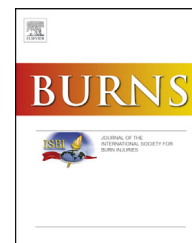


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# Burns teaching in UK medical schools: Is it enough?



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## ABSTRACT

**Background:** Burns are frequently seen and managed in non-specialist settings. The crowding of the UK medical undergraduate curriculum may have resulted in the reduction of teaching on burns.

**Aim:** To determine the burns education experience and the level of competence among UK final year medical students in assessing and acutely managing patients with burns.

**Methods:** An online questionnaire was circulated among UK final year medical students.

**Results:** There was a total of 348 respondents. The majority of the respondents (70%) have not received any specific teaching on how to manage patients with burns. Nearly two-thirds of the students (66%) have never seen a patient being managed for burns throughout their training. Over 90% of respondents stated that they would not feel confident in initially managing a burn in the emergency department. The majority of the respondents (57%) have not heard of the criteria for referring a burns patient for further specialist management. There was almost universal agreement about the importance of knowing how to manage a burn initially.

**Conclusions:** There seems to be a lack of consistent undergraduate training in burns management and final year students lack the experience and knowledge to initially manage burns.

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## 1. Introduction

In the United Kingdom every year approximately 175,000 people are seen in accident and emergency departments with burns of varying severity. Of these, around 16,000 patients are admitted to hospitals [1]. In England and Wales between 2005 and 2009 the incidence of burns admissions into NHS hospitals was on average 20.6 per 100,000 population per year [2]. In the UK the majority of patients (63%) with burns are eventually admitted to burns and plastic surgery units. Children are more likely than adults to be cared for in a

specialist unit (70% vs. 57%). However, there is great variation nationally in the rates of hospital admissions of patients with burns, and not all of them are admitted to specialist burn units [3]. Over a third of adults (43%) and just under a third of children (30%) are admitted to hospitals with no appropriate burn services. Furthermore, the number of annual community treated burns is approximately 250,000, managed by general practitioners as well as other allied healthcare professionals [1].

Although patients with severe burns are ultimately managed in specialised burn units under the care of plastic surgery teams, nationally, it is non-plastic surgeons who are

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more frequently involved in the initial management of patients with burns.

In the past, plastic surgery has been included in the undergraduate curriculum of the majority of UK medical schools [4]. However, more recently, as a result of the crowding of the curriculum, plastic surgery has been treated more as a highly specialised and complex reconstructive discipline, resulting in questions over its relevance to medical undergraduates [5]. Since burns have traditionally been treated by plastic surgeons, the reduction of emphasis placed on this specialty may have resulted in a reduction in the teaching of burns management to medical students.

There is currently no data demonstrating the quality and quantity of teaching on burns management in UK medical schools and whether it is sufficient enough for newly qualified doctors to be able to confidently assess and initially manage patients with burns.

The purpose of this study was to determine the burns education experience and the level of competence among final year medical students across the United Kingdom in assessing and acutely managing patients with burns.

## 2. Methods

An Internet-based survey with multiple-choice answers was distributed among final year medical students across the United Kingdom between October–December 2014. Thirty-three medical schools across the UK were offered to take part in the survey. Out of the 33, 15 medical schools in England, Wales and Scotland agreed to distribute the questionnaire among their final year medical students. The survey was distributed either via email, e-bulletin, or the final year announcement board, coma through the respective medical school administrations and surgical societies.

The survey was created using the online survey development software - SurveyMonkey (SurveyMonkey, Palo Alto, California, USA). The survey did not require an ethical approval according to the University College London (UCL) Research Ethics Committee guidelines.

Questions elicited categorical, multiple choice and free text answers, and the respondents were given an option to skip questions. Initially, the students were asked what their current career intention was, to determine whether they had a personal interest in emergency medicine, plastic surgery and burns management. The respondents were able to select more than one option if required. To characterise the education experience, the students were then asked whether burns management was part of their medical school curriculum and whether they have received any teaching about burns. This was then further explored by more specific questions regarding the format of teaching.

Clinical exposure to burns management was evaluated by asking the students whether they have seen burns being managed, including surgically and with dressings. They were then asked to quantify their experiences. In order to assess the competence of dealing with burns, students were asked whether they were prepared to initially assess and manage a burn in the emergency department. A question regarding the referral criteria was included in the survey to assess the ability

to seek appropriate help for burns. Finally, the students were asked about their opinion on the importance of knowing how to initially manage burns. In addition, those who have indicated a career intention in plastic surgery or emergency medicine were looked at separately in order to compare their responses to the general results. At the end of the survey, the students were given an opportunity to write about what skills could burn management add to their personal development.

The data was anonymized by medical school and respondents and then abstracted from the Internet survey into a Microsoft Excel 2010 spreadsheet (Microsoft Inc., Redmond WA, USA).

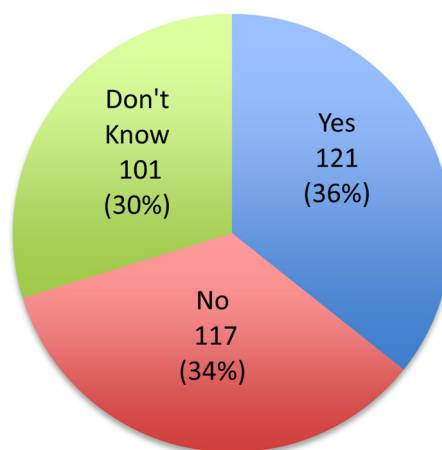
## 3. Results

### 3.1. Career intention

All the 33 UK medical schools with an approximate total of 6600 medical undergraduates were invited to participate in the survey. Fifteen medical schools with an approximate total of 3500 final year undergraduates have agreed to participate in the survey. There were a total of 348 respondents from medical schools across the UK, excluding Northern Ireland giving us an estimated response rate of 10%. Among the respondents, 31% had a career intention in surgery. Of these, 4% were considering plastic surgery. Emergency medicine was a career choice for 22% of the respondents and anaesthetics for 17%. Forty percent of students were planning on pursuing a career in the medical specialties, 21% were considering paediatrics, 32% were considering general practice and 42% of the students were considering multiple specialties or other career options.

### 3.2. Awareness of the curriculum (Fig. 1)

Over a third of the students (36%) stated that burns management was part of their medical school curriculum. Thirty four percent of respondents stated that their undergraduate curriculum did not include burns management. The



**Fig. 1 – Answer to the survey question: “Is burns management part of your medical school curriculum?”**

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