

Integrating Oral Health in Medical Education Model Curriculum: A Call for Submissions

The Association of American Medical Colleges (AAMC), in partnership with the Health Resources and Services Administration, announces a call for submissions for instructional resources to support an oral health in medicine model curriculum, disseminated through MedEdPORTAL, the association's peer-review open-access educational resource publication repository. This initiative is designed to provide credible peer-reviewed oral health instructional resources for faculty to facilitate integration of oral health concepts into the medical education curricula. The objective of the initiative is to prepare physician clinicians to incorporate relevant oral health practices into general healthcare and disease prevention services. The Oral Health in Medicine initiative is supported through a cooperative agreement from the Health Resources and Services Administration/Maternal Child Health Bureau (grant #U44MC20223).

Oral Health in Medicine Competency Domains

The call for oral health in medicine submissions focuses on the following key competency domain areas for oral health integration:

- **General Oral Health Screening Exam** - Applies foundational knowledge of oral health to perform basic assessment screening and diagnoses.
- **Dental Caries** – Evaluate for and communicate with patients and families the risks and consequences of untreated dental caries.
- **Periodontal Disease** - Applies knowledge of periodontal disease in the health management strategy of patient care.
- **Oral Cancer and Prevention** - Applies oral health cancer screening and prevention guidelines in health assessment and exams.
- **Oral-Systemic Health Interactions** - Integrates knowledge of oral health impact on systemic health and disease.
- **Public Health** - Works with health professionals and community partners to emphasize health benefits and effective disease and injury prevention strategies.
- **Emergency Care** - Applies first line management to stabilize oral emergencies and traumas to point of appropriate referral.
- **Medical Dental Interface** - Optimize oral health and treatment outcomes through effective outreach and collaboration with dental professionals

Oral Health in Medicine Resource Development Award

Oral health resource development awards will be considered either for the: a) refinement of existing curricula content the author has already used in instruction, or for b) concept development of new oral health educational material the author proposes to draft in the course of the award activity.

Furthermore, the submission must describe how the proposed activity will either facilitate an interdisciplinary approach or use human health as context for teaching oral health concepts in undergraduate medicine curricula.

In the application, authors will be asked to designate proposed resources as either

- a) **content-tested** - materials that have already been used with learners, or
- b) **concept-based** - new materials that will be drafted as part of this initiative.

Multiple resources may be submitted for consideration, though each should be submitted under a separate application.

Funding

Accepted applicants will receive a \$2,000 development award and travel support to attend a required one-day training workshop in Washington, D.C. The development award will be disbursed in two phases: upon completion of the training workshop and upon formal submission of final materials to MedEdPORTAL. In the event that multiple resources are accepted from a single author, each will be funded as a separate award of \$2,000.

Application

Deadline Tuesday, November 15, 2011 at 5p (EST). Find out more information and apply at: www.mededportal.org/oralhealth.

Applicants will be notified of funding decisions by December 15, 2011.

Required Workshop Training

Accepted applicants will receive travel support to include airfare, lodging, and related approved expenses to attend a **required one-day training workshop** in Washington, DC on MedEdPORTAL resource development and submission protocol. Workshop preference is solicited in the application submission. Submission of an application implies agreement to attend one of the three following dates:

January 18, 2012 (10a – 2p EST)

February 2, 2012 (10a – 2p EST)

March 14, 2012 (10a – 2p EST)

Efforts will be made to assign first preference whenever possible, barring space limitations.

Development Award Completion Deadline

- Content-based (classroom-tested) resource modules submitted to MedEdPORTAL for final peer review: June 1, 2012.
- Concept-based (newly developed) resource modules submitted to MedEdPORTAL for final peer review: September 1, 2012.

Resources

Teaching materials that enhance the undergraduate medical curriculum take many forms: tutorials, exercises, lab guides, case studies, videos, simulations, etc. The key characteristics of a teaching module published in MedEdPORTAL are:

- Serves as full, stand-alone teaching/learning activity;
- Includes educational objectives and outcome-based measures;
- Teaches concepts of oral health in the context of human health; and
- Is relevant and replicative for other faculty.

Questions?

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Published Modules

Complexity and detail of published teaching materials will depend on the activity or concept being taught. Often clear-cut materials and learning activities are the most useful. The two curricular modules below are oral health content examples from MedEdPORTAL.

Head, Neck and Oral Cancer Examination. *This resource module consists of a 40-minute video intended for practitioners of dentistry, medicine, nursing and public health who are responsible for diagnosing and referring patients with head and neck and oral cancer. Approximately 31,000 cases of oral, head and neck cancer are diagnosed in the United States yearly and about 25% of these patients died from their disease. 1).The preponderance of these tumors represent squamous cell carcinoma of the oral mucous membranes. The combined five-year survival rate in the United States is approximately 57 percent. 2). A squamous cell carcinoma found in stage 1 has a five year prognosis of 95% while the same tumor diagnosed in stage 4 has a five year prognosis of approximately 20%. The purpose of this video is to provide the practitioner with the baseline skills to diagnose and refer patients with head and neck and oral cancer at the earliest possible time.*

Siegel M, Murrah V, Aloise D. *Head, Neck and Oral Cancer Examination. MedEdPORTAL; 2009.* Available from: www.mededportal.org/publication/7768

Oral Health Management of Pregnant Dental Patients. *This teaching module is based on a section of the Clinical Manual from the University of Detroit Mercy School of Dentistry that guides students in treatment of medically complex patients. There has been much confusion among students and clinical instructors regarding oral health care procedures for pregnant patients. Uncertainty about what can and cannot be done for these patients has led to incorrect clinical decisions; some patients have been dismissed from the clinic with no care provided. Lack of supporting evidence underlies much of this confusion. This resource provides current evidence to facilitate clinical decisions based on the principles of evidence-based dentistry. It also helps develop communication skills between obstetricians and oral health care providers, permitting them to share health information about the patient and fetus.*

Geist R. *Oral Health Management of Pregnant Dental Patients. MedEdPORTAL; 2009.* Available from: www.mededportal.org/publication/4056

Background Information

Need

There has been an expressed need for physician competency in oral health over the past decade. The Surgeon General's Report on Oral Health in America (May 2000) called to "build an effective health infrastructure that meets the oral health needs of all Americans and integrates oral health effectively into overall health care." Today's concomitant focus on interprofessional education makes effective training of physicians to collaborate with oral health professionals in patient care ever more important.

In times of constricted faculty funding and more demanding clinical schedules, especially for teaching faculty, integrating new content into an already loaded medical school curriculum may be perceived as an unfunded mandate. This is made yet more challenging if medical faculty perceive insufficient expertise to define and implement learning experiences outside their immediate discipline. Providing clear and objective educational materials/resources of demonstrated quality will allow physicians to integrate novel content into existing courses. This accommodates 'just in time' curriculum planning

needs and can assuage concerns about addressing interdisciplinary content. It is essential that proposed materials/resources be associated with a specific oral health competency and matching learning objectives for clinical skills and foundational knowledge.

Benefits of an Oral Health in Medicine Model Curriculum

Educators – Faculty need to develop the physician clinician's understanding of the oral-systemic impact on overall health in order to provide comprehensive coordinated care. To build this capacity, educators need access to appropriate instructional materials and content. Readily available, peer-reviewed educational modules linked to oral health competencies will save faculty time and money and increase confidence that learning experiences facilitate desired outcomes. Faculty may utilize individual modules or the entire curriculum to address the learning objectives in the MSOP report on oral health and the oral health in medicine competencies published at www.mededportal.org/oralhealth.

Scholars – MedEdPORTAL maintains a rigorous peer review process based on standards used in the scholarly publishing community. Each submission is scrutinized by editorial staff and independent reviewers using a standardized review instrument grounded in the tenants of scholarship. Published authors receive a formal citation for their accepted publication. MedEdPORTAL publications are considered by many to be scholarly works that may support faculty advancement decisions.

Learners – Students presented with oral health early in their training, during the formative period of inculcation of professional values will be better equipped to integrate an oral health perspective during training and subsequent practice. Accessible quality learning materials facilitate self-study and review at students' convenience for the further reinforcement of core foundational understanding.

Discipline – Student learning designed around objectives that reflect the professional expertise of medicine and dentistry, including Health People 2010, integrates the content of knowledge and ability vital to the skill set of a prepared physician workforce engaged to address critical health needs of the nation, and incorporates oral health concerns germane to promoting maternal and child health.

Inter-professionalism – This collection will promote interdisciplinary teaching by giving faculty access to proven peer-reviewed teaching materials that can be incorporated into existing courses, and need not be limited to physician authorship.

Systems-based – Medical students trained in collaborative models of integrated care will have foundational learning experiences that foster facility with the medical and dental home model as they move into future roles as clinician practitioners, educators, professional leaders, policy advisors, and patient care advocates.