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Is the Devil in the Second Year? Student Perceptions of Evidence-Based Medicine at Cooper Medical School of Rowan University (Poster)

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Is the Devil in the 2nd Year?

Student Perceptions of Evidence-Based Medicine at CMSRU



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Introduction

How do we train students to embody the principles behind EBM?

The future of patient care hinges on developing physicians who can sift through oceans of information to deliver exceptional care.

Although medical schools have taught EBM for two decades, the vast majority compress this education into a few days.¹ CMSRU, however, developed a specialized EBM curriculum spanning all four years of medical education. In this course, Scholar's Workshop (SW), students learn to frame a question, appraise information sources, and understand the hierarchy of evidence.² This longitudinal curriculum raises the question - does this format of EBM exposure affect student perception of their skills?

Methods

Descriptive, cross-sectional survey with a target population of M1, M2, M3, and M4 students at CMSRU

Distributed a 10-question survey on elements including student-perceived:

- Encouragement, Motivation
- Self-confidence, Knowledge
- Usefulness of clinical inquiry

Results

We surveyed 341 students and obtained 65 responses for a 19.06% return rate.

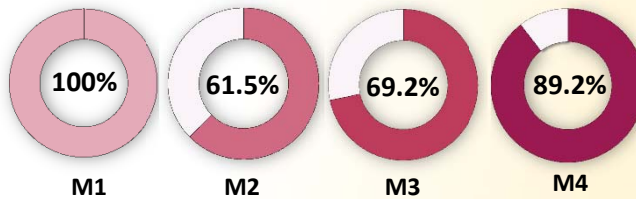
According to our results, we observed a difference between pre-clinical (M1/M2) and clinical (M3/M4) students over three categories:

- Motivation to ask questions (Fig 1)
- Confidence in developing a clinical question (Fig 2)
- Frequency of self-reported clinical searches

We did observe a nadir in the M2 year that led to fewer questions asked, less confidence, and lower self-initiated use. No significant difference was found in the perception of usefulness of EBM between classes.

Students Motivated to Ask Clinical Questions

Fig. 1. Percentage of students reporting feeling motivated to ask questions. Attitudes improved over the four years, with a nadir in the second year



Discussion

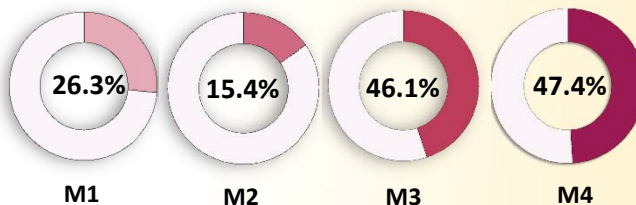
We predicted that attitudes towards EBM evolve over time, and students would find merit in it by the fourth year.

This study was the first to assess student perceptions in a longitudinal EBM curriculum at CMSRU. A nadir was seen in responses of second year students. With increasing pressures to deliver competitive board scores for residency programs, it is plausible that second year students are more dissatisfied with information not directly applicable to "the test."

Most importantly, attitudes improved significantly in the M3/M4 years. These students reported improved confidence and application of EBM compared with M1/M2 years. This may be explained by greater patient care responsibilities during rotations. This research supports the conclusion that by M4 year, students develop a holistic understanding of EBM that will improve clinical decision making.

Self-Confidence in Developing Clinical Questions

Fig 2. Student-reported confidence. Graph displays percentage of students reporting "sufficient" and "very confident" in ability to develop a clinical question.



References:

1. Maggio LA, Tannery NH, Chen HC, Cate OT, O'Brien B. Evidence-Based Medicine Training in Undergraduate Medical Education. Academic Medicine. 2013;88(7):1022-1028.
2. 1807 Scholar's Workshop (M4) Syllabus. November 2017.