CAPSULE COMMENTARIES

Capsule Commentary on Battistone et al., “Mini-Residency” in Musculoskeletal Care: a National Continuing Professional Development Program for Primary Care Providers

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Battistone et al.¹ report a health education research study describing a national professional development program to enhance the competence of primary care providers in the evaluation of shoulder and knee complaints. The study sites were 13 different Veterans Affairs (VA) medical centers. Participation in this 3-day ‘mini-musculoskeletal (MSK) residency’ was entirely voluntary. The proposals were reviewed from these sites. The investigators started with a pre-course needs and self-assessment. Participants were less confident in evaluating and managing shoulder and knee complaints. An instructional course was conducted on physical examination of the shoulders and knees. Observed Structured Clinical Examination (OSCE) was performed at the end of the course to assess the learned skills of the participants. Participants were administered a post-course self-assessment and a second end-of-the course assessment with questions on pre-course efficiency. OSCE scores demonstrated an improvement in the competency in participants. Self-assessments by the participants were higher post-course than pre-course. Further, participants were more critical about their pre-course adeptness.

A large percentage of primary care visits are for musculoskeletal symptoms.² In the US, the majority of primary care providers tested at a large, regional, academic primary care institution failed to demonstrate adequate musculoskeletal knowledge and confidence.³ Similar findings have been replicated in studies across other countries. This study by

Battistone et al. is unique in many ways. First, the study participants are advanced medical professionals involved in the care of veterans. Previous studies assessing MSK competency have focused on medical students and residents. Second, this is descriptive educational research in a universal health care setting (namely the VA) involving a large number of primary care providers. Third, needs assessment was performed to decide the curriculum and structure of the course. This approach along with the non-mandatory nature of this course ensured the recruitment of active/motivated learners. The structured approach to a common problem used in this study can be tailored to other continuing professional development MSK courses at large academic institutions and national conferences.

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Compliance with Ethical Standards:

Conflict of Interest: The author has no conflict with any of the material in this manuscript.

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