P083 A RHEUMATOLOGY CAROUSEL: THREE-YEAR RESULTS FROM AN OPEN-ACCESS TEACHING WORKSHOP DESIGNED FOR CORE RHEUMATOLOGY ASSESSMENTS FOR UNDERGRADUATE MEDICAL STUDENTS

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**Background/Aims**
Medical students need to gain patient contact to develop their skills in history taking and examinations. In year three, undergraduate students typically rotate across various hospitals and specialties and are expected to have dedicated rheumatology exposure for history and examination competencies. Rheumatology as an out-patient specialty can limit opportunities for medical students to have broad exposure to rheumatological conditions.

**Methods**
In January 2018, we designed an annual rheumatology half-day teaching workshop (‘Rheumatology Carousel’) using a combination of lecture-based teaching and small group based guided clinical history and examination stations, aimed at third-year medical students from the University of Birmingham. This covered key presentations in rheumatology: axial spondyloarthritis, rheumatoid arthritis, systemic sclerosis (connective tissue disease), osteoarthritis, and vasculitis. Each station required a Clinical Teaching Fellow or Rheumatology ST1 trainee, overseen by one consultant facilitator. We designed patient proformas incorporating consent, demographics, key clinical history, therapy, and examination findings. We produced a written patient guide, and consultants invited appropriate patients to volunteer for the day. We designed a one-hour lecture-based tutorial. A lesson plan and schedule were created outlining faculty requirements; including time, roles, and faculty numbers. We invited five to six patients to each session, with a plan of four to five focussed examinations. We designed the carousel to accommodate up to 40 students, split into two groups running over a day. Focussed examinations involved students in groups of four, with each student being a lead examiner in at least one station, each station lasting 20 minutes. Best practice examination techniques for each condition were assessed and emphasised. Following a debrief, we collected feedback from students, faculty, and patients (online and written feedback), using Likert scores for teaching content, and quality of the session delivery.

**Results**
The carousel ran in February 2018, 19, and 20. The sessions were positively evaluated by students, faculty, and patients. In total, 93 students attended, 89/93 completed feedback. Satisfaction scores (mean; SD; range) were high (1—strongly disagree, 5—strongly agree) for content (4.8; 0.49, range 3–5) and quality of delivery (4.7; 0.54; 3–5). All patients who participated volunteered to return for future teaching sessions, with several patients attending all three years. Free text feedback indicated students valued structured exposure to core conditions and called for more sessions of this nature.

**Conclusion**
This sustainable reproducible intervention ensures students have structured exposure to important rheumatological conditions. The methodology allows reproducible sessions that are positively evaluated despite rotating clinical teaching staff. We have made all our teaching materials, logistical plan, and scheduling tools available as open access resources under a Creative Commons license for free reuse and adaptation by any healthcare professional, via a web link. We plan to record an electronic version to distribute post the COVID-19 pandemic.