**ABSTRACT**

There is an ever-increasing amount of new medical knowledge that learners are expected to obtain. Likewise, there has been a move toward competency-based education and the creation of Entrustable Professional Activities (EPAs). These EPAs set standardized levels of proficiency to guarantee that all learners have a sufficient level of at the completion of their undergraduate medical training. Many of the EPAs, for example EPA #13, can often be arduous and ineffectively taught in a conventional lecture-based manner. It is our hypothesis, that this critical information can be conveyed using a novel blended learning curriculum. To achieve this, an online curriculum was created to be performed asynchronously and supplemented for the 8-week Ambulatory Medicine Sub-Internship rotation. This online curriculum utilizes modules from the Institute for Healthcare Improvement and the Choosing Wisely® initiative, as well as exposes the learner to Physician Wellness/Resiliency, Empathy, and Antibiotic Stewardship. Interestingly, paired with direct observation while precepting the medical student in the outpatient setting, this blended learning curriculum teaches and assesses all of the EPAs (EPAs #1-13). However, due to the complex nature of EPA#13, this curriculum is uniquely designed to instruct the learner on how his/her decisions can identify system failures and improve safety in both an online and real-time environment. Finally, it appears that this blended learning curriculum both improves learner satisfaction and understanding, while it also develops a streamlined process for presenting and assessing difficult material, like EPA#13, in a concise, effective manner.

**INTRODUCTION**

- Osteopathic Considerations for Core Entrustable Professional Activities (EPAs) for Entering Residency" was published by AACOM in April, 2016.
- EPAs provide confidence in both the learner and faculty that he/she can provide safe care to patients, and assume the duties required of a starting PGY-1 resident.
- Some EPAs are taught by formal lecture; however, some EPAs like EPA#13 intertwine with other EPAs, increasing the difficulty to both teach and assess.
- Asynchronous blended learning curriculums allow the learner to progress through certain teaching modalities at his/her own pace, while still pairing with "hands-on" active learning sessions/patient encounters to further箔ldy difficult content.
- Blended learning curriculums allow the instructor to create a degree of standardization among a clinical rotation, where direct observation and instruction can vary among clinicians and learners.

**METHODS**

![Blended Learning Curriculum Design](image1)

**RESULTS**

- Student perception of satisfaction and usefulness improved by 7% in the first 2 months of inception.
- Anecdotally, faculty perception was reported to demonstrate an overall improvement in compliance with completing the materials and application in the office.
- Participant Quotations:
  - "The blackboard experience was easy to navigate and topics were useful to 6th year medical students."
  - "This rotation contributed to my learning and becoming a competent physician. I am way more confident in my ability to take care of patients after this rotation."

**CONCLUSION**

The Entrustable Professional Activities are paramount to the future of medical education. They are a set of deliverable skills in which a medical student should be proficient, prior to entering into the world of graduate medical education. Therefore, this OMS4 clerkship is a perfect paradigm to instruct and assess these abilities prior to graduation. Likewise, future physicians cannot learn the EPAs in isolation. These learners must incorporate them into the world in which physicians practice, including population health expertise, empathic healthcare delivery, and physician wellness. This novel blended learning curriculum accomplished this goal. A cost effective streamlined experience was created allowing learners to combine online didactic material with clinical encounters, while assessing all 13 EPAs, with an emphasis on EPA#13. Students and faculty felt that this model was easy to navigate, as well as pertinent for their future careers, regardless of the students’ desired specialty.

This novel curriculum will continue to evolve. Our next steps are to continue to redesign our assessment tools and data gathering, in order to improve upon this experience as an ongoing process.