From the Director . . .

The 2015 Academy Educational Scholarship Day and Fall Symposium is Thursday, October 28. The complete program, including abstracts for the peer-reviewed oral and poster presentations are included in this issue. As you will see from the program agenda, this year’s program includes opportunities to interact with and learn from a number of our own faculty who have ventured into educational innovations in inter-professional education (IPE). Also in this issue you will find news about other achievements, awards, developments, and upcoming opportunities.

Among the Educational Scholarship Day presentations will be those from the 2014-15 Educational Enhancements Grant awardees and the 2015 of the Docere Fellowship in Health Professions Education. One EEG proposal was funded for the 2015-16. Some funds remain in the 2015-16 EEG budget, so we will be issuing a Second Round RFP for only Travel Award proposals. Note that only Academy members in active/good standing are eligible to apply. The RFP will be available no later than November 3 and proposal must be received no later than 4:00 p.m., December 3. This is a short turn-around, so if interested, please refer to the Academy website for details about the EEG Travel Award criteria. Please note other upcoming dates and deadlines to the left of this page, so you don’t miss opportunities of interest. Finally, we conducted the fourth strategic thinking and design process for the Academy during the Spring 2015. Results have led to some changes already, such as a change in our name to the LSU Health Teaching Academy. We are nearing completion of the resulting action agenda and more improvements will be implemented in the very near future to both strengthen the Academy organizational structure, responsiveness to faculty needs and interests across the campus, and enhance benefits to Academy members. As always, send us your input and I look forward to seeing you on October 28.

Sheila W. Chauvin, PhD, MEd

Academy Fall Symposium: Inter-professional Education at LSU Health

Over recent years, the Teaching Academy has devoted program time and collaborative efforts to support the incorporation of inter-professional education (IPE) into curriculum and program experiences for learners across the various professional schools at LSU Health. Several Academy symposia have focused on faculty development in IPE. These events and opportunities for collaborative learning have contributed to early efforts and successes in IPE initiatives. Once again, the Academy is focusing on IPE for the 2015 Fall Symposium, to occur on October 28. This time is to join together to celebrate early successes from implementation and to learn from colleagues who have been educational leaders in IPE at LSU Health. As with any innovation, challenges are realized and lessons are learned. An interactive panel discussion will provide faculty participants with a background for why IPE is critical to our learners’ future success in practice and the strength of educational programs moving forward. Finally, participants will be able to attend break-out sessions to interact with colleagues who have already blazed this new trail and explore what might be meaningful and feasible ways to increase engagement in IPE across the LSU Health interprofessional campus.

Inside this Issue:

The Academy and IPE
New Academy Members, Docere Teaching Excellence Fellows and EEG Awards Update
Member Accomplishments
Fall Symposium Agenda
ESD Abstracts
Congratulations and Welcome New Academy Members!

Faculty may apply at any time for membership in the Teaching Academy. Upon peer review and acceptance, new members engage in the Teaching Academy immediately. An annual induction of new members occurs during the recognition program held as part of the annual Academy Educational Scholarship Day held with the Fall Symposium. Since October 2014, the following faculty have been accepted as Academy members:

- Marie Adorno, PhD, Associate, Undergraduate Nursing, School of Nursing
- Tina Benoit-Clark, MD, MBA, FACP, Fellow, Internal Medicine (Lafayette), School of Medicine
- Kathleen Crapanzano, MD, Teaching Scholar, Psychiatry (Baton Rouge), School of Medicine
- Jennifer Martin, DNP, CRNA, Fellow, Nursing, School of Nursing
- Janice Townsend, DDS, MS, Master Teacher, Pediatric Dentistry, School of Dentistry

Docere Teaching Excellence Fellows and New Academy Associate Members:

- Leigh Ann Burns, MS, Medicine-Gastroenterology, School of Medicine
- Rachel Chappell, MHS, Physician Assistant program, School of Allied Health Professions
- Suzanne Fournier, DDS, Pediatric Dentistry, School of Dentistry
- Bruce Hurley, MD, Emergency Medicine, School of Medicine
- Douglas Johnston, PhD, Microbiology, Immunology, and Parasitology, School of Medicine
- Maria Reinoso, MD, Ophthalmology, School of Medicine

Educational Enhancement Grants — 2015-16 Project

The Educational Enhancement Grants (EEG) program is an annual opportunity to support small, one-year educational enhancement, scholarship, and faculty development projects. Project directors must be Academy members, but other project team members may or may not be Academy members. Four project categories are available: 1) educational enhancement, 2) faculty study group, 3) faculty mentoring, and 4) travel awards (available only to Academy members). Project proposals undergo rigorous peer review. Based on previous years, a total of $20,000 is available to fund such projects. For the 2015-16 call for proposals, one project was funded and it is currently underway. Below is the awarded project:

Compassionate Care as a Professional Competency within Occupational Therapy Practice. Kelly Alig (Project Director/Principal Investigator), Barbara Doucet, Shannon Mangum, Jo Thompson, Rennie Jacobs, and Kerrie Ramsdell (all for Occupational Therapy), Mona Baker (Clinical Laboratory Sciences) (School of Allied Health Professions), and Joy Sturtevant (Department of Microbiology, Immunology, and Parasitology, School of Medicine). Funding Award: $6,900

Occasionally, when sufficient EEG funds are available, a second round of call for proposals is possible. In such instances, proposals are limited to the Travel Awards category and these are available only as individual proposals from Academy members. For the 2015-16 EEG program, a second RFP for Travel Awards will be distributed to all Academy members no later than November 3, with a deadline for receipt of proposals on December 3. Full details about the EEG program are available from the Academy website.
Academy Member Accomplishments:

While not a completely inclusive list of member accomplishments since October 2014, below are those shared with us recently by Academy members:

Marie Acierno, MD (Fellow, SOM)
Selected by the American Academy of Ophthalmology for the 2015-16 Academy’s Leadership Development Program (LDP) XVIII, class of 2016 as a representative for the North American Neuro-Ophthalmology Society
Management of Malignant Idiopathic Intracranial Hypertension, Invited Guest Speaker 2015 Ophthalmology Update, University Mississippi Medical Center, Jackson, MS, August 8, 2015

Christine Butts, MD (Fellow, SOM)
With colleagues, Elizabeth Clement, MD and Scott Mackey, MD, designed a curriculum to introduce bedside ultrasound into the new first-year medical student core curriculum. The inaugural implementation is well underway.

Mary Thoesen Coleman, MD, PhD (Teaching Scholar, SOM)
Departmental Seminar Series
Writing Case Reports, LSU Department of Family Medicine, Telemedicine Faculty Development Series, New Orleans, Louisiana, May 18, 2015

Papers Presented:
Coleman MR, Coleman MT. Case Report: Dairy-free Dietary Substitute, Abdominal Pain, and Weight Loss. Student Research Day, LSU School of Medicine, New Orleans, Louisiana, October 6, 2015.

Visiting Seminar:

Judith Gentry, RN, MSN, OCN, CNE (Fellow, SOM)
Selected as an Oncology Nursing Society Award reviewer for the 2016 ONS annual awards

Amparo Gutierrez, MD (Fellow, SOM)
Barratt D, Mader EC, Gutierrez A, Oliva AA. EEG and Sleep Team-Based Learning, MedEdPORTAL, 2015. Received an Editor’s Choice special distinction, awarded to only a small number of publications.

Stacey Holman, MD (Fellow, SOM)

Continued on the next page
Member Accomplishments since October 2014 (Continued)

Michelle Moore, PsyD (Fellow, SOM)

Awards and Honors

- Outstanding Service to Students for the Prevention and Education of Substance Abuse (SPESA) Club and New Orleans Community, Presented by the President of the Addictive Behaviors Counseling and Prevention Program at Southern University of New Orleans, October 2, 2014.
- Early Career Psychologist Award in recognition of outstanding and significant contributions to early career psychologists in Louisiana, Presented by the Louisiana Psychological Association, June 13, 2015.

New Appointments

Associate Director of Pre-Doctoral Training, Department of Psychiatry, Section of Psychology

Journal Publications (non-peer reviewed)

- Becoming a Mentor. Louisiana Psychological Association, 6(4), 4, August 2015.


Invited Presentations


Jeffrey Surcouf, MD (Fellow, SOM)


Interprofessional Education (IPE)

Interprofessional Education (IPE) is defined as “when students from two or more professions learn about, from and with each other to enable effective collaboration and improve health outcomes.”
### Activity Credit for Physicians and Nurses
The Louisiana State University School of Medicine, New Orleans is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians.

The Louisiana State University School of Medicine, New Orleans designates this live activity for a maximum 3.75 AMA PRA Category 1 Credit(s)™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

### Activity Credit for Nurses
Louisiana State University HSC School of Nursing, Faculty Development Continuing Nursing Education & Entrepreneurial Enterprise is accredited as a provider of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation.

Nursing participants can earn up to 3.75 continuing nursing education contact hours; participants must attend the entire session and must complete the evaluation.

### Teaching Academy
**2015 Fall Symposium and Educational Scholarship Day**

**Wednesday, October 28**

Isidore Cohn, Jr. Learning Center
6th floor, LSU-Lions Building

<table>
<thead>
<tr>
<th>Time &amp; Location</th>
<th>Program Agenda</th>
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<tbody>
<tr>
<td>7:45 – 8:15 a.m.</td>
<td>Final Poster and Demonstration Set-Up</td>
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<tr>
<td>8:00 – 9:00 a.m.</td>
<td>Registration and Continental Breakfast</td>
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<tr>
<td>Lobby</td>
<td>Academy Business Meeting – Members only (8:15-8:50 a.m.)</td>
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<tr>
<td>9:00 – 11:00 a.m.</td>
<td>Educational Scholarship Day</td>
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<tr>
<td>Lobby</td>
<td>Oral Abstracts, Posters and Demonstrations</td>
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<tr>
<td>11:00 – 11:30 a.m.</td>
<td>Annual Academy Recognition Program</td>
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<tr>
<td>Large Lecture Room</td>
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<tr>
<td>11:30 a.m.–12:15 p.m.</td>
<td>Lunch Buffet and Networking</td>
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<tr>
<td>Lobby</td>
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<tr>
<td>12:15 – 1:15 p.m.</td>
<td>Inter-Professional Education at LSUHealthNewOrleans: Early Successes, Challenges, and Opportunities (1.00 credit)</td>
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<tr>
<td>Large Lecture Room</td>
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<tr>
<td>1:15 – 1:30 p.m.</td>
<td>Introduction to Concurrent Sessions (0.25 credit)</td>
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<tr>
<td>Large Lecture Room</td>
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<tr>
<td>1:30 – 1:40 p.m.</td>
<td>BREAK</td>
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<tr>
<td>Conference Rooms</td>
<td>IPE: Competencies &amp; Curricula</td>
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<tr>
<td>1:40 – 2:40 p.m.</td>
<td>Robin English, Sandra Andrieu, Kari Brisolara, and Jessica Johnson</td>
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<tr>
<td>(1.00 credit)</td>
<td>Large Lecture Room</td>
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<tr>
<td>Conference Rooms</td>
<td>DDx: Vestibular Disorders</td>
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<tr>
<td>2:40 – 2:50 p.m.</td>
<td>Laurie Hebert, Rachel Trommelen</td>
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<tr>
<td>(1.00 credit)</td>
<td>Conference Room 1</td>
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<tr>
<td>Conference Rooms</td>
<td>IPE: Simulation with Activities of Daily Living (ADLs), Transfers, and Medical Lines (1.00 credit)</td>
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<tr>
<td>2:50 – 3:50 p.m.</td>
<td>Shannon Mangum, Ellen Beyer, and Kathy Carter</td>
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<td>(1.00 credit)</td>
<td>Conference Room 8</td>
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<tr>
<td>Conference Rooms</td>
<td>Cultural Diversity</td>
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<tr>
<td>3:50 – 4:00 p.m.</td>
<td>Kirk Nelson, Meher Banaje, Kerrie Ransdell, Henry McCarthy</td>
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<tr>
<td>Large Lecture Room</td>
<td>Conference Room 3</td>
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<tr>
<td>4:00 – 4:30 p.m.</td>
<td>IPE in a Patient Care Setting</td>
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<tr>
<td>Large Lecture Room</td>
<td>Mary Coleman, Angela McLean</td>
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<tr>
<td>4:00 – 4:30 p.m.</td>
<td>Simulation-based IPE</td>
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<td>John Paige, Deborah Garbee, Matthew Carlisle</td>
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<td>Conference Room 8</td>
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<td></td>
<td>BREAK – Return to Large Group</td>
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Advanced registration appreciated to plan effectively for materials, lunch, and break refreshments.

To register, please email academy@lsuhsc.edu by Friday, October 23, 2015.

Questions or more information? Please call 504-568-2140 or email academy@lsuhsc.edu.

Please share this announcement with your colleagues and invite them to join us on October 28.

Academy website: www.learningcenter.lsuhsc.edu/academy
Educational Scholarship Day 2015
Poster Presentations and Oral Abstracts

The 2015 Fall Symposium and Educational Scholarship Day will feature 17 projects covering various disciplines and topics. The ESD presentations will also highlight completed Educational Enhancement Grant projects from 2014-15 along with the capstone project for each of the 2014-15 Docere Fellows. We wish to congratulate all those who were accepted and we look forward to a successful and enlightening ESD 2015.

The following are project titles, authors, and proposal abstracts representing all of the accepted projects (poster presentations followed by oral abstracts).

Poster Presentations

### Title: Quality Improvement in a Small Residency Program: Limitations, Solutions, and Example Assessing Body CT Appropriateness after Protoceling Quality Improvement Project

**Eric Wallace, MD; Janice Letourneau, MD; Janis Brian, MPH; Aran Toshav, MD; David Smith, MD; Raman Danrad, MD**

#### Proposal Abstract

**Background**

Structured Resident Quality Improvement (QI) education is increasingly important given new American College of Graduate Medical Education (ACGME) and American Board of Medical Specialties (ABMS) Maintenance of Certification (MOC) requirements. Radiologists must be proficient and knowledgeable regarding quality improvement and quality assessment. In a 4 year training program already filled with rigorous educational demands, residents often find it difficult to comply with the many requirements. Residency programs and directors also share this problem, particularly smaller programs. With a smaller faculty and residency size it can be difficult to devote time to QI given other clinical/academic demands.

**Purpose**

To retrospectively look at the outcome of a QI project on pre-procedural protocols over several years, to report the longitudinal success of a project created within the QI educational context, and to also highlight the problems and solutions small residency programs may identify in completing QI projects.

**Methods**

50 Body CTs were randomly selected from our institution’s PACS from 3 different time periods: 2008-2009 (no protocol performed), 2011-2012 (protocol performed by a resident via paper), and 2013-2014 (protocol performed by a resident via the RIS-PACS). Two staff radiologists graded the appropriateness of the study based on clinical history provided. Criteria included the region imaged, use of intravenous and oral contrast, number of phases, and timing of contrast. Reviewers were blinded to the date of the study performed. Data was statistically analyzed.

**Results**

The QI project on effectiveness of pre-procedural protocols resulted in increased appropriateness in the department’s use of oral contrast (100% in 2013-2014 compared to 79% in 2008-2009 and 83% in 2011-2012) and appropriate number of phases of Body CT’s. (86% in 2013-2014 compared to 64% in 2008-2009 and 74% in 2011-2012).

**Conclusion**

Despite the limitations, effective QI projects can be performed in small residency programs that favorably affect patient care.

*Continued on the next page*
Poster Presentations, continued

Title: IV Contrast Parameters: An Intradepartmental QI Project
Dane Mackey, MD; Bradley Spieler, MD; Aran Toshav, MD; Lawrence Manalo, MD; Eric Wallace, MD; David Smith, MD; Jonathan Stidham, MD; Leonard Bok, MD

Proposal Abstract

Within the department of radiology at LSUSHC-ILH, there is nonuniformity among staff, residents, nurses, and technologists regarding the navigation of patient related factors which may prevent the safe administration of full dose IV contrast for CT and MRI examinations including acute/chronic renal impairment, allergies, etc. Our intradepartmental QI project sought to identify exactly what those factors are, how they effect administration of IV contrast, and finally to implement an evidence-based set of general parameters for departmental members to consult for navigation of the identified patient factors. Through the use of an intradepartmental survey, literature search, innovation, and multiple departmental discussions, we have progressed to nearly the final stage of the QI process regarding this issue. This poster presentation will illustrate how the standard QI process was utilized, what the current literature states regarding navigation of patient factors which may prevent the safe administration of IV contrast, and the future direction of this ongoing project.

Title: Neonatal Intensive Care Unit Boot Camp: A Supplemental, Preparatory Curriculum for House Officers
Jeffrey Surcouf, MD; Christy Mumphrey, MD; Jessica Patrick-Esteve, MD; Brian Barkemeyer, MD; Marlene Buis, MD; Raegan Gupta, MD; Staci Olister, MD; Dana Rivera, MD; Sheila Chauvin, PhD

Proposal Abstract

INTRODUCTION: Medical education and resident training have undergone significant changes in recent years with the introduction of duty hour restrictions, milestone-based competency evaluations, and a shift towards a more resident-driven career path-directed curriculum. With these changes, residents are doing fewer required ICU rotations. The ACGME residency guidelines require residents to have "two units of NICU" during three years of training. Additionally, since the 1999 Institute of Medicine's publication "To Err is Human: Building a Safer System," much focus has been placed on patient safety and reducing medical error.

OBJECTIVES: In an effort to combine these two dichotomous extremes of less exposure with less medical error, we introduced "NICU Boot Camp" as a supplemental curriculum immediately prior to beginning a rotation in the neonatal intensive care unit with the intention of preparing residents.

METHODS: Our boot camp consists of 3 one-hour sessions. Two didactic sessions encompass expectations, infection control, calculations, nutrition, respiratory management, and on-call problems. One simulation session combines the knowledge received with three hands-on real-life scenarios. At the completion of their NICU month, residents were given a survey to complete about the boot camp experience.

RESULTS: A total of 32 residents have participated in the sessions, and overwhelmingly support the curriculum. Out of a usefulness max score of 4, Session 1 (Orientation/Calculations) received 3.39, Session 2 (Respiratory/On Call Problems) received 3.35, and Session 3 (Simulation) received 3.44. Eighty-four percent of responders felt it would be useful to repeat the boot camp prior to each rotation.

CONCLUSION: Translation of success with less patient error will take time to evaluate. However, this boot camp gives residents the opportunity to feel more comfortable while in an unfamiliar high stakes, high stress environment. With ongoing changes in medical education requirements, there is room for further expansion to other disciplines by planning a similar boot camp curriculum.

Poster was presented at Children’s Hospital Research Day - June 2015
Poster is formatted similar to the abstract with the addition of "future directions"

Continued on the next page
Poster Presentations, continued

Title: Identifying and Addressing Knowledge Gaps of Medical Providers to Support the State’s Prevention Efforts
Adrienne Katner, DEnv, MS; Cheryl Harris, MPH; Trina Evans Williams, MPH; Ann Johnson Bludsaw, LMSW; Ngoc Huynh, MPH

Proposal Abstract

This research highlights a gap in the knowledge of medical providers, and presents recommendations to close this knowledge gap. Louisiana (LA) requires universal screening of all children between the ages of 6 and 72 months for lead-poisoning; and reporting of results to the LA Office of Public Health (OPH), regardless of result. However, based on laboratory reports, only 16% of LA children were tested in 2011. Low reported testing rates could be due to a lack of knowledge about state testing and/or reporting requirements. OPH’s LA Healthy Homes and Childhood Lead Poisoning Prevention Program (LHHCLPPP) conducted an online survey of 156 New Orleans pediatricians to assess screening practices, and awareness of LA’s testing and reporting requirements (n=79). Only 67% of pediatricians routinely screen children at least once; 32% were not aware of LA’s screening requirements; and 66% were not aware of LA’s reporting requirements. Over half the surveyed pediatricians (54%) did not think lead exposure was a problem in Orleans parish, despite the fact that 18% of children tested in New Orleans in 2014 had elevated blood lead levels (>5 µg/dL) compared to the national average of <1%. Finally, 21% of pediatricians indicated they had never received education on lead poisoning, diagnosis and treatment during their medical residency. Recommendations to address this knowledge gap are proposed, and include:

1) Partnering with OPH to develop an inter-professional education collaborative to outline public health priorities, surveillance gaps, and education needs;
2) Implementing curriculum changes to address education needs;
3) Identifying strategies to increase faculty participation in forums and training on education needs, and best practices in educational intervention of health professionals;
4) Funding research to identify barriers to screening and develop strategies to overcome barriers, identify other health practitioner knowledge gaps, and evaluate impact of educational interventions on state prevention efforts.

Brief description of the elements or organization of the poster or presentation:

1) Background on LA’s childhood lead poisoning rates, low pediatric screening rates, and state requirements for universal lead screening and reporting;
2) Preliminary results of OPH’s physicians survey which highlight knowledge gap;
3) Recommendations to address knowledge gap, to include partnership between LSUHSC and OPH; curriculum changes; and research to identify barriers to screening and develop strategies to increase screening. Presenter aims to engage attendees in a discussion on how to promote effective partnerships and strategies for educating LSUHSC’s health care students and faculty.

Continued on the next page
Poster Presentations, continued

Title: Team Training for Emergency Room Trauma Transfers (T2ERT2)  
2014-15 EEG Award  
John Paige, MD; Deborah Garbee, PhD; Pierre Detiege, MD; Vladimir Kiselow, MD; Vadym Rusnak, MD; Qingzhao Yu, PhD;  

Proposal Abstract

Background: Inter- and intra-hospital transfers of critically ill patients are often rife with potential problems. Although adverse events are relatively low during transfers, they can be potentially catastrophic (i.e., extubation of a patient, code initiation).1 Simulation-based training (SBT) is an effective method for improving teamwork in the trauma setting. We investigated the impact of SBT trauma team training on participants’ team-based attitudes, their team-based behaviors, and their interprofessional attitudes.

Brief Project Description: For this Educational Enhancement Grant, learner teams from the Schools of Medicine and Nursing underwent a two hour inter-professional team transfer training session using SBT in an attempt to increase their awareness of inter-professional teamwork and communication.

Methods: From August, 2014 to June, 2015, trainees divided into teams of 6-8 participants consisting of undergraduate nurses, emergency medicine residents, and general surgery residents participated in 10 sessions. Sessions involved two standardized simulated scenarios followed by a focused debriefing on team-based competencies and communication protocols. Pre-/post-session Readiness for Inter-Professional Learning (RIPL, nineteen items, Likert-type) surveys and post-scenario participant- and observer-rated Teamwork Assessment Scales (TAS, three subscales, 11 items, Likert-type) were given during each training session. Mean RIPL and TAS scores were calculated; matched pre-/post-score differences were compared using paired t-test or ANOVA.

Results: Matched pre- and post-training questionnaires were collected from all participants. Data analysis is ongoing and results will be presented at the Symposium.

Conclusion: Inter-professional trauma team transfer training using SBT has the potential to change attitudes toward key team-based competencies. Such attitudinal change is an important first step in adopting team-based behaviors in the actual clinical environment and improving transfer care.

Title: Summer Research Program Increases Student Understanding of Biomedical Research  
Lauri Byerly, PhD; Jason Gardner, PhD  

Proposal Abstract

The Department of Physiology has hosted various groups of students interested in learning and conducting research for several years. These trainees varied in 1) education level (high school students, undergraduate students, medical students, and local school science teachers), 2) research knowledge and experience, and 3) funding sources (local community groups, national societies, and government agencies), and 4) geographical location.

Over the past three years, we developed and formalized an integrated training program to provide a robust research learning experience that enhances understanding of biomedical research. First, we decided that students would benefit from peer mentoring and, for example, we paired high school students with undergraduate, graduate, and medical students. Second, we implemented a focused mentoring program that included an introductory seminar during the first week that described the department, the scientific method, the basics of the research process and the research poster presentation. A team building activity (picnic) where the trainees interacted informally with Departmental faculty, post-docs, and graduate students was held during the first week. Mid-way through the summer program, each trainee presented a 5-minute presentation on the hypothesis and methods for his or her research project. Two weeks before the end of the program, each trainee presented a poster about their research project in digital form to departmental faculty, post-docs and graduate students for feedback. On the last day of the program, students presented their research projects at a campus-wide poster session that was judged by Medical School faculty; this was followed by an awards ceremony.

During the past four summers, we have hosted more than 70 trainees. A survey at the end of the program indicated that more than 84% understood the research process. More than 90% felt they had a positive experience. We feel our program has enhanced our students understanding of biomedical research.

Continued on the next page
Poster Presentations, continued

Title: LSUHSC Summer Research Program Midpoint Evaluation
Megan Bronson MPH, Marvin Hudson, Jr; Symielle Gaston, MPH; Joann Lee; Mary Moore; Michael Rivers; Edward Peters, DMD

Proposal Abstract

Effective program evaluation allows one to measure impact of activities on attitudes, beliefs or knowledge of a particular population. Many events present the opportunity to collect information in order to learn more about participants’ experiences.

The LSUHSC Summer Research Program (SRP) employs high school, undergraduate and medical students as interns to work with a variety of faculty throughout the LSUHSC Schools of Medicine and Public Health each summer. Interns are paired with faculty mentors to conduct research over an 8-10 week period.

In 2015, a Research Intern collected data from both interns and mentors and/or supervisors at the approximate midpoint of the SRP as part of a program evaluation. The interns’ survey asked 14 questions about daily activities, productivity, and behaviors. The mentors'/supervisors’ survey asked ten questions about interactions with interns and recommended improvements for the SRP. The surveys were designed and distributed electronically via SurveyGizmo, which allowed responses to remain anonymous. Over a 10-day period, all SRP participants received personalized initial and reminder emails until they submitted a response.

Of the 83 interns in SRP, 70 (84%) completed the survey and 54 of 69 (78%) mentors/supervisors completed their survey. When asked if they would join the program again, 76% of interns agreed they would and 10% disagreed. Of those 10%, 67% reported working primarily with a supervisor rather than the assigned faculty mentor. 89% of mentors/supervisors reported being satisfied with the SRP while 4% were very dissatisfied.

Continued on the next page
Poster Presentations, continued

Title: Physicians Heal Thyself: Scandals, Suicides and Substance Abuse Among Us
Margaret Bishop-Baier, MD; Scott Embley, LCSW; Lauren Garnier, LCSW

Proposal Abstract

Physicians and other healthcare professionals experience unique stressors that most people in the workforce do not experience. These stressors, when not dealt with effectively, can have a negative impact on the physicians overall health and wellness. The American Medical Association states the following “physicians have a responsibility to maintain their health and wellness, constructed broadly as preventing or treating acute or chronic diseases, including mental illness, disabilities, and occupational stress.” When ignored conditions can lead to impairment. An impaired physician is one who is unable to provide safe, effective care for patients due to his/her own illnesses or life circumstances. It is estimated that 10-15% of the physician population has an alcohol/drug problem at any given time (1). Additionally, physicians may be impaired due to mental illness. Physicians who participate in treatment geared towards the specific needs of the physician have an abstinent rate of up to 75-90% (2). We will review data regarding physician impairment. We will discuss the data available on physicians in training as impaired residents pose specific risks as well as opportunities for early education and intervention. With the use of case vignettes, we will also discuss techniques for promoting health and wellness among physicians, supporting colleagues in identifying physicians who are in need for help, intervening quickly when the health and emotional well-being of a colleague is in question and the appropriate referrals/resources that will assist the physician in gaining control over his/her impairments. Finally, we will emphasize that the timely use of these resources are correlated with high success rates.

This information has previously been presented at the American Psychiatric Association Annual Conference in 2010 as well as the International Employee Assistance Professionals Association in Higher Education Annual Conference in 2012. In both of these presentations, it was deemed most effective as an interactive workshop.


Title: High School and Undergraduate Summer Interns Trained in Public Health and other Health Sciences
Martha Cuccia, MPH; Mary Moore; Paula Gregory, PhD; Fern Tsien, MD

Proposal Abstract

Background: LSU Health Sciences Center provides two-month internships to high school and undergraduate students interested in pursuing education and careers in the health sciences. Interns are matched with LSUHSC faculty to work on research projects according to students’ research interests and faculty expertise.

Description: The School of Public Health has recently begun hosting interns. A primary objective is that interns will receive an introduction to educational opportunities and increase awareness of various disciplines within the School of Public Health. Participating programs include Biostatistics, Epidemiology, and Environmental and Occupational Health Sciences. Projects included studies on lead poisoning, internship epidemiological evaluations, and RNA biostatistical analyses.

Methods: Interns were trained in scientific problem-solving/research methods; responsible conduct of research; data analysis; scientific communication and presentation; and introduction to various careers. Students completed pre-and post-internship surveys.

Results: Of the fifty-two summer 2015 participants, 37 were undergraduates and 15 were high school students. 58% were female and 42% male, 40% African American, 20% Asian, 29% Caucasian, and 11% Hispanic. Students indicated satisfaction of their mentors on a 5-point Likert scale on their post-internship surveys. Two School of Public Health high school interns won awards for their end-of-the summer poster presentations. Both were underrepresented minorities (URM) in the sciences. All School of Public Health interns plan to continue with their research work during the academic year as part of their high school senior projects, plan to apply for part-time work in these fields during college, and have considered public health graduate training.

Discussion: Student interns interested in population-based health can access resources at the School of Public Health. One-on-one mentoring provides the best opportunity for interns to learn about various careers. Future mentoring opportunities will be explored to continue to promote awareness of the LSUHSC School of Public Health educational programs and public health careers.

Continued on the next page
Title: LSUHSC-NO Physiology Predoctoral Students Lead Community Prekindergarten to High School Physiology Education
Lisa Harrison-Bernard, PhD; Annie Whitaker, PhD; Margaret Stieben; Patricia E. Molina, MD, PhD,

Proposal Abstract

Background: Exposure of predoctoral candidates to PK-12 and community education outreach provides a forum for science advocacy and the development of skills to communicate complex scientific concepts to the lay public.

Description of project/program/innovation: Our program provides training to predoctoral students through coursework, research, scientific conferences, tutoring, teaching, and PK-12 educational outreach. Physiology faculty and students engage in interactive, hands-on physiology experiments to engage young students in the scientific method, while they are learning about how their bodies function.

Methods: We are fortunate to have access to a nationwide outreach program developed by the American Physiological Society (APS), in 2005 which builds connections between scientists and their local PK-12 schools. The program, Physiology Understanding (PhUn) Week, has reached over 80,000 students in the past 10 years. Typically, a team of 3 students and 1 faculty explains the scientific method, assists the students in formulating hypotheses, collecting their own data, interpreting the outcome, and discussing conclusions. Most visits include a PPT presentation, hands-on experimental activity with data sheets, and group discussions. Importantly, our students serve as role models for future scientists.

Results: Over 1,700 students in the greater New Orleans area in grades in PK-12 have been educated by 12 current and former physiology predoctoral students and 5 faculty members in 32 events in the past 5 years.

Discussion/Conclusions: These unique educational experiences provide our doctoral graduates with the knowledge and confidence to communicate with future young scientists, lay community, politicians, and policy makers in support of biomedical careers and research. The goal is to increase the types of physiology educational programs offered, make new contacts with schools with minority students, increase student, fellow and faculty participation, publish a journal article to disseminate the information. Funding provided by APS; NIH/NIAAA P60 AA09803 & T32 AA07577

Evidence of other dissemination (e.g., previous presentation(s), publication): 2015 CSGS Annual Meeting in New Orleans, March 5-8, 2015 Poster Presentation

Continued on the next page
Title: Community Outreach Science Education as a Communication Teaching Tool for LSUHSC Trainees
Fern Tsien, MD; Martha Cuccia, MPH; Mary Moore; Kathy McDonough, MD; Joseph Moerschbaecher, III, MD

Proposal Abstract

Background: The LSUHSC leadership saw the need for improved science education as evidenced by poor standardized science test scores and a dismal number of Louisiana underrepresented minority (URM) applications to our six LSUHSC-NO Schools.

Description of the project: This led to the creation of four programs in which trainees (graduate, medical, and MD/PhD students, post-doctoral fellows, and residents) from the six LSUHSC-NO Schools teach science to local K-12 (elementary, middle, and high school) students and undergraduates: the Science Partnership Program, the Hands-on Science Career Workshop Program, the Drug Awareness Program, and the Science Youth Initiative. The goals are to make science easier to understand, improve academic achievements, address health topics, introduce diverse role models in the sciences, and increase awareness of science careers, while simultaneously training LSUHSC students in effective communication. Therefore, the LSUHSC trainee instructors receive education in how to communicate about science and health to the lay public while performing community service.

Methods: Hands-on experiments pertain to concepts found in the media (cancer, forensics), health issues (smoking, alcoholism), and curriculum (cells, DNA). Science videos featuring the LSUHSC trainees and children have also been prepared for dissemination. The Science Teaching Efficacy Belief Instrument (STEBI) was used to evaluate the teaching confidence levels of the instructors before training, following training, and after teaching lessons.

Results: The study demonstrates a statistically significant increase in confidence and teaching readiness in the LSUHSC instructors following their participation in these programs.

Discussion: Teaching is a skill LSUHSC trainees need to be effective communicators in their future careers as scientists or clinicians. Surveys will continue to be implemented to participating instructors to more accurately assess the efficacy of these programs as a communication teaching tool. This project was presented as a poster at the Conference of Southern Graduate Schools, New Orleans, LA, March 2015.
Poster Presentations, continued

Title: Multimodal Strategies Improve Compliance with Lung-Protective Ventilation Guidelines
Terry Forrette, MHS, RRT; Patrick Greiffenstein, MD; John Zamjahn, PhD, RRT

Proposal Abstract

Introduction: In a previous study we identified low compliance in setting tidal volume (VT) according to a lung protective strategy of 6 mL/kg predicted body weight (PBW) as per our institutional guidelines. Only 20% of subjects received lung protective ventilation (LPV) within 10% of their predicted VT (PVT). We found that lack of adherence to our institutional guideline for LPV was not due to inaccurate height measurement and calculated PBW but rather suspected that it may be related to the previous teaching strategy (TS1).

Hypothesis: Compliance would be increased using an improved multimodal teaching strategy (TS2) that includes both classroom and bedside components specifically directed at LPV.

Methods: Residents at the beginning of their monthly rotation received a classroom lecture redesigned to emphasize the LPV protocol, ARDSnet VT charts were placed in each ICU room, and LPV settings were reviewed during daily rounds in our trauma/surgical critical care unit. Data were collected on 65 consecutive subjects who were receiving conventional volume ventilation. Height was determined by measuring ulnar length (Ulnar Ht) using an established, validated method and then compared to the height entered into the hospital’s electronic medical records (Epic Ht). Predicted body weight was determined using the ARDSnet VT tables. Set VT (SVT) was then compared to PVT and reported as percentage PVT. IRB approval was obtained prior to collecting these data. Student’s t-test was used to compare continuous variables while Fisher’s exact test was used to compare dichotomous variables.

Results: There was no significant difference between Ulnar Ht and Epic Ht (P>0.2). The accuracy in setting PVT for each teaching strategy is shown in the Figure. Compared to TS1, TS2 resulted in significantly higher percentages of subjects receiving LPV within 5%, 10%, and 20% of PVT. Only 18% of the TS2 group had SVT > 30% of PVT compared to 35% of the TS1 group. Forty-eight percent of TS2 subjects received LPV within 10% PVT (range 5.4-6.6 ml/kg PBW), as compared to only 20% of TS1 subjects.

Conclusion: A multimodal teaching strategy significantly improved compliance with our LPV guidelines. Further studies are required to determine the contribution of each component of the teaching strategies in order to optimize compliance.
Oral Abstracts

DOCERE FELLOWSHIP PROJECT—Rachel Trommelen, PT, DPT, NCS—2015 Docere Graduate
Title: Impact of Case-based Learning and Reflection on Clinical Reasoning and Reflection Abilities in Physical Therapy Students
Rachel Trommelen, PT, DPT, NCS; Aryn Karpinski, PhD; Sheila Chauvin, PhD, MEd

Proposal Abstract

Introduction: Clinical reasoning and reflection are vital skills for Physical Therapists (PT) to achieve the mission of autonomous practitioners of choice for movement disorders. This study addresses the impact of the combination of Case-Based Learning (CBL) and external reflective articulation on the development of clinical reasoning and reflective abilities in entry level professional Doctor of Physical (DPT) students.

Review of Literature: The current CBL literature in health care education is mixed as to its effectiveness in promoting clinical reasoning, with less literature specifically relating to Physical Therapy (PT) education. Use of reflection is also recommended to increase clinical reasoning; however its direct impact on promoting clinical reasoning and reflective abilities in DPT students is unknown. It is also unknown if the combination of CBL and use of explicit reflection using external reflective articulation increases clinical reasoning over use in isolation.

Subjects: Subjects were second year DPT students (N = 27) participating in a course on the physical therapy examination, evaluation, and treatment strategies for a variety of neuromuscular disorders.

Methods: The intervention was the addition of written external reflective articulation assignment using the Physical Therapy Clinical Reasoning and Reflection Tool (PT-CRT) along with posed questions surrounding clinical reflection to CBL activities. Five CBL activities were completed before the addition of external reflective articulation. Subjects completed the Diagnostic Thinking Inventory (DTI) and Self-Assessment of Clinical Reasoning and Reflection (SACRR) three times during the course: Beginning, before implementation of the intervention, and at the conclusion of the course.

Results: Seventeen subjects (63.0%) were female and ten (37.0%) were male with a mean age of 24.63 (SD = 2.53) and Grade Point Average of 3.52 (SD = 0.24). There were no significant differences in the DTI and SACRR scores with respect to gender, age, and Grade Point Average (GPA). The main effect of SACRR scores was significant (p < 0.001). There were significant differences across the three SACRR and DTI scores, with no statistically significant differences (p > 0.05) before the reflection was implemented (Pre to Time 2) and a statistically significant increase in SACRR (p=0.001) and DTI scores (p=0.01) after the reflection was implemented (Time 2 to Time 3).

Discussion and Conclusion: The results in this study support the addition of external reflective articulation to CBL activities for DPT students to increase clinical reasoning and reflective abilities. Purposeful use of CBL and reflection promoted the students to improve clinical reasoning skills, a critical factor in clinical decision making. Results provide useful information to guide educators and administrators in learning activities which improve reflective and clinical reasoning abilities in DPT students.

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**DOCERE FELLOWSHIP PROJECT— Joseph LaRochelle, PharmD, 2015 Docere Graduate**
**Title: A Pediatric Critical Care Pharmacotherapy Rotation**
*Joseph LaRochelle, PharmD; Bonnie Desselle, MD; Aryn Karpinski, PhD; Sheila Chauvin, PhD, MEd*

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**Proposal Abstract**

Background: Pediatric residents are expected to have certain knowledge about medications prior to sitting for the board exams in pediatric. However, pharmacotherapy training is not often formalized in the training. The residents rotate through the pediatric intensive care unit as part of their regular training in residency. Clinical pharmacists in pediatrics are specially trained in pharmacotherapy and can serve as preceptors of medical residents. This is the 1st such rotation for medical residents.

Rotation description: 2 week elective educational experience in which residents provide pharmaceutical care to critically ill pediatric patients along with a pharmacy preceptor and pharmacy students. Activities include designing plans, participation on rounds, and interactive topic discussions.

Methods:
Research question 1: do residents have increased confidence on drug-related decision? Created survey measuring confidence given to residents on rotation and in the PICU (control) on 1st and last day of rotation.
Research question 2: Do residents have increased knowledge in drug related decisions? Knowledge exam given to residents on rotation and in PICU on 1st and last day of rotation.

Results: Residents on rotation had increased confidence over their peers and from the beginning of the rotation. Residents on rotation had higher exam scores then peers and from the beginning of the rotation.

Conclusions: Seems to be beneficial for residents. Sample size too small at this interim data analysis to draw robust conclusions. Increasing sample sizes will help to solidify results.

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**Title: Continued Development of the Interactive Atlas of the Human Skeleton as a Resource for Anatomy Education**
2014-15 EEG Award
*R. John Cork, PhD; Gregory P. Casey, PhD; Sally Abell; Jasmyne Farrell; Emily Winters*

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**Proposal Abstract**

Several years ago we developed a template for online modules used by nursing students to study the bones of the human skeleton. The first module developed focused on the scapula and included an instructional video, interactive animations on the bony landmarks and muscle attachments, and quizzes for self-testing. This module has now been used for several years in the Nursing Anatomy courses. A previous study showed that access to the Scapula module significantly improved scores on related exam questions. The results of this study were presented at an earlier Educational Scholarship Day and at the American Association of Anatomists annual meeting in 2014.

Last year we received an Educational Enhancement Grant (EEG) to expand the scapula module into a complete web-based resource ‘Interactive Atlas of the Human Skeleton’ (IAHS). This would include modules on all the bones on the skeleton. The EEG provided funds to purchase a workstation and software to design and compose all the required web pages, and the School of Nursing provided money to pay student worker(s) to complete the bulk of the work.

Although it took nearly six months before we were able to hire any suitable students we have completed the bulk of the project. Dean Porche has graciously agreed to continue supporting the student workers until the end of the year so that we can complete the remaining portions of the project. As of Aug 2015 interactive animations for bones of the vertebral column, lower limb, pelvis and thoracic cage are essentially complete, with only a couple of bones in the upper limb still unfinished.

Most of the remaining time on the project will be used to complete the series of videos. Completion of the Skull Module will become part of a Nursing research (MUSES) project by one of the student workers.

*Continued on the next page*
Title: Bootcamp Survival Guide: How to Implement a ’Preparation for Residency’ Curriculum
Stacey Holman, MD; Jaime Alleyn, MD; Valerie Williams, MD; Asha Heard, MD; Florencia Greer Polite, MD

Proposal Abstract

Background
Immediately following the 2013 NRMP Match, medical students from LSU – NOLA who matched into OBGYN residencies and non-LSU students who matched to the LSU - NOLA program were invited to participate in a one-week, non-credit elective to begin preparations for residency training.

Description
We aimed to develop an elective for fourth year medical students recently matched into OBGYN. The Association of Professors of Gynecology & Obstetrics (APGO) developed the foundation elements for this elective, known originally as Milestone 1. It is now identified as the Preparation for Residency Curriculum.

Methods
Curriculum design focused on basic knowledge and skills in areas of obstetrics, gynecology, and office practice as suggested in the draft outline distributed by APGO. Course content was presented using independent study, traditional lectures, team based learning, and simulation. A pre-test was given to assess clinical knowledge and a basic skills confidence survey was administered utilizing a four point Likert scale. At the end of the one-week elective, the students completed a post-test, confidence survey, and final evaluation of the course.

Results
Medical students who participated were satisfied with the course and levels of confidence on basic skills improved after completion of the elective. Comparison of the knowledge test score means was not significantly different (pre-test 67.14% vs. post-test 64.86%, p=0.39). From these pilot results, a detailed curriculum was developed to cover the topics that were subsequently published in the APGO Preparation for Residency curriculum in 2014. The bootcamp was then extended to meet criteria for an elective course at the School of Medicine extending over a four week period of time.

Discussion
This program continues to evolve as we build curriculum. We also hope to survey our current interns at the end of this year to further assess whether this elective provides a worthwhile educational initiative that supports our goal for a safe and successful transition from medical school to residency.

Element of the Poster/Presentation would include: curriculum elements, charts of results, examples of survey tools

This abstract has been submitted to the 2016 CREOG & APGO Meeting.

This concludes the listing of accepted project abstracts for Educational Scholarship Day 2015.

If you wish to submit an abstract for Educational Scholarship Day 2016 (date to be determined), please visit the Teaching Academy website for more information about the Fall Symposium/Educational Scholarship Day proposal submission timeline at learningcenter.lsuhsc.edu/academy.

Thank you for your support of the Teaching Academy.