

Introduction

This study aims to improve the medical care of U.S. military veterans by introducing "the military health history" to third year medical students at a large medical school in the southeastern United States. As a result of the nature of military service, veterans are a unique patient population with many special health considerations. For various reasons, measures are often not taken by clinicians to address such special considerations. This results in a healthcare disparity for veterans first described by Dr. Jeffrey Brown in 2012. By intervening at the medical school level, we hope to play a role in rectifying this disparity and assist in creating a future in which veteran healthcare is of the highest quality.

Materials and Methods

This study was approved as quality improvement research by both Louisiana State University Health Science Center and Southeast Louisiana Veteran Healthcare System IRB offices. A short lecture outlining the components of the military health history was presented to 186 third year medical students. The students were given the opportunity to answer five survey questions before and after the lecture. These questions assessed the students' understanding of the lecture material, perceived importance of the subject matter, and likelihood of future implementation. One-way between-groups analyses of variance (ANOVAs) were conducted to examine changes in the mean levels of these variables after the lecture.

Results

The survey results revealed statistically significant increases between pre- and post-lecture levels of perceived importance of, likelihood of ascertaining, and confidence performing a military health history. Results are demonstrated in detail in Table 1 of the manuscript.

Conclusion

The lecture resulted in statistically significant differences in survey responses with large effect size. The team feels that these results indicate an effective education of a group of future physicians on the importance of veteran-tailored healthcare. Our hope is that these students go on to employ the military health history in future practice, although such a determination cannot be made by this study. To address this, the team plans to carry out a 6-month follow up survey with the sample population to assess the longer-term effects of our intervention. Furthermore, we plan to survey veterans immediately following Veterans Health Administration clinic visits with members of our study population to assess the patient's perceived benefit of the military health history.