INTRODUCING WOUND CARE IN TODAY’S CURRICULUM

Clint W. Snyder, PhD
Associate Dean, Health Professions Education
Northeastern Ohio Universities College of Medicine
OBJECTIVES

- Review the current status of wound education in medical school curricula in the USA
- Discuss how the USA compares to other countries regarding wound education
- Describe places in the curriculum for expansion of wound care
The AAMC gives us a useful tool for understanding the curriculum of medical schools in the USA

CurrMIT (Curriculum Management & Information Tool)

Documents curricular topics, teaching methods, and teaching materials
There are 50 schools that have complete curriculum data in the CurrMIT database.

The curricular information includes only required curriculum for students.

Fourth year electives are not included in the data collection.
TOPICS THAT MEDICAL SCHOOLS TEACH

- chronic inflammation and wound healing
- chronic wounds/ulcers
- clinical nutrition ii (wound healing)
- clotting and homeostasis
- geriatric wound care
- Inflammation and Healing
- Morphology of Irreversible Injury
- negative pressure wound therapy
- Physical Injury
- Plasma Proteins; Mechanisms of Coagulation
- superficial wound infection
- pressure ulcers and wounds
- skin and wound healing

- tissue repair and wound healing
- treatment of puncture wounds
- Type II Diabetes
- wound care
- wound closure
- wound complications
- wound healing
- wound infection
- wound management, venous ulcers and burns
- wounds, incisions and wound healing
On average, the medical schools examined taught 9.2 hours of required education on wounds.

These hours had the following distribution:
- Year One: 3.0 hours
- Year Two: 4.2 hours
- Year Three: 1.5 hours
- Year Four: 0.5 hours
Most of the curriculum time was accounted for by courses teaching physiology:
- physiology of wound healing
- physiology of tissue injury

Clinical curriculum on the management of wounds occurred during the second and third years.
WHAT ABOUT THE CLINICAL CURRICULUM?

- Surgery
  - The American College of Surgeons suggests a curriculum for core surgery clerkship
  - Overall, the suggested curriculum has one week of didactic training
  - Wound treatment is not included in the suggested lectures
WHAT ABOUT THE CLINICAL CURRICULUM?

- Medicine
  - CDIM/SGIM has presented a curriculum for a core internal medicine clerkship
  - Wound education is not specifically addressed
  - Culturing of wounds is a suggested procedure
  - Wound healing secondary to poor nutrition
WHAT ABOUT THE CLINICAL CURRICULUM?

- Pediatrics
  - The Council on Medical Student Education in Pediatrics (COMSEP) suggests a curriculum for core clerkships in pediatrics
  - No curriculum is suggested in the care of wounds, nor didactic session on the topic
WHAT ABOUT THE CLINICAL CURRICULUM?

Family Medicine
- The Society of Teachers of Family Medicine (STFM) has created a suggested curriculum for core clerkships in family medicine
- Wound care not explicitly addressed in the suggested core didactic presentations
- However, diabetic care includes foot examination
WHAT ABOUT THE CLINICAL CURRICULUM?

- Obstetrics and Gynecology
  - The Association of Professors of Gynecology and Obstetrics (APGO) has created a suggested curriculum for core clerkships in OB/GYN
  - Wound care not explicitly addressed in the suggested core didactic presentations
WHAT ABOUT THE CLINICAL CURRICULUM?

- Psychiatry
  - The Association of Directors of Medical Student Education in Psychiatry (ADMSEP) has created a suggested curriculum for core clerkships in psychiatry.
  - Wound care not explicitly addressed in the suggested core didactic presentations.
SO WHERE DOES IT OCCUR?

- When specifically included as a part of formal clinical curricula, wound education most frequently occurs in:
  - Emergency Medicine
  - Geriatrics
  - PM&R
- However, in most schools, these are not required clerkships
Study of three countries found that wound care education is sadly lacking.

Required wound education received in the United States was 9.2 hours in the 4 years of medical school.

This compared to 4.9 hours over 5 years of education in the United Kingdom, and 9 hours of wound education over 6 years of medical education in Germany.

WHERE DO WE GO?

- Anatomy courses, in both gross and micro areas, seem to have overlooked this important area
- Physiology does appear to be responsive, though limited
- Principles of medicine courses and therapeutics could increase curriculum time
WHERE DO WE GO?

- Clinical clerkships seem to have the most area for improvement
  - Internal Medicine
  - Surgery
  - Family Medicine
- Experiential learning on the clinical floors leaves the teaching of this curriculum to chance and patient presentation