Research shows that 25% of pediatric clinic visits involve DBP concerns; however, most pediatric residency training programs only offer 1 month of DBP training. Additionally, surveys of pediatricians in practice have consistently reported a DBP knowledge gap and insufficient DBP training during residency relative to DBP demands in general pediatric practice. Our training program was contributing to this knowledge gap with consistently below average DBP subtest scores on the American Board of Pediatrics (ABP) certifying exam over a 15 year time period.

Changes were made to the existing core rotation in 2011 to fill content knowledge gaps.

1. A “resident portfolio” was added to dovetail with the clinical experience. This consisted of structured observation forms for clinical encounters and community site visits, a critical review of DBP screens used in primary pediatrics, a resident led “journal club”, an end of rotation multiple choice (MC) exam, and resident pre- and post-rotation self assessments.

2. An electronic longitudinal curriculum was developed and emailed to residents monthly over the course of their residency. Electronic modules included 18 concise DBP topics accompanied by MC exam questions.

3. Monthly interactive DBP case conferences were added to the regular pediatric resident conference schedule.

4. Subtest scores on the ABP certifying exam and PREP Self Assessment (SA) scores were reviewed one year following the above curricular changes.

64 residents completed the pre- and 41 residents completed the post-rotation self assessment. Ratings of DBP knowledge improved from a mean of 1.65 (SD 0.46) to 2.65 (SD 0.38) on a 4 point scale (p<0.001). Residents scored 77% correct on DBP topics on the 2012 PREP SA compared to an overall topic average of 60%.

The 15 year pattern of below the mean DBP subtest scores on the ABP certifying exam improved to 2% above the mean in 2012, and increased to the 2nd highest for Baylor in 2013.

Teaching tools that dovetail with clinical experience during the core DBP rotation along with longitudinal curricula across the 3 years of residency improve resident DBP knowledge.