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An Evaluation of Educational Interventions Aimed at Preparing Medical Students for Acute Care: A Systematic Review

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Introduction: There is evidence to suggest inadequate preparation for acute care within the undergraduate medical curriculum. Whilst previous attempts have been made to address this concern, a lack of formal evaluation of intervention effectiveness limits their utility. This review aimed to identify educational interventions seeking to prepare medical students for acute care and evaluate their effectiveness.

Methods: MEDLINE, CENTRAL, Embase, Scopus and Web of Science were systematically searched. Primary research studies published between 2000-2020 and reporting changes in outcomes related to medical student preparation for acute care were included. A modified version of a standardized approach was used to determine intervention effectiveness. Study quality was appraised using the Medical Education Research Study Quality Instrument (MERSQI). Studies with a MERSQI score of ≥ 14 were classed as high-quality.

Results: Overall, 72 studies were included in this review. The majority were single group pre and post-test studies ($n=39$, 54.2%) and none measured changes in student behavior nor patient/healthcare outcomes. Courses, clerkships and simulation were found to be the most effective of the interventions identified. Clerkships were the most successful at improving acute care skills. Mean MERSQI score was 12.4 (range=7.8-15.5, SD=1.7) and 18 studies (25%) were classed as high-quality.

Conclusion: This review favors the use of clerkships, as well as courses and simulation. However, considerable heterogeneity and numerous study limitations prevent firm conclusions from being drawn. Future high-quality studies, especially those measuring behavioral changes and patient/healthcare outcomes, are subsequently needed. Reviews with a more focused area of research and those assessing long-term outcomes would additionally prove beneficial.

Biography:

Haider Merchant is currently a final year medical student at the University of Exeter. He had developed an interest in medical education, which led me to completing an intercalated Masters in Clinical Education last academic year. He had particularly become interested in improving undergraduate preparedness for practice. Hence, He completed this research as part of the dissertation component of the Masters degree. He hope to undertake further academic training in medical education and subsequently undertake an Academic Clinical Fellowship as part of my further specialty training. He also hope to complete either a PhD or MD in medical education.