Learning How to Care for Seriously Ill and Dying Patients: A Palliative Care Rotation for Primary Care Interns

Background
- All internal medicine (IM) residents care for seriously ill and dying patients.
- Many trainees feel unprepared in providing palliative or end-of-life care.
- ACGME now requires palliative care training in IM residencies.
- Studies show that residents who complete a palliative care rotation have improved comprehension of key end-of-life topics, with learning sustained at 1 year and 2 years post-rotation.
- Lack of studies that compare learning outcomes with control group.

Objective
- To see if a mandatory Palliative Care rotation improves primary care (PC) interns' comfort with and knowledge of key concepts in symptom management, communication skills, and care of seriously ill patients.

Curriculum Structure
- All 18 PC interns in 2022-2023 complete two-week rotation:
  - set goals with attending, with observed encounters and feedback at least 1x weekly
  - follow 1-2 patients, writing notes daily
  - observe 1-2 family meetings, leading at least 1 with support
  - watch pain management lecture and additional lectures about nausea, code status discussion, advanced care planning, or hospice
  - practice worksheets and review with attending
  - participate in interdisciplinary meetings with social work and chaplain

Program Assessment
- Pre post survey of comfort with and knowledge of "Entrustable Professional Activities" (see right), with a historical control
- Paired T test of pre and post-rotation
- MedHub feedback

Results/Conclusions
- In preliminary data (n=12):
  - Gains in comfort with key skills (p=0.14)
  - Significant gains in knowledge (p=0.003)
- Awaiting end of year to complete data collection and compare to historical control group.
- Participants indicate improved comfort in communications skills and pain and symptom management on MedHub evaluations.
- Another measurable outcome to track longitudinally will be specialty interest growth in palliative care.

Future Directions
- Expand palliative care intern rotation to other IM programs
- Incorporate intern feedback to improve curriculum structure