Bystander Emergency Response - A Clinical Elective for 1st-Year Medical Students

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Background: The traditional undergraduate education model begins with two years of basic science followed by two years of clinical education. The University of Pittsburgh School of Medicine created a Mini-Elective program to broaden clinical exposure for 1st (MS1) and 2nd year medical students. These electives provide information and skills that ease the transition to a clinical education while providing exposure to possible career interests.

We sought to develop a course offering exposure to Emergency Medicine while providing a skill set appropriate for the MS1.

Educational Objectives: This course provides a structured approach to the injured/ill patient for the MS1 with limited clinical experience and explores scenario-specific techniques for patient stabilization and management.

Curricular Design: Six two-hour sessions utilized a combination of didactic and simulation teaching. Each case simulation highlighted skills associated with basic life support (BLS) emergency response. The scenarios emphasized BLS maneuvers appropriate regardless of environment.

High-fidelity mannequins were used for case simulations. Review of key points from each session took place using PowerPoint or a re-demonstration of skill. Session topics included Approach to the Ill or Injured Patient, Basic Life Support, In-Flight Emergencies, Introduction to Wilderness Medicine, and Introduction to the Trauma Patient. Skills reviewed included evaluation of scene safety, donning of personal protective equipment, reviewing the ABCs, obtaining a focused history, cardio-pulmonary resuscitation, bag-valve mask ventilation, chinlift/jaw thrust, cervical spine immobilization, hemorrhage control, needle thoracostomy, long bone immobilization, and mass casualty triage.

Impact/Effectiveness: Pre and Post surveys were administered. 67% (N=12) of our students had no experience with direct clinical patient care prior to medical school. All students rated the course as Excellent with 100% of respondents (N =11) recommending this course to fellow students.

The Bystander Emergency Response Mini-Elective created an opportunity for MS1 students to gain life-saving patient and procedural skills. Students expressed a high level of satisfaction with the course and an increased level of confidence in responding to medical emergencies.

Changing the Tradition of Grand Rounds Using Google Hang Out

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Background: Access to medical education has expanded beyond the classroom, making the once traditional grand rounds speaker presenting at a podium a fading concept. Using Google Hangouts On Air, we invited speakers to speak at our weekly conference. This forum has increased the access to various lecturers at the convenience of both our program and the speaker, while also significantly decreasing the cost of grand rounds.

Educational Objectives:
1. Use Google Hangouts On Air to live-stream speakers from all over the world

Curricular Design: To broaden our grand round speakers, we developed a tele-conference lecture series using Google Hangouts On Air, a free teleconference platform, which allows participants to hold live webcam conferences. Through our pilot curriculum, we had speakers present for 10-15 minutes on high yield EM topics. The speakers gave their talk from their home or office as we projected their live stream presentation to the audience, who was then able to interact with the speaker. These sessions were recorded and made available via our residency website to be viewed by residents and faculty at their own convenience (refer to image A and B).

Impact/Effectiveness: This innovation can allow for residencies to obtain guest speakers from anywhere in the world for weekly conference with little to no set up cost with technology as simple as a laptop. This platform has been used successfully by online bloggers such as alien.com and across Canada’s EM programs. The researchers will assess the effectiveness of this lecture format by assessing the number of times the videos have been viewed at the site, and via a survey of the residents and speakers who participated.