

## Implementing Naloxone and Buprenorphine Low Dose Induction Training into the CUSOM Trek Curriculum

**Purpose:** The opioid epidemic continues to be a public health crisis. The Coalition on Physician Education (COPE) has responded to this crisis through their annual Curriculum Innovation Challenge to support medical schools integrating a more robust addiction medicine curriculum into their training. Teams apply with curriculum submissions and if selected, develop their curriculum alongside COPE faculty for an entire semester in a structured, workshop-based format. The CU team was one of four winning submissions nationwide.

**Objectives:** This three-part curriculum is designed for 4th year medical students during their Transition to Residency phase of the University of Colorado School of Medicine's Trek Curriculum within the integrated clinician's course. At the end of this three-part curriculum, students should have increased their knowledge base and competencies in three main areas. First, students should be able to identify an overdose and administer naloxone. Second, students should be able to initiate a low dose buprenorphine induction as well as identify a patient who would benefit from such approach. And lastly, students should feel comfortable interacting with patients about opioid use disorder and treatment options.

**Methods:** The first phase (30-minute didactic session) seeks to empower students to feel confident in their ability to identify signs and symptoms of an opioid overdose and how to administer naloxone. The second phase (60-minute PBL workshop) seeks to address the growing fentanyl epidemic by teaching innovative treatment approaches relevant to providers in addiction medicine, emergency medicine, and primary care. Students will learn low dose initiation of buprenorphine for opioid use disorder, an evidence-based treatment option aiming to avoid uncomfortable withdrawal for the growing number of patients with OUD in need of care. Students will then participate in a standardized patient (SP) encounter where a patient with OUD seeks help in an ED setting.

**Results:** Students will be assessed via both written test style questions as well as via feedback following the SP encounter. Learning objectives and a competency rubric will be used to standardize student assessment. Assessment results will be used to understand the efficacy of the curriculum in increasing knowledge points outlined in the learning objectives. A pre-post knowledge, behavior, and attitudes survey will be used to assess curriculum efficacy and facilitate ongoing quality improvement.

**Conclusion:** Due to the wide-reaching nature of the opioid epidemic, it is important that providers from a variety of fields feel comfortable in addressing opioid use disorder as patients in all medical specialties suffer from this disease. This curriculum, due to its placement in the student's medical training, serves to accomplish this task. This curriculum can be implemented in Fall 2023."