

related to EM, and have increased confidence in EKG interpretation for new EM residents.

Abstract:

Introduction: The ability to rapidly and accurately interpret electrocardiograms (EKGs) in the emergency department is an essential skill required by emergency physicians. A near-peer taught EKG curriculum is a viable option for a comfortable and efficient learning environment for new emergency medicine (EM) residents.

Educational Objectives: After participating, learners will have improved recognition of significant EKG patterns related to EM, and have increased confidence in EKG interpretation for new EM residents.

Curricular Design: The curriculum was designed based on Kern's six step approach. While all emergency medicine physicians must be adept at interpreting EKGs, an informal needs assessment specific to Maimonides residency showed consistent discomfort with this skill among graduates. A near-peer approach was chosen to foster an open, communicative, non-threatening environment for learners. There were multiple interactive web-based lectures that covered a wide variety of topics. The target audience was new EM residents and the course was taught by second and third year EM residents. A pre- and post-quiz was administered.

Impact/Effectiveness: Reaction level data showed improvement in comfort with EKG interpretation and self-reported knowledge of EKGs among residents who took the course. The near-peer approach may have allowed for a more comfortable environment for new residents to learn material. The course was easily implemented and will be held again next year.

6 A Novel Wilderness Medicine Curriculum for Emergency Medicine Residents

Elizabeth Hamilton, MD, MPH; Sara W Nelson, MD

Learning Objectives: The objective of this curriculum was to teach emergency medicine residents how to assess, treat and transport patients in an austere environment through an interactive, team based didactic competition.

Abstract:

Introduction: Wilderness medicine is an essential component of Emergency Medicine residency education. Traditionally, wilderness medicine is incorporated into residency training through a combination of classroom based lectures and practical demonstrations. Since its inception in the fall of 2000, medical practitioners have been able to participate in regional Medical Wilderness Adventure Races (MedWAR™) to learn and practice wilderness medicine skills in a competitive setting. While MedWAR competitors have reported gaining valuable experience through participation, this model of team-based, competitive

wilderness medicine simulation has never been applied to residency training. With this in mind, we developed the Wilderness Interactive Didactic Experience, or WildRIDE.

Objective: Our educational objective was for residents to attain comfort with assessing and stabilizing patients in the wilderness through an interactive team-based event modeled after a MedWAR™ competition.

Design: Teams of residents rotated through 6 instructor-led simulations to assess, stabilize and evacuate mock "patients" played by medical students. Instructors scored teams on their completion of critical actions and then debriefed the scenario. Teams also rotated through a circuit of self-directed skills stations to practice activities like improvised splinting, litter carries, shelter building, and wound care. Basic knowledge was assessed with multiple choice questions throughout the event.

Effectiveness: After participating in the WildRIDE event, 100% of residents who completed our post-event survey reported increased comfort with performing a patient assessment in the wilderness. All respondents felt the experience was valuable and that they enjoyed the team-based structure. 92% stated they would like to see the WildRIDE event offered in the future. Participants asked that more instruction be available at the skills station, which we will incorporate into our next WildRIDE.

7 A Pediatric Emergency Curriculum for Emergency Medicine Residents

Taylor McCormick; Genie Roosevelt, MD, MPH; Jennie Buchanan, MD; Maria Moreira, MD

Learning Objectives: To design a simulation-based, half-day boot camp for our senior resident class focusing the most anxiety-provoking pediatric emergencies, resuscitation skills, and uncommon procedures as the final component of a comprehensive pediatric emergency curriculum.

Abstract:

Introduction: All emergency medicine (EM) physicians must be skilled in caring for children as the vast majority of pediatric visits occur in community emergency departments. Exposure to critically-ill children during EM residency is limited, making simulation-based training a key component of pediatric emergency medicine education.

Curricular Design: Based on survey responses from senior residents and recent graduates on knowledge gaps in pediatric emergency care, an advanced pediatric emergency boot camp curriculum was developed and refined by expert pediatric emergency medicine educators. This course is an essential component of a comprehensive pediatric emergency curriculum which includes a basic pediatric resuscitation boot camp intern year, integrated core pediatric emergency didactics, quarterly pediatric emergency morbidity and mortality conference, a Neonatal Resuscitation Program course specifically for third