

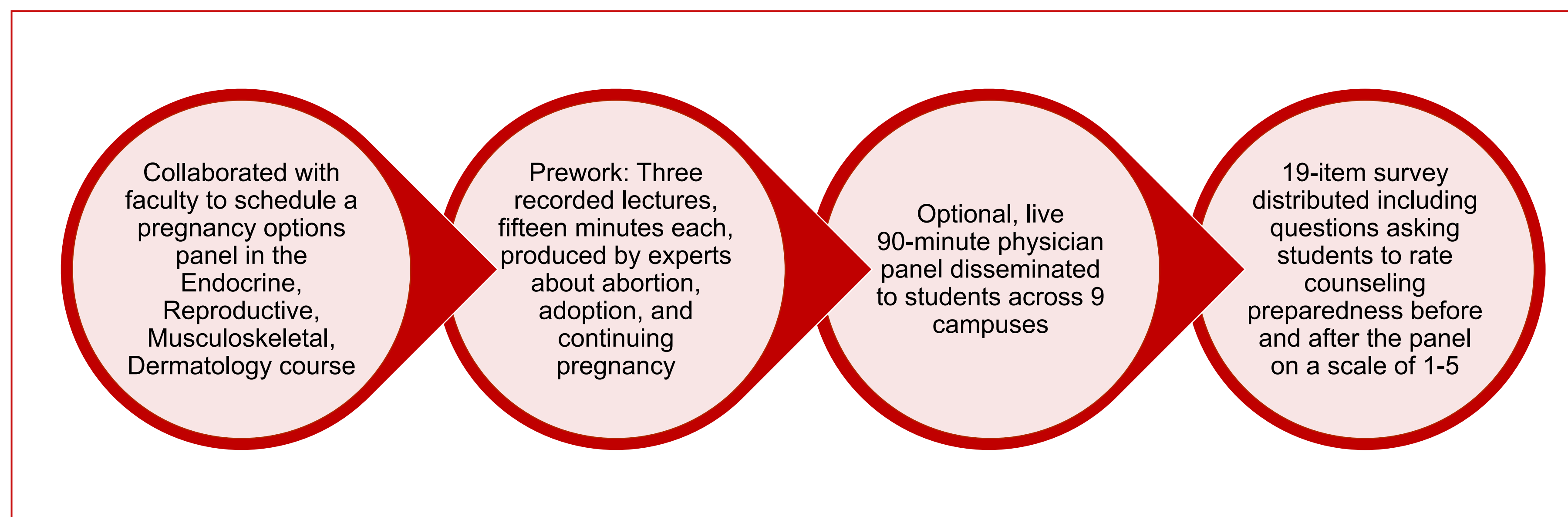
BACKGROUND

- Comprehensive pregnancy options counseling is a non-directive discussion that presents a pregnant patient with all available options.
- In 2011, 2.8 out of the 6.1 million pregnancies in the United States were unintended. High quality options counseling can help improve pregnancy outcomes [1]
- Medical students often lack education in options counseling, particularly abortion counseling, despite documented benefits of early exposure [2]
- Currently, there is no standardized curriculum for teaching pregnancy options counseling during preclinical medical education.

INITIAL SURVEY

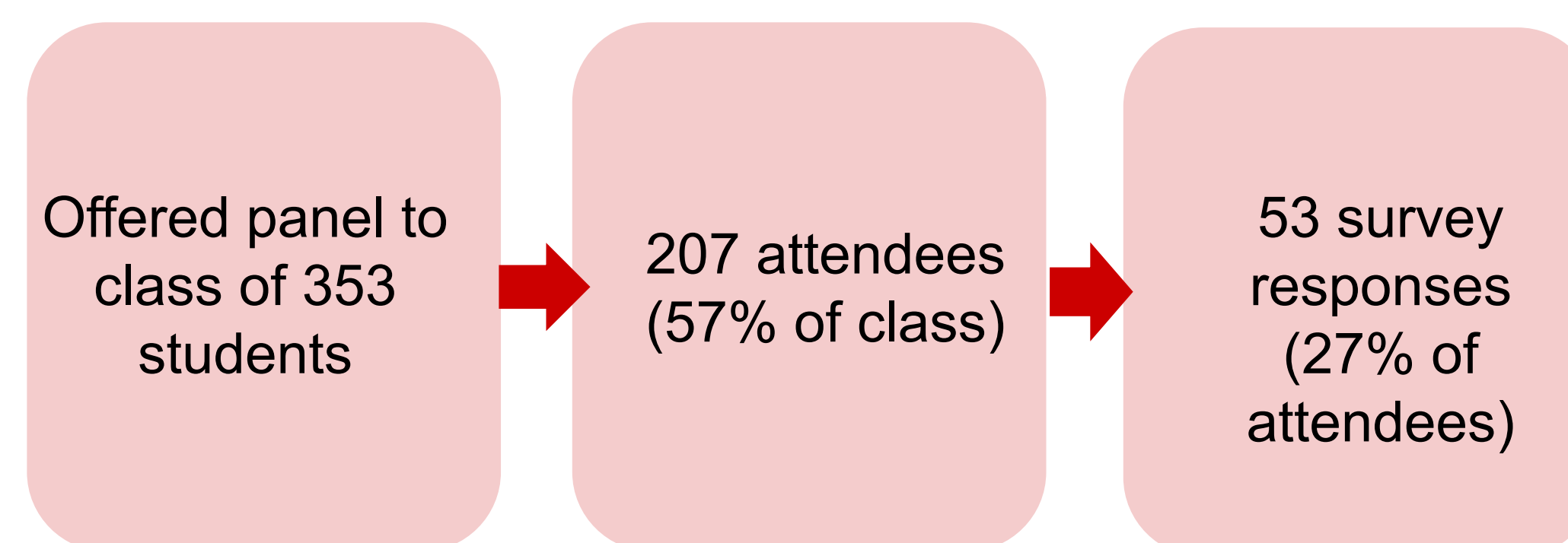
- In a previous assessment of student preparedness and interest, we found that IUSM adequately covers family planning topics, but has gaps in abortion counseling during preclinical education [3].
- Our survey showed that IUSM medical students are interested in learning about options counseling and feel unprepared to counsel about abortion [3].
- Based on these findings, we sought to implement curriculum change in the form of a panel-based discussion.

METHODS



RESULTS

PANEL ATTENDANCE AND SURVEY RESPONSE



Variable	Total sample n=53	
	Number	%
Sex		
Male	12	23
Female	39	73
Nonbinary	2	3
Ethnicity		
White	41	77
Black or African American	4	8
Asian	6	11
Other	2	4

Table 1: Survey response demographics

COUNSELING PREPAREDNESS IMPACT

Counseling Option	Mean Difference Between Pre and Post Panel Scores	95% CI
Abortion	1.33	(1.12,1.53)
Adoption	0.75	(0.52,0.98)
Continuing Pregnancy	0.87	(0.64,1.09)

Table 2: Mean difference in Likert Score between Pre and Post Panel

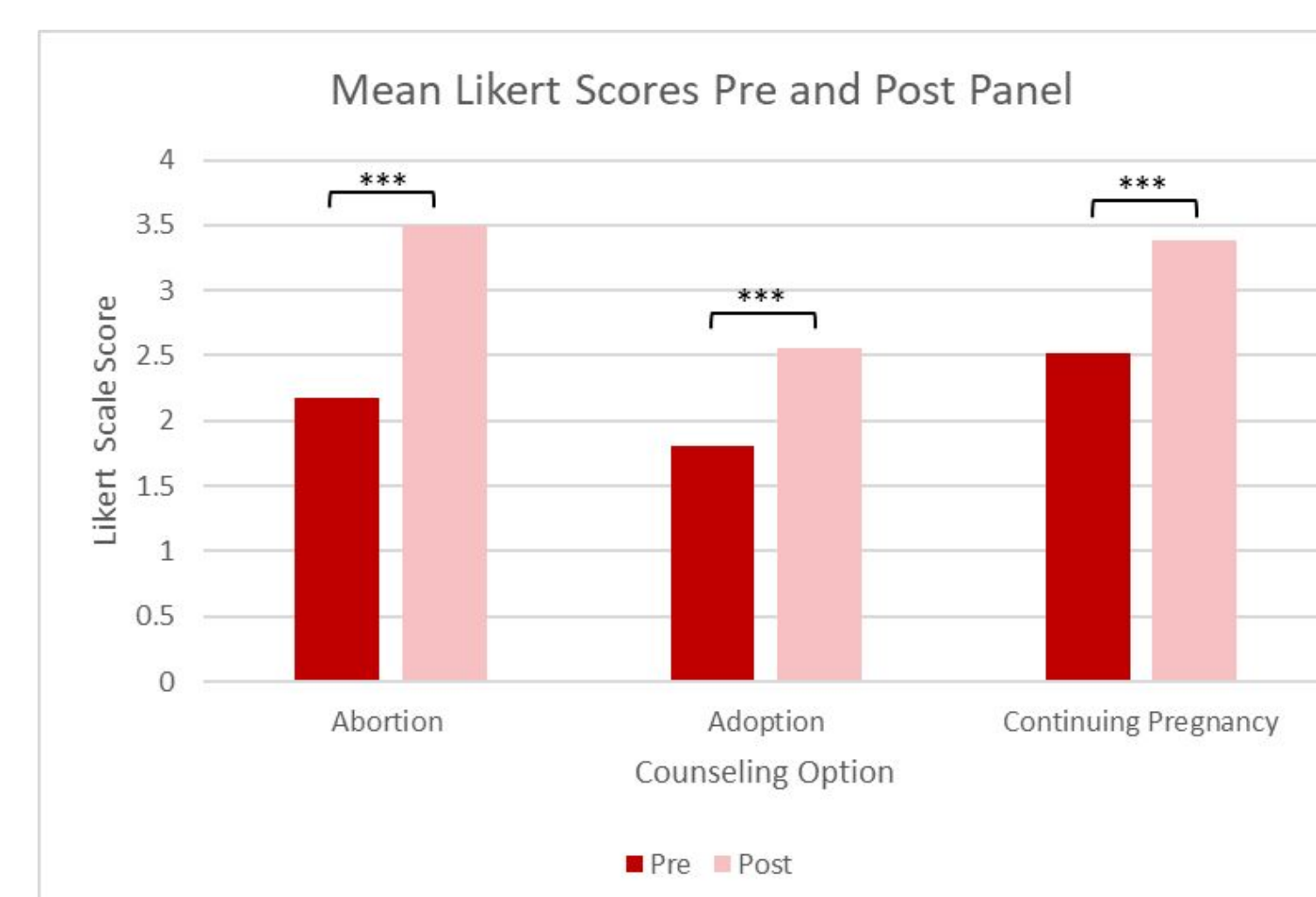


Figure 1: Mean preparedness scores before and after the panel
*** indicate significant results with $p < 0.001$

CONCLUSIONS

- Overall students rated their preparedness significantly higher after attending the panel for abortion, adoption, and pregnancy continuation counseling.
- Counseling preparedness surrounding abortion increased the most, suggesting the student lead discussion tended to focus on abortion counseling.
- The panel effectively integrated pregnancy counseling topics into preclinical education, and prioritized clinically relevant discussions of student interest.
- Using a statewide physician videoconference panel helped provide students across IUSM access to physician expertise and unified content.

FUTURE DIRECTIONS

- Improve the panel for next year, using feedback from survey data. Facilitating the student-lead discussion to include more adoption and continuing pregnancy options will help improve counseling preparedness in these topics.
- Through collaboration with faculty, this panel will be a required part of the ERMD course in 2023.
- Incorporate case-based small groups to provide hands on instruction

REFERENCES

- Farmer, L. E., & Clare, C. A. (2021). The Status of Medical Student Education in Pregnancy Options Counseling: a Review. *Medical science educator*, 31(6), 2085–2091. <https://doi.org/10.1007/s40670-021-01368-x>
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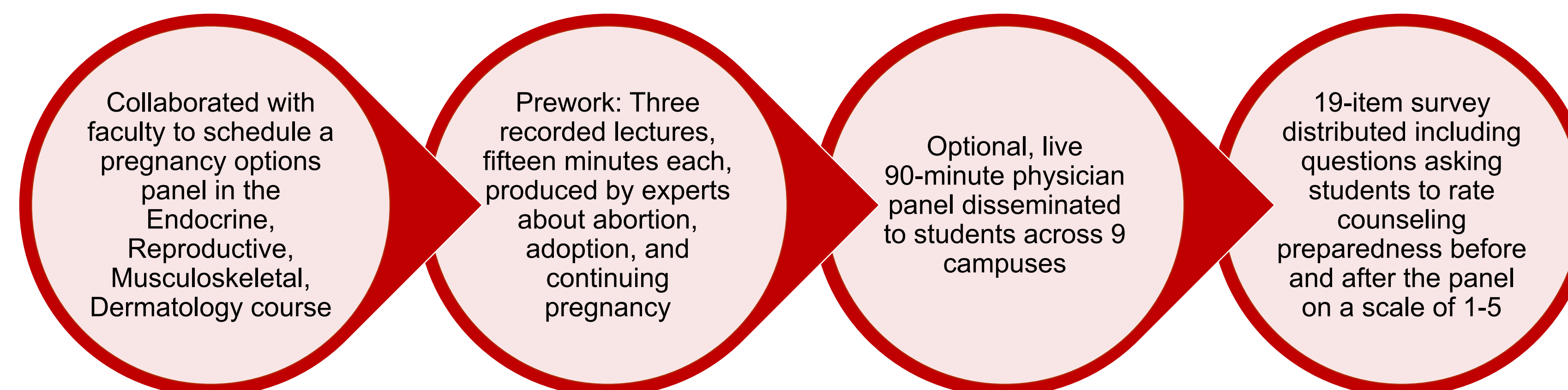
BACKGROUND

- Comprehensive pregnancy options counseling allows physicians to engage in shared decision making with patients and improve outcomes.
- All-options counseling includes advising pregnant patients about abortion, adoption, and continuing the pregnancy (parenting)
- In 2011, 2.8 out of the 6.1 million pregnancies in the United states were unintended [1].
- High quality options counseling can help improve pregnancy outcomes in numerous ways including preventing prenatal care delays [1].
- Currently, there is no standardized curriculum for teaching pregnancy options counseling during preclinical medical education.

INITIAL SURVEY

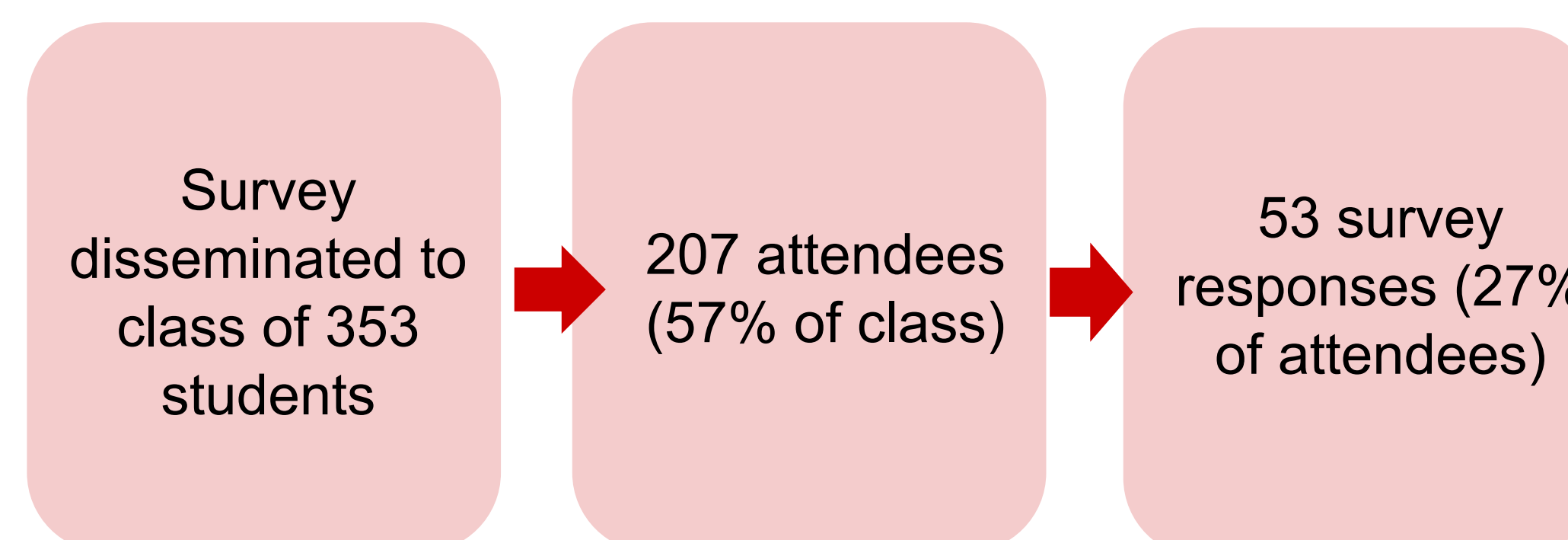
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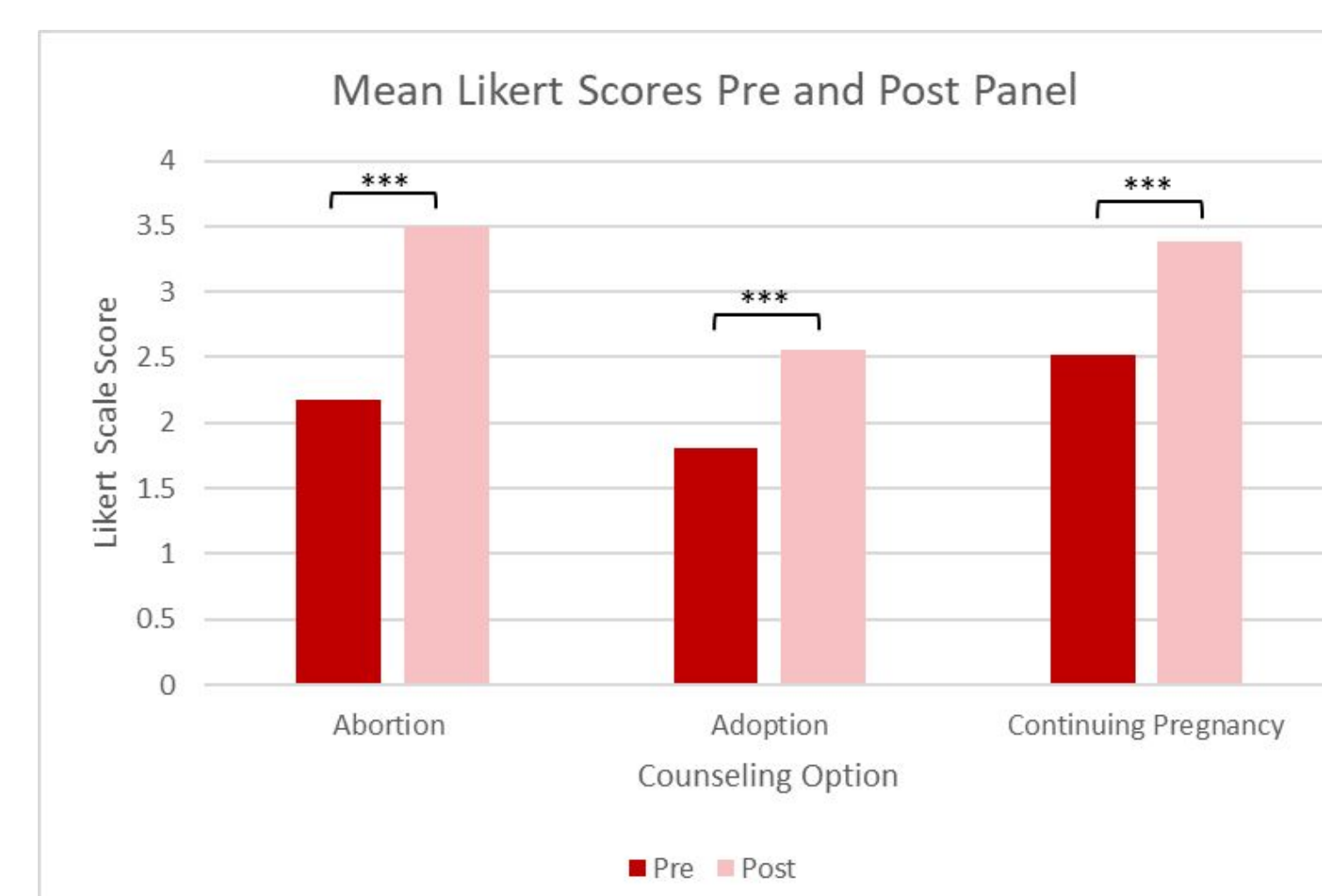


Figure 1: Mean preparedness scores before and after the panel

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CONCLUSIONS

- After attending the panel, students rated their preparedness significantly higher for abortion, adoption, and pregnancy continuation counseling.
- Using a statewide physician videoconference panel modality can help provide students across a multi-campus medical school access to physician expertise and unified content.
- Having access to the experts from other regional campuses is a powerful resource for bridging gaps in pregnancy counseling and creating much needed standardized curriculum.

FUTURE DIRECTIONS

- Incorporate the prework and the panel as a required-attendance course session
- Add a post-session reflective writing assignment
- Improve the panel for next year, using feedback from survey data.
- Incorporate case-based small groups or simulation to provide hands-on experience with pregnancy options counseling.

REFERENCES

1. Farmer, L. E., & Clare, C. A. (2021). The Status of Medical Student Education in Pregnancy Options Counseling: a Review. *Medical science educator*, 31(6), 2085–2091. <https://doi.org/10.1007/s40670-021-01368-x>
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