complement students' medical education by offering the opportunity to experience a different medical or research system where they will face challenges in communication, professionalism and scholarship (CanMEDS Framework). The purpose is to allow future physicians to gain academic knowledge and cultural sensibility in order to better serve a multicultural population.

Structure/Method/Design: 136 students from 4 Quebec medical schools were selected from 332 applicants through a match system between the 39 available countries and the choices of the applicants. Local officers in each university assisted the selected applicants in preparing the required documents. A pan-provincial mandatory pre-departure training is held to address issues that students can face on an exchange including culture shock, security and ethics. During the exchange, every student is required to complete a logbook, which tracks their academic progress and is required in order to obtain an official certificate. Upon return, surveys gathered students' ratings and comments on their exchange upon many criteria (on a scale of 0 to 3): the welcome, lodging, internship, supervision and social program.

Outcome & Evaluation: Surveys indicate that students were satisfied to very satisfied with their experience in all aspects mentioned previously (scores 2 and 3, ranging from 72.5% to 91.9% for each criteria). Individual responses were used to improve the program's structure and to give feedback to the countries if the score was low (0 or 1). Comments indicate that participants self-reported knowledge gained in both medical or research skills and cultural understanding. This suggests the programs' positive impact on participants' academic and personal progress. All participants have received their certificate.

Going Forward: Feedback from participants support the main objective to foster medical students' competences in communication, professionalism and scholarship in a novel cultural setting. Challenges remain in increasing the programs' visibility and accessibility to all medical students in Quebec, maximizing exchanges with countries with positive feedback and establishing the internship as a credited course in the remaining medical faculty.

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Impact of an Evidence-Based Pediatric Electronic Knowledge System on Peruvian Physicians' Perceptions of Care Quality, Learning, Teaching, and Self-Efficacy

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Program/Project Purpose: Lack of access to current medical information is a limiting factor in practicing evidence-based medicine (EBM). While many hospitals and most physicians have computers and smart phones, integration of these devices into everyday medical practice is poorly-developed in most resource-limited environments. The objective of this study was to evaluate how access to an EBM knowledge system, on the web and as a mobile application (app), impacts Peruvian physicians' perception of care quality, learning, teaching and self-efficacy.

Structure/Method/Design: KidsCareEverywhere (KCE) is a California charity that donates medical software, PEMSoft (Pediatric Emergency Medicine Software), to resource-limited health systems. PEMSoft is a vast, multi-media library of EBM written in English and widely used commercially in America and Australia. The mobile app requires the web only for initial download and updates, but not for ongoing use. EBSCO Health, Ipswich, MA donates PEMSoft to KCE. Universidad Peruana Cayetano Heredia in Lima, houses the Peruvian school of public health and medical school.

KCE, in collaboration with Universidad Peruana Cayetano Heredia, visited two hospitals in Lima in July, 2016. 252 primarily Spanish-speaking physicians underwent a 75 minute PEMSoft training, then were surveyed three months later.

Outcome & Evaluation: The subjects were diverse in age, training levels, and medical specialties, and almost all regarded themselves comfortable with technology and written English. Before PEMSoft, subjects queried written references about clinical questions as frequently as web-based software or mobile apps.

On follow-up, 54 subjects reported that they used the mobile app more than any other written or software reference, with few barriers. 70% reported using the web-based version weekly; 89% used the app weekly inside the hospital, 87% outside the hospital. 91% thought PEMSoft was easy to use; 96% thought it improved patient care. 74% said it helped them learn medicine more easily and 67% said it helped them teach medicine more effectively. 70% considered themselves more confident with PEMSoft.

Going Forward: Providing an EBM electronic knowledge system to physicians in Lima, Peru resulted in substantial changes in patterns of access to information, perceptions of care quality, and attitudes toward learning, teaching and self-efficacy. Electronic programs, especially mobile apps, may be powerful tools to dramatically improve information access, knowledge dissemination, and physician attitudes toward practice.

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Health Needs of Refugees: Port of Arrival versus Permanent Camp Settings

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Background: The world's refugee population currently stands at over 19 million, the large majority of whom reside in developing countries. The quality and accessibility of healthcare for refugee populations varies according to the geographic setting, availability of resources, and proper training of healthcare providers. This paper uniquely compares and contrasts two important settings for healthcare provision for refugees: the permanent "camp" settings of Za'atari, Jordan, versus the transitory location of Lampedusa, Italy—a major port of arrival for refugees. More specifically, we analyze governance and organizational structures, identify specific health needs, and propose gaps in health care that must be addressed.