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## Ob/Gyn Residents' Confidence Completing Genetic Carrier Screening-Related Tasks Before and After an Interactive Educational Intervention

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# Ob/Gyn Residents' Confidence Completing Genetic Carrier Screening- Related Tasks Before and After an Interactive Educational Intervention

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## Outstanding Presentation Award Winner

### Abstract

Obstetricians and gynecologists (Ob/Gyns) are the most common ordering providers of genetic carrier screening. The American College of Obstetricians and Gynecologists (ACOG) recommends that this screening is offered to all pregnant individuals as it is an important part of patient care to discuss reproductive risks and options. However, previous studies identified that Ob/Gyns' adherence to this guideline is only between 27-30%. One potential barrier to offering genetic testing for non-genetics healthcare providers, such as Ob/Gyns, is low self-reported confidence in performing genetics-related tasks. Despite barriers, non-genetics providers want to stay informed and receive education that is appropriate for their curricular and occupational foci. Interactive, case-based learning with clinical application is a key component for building confidence in providers. This study aims to identify if a new, interactive, case-based, genetic skills-focused educational model created at the University of Nebraska Medical Center (UNMC) increases immediate and retained confidence in genetics skills of Ob/Gyn resident physicians. The intervention was developed with iWall technology at UNMC and piloted with 12 UNMC Ob/Gyn residents. Confidence was assessed with Likert scale surveys at three timepoints and focused on core genetic competencies for non-genetics providers identified by earlier studies. Ten participants completed the pre- and immediate post-survey, and nine of them reported significant ( $p < 0.05$ ) increases in confidence. Of the 13 skills assessed, residents demonstrated a statistically significant increase in average confidence levels on 10 skills, including evaluating clinical test utility and assessing risk. Data collected four months later from four participants suggests a potential theme of increased confidence levels in skills completed more frequently. This study proposes that an engaging, skills-based model has potential as an effective approach to teaching genetic content, like carrier screening, that may improve providers' confidence performing these skills. Ultimately, this may minimize the known barrier that low confidence presents in practice.

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