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Curriculum Development to Improve Internal Medicine Resident Subspecialty Education

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Innovations in Health Science Education Journal

Curriculum Development to Improve Internal Medicine Resident Subspecialty Education

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7

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Abstract

Background: Internal medicine resident education and exposure to subspecialty care is an important component of the residency curriculum. Here we describe our nephrology division's experience implementing a revised resident didactic curriculum and its impact on internal medicine in-training examination (ITE) performance and satisfaction with curriculum. Methods: ITE exam results were reviewed, and areas of weakness were identified. Educational objectives were created based on historical ITE questions and cross referenced with American College of Physicians' learning objectives in nephrology. We defined fifteen domains of competence in nephrology and associated didactic sessions were created. Protected didactic time was scheduled to maximize resident participation. Historical methods of teaching within our division, namely Socratic and beside teaching, were continued unchanged. ITE performance and ACGME survey responses pre- and post-implementation of curriculum changes were assessed. Results: ITE performance from 2013-2019 showed a mean percentile rank of 63rd among UNMC internal medicine residents compared to national. The year immediately prior to curriculum revision (2019) was at the 64th percentile. Following implementation, percentile ranks improved to 75th (2020), 87th (2021), 85th (2022) and 86th (2023) percentiles. ACGME survey data revealed resident satisfaction with the quality of didactic and clinical experience was scored as "good" or "excellent" both pre- and post-intervention. Discussion: Strategic revision of a didactic curriculum, along with continuing traditional Socratic and bedside teaching, can improve resident ITE performance without compromising resident satisfaction. Identifying protected didactic time that does not interfere with resident patient care responsibilities likely was an important factor in promoting participation in didactics and maintaining high resident satisfaction with the curriculum.

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