Conclusion. Interprofessional education enhanced students’ knowledge of care coordination, interprofessional communication skills, competency in teamwork, and understanding of socioeconomic barriers to care in an underserved population with HIV.

Disclosures. All Authors: No reported disclosures

968. Leveraging On-Demand Digital Education to Increase ID Specialists’ Knowledge and Confidence on Appropriate Probiotic Use for CDI Prevention

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Session: P-54. Infectious Diseases Medical Education

Background. Probiotics are increasingly being used in healthcare. As the number of probiotic options and their potential uses increase, it becomes more challenging to make an informed selection for a given disease state. This study assessed the ability of digital education to improve Infectious Disease (ID) specialists’ knowledge regarding the use of probiotics in preventing Clostridioides difficile infection (CDI) and antibiotic-associated diarrhea (AAD).

Methods. A CME/ABIM MOC certified, educational program featuring a panel of 3 expert ID faculty was developed. The program sought to clarify the role of different probiotic strains in the prevention or treatment of different disease states. Educational effectiveness was assessed with a repeated-pairs pre-/post-assessment study design; each individual served as his/her own control. A chi-square test assessed changes pre-/post-assessment. P values < 0.05 are statistically significant. Effect sizes were evaluated using Cramer’s V (< 0.05 modest; 0.06-0.15 noticeable effect; 0.16-0.26 considerable effect; > 0.26 extensive effect). The activity launched on a website dedicated to continuous professional development. Data for this matched-learner analysis were collected through 09/09/20.

Results. To date, 7122 HCPS, including 5068 physicians, have participated in the activity. Data from the subset of ID specialists (n=235) who answered all pre-/post-assessment questions during the initial study period were analyzed. Following activity participation, significant improvements were observed in the proportion of ID specialists who answered assessment questions correctly (47% vs 69%; pre: P < 001; V=0.22). Improvements were also observed in several specific areas of assessment (Table) and confidence in their ability to select a probiotic-based on strain- and disease-specific efficacy (36% increase).

Conclusion. Participation in this online educational program significantly improved ID specialists’ understanding of the interplay between strain- and disease-specificity in the context of probiotics. These findings highlight the potential for well-designed online education to positively impact physicians’ knowledge and confidence.

Disclosures. All Authors: No reported disclosures
The bottom half of the screen, the dialogue box allows the player to collect the patient's medical history. The player can interact with certain elements to obtain relevant information to make decision and progress in the game.

Conclusion. The game allows medical students to practice diagnosis and treatment of COVID-19. Future versions will include assessment reports of player's actions, and a new score system will be implemented. New diseases will be incorporated in the gameplay to match the variety of scenarios offered by real hospitals and patients. Artificial intelligence will be employed to optimize gameplay, feedback and learning.

Disclosures. All Authors: No reported disclosures

970. Medical Student Engagement with the COVID-19 Pandemic Is Increased Through Participation in a Preclinical Elective

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Session: P-54. Infectious Diseases Medical Education

Background. The medical field's response to the Coronavirus Disease 2019 (COVID-19) pandemic required a multifaceted approach. Medical students were often excluded from the initial phases of pandemic response, resulting in feelings of disengagement. This study aimed to determine if offering educational experiences on current events related to the COVID-19 pandemic could increase medical students' understanding of, and engagement with, the pandemic.

Methods. In Fall 2020, an elective course reviewing several aspects of the COVID-19 response was implemented. Preclinical medical students attended a discussion-based seminar series given by expert faculty on a variety of topics including pathophysiology, vaccine development, telemedicine, and others. Upon course completion, students were asked to complete a survey quantifying their understanding of the COVID-19 response and individual facets of the response, and feelings of personal engagement on a Likert scale from 1-5, with 5 representing the most understanding or engagement. The differences in pre-course and post-course mean scores were compared using a Wilcoxon matched-pairs signed rank test for each question.

Results. A total of 65 students completed the course; 35 (54%) students filled out the final course survey. Results showed significant improvement in students' perceived holistic understanding of the pandemic response (2.67 pre-course vs. 4.36 post-course; P < 0.001), and their feelings of personal engagement (3.06 pre-course vs. 4.33 post-course; p < 0.001). Students also reported significantly increased feelings of understanding for each individual facet of the pandemic response reviewed during the course (8 questions total, all p-values < 0.001).

Conclusion. Preclinical medical student participation in a course reviewing COVID-19 pandemic response significantly increased feelings of engagement with and understanding of the medical field's response to the pandemic. Students showed improved understanding of each aspect of the pandemic response that was covered in the elective. The-based electives that seminar- and discussion-based electives can be a useful tool for fostering preclinical student engagement in current events in medicine.

Disclosures. Prathit A. Kulkarni, M.D., Vessel Health, Inc. (Grant/Research Support)

971. Online Medical Education Improves Knowledge of Data on Appropriate and Timely Use of Influenza Antiviral Medications to Patients at High Risk for Influenza-Related Complications and Morbidity

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Session: P-54. Infectious Diseases Medical Education

Background. Many patients are at a higher risk of influenza complications because of age and comorbidities. We sought to assess whether online education focused on appropriate and timely use of influenza antiviral medications to patients at high risk for influenza-related complications and morbidity could improve knowledge, competence, and confidence of clinicians.

Methods. Primary care physicians (PCPs) and pediatricians participated in a 30-minute video lecture with synchronized slides. Educational effect was assessed using a repeated-pairs design with pre-/post-assessment. Three multiple choice questions assessed knowledge/competence, and 1 question assessed confidence. Statistical tests to assess significance: Paired samples t-test for overall average number of correct responses and for confidence rating; McNemar's test for individual questions (5% significance level, P < .05). Cohen's d estimated the effect size impact on number of correct responses (≥ .20 modest, .20-.49 small, .50-.79 moderate, ≥ .80 large). Data were collected from 10/28/20 to 12/23/20.

Results. Average knowledge/competence improved from 29% to 43% (N=439, P < .001, Cohen's d = 0.45) among primary care physicians and from 31% to 43% (N=226, P < .001, Cohen’s d = 0.38) among pediatricians. Post participation, 12% more PCPs selected from 10/28/20 to 12/23/20.

Conclusion. This study demonstrated the success of a video lecture with synchronized slides at improving PCPs and pediatricians knowledge, competence and confidence.