

emergencies.

Curricular Design: Bootcamp skills were selected by surveying peers, literature review, and a focus group of PEM faculty to include airway management, intraosseous placement, fracture management, nursemaid’s reduction, FAST, and ultrasound guided peripheral IVs. We partnered with PEM faculty to develop each station and reviewed materials for appropriate developmental level. Each station consisted of a brief didactic introduction followed by high signal simulation on mannequins or skill trainers. All 2nd, 3rd, and 4th year students at our institution or 1st years with extensive previous experience were offered to participate. Participants completed pre- and post-workshop surveys assessing self-reported comfort levels using a Likert scale. We also elicited feedback for how to improve future sessions.

Impact/Effectiveness: 13 students participated in the pilot. Pre and post confidence levels were assessed using a Fisher’s exact test. Confidence levels increased significantly for all procedures after participation in the bootcamp (p<0.05 for all domains). This pilot suggests that the bootcamp increased comfort in managing a subset of pediatric emergencies. Participant feedback was overwhelmingly positive. Future iterations are necessary to confirm these findings and adjust the program to fully address all student’s needs.

60 A Novel Points-Based Curriculum for Scholarly Activity

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Background: The ACGME requires residency programs to facilitate resident scholarly activities to further their understanding of evidence-based medicine. For many established residency programs with robust academic publishing backgrounds, these requirements are often met through original studies.

Curricular design: Our 3-year community-based residency program had its inaugural year in 2021 and is set to graduate its first set of residents in 2024. This allowed for the opportunity to establish a curriculum to strengthen the scholarly characteristics of this new program. We pioneered a point system for scholarly activity that took effect in 2022 to encourage resident involvement in various projects including IRB-approved original research studies, publication of a book chapter, case reports, poster or abstract presentations, and representative positions in professional committees. Original research including studies, chapters, and QI projects were given more weight and earned 5 points, the maximum allowed for a project. Surveys were collected annually from the residency class to inquire about project involvement.

Results: Within the first year of the implementation, the PGY3 class was surveyed at the beginning of their final year to assess status of meeting these scholarly activity requirements.

90% of the PGY3 class met the minimum 5-point requirement entering their 3rd year. 60% of the class held 10 or more points, and 30% of the class held 15 or more points.

Conclusion: We believe this points-based system allows residents to diversify their interests in scholarly activity and allows freedom to engage in multiple small projects or one large project. This liberal system that presents multiple options for scholarly activity encourages collaboration between faculty and residents and may be adopted in newer or established residency programs.

Table 1.

Type of Scholarly Activity	# of Awarded Points
IRB-approved original research study: prospective (RCT or Cohort) or retrospective (registry or chart review) complete and submitted (acceptance not required)	First/second author: 5 points Third author: 3 points
Completion of a resident research grant	PI: 4 points Other investigator: 2 points
Original review article, systematic review/meta-analysis using accepted guidelines/methodology	1 st and 2 nd author: 4 points 3 rd author: 2 points
QI project that tests a hypothesis or clinical/administrative question, is written and disseminated in health care system	5 points
Creation of a NEW educational curriculum	5 points
Official Board officer for National EM Resident Organization	5 points
Publication of a book chapter or section (e.g. Corpendium, 5 Minute EM consult)	NEW Chapter: 5 points Revision of chapter: 3 points
Written Case Report submitted for publication	First/second author: 4 points Third author: 2 points
Submission to regional/national/international conference (no acceptance)	1 st or 2 nd author: 3 points
Posters and oral presentations of original research at a Society meeting (e.g. SAEM, ACEP)	National: 4 points Local: 2 points
Creation of NEW electronic learning tool (MDCalc, WikEM) (approved by PD)	4 points
Board member for National EM Organization	4 points
Creation of de novo innovation in medical education	3 points
Reviewer for JEM: minimum of 3 reviews	3 points
Critically Appraised Topic submitted to peer-reviewed journal (JEM)	2 points
Posters and oral presentations to home institution	2 points
Educational publications disseminated to physician group (CME tidbits submitted to EMA group)	2 points
Service on professional committee (EMRA program representative, RAMS, RSA, SAEM, ACEP etc)	2 points
Published podcast, educational or procedural video, other new online learning module	2 points

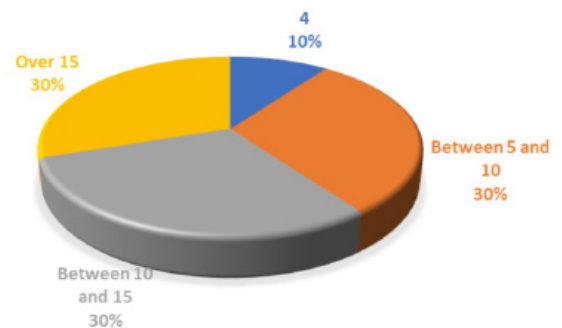


Figure 1. Number of scholarly activity points accumulated in PGY3 class.