Palliating Interns: The Impact of a Palliative Care Rotation on Internal Medicine Interns

Jennifer Healy, DO[1,2,3], Shuko Lee[2] , Sandra Sanchez-Reilly, MD [1,2]

1. University of Texas Health Science Center at San Antonio; 2. GRECC, South Texas Veterans Health Care System, San Antonio, TX; 3. University Health System

University Health System

WE MAKE LIVES BETTER
UT HEALTH SCIENCE CENTER
SAN ANTONIO

Background

- Many studies look at efficacy for including palliative care (PC) curriculum for medical students, yet incorporation of PC rotations in the education of residents has not been required nor well-studied.
- Core topics for PC include communication skills, symptom management, and working with an inter-professional team.
- These may be taught in didactic settings, but supervised practice has the greatest potential for impact

Research Objective

To assess the impact of a palliative medicine consultation rotation on internal medicine (IM) interns.

Methods

- 42 IM interns (26-categorical and 15-preliminary)
- 50% interns completed 2-week rotation in PC
- 100% interns completed PC-focused didactics.
- Web-based surveys were completed by interns
  - pre-internship and post-internship reflection.
  - included validated Self-Efficacy in PC Scale for communication, patient management, multi-professional teamwork
  - Thanatophobia Scale (assesses PC attitudes)
- McNemar's Test was used for statistical analysis.

Results

N=10		**8 categorical, 2 preliminary**
Ethnicity:		**PC rotation = 50%**
Caucasian:	40%	**Age:** 20-39 years old
Hispanic:	50%	**Gender:** Female 20%
Pacific Islander:	10%	

- Overall, pre-year attitudes were positive and remained positive.
- 40% of the intern's with negative attitudes in caring for PC patients shifted to a positive attitude (p=0.0047).
- There was statistically significant improvement in self-efficacy in all areas—most notable being the interns' ability to assess patient needs and prescribe appropriate pain medications.
- When comparing those who completed the rotation against those who did not, there was a higher percent of shifting to confident in those who completed the rotation (P=NS due to small numbers of completers).

Conclusions

This study suggests that IM interns greatly benefit from a PC clinical experience.

Implications

More studies need to be completed to investigate if PC rotations should be a required part of residency.