Canadian Medical Education Journal You Should Try This!

Development of a medical education podcast in obstetrics and gynecology La production d'une baladodiffusion éducative en obstétrique et gynécologie

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Implication Statement

Podcasts are used in medical education to supplement conventional teaching methods such as lectures and reading. We identified a lack of Canadian medical education podcasts covering obstetrics and gynecology (Ob/Gyn) content and created a podcast specific for Canadian medical students and residents. The podcast called "OB-G in YEG" is freely available and currently has fourteen episodes that cover common topics in Ob/Gyn. We describe the process for creating a high-quality medical education resource that is widely accessible to learners that readers may be able to replicate in their own discipline.

Introduction

Podcasts are audio recordings that users can access online that cover a wide variety of topics. The term "podcast" was first used in 2004, and their use has become increasingly popular worldwide.¹ A 2019 survey demonstrated that approximately 11 million Canadians have listened to a podcast in the past year.² Podcasts can be accessed in a versatile manner; people can listen to podcasts while at home, doing chores, and commuting. Podcasts are an effective learning tool in medical education. Studies

Énoncé des implications de la recherche

Les baladodiffusions sont utilisées dans l'éducation médicale en complément aux méthodes d'enseignement traditionnelles comme les cours magistraux et la lecture de textes. Ayant constaté un manque de baladodiffusions d'enseignement dans les domaines de l'obstétrique et de la gynécologie (OB/GY) au Canada, nous avons créé une telle émission destinée aux étudiants et aux résidents en médecine de ce pays. La baladodiffusion, intitulée « OB-G in YEG », est disponible gratuitement et elle comporte actuellement onze épisodes sur des sujets d'intérêt général touchant à l'obstétrique et à la gynécologie. Nous décrivons le processus de création d'une ressource d'enseignement médical de qualité, qui est largement accessible aux apprenants et que les lecteurs seraient peut-être en mesure de reproduire dans leur propre discipline.

demonstrate that students who listened to a medical podcast performed better on tests.³ Surveys suggest that podcasts do not replace conventional teaching methods such as lectures and reading, but rather are a supplementary learning tool.⁴ The uptake of educational podcasts is high in many areas of medicine; however, it is unclear what educational podcasts are available for learners in obstetrics and gynecology (Ob/Gyn). The purpose of this project was to determine the availability of medical education podcasts in Ob/Gyn and to create a podcast specifically designed for Canadian learners.

Innovation

Podcast review

We performed a search of podcast hosting platforms to identify available podcasts in Ob/Gyn in 2018 and updated in 2020. Titles and descriptions of podcasts were screened to identify relevant podcasts, and we listened to individual episodes to identify podcasts intended for medical learners. Eight podcasts were included in the review (Table 1) and all covered general Ob/Gyn topics such as forceps, preterm birth and contraception. Three podcasts reported references used to create content, most commonly American guidelines or studies. Publication dates were analyzed, and only two podcasts had released new episodes in the past year. We identified a lack of Canadian content for learners in Ob/Gyn and sought to create a medical education podcast to fill this gap.

Podcast creation

We developed a podcast called "OB-G in YEG" and released the first episode in January 2020. Ob/Gyn residents and medical students at our university were invited to participate in creating podcast episodes with the support of a staff physician or senior resident. Episodes reference guidelines from the Society of Obstetricians and Gynaecologists of Canada. Podcast episodes were created by selecting a topic from a list of potential topics (e.g. pelvic pain, ectopic pregnancy, vaginal discharge), developing a podcast script, recording episodes, and uploading to the platform. The podcast is published monthly and freely accessible on podcast hosting sites and the show's webpage.⁵ Key indicators for the quality of medical education podcasts include credibility, high-quality accurate content, and functional design.⁶ These quality indicators were considered in the design of OB-G in YEG by ensuring transparency in authorship, using evidence-based resources, and using technology that is open access. As of January 2021, there are fourteen episodes available, with 2975-episode downloads.

Table 1. Description of included teaching podcasts that target learners including medical students and/or residents. All podcasts are publicly available on common podcast hosting platforms

Podcast	Country	Number of	Dates Active	Publication	Length of Episodes
		Episodes	(N = months)	Frequency	(min)
Obstetrics - The Running	USA	9	Oct 2014 – Jan 2015 (4)	Weekly	4 – 7
Obstetrician	USA	9	Oct 2014 – Jan 2015 (4)	VVEEKIY	4-7
The OB/Gyn Podcast	USA	61	Sep 2016 – Dec 2019 (29)	Monthly	8 – 74
UNC - OB-GYN Clinic Notes	USA	9	Oct 2016 – Jul 2017 (10)	Quarterly	5 – 16
OBGYN 101 - Gray Haired		15	lan 2000 Mar 2010 (15)	Random	5 – 18
Notes	USA	15	Jan 2009 – Mar 2010 (15)	Kanuom	2 - 19
Pimped Ob/Gyn	USA	19	Oct 2017 – Aug 2018 (11)	Random	10 – 29
Dr. Katie Smith: OBGYN and	USA	13	Oct 2015 – May 2016 (8)	Monthly	9 – 26
Faculty Development					
Obstetrics and Gynaecology	Ireland	38	Jun 2016 – Mar 2017 (10)	Random	1-5
Emergencies UCD					
CREOGs over Coffee	USA	87	Dec 2018 – May 2020 (17)	Weekly	6 - 37

Next Steps

We describe a process for creating a high-quality medical education resource that is accessible to learners. Medical educators interested in podcast creation should consider identifying available podcasts using the review methodology described. We are currently undertaking a prospective study to evaluate the effectiveness of the podcast on understanding and knowledge retention. OB-G in YEG will continue to cover relevant topics in Ob/Gyn. **Conflict of Interest:** The authors have no conflicts of interest to declare **Funding:** none

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