

Innovating and Invigorating CME Updates: You Really Can Reach and Teach Old Dogs New Tricks!

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OBJECTIVES

The simulation workshop component of our Family Medicine Update is to provide meaningful, memorable CME experiences for seasoned physicians. Participants are asked to evaluate and treat a "patient" in an office based setting.

BACKGROUND

In order to be highly effective, CME programs must be framed with clear, concise, reproducible goals and objectives that reflect levels of understanding; Adult and Learning Styles Models; opportunity for the attendee to reflect on his/her own learning to facilitate further instruction and/or remediation; and maintenance of lifelong learning habits. CME programs must ensure that courses genuinely reflect practice, quickly and accurately identify knowledge gaps, and immediately remediate for correction and improvement.

METHODS

Scenario development is based on current healthcare issues. Scenarios incorporating bioterrorism, stress induced cardiomyopathy, and H1N1 influenza among others have proven to provide challenging diagnostic dilemmas for experienced physicians.

Attendees are randomly paired and each team is given a different clinical scenario. Information pertinent to the "patient's" clinical presentation such as labs, EKGs, and x-rays is made available to the diagnosing/treating team as requested. The other attendees observe the progression of the scenario through a one-way mirror and are provided with the same test data to interpret. After all scenarios are completed, a detailed debriefing session follows. All attendees are encouraged to critique the management of all the scenarios and discuss the multiple approaches to recognition and treatment of the "patient's" condition.

The organization of the simulation exercises allows all attendees to actively participate in every scenario eliminating the down time often seen with simulation based educational venues.

RESULTS

The scenarios and format have elicited very positive feedback about the realism and active participation the simulation component of the Family Medicine Update provides. Comments included "Will alter my practice performance"; "This is the BEST Format! The Simulation of Office Urgencies/Emergencies was 1+++ for format enhanced participation"; "The Simulation of Office Urgencies/Emergencies was marvelous; an excellent learning tool!"

Save The Date...
JUNE 2ND 2010 - JUNE 5TH 2010

Not just a board review!
Revamped course based on feedback from attendee survey!
Start the morning with imaging:

- Lessons for ordering and interpreting imaging studies
- Focus on chest, body and cardiac imaging

Next, a taste of ABFM Self Assessment Modules (SAM):

- Highlights of SAMs on Asthma, Childhood Illness and Care of the Vulnerable Elderly

Remainder of the day focuses on:

- Recent advances, like cutting edge technology and implications for practice
- Updates on prevention, diagnosis and treatment of common conditions encountered in practice
- Shorter presentations with 12 more topics.

Full day of clinical skills:

- Visit our website for further details

Post-program opportunity:

- Performance Improvement CME (PI-CME) related to course topics
- Earn up to 20 additional AMA/PPA category 1 credit per PI-CME topic



MAURICE GOLDENHAR
36th Annual
FAMILY MEDICINE
UPDATE 2010
JUNE 2nd thru
JUNE 5th, 2010
Wednesday - Saturday



Location:
Level 3, Lecture Hall 5 in the Health Sciences Center
State University of New York at Stony Brook

Sponsored by Stony Brook University
Office of Continuing Medicine Education
School of Medicine
State University of New York at Stony Brook

35th Annual
FAMILY MEDICINE UPDATE 2009
May 27th - 30th, 2009

GENERAL EDUCATIONAL OBJECTIVES
for the Family Medicine Update

The rapid advances in diagnostic and treatment modalities require continuing education for the family practitioner. This module course is designed to cover current and common areas of clinical practice, including integrated topics in cardiology, gastroenterology, infectious disease, imaging, neurology, orthopedics, obstetrics, geriatrics, pediatric disease, physical medicine and rehabilitation, preventive medicine, surgery and women's health, included in a full day of interactive clinical and practical experience.

Upon completion of the program, participants should be able to:

- Determine the differential diagnosis and clinical management of problems frequently encountered in family practice.
- Use and interpret currently available diagnostic techniques.
- Recognize the appropriate application of and select from among currently available therapeutic modalities.
- Apply skills in problem-solving, including eliciting patient history, performing physical examinations, gathering and evaluating diagnostic data, making clinical decisions, implementing therapy and providing supportive care.
- Perform appropriate preventive procedures and patient counseling to promote and maintain health and prevent disease.
- Identify problems likely to respond to management as educational and necessitating consultation to confirm the diagnosis and/or manage through need, as well as those conditions requiring referral for definitive care.

STONY BROOK FACULTY

<p>Robert A. Smith, MD, MPH Director, Office of Continuing Medicine Education Chairman of the Board Department of Family Medicine State University of New York at Stony Brook</p> <p>John R. Kelly, MD, MPH Associate Dean for Continuing Education Department of Family Medicine State University of New York at Stony Brook</p> <p>Michael J. Kelly, MD, MPH Associate Dean for Continuing Education Department of Family Medicine State University of New York at Stony Brook</p> <p>John J. Kelly, MD, MPH Associate Dean for Continuing Education Department of Family Medicine State University of New York at Stony Brook</p> <p>John J. Kelly, MD, MPH Associate Dean for Continuing Education Department of Family Medicine State University of New York at Stony Brook</p> <p>John J. Kelly, MD, MPH Associate Dean for Continuing Education Department of Family Medicine State University of New York at Stony Brook</p>	<p>John J. Kelly, MD, MPH Associate Dean for Continuing Education Department of Family Medicine State University of New York at Stony Brook</p> <p>John J. Kelly, MD, MPH Associate Dean for Continuing Education Department of Family Medicine State University of New York at Stony Brook</p> <p>John J. Kelly, MD, MPH Associate Dean for Continuing Education Department of Family Medicine State University of New York at Stony Brook</p> <p>John J. Kelly, MD, MPH Associate Dean for Continuing Education Department of Family Medicine State University of New York at Stony Brook</p> <p>John J. Kelly, MD, MPH Associate Dean for Continuing Education Department of Family Medicine State University of New York at Stony Brook</p> <p>John J. Kelly, MD, MPH Associate Dean for Continuing Education Department of Family Medicine State University of New York at Stony Brook</p>
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GUEST FACULTY

<p>John J. Kelly, MD, MPH Associate Dean for Continuing Education Department of Family Medicine State University of New York at Stony Brook</p> <p>John J. Kelly, MD, MPH Associate Dean for Continuing Education Department of Family Medicine State University of New York at Stony Brook</p> <p>John J. Kelly, MD, MPH Associate Dean for Continuing Education Department of Family Medicine State University of New York at Stony Brook</p>	<p>John J. Kelly, MD, MPH Associate Dean for Continuing Education Department of Family Medicine State University of New York at Stony Brook</p> <p>John J. Kelly, MD, MPH Associate Dean for Continuing Education Department of Family Medicine State University of New York at Stony Brook</p> <p>John J. Kelly, MD, MPH Associate Dean for Continuing Education Department of Family Medicine State University of New York at Stony Brook</p>
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Location: Level 3, Lecture Hall 5 in the Health Sciences Center
State University of New York at Stony Brook

REFLECTIVE CRITIQUE

We utilized the Kirkpatrick four level model of program evaluation to assess attendee reaction, learning, behavior and results. The evaluations were used to determine program effectiveness and to improve future training programs. Several researchers validated the importance of incorporating simulation experiences into professional education and evaluation.

CONCLUSIONS

Based on feedback and reviews, we shortened the briefing period, and enhanced the debriefing by including evidence based medical references about the clinical issues being simulated and providing these materials to attendees.