Background

Roughly 11% of US adults experience chronic pain. 165,000 overdose related deaths from 1999-2014. In 2010, 98 out of the top 100 prescribers of oxycodone were in Florida. Geriatric population has a high prevalence of chronic pain. Growing geriatric population in Florida.

Purpose

To analyze the state of chronic, non-cancer pain management education in Florida medical schools and residency programs.

Hypothesis

A gap would be revealed between what students are actually presented and what feel they should learn to be comfortable with chronic, non-cancer pain management material.

Materials and Methods

Faculty, medical student, and resident perceptions were measured with an anonymous Qualtrics survey.

Two survey versions:
- Medical school and residency faculty
- Medical students and residents

Distributed to all Florida medical school deans (seven MD and two DO)

Faculty Suggestions

- Faculty, medical student, and resident perceptions were measured with an anonymous Qualtrics survey.
- Medical school and residency faculty
- Medical students and residents
- Distributed to all Florida medical school deans (seven MD and two DO)

Student/Resident Suggestions

Largely mirrored faculty suggestions
- More online lectures, online modules, workshops, and clinical scenarios
- Access to pain clinic rotations

Results

Background

A large percentage of faculty, students, and residents do not feel that their education equips them with a sufficient level of competence to treat patients with chronic, non-cancer pain.

Florida’s medical schools and residency programs have room to improve in teaching their students and residents about chronic, non-cancer pain management.

Considerations

Topics included on USMLE and NBME exams.
- Competencies:
  - The Accredited Council for Graduate Medical Education (ACGME) competencies for residency programs, as well as individual residency program milestones, are vague and not specific to disease.
  - Medical school competencies are individual to each school, but most are largely based off of the ACGME.
  - Only three medical schools in Florida specify chronic care in their curriculum.
  - Medical Education Working Group: Massachusetts medical school deans, with leadership from the Massachusetts Department of Public Health and the Massachusetts Medical Society, created ten core competencies for the prevention and management of prescription drug misuse.

Conclusion

Faculty Suggestions

- Didactic training on gathering history, including functional status and psycho-social history
- Emphasize multimodal, non-opioid, and nonpharmacological treatments
- Utilize workshops with multidisciplinary lecturers
- E-FORCE training
- Online modules
- More online lectures, online modules, workshops, and clinical scenarios
- Allow for rotations in pain clinics
- Drug abuse and mitigation strategies
- Reference the 2016 CDC Guideline for Prescribing Opioids for Chronic Pain

Student/Resident Suggestions

- Largely mirrored faculty suggestions
- More online lectures, online modules, workshops, and clinical scenarios
- Access to pain clinic rotations

Questionnaire

Participants included 98 faculty, 141 medical students, and 19 residents.

Acknowledgements

Supported by the Charles R. Mathews Geriatrics Education and Research Scholarship.