‘A Curricular Toolkit for an Obstetrics Resident Bootcamp’

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WORKS IN PROGRESS

Background:
In 2015, the American Board of Obstetrics and Gynecology (ABOG), in conjunction with the ACGME and the American College of Obstetrics and Gynecology, published the "Obstetrics and Gynecology Milestone Project" delineating the residency training year appropriate milestones to be met by trainees. Milestone 1 is expected to have been met by all incoming Obstetrics and Gynecology residents. The incoming resident bootcamp learning experience provides opportunity to address Milestone 1 competencies and ultimately enhance resident educational experience. I have designed a curricular toolkit incorporating principles and best practices of teaching ACGME Milestone 1 obstetric patient care milestones to the adult learner. This curricular toolkit which incorporates the theories and best practices of instructional design, teaching methodology and assessment and feedback, can be adopted by other residency teaching programs to provide an effective bootcamp experience.

Objectives:
The bootcamp curriculum will ultimately serve three integral purposes:
1. Consolidate knowledge and clinical skills levels amongst the interns
2. Expose interns to efficiently navigating systems and clinical staff
3. Reinforce the importance of self-assessment and life-long learning

Methods:
The 6 step approach for curricular development of medical education as described by Thomas and Kern et al was implemented at the start of the curricular toolkit design. Merrill's principles of teaching and the key considerations of teaching to the adult learner, are cornerstone in the design of the curriculum. Various instructional methods are incorporated to provide both knowledge-based and skill-based educational experiences. For example, a flipped classroom model (combining asynchronous and synchronous instructions) will be employed to deliver content to prime the learner, followed by in-class/person activities such as simulation training to provide opportunities to actively engage with and apply pre-class content.

Evaluation Plan:
The curricular toolkit includes a variety of assessment methods which will be utilized to assess the learners’ progress. These assessments will be both formative and summative, as well as qualitative and quantitative. The formative assessments would include both informal brief and immediate feedback, and formal debriefing following learning activities. Methods such as Ask-Tell-Ask, STOP and feedback sandwich should be utilized to give effective, timely and optimal feedback. Finally, summative feedback will be provided at the end of the learning experience within 1 week of course completion. The toolkit itself will be assessed by survey of the interns and faculty, and comparison of pre/post-course PrepForRes (a standardized incoming obstetrics and gynecology examination) scores at the conclusion of the course.

Conclusions:
This obstetrics curricular toolkit addressing ACGME Milestone 1 goals incorporates the best practices of instructional design, teaching methodology, and assessment and feedback. This toolkit may be adopted nationally to most effectively and optimally train incoming interns on the integral aspects and clinical basics of being an OB-GYN resident (ACGME Milestones level 1). We plan to continue to develop this toolkit to be comprehensive of all 6 ACGME Milestones and to implement the use of the toolkit at future incoming Wake Forest obstetrics and gynecology resident bootcamp sessions.