# A Novel Virtual Workshop on Trauma-Informed Care for First Year Medical Students

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### Introduction

Trauma – including physical, sexual, emotional abuse, and more has a well-established impact on health outcomes, and may even lead to avoidance of care, as exams themselves may be triggering (e.g., closed-door rooms, disrobing)<sup>1,2</sup>. In the United States, nearly 90% of the population report 1+ traumatic exposures<sup>3</sup>.

Trauma-informed care (TIC) is an established paradigm that promotes safety, resilience, and healing, and helps prevent retraumatization during medical care. Recently, TIC has gained momentum, in part due to events such as #MeToo.

It is critical to prepare providers to offer TIC, and research shows that TIC workshops in medical school are effective<sup>4,5</sup>.

### **Teaching Innovation**

- As part of a longitudinal curriculum (Figure 1), this virtual session introduced TIC concepts and exam maneuvers to MS1s during the COVID-19 pandemic
- Part 1: at-home lecture by TIC expert on concepts and physical exam (Figure 2)
- Part 2: virtual workshop
- 2-hrs, 4 faculty & 35 students, offered 4x to reach all MS1s
- Live Q&A with national TIC expert
- Faculty-led breakout groups for discussion and practice of TIC communication skills (Figure 3)
- MS1s completed written reflection at next patient encounter

Trauma-informed care is an established set of practices that promote patient agency, safety, and comfort in order to avoid retraumatization, create safe exam spaces, and ultimately further humanistic care.

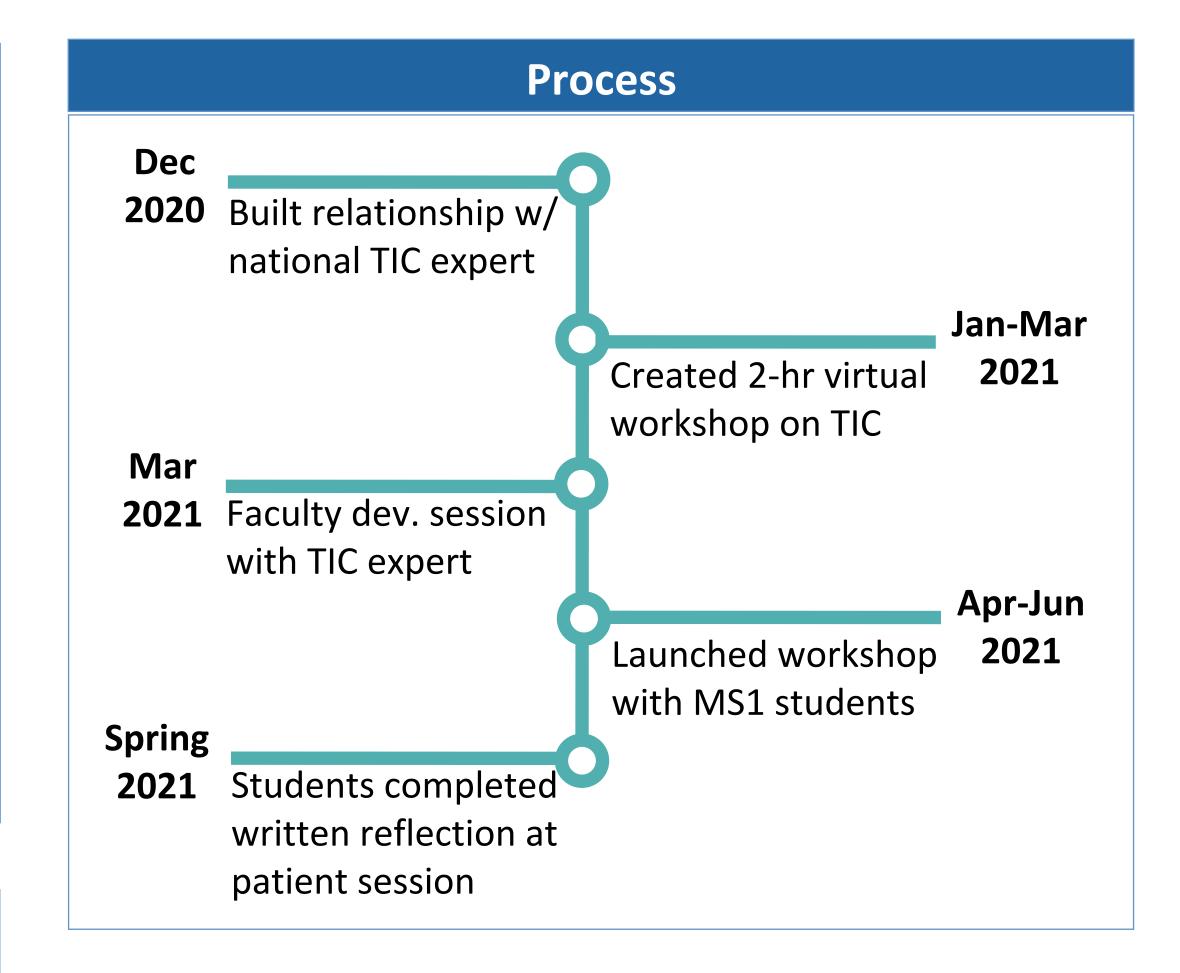


Figure 2. TIC Thyroid Exam **Standard** behind patient TIC next to patient

Figure 3. Edit the Phrase, Breakout Room Activity

Remains in pt's sight

### Overview

Pt cannot see provider

- Students are provided a patient one-liner
- 2-mins to rewrite the phrase & share with group
- Group discusses revisions

### Provided:

Mr. Z is a 48yo homeless pt with a hx of noncompliance and alcoholism here for a 4th admission this year for poorly controlled diabetes.

### Revision:

Mr. Z is a 48yo man with a hx of housing instability, alcohol use disorder, and diabetes not at goal who presents for re-admission with hyperglycermia.

Fall MS2 Fall MS1 **Residency Orientation** Virtual Module Pelvic Exam Teaching Virtual Module in FCM Tutorials when students learn for Ob/Gyn and Family Medicine introducing TIC interns on TIC pelvic exams exam maneuvers

> **Preclinical Curriculum Major Clinical Year Differentiation & Integration**

> > Spring MS2/Fall MS3

**Interactive Workshop Standardized Patient Session** in FCM Tutorials in Ob/Gyn Clerkship to introducing TIC, led by practice TIC pelvic exam faculty & national expert

Figure 1. Trauma-Informed Care Longitudinal Curriculum Overview

communication skills

## Results

### Post-Session (n=124) Pre-Session (n=135)

had never received any TIC training

Spring MS1

agreement that all medical students 98% should be taught TIC content

felt uncomfortable explaining a TIC physical exam to a peer

satisfaction with the lecture's 95% teaching of TIC language

believe TIC is important to the physical exam

found breakout groups useful 85% though most would have preferred an inperson component (63% all in-person, 29% hybrid virtual)

### **Lessons Learned**

- First-ever fully virtual TIC curriculum & first-ever content on TIC at VP&S to our knowledge.
- VP&S students perceive TIC as an important aspect of patient care that all medical students should learn.
- Virtual workshop is easily transferable and could be expanded to reach all interested students and programs.
- Columbia instructors may use virtual formats even for sensitive content, ideally paired with an in-person component.

- References
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