Abstract

Context: Medical education does not adequately cover end-of-life (EOL) care and palliative care (PC). Physicians must have an understanding of the best care for patients at the end of life, including palliative care. The preclinical years of medical school offer an environment to explore these topics.

Objectives:
- To teach medical students some basic end-of-life care competencies
- To instill confidence in addressing EOL care issues with patients and families
- To examine the effectiveness of this intervention

Design: Twenty students voluntarily enrolled in a student-designed elective taking approximately 10 hours in their first year. All first-year students responded to a survey to compare outcomes.

Results:
- Eliciting students felt they knew more about PC, hospice, and healthcare advanced directives.
- Eliciting students felt better prepared to speak to patients about EOL choices.

Conclusions: Simple, low-cost, well-timed sessions can decrease the barrier to effective communication and lead to better care for patients and more confident students.

Methods

Selection of Students:
Students self-selected by expressing interest through email.
- 30 students responded with interest
- 24 students attended the first session
- 20 students finished the elective
- 18 students completed the survey

Study procedures:
A survey including peer-reviewed published questions was administered in the 2009-2010 school year to all Tulane medical students to gauge interest and collect baseline data. The same survey was administered to the first-year class in 2011, with different colleagues assigned to compare students who took the elective with those who did not.

Results

This need, as well as anecdotal requests and strong student support (fig. 4), led to the development of the elective course Aspects of Palliative and End-of-Life Care at Tulane Medical School to be taught in the 2010-2011 academic year.

We hypothesized that an elective undergraduate medical education course would increase self-perceived preparedness among undergraduate medical students to speak with patients and their family members about end-of-life issues compared to students who did not enroll.

Discussion

This study includes the possibility of a selection bias due to the voluntary nature of the elective. Students who participated might have already been knowledgeable and comfortable with these topics, but with the absence of a pre-course survey, we will not know. Also, we did not evaluate their knowledge or their abilities in an objective way with a pre-test and post-test, so the data is self-reflexive and subjective.

There was significant interest from other students who did not get the opportunity to take the course as well as continued interest by those enrolled in the elective. Those students who expressed interest in learning more about include: (n = 86)

Possible future continuations of the course:
- Implementation into the mandatory course work for MS-1 students
- Adding more subjects from the list above to MS-2 opportunities
- Continuing to study these same students as they progress through school
- Funding opportunities in order to include standardized patients
- Part of a larger beginning to a Tulane Research Group on Palliative and End-of-Life Care

Conclusion

These encouraging results demonstrate that in the preclinical years of medical school, students have the potential to learn and grow in areas that are underrepresented in the medical curriculum. We believe that it is representative of the enthusiastic nature of the first year of medical school that this low-cost, 10-hour elective was able to show such results.

Literature Cited and Acknowledgements


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Session 1: Introduction to the course and gaining trust
- Aded death should be considered a medical emergency
- Chylyfi Mix 1975

Session 2: Our First Dead Patient: Anatomy and Cadavers
- My room called her body to an anatomical gift program in Jessie Kittle, T2 and plant operator

Session 3 and 4: Exploration of Media Views on Death
- It is commonly known that medical students dissect the bodies of the dead; it is less commonly realized that these same

Session 5: End-of-life communication

Session 6: Ethics Committee Meeting
- All students attended one Ethics Committee Meeting during the course
- Topics discussed: patient consultations, new policies or laws, new research
- Activity: Ask questions and participate
- Goal: Familiarize students with resources available to physicians

Session 7: Hospice Visit: exploring a multidisciplinary view
- Shadow a hospice team member
- Follow-up on palliative care patients
- Understand the culture of hospice
- Introduce resources available to patients

Curriculum

Year 1 Curriculum Overview

A Pilot Preclinical Elective on Aspects of Palliative Care and End-of-Life Care
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