EDITORIALS

Practical and Effective Strategies to Promote Scholarly Activity by Residents

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J Gen Intern Med 24(3):435–6 DOI: 10.1007/s11606-009-0901-4 © Society of General Internal Medicine 2009

■ he Accreditation Council for Graduate Medical Education (ACGME) requires that internal medicine residents participate in scholarly activities, including conducting original research, or preparing case reports or literature reviews. 1 Promoting residents' scholarly activity is also a laudable goal of medical educators. However, achieving this goal can be challenging. Barriers include a lack of interest by residents and limited research infrastructure, as reported in a recent national survey of internal medicine program directors.² Issues relating to faculty availability and expertise may also serve as impediments to successful resident research endeavors. In large programs, finding a sufficient number of research mentors may be difficult. In training programs with few research-intensive faculty members, opportunities for residents to participate in original research may be limited or absent. Due to these limitations, preparing case reports for poster presentation or publication remain an important way for residents to fulfill research requirements.

Two articles in this issue of JGIM demonstrate practical and effective methods of promoting and assessing the scholarly efforts of residents. Importantly, these activities were studied in trainees from multiple programs, did not require substantial faculty expertise or funding, and could easily be implemented in internal medicine residency training programs in a variety of settings.

In the first paper, Sridhar et al. studied the results of a case report writing workshop.³ The authors evaluated outcomes in participants who attended a 60–90-min workshop at various regional and national general internal medicine meetings from 2005–2008. The workshop was designed to help attendees prepare a case report for presentation or publication and included content in formatting, outlining, and reviewing specific journal requirements. Approximately two-thirds of the 214 workshop participants were students, residents, or fellows.

After the workshop, participants reported a significant improvement in perceived competence to prepare a case report, and an increased likelihood to submit a case report for presentation or publication within the next year. Two years after the program began, a PubMed search of participants

found that nine (seven residents, two faculty members) had successfully published a case report.

The work of Sridhar and colleagues advances what is known about research in internal medicine residency programs. Given the simplicity of the methods and short-term success of program participants, residency programs may wish to recreate the workshop, using the content, format, and handouts described in the paper. Subsequently, residents could be encouraged to prepare case reports for presentation or publication. This approach not only fulfills ACGME requirements, but also has been shown by the authors to successfully promote the academic development and productivity of trainees.

In the second paper, Willett and colleagues present the results of an observational study performed to identify key components of case report posters and test an evaluation tool. During their study, 45 faculty evaluators from 20 institutions reviewed 247 case report posters at four Society of General Internal Medicine (SGIM) meetings (three regional, one national) from 2006–2008. Using an evaluation tool incorporating SGIM and American College of Physicians poster judging criteria, a mean score was calculated for each case report poster. Presenters received immediate written and verbal feedback from the faculty evaluators, including a copy of the completed evaluation tool.

The authors found three areas often requiring improvement in case report posters. These are: (1) clearly stating learning objectives, (2) linking conclusions to learning objectives, and (3) use of appropriate number of words. In regards to the evaluation tool, internal consistency was high, and scores were similar across the broad range of faculty evaluators.

This project illustrates a reasonable approach for instructing trainees in case report poster preparation. The criteria for successful posters and how submissions will be judged are clearly demonstrated. Many internal medicine residency programs have "resident research day" or other local or regional venues for housestaff to present their research. The evaluation tool developed by Willett and colleagues could certainly be used in individual residency programs to judge case report poster submissions and provide valuable feedback to trainees. Such critical evaluation may also increase the likelihood of eventual acceptance of abstracts and manuscripts for presentation or publication.

The authors of both papers should be commended for providing residency programs the means to meet ACGME requirements regarding the scholarly activity of residents. Used together, these projects can form an integrated approach to fostering high quality case report preparation by residents. The first step is an educational activity, such as the case report workshop developed by Sridhar et al. Next, case report poster submissions are solicited from residents. Last, submissions

are evaluated using the tool described by Willet et al., and immediate feedback provided to trainees.

These manuscripts should encourage clinician-educators about possibilities to enhance the amount and quality of scholarly activities by residents. The work of these investigators represents practical and effective strategies to increase residents' academic productivity, enhance opportunities for mentoring, and promote career development. Whether promotion committees will adequately recognize the important work of clinician-educators in fostering the academic endeavors of residents is unknown. However, these papers show us that case report posters and publications represent a feasible, inexpensive, and important educational opportunity for internal medicine residents.

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