Formalizing POCUS Education for Internal Medicine Residents with a Hypothesis Driven Longitudinal Curriculum



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Educational Objective: To create a sustainable POCUS curriculum for IM residents that will foster the knowledge and skills necessary to safely incorporate POCUS into their clinical practice.

Background

- Point of care ultrasound (POCUS) is a powerful tool for improving diagnostic evaluation of common medical problems
- Professional organizations have established guidelines for POCUS training of IM residents
- POCUS is expected to be included in future ACGME milestones

When:

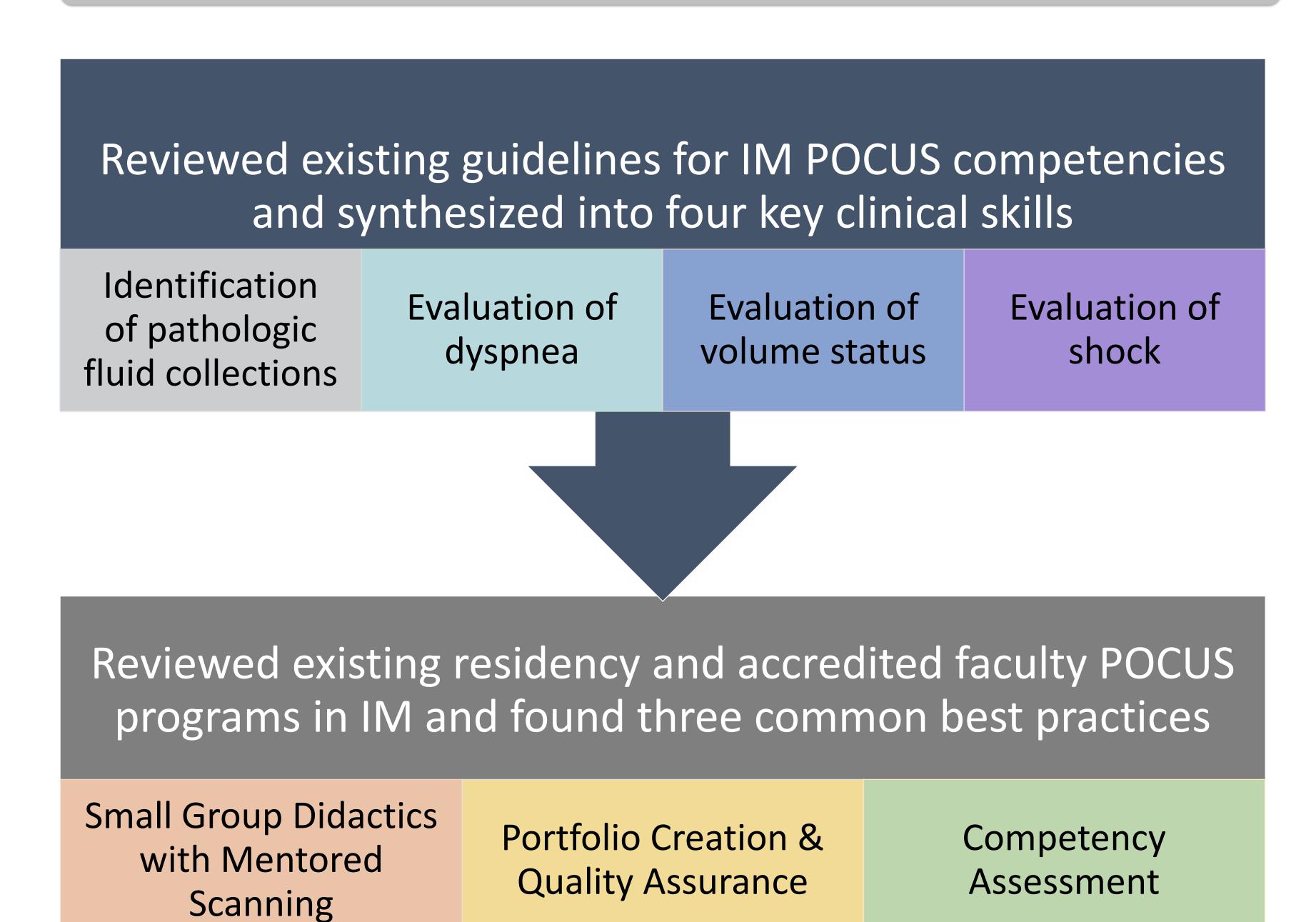
Clinic Block

Clinic Block

• WES

 Thus, POCUS training has become a mandatory component of a successful IM residency program (IMRP)

Program Development



Resource Evaluation

Assessed the resources required to implement all three components of the designed curriculum including,

- Faculty, housestaff, and administrative time
- Equipment and software needs

Didactics & Mentored Scanning

- Maximum 3-4 housestaff per faculty = 16 groups
- 5 half-day faculty led sessions per intern
- Dedicated faculty at all three clinical sites

Portfolio Creation & Quality Assurance

- 4 half-day self-led sessions per intern
- Faculty to review ~20 images per skill per intern
- POCUS equipment at all clinical sites
- Cloud based storage for images

Stakeholder Engagement and Funding Proposal

In formulating our funding proposal, we focused on highlighting educational goals of our proposal that would resonate with key financial stakeholders including,

- Requiring a competency assessment to ensure patient safety concerns
- Overcoming barriers related to hospital clinical privileges
- Bolstering our competitiveness in residency recruitment and fellowship placement.

	AY 2020-21	AY 2021-22	AY 2022-23
Faculty			
POCUS Faculty	0.6	0.6	0.6
Program Lead	0.1	0.1	0.1
Total	0.7 FTE	0.7 FTE	0.7 FTE
Equipment			
8 Phillips Lumify ultrasounds	\$32,000		
4 Android tablets	\$2400		
QPath – cloud-based storage	\$18000	\$14000	\$14000
Total	\$52400	\$14000	\$14000
IMRP Administrative Time	192 hours	96 hours	96 hours

Didactics & Mentored Scanning

• Faculty Led Sessions = 16 groups of 3-4 interns x 5 half days = 80 half-days 40 half-days Preparation = 2 hours/small group session x 80 sessions = 160 hours

Portfolio Creation & Quality Assurance

• Image Review: $3m \times 20$ images x 4 skills x 50 PGY-1 = 12000m \rightarrow 200 hrs 50 half-days • Overall Feedback: 30m/skill x 4 skills x 50 PGY-1 = 6000m \rightarrow 100 hrs 25 half-days

Final Competency Assessment

• 2 WES half-days/group x 2 WES groups x 3 faculty =

When:

• OBMT

Clinic Block

12 half-days

207 half-days

When:

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Final Competency

Assessment

2 half-day faculty led

Can be accomplished

with large group WES

sessions per intern

sessions

Discussion

The development of this curriculum highlights importance of stakeholder engagement. Building an evidenced-based, competency-centered curriculum across multiple sites is labor and resource-intensive. Nevertheless, acquiring those resources is possible when the educational goals of the curriculum intentionally align with those of key financial stakeholders.

• WES

Resources:

When:

•OBMT

- 1. LoPresti CM, et. al. *Am J Med* 2019;132:1356-60.
- 2. Kessler C, Bhandarkar S. J Clin Ultrasound 2010;38:401-8.
- 3. Ma I, et.al. *J Gen Intern Med*. 2017 Sep;32(9):1052-105.

When:

Clinic Block

- 4. LoPresti CM, et. al. *Ultrasound J* 2019;11:10.
- 5. Schnobrich DL., et.al. *JGME*. 2013 Sep;5(3):498-502.

WES

6. Soni N, et.al. JHM. 2017 Sep;12(9):775-776.

Curricular Timeline

2nd Trimester **Intern Year Months 9-12 (3rd Trimester) Intern Year Months 1-4 (1st Trimester) Intern Year Months 5-8 (2nd Trimester)** Skill #1: Fluid Collections Skill #2: Evaluation of Dyspnea Skill #3: Evaluation of Volume Status Skill #4: Evaluation of Shock **Didactics and Mentored Knowledge and Skills Knowledge and Skills Didactics and Mentored Didactics and Mentored Didactics and Mentored Self-guided Practice Self-guided Practice Self-guided Practice Didactics and Mentored** Scanning **Self-guided Practice** Assessment Assessment Scanning **Scanning** Scanning with Portfolio with Portfolio with Portfolio Scanning with Portfolio <u>Topics</u> Knobology, Pleural Effusions, • Skills #1-2 <u>Topics</u> • Skills #1-4 All cardiac views, LVEF, Lung ultrasound, parasternal Lung ultrasound, parasternal Methods <u>Methods</u> <u>Methods</u> Ascites, Pericardial Effusions JVP, IVC, subxiphoid Methods: Methods Methods: right heart strain cardiac views cardiac views Self-directed Self-directed Self-directed <u>Methods</u> Methods Written exam Self-directed Written exam Methods Methods Methods Faculty review with Faculty review with Faculty review with Online Content Online Content Hands on exam Hands on exam Faculty review with Online Content Online Content Online Content electronic feedback electronic feedback electronic feedback • Small group (3:1) •Small group (3:1) electronic feedback When: •Small group (3:1) Small group (3:1) •Small group (3:1) When: When:

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