

Medical Student Counselling for Hospitalized patients Addicted to Tobacco: The MS-CHAT CWRU pilot

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BACKGROUND

Counselling interventions to quit smoking are both efficacious and cost-effective.

Medical students do not receive adequate training and experience in counselling actual patients.

Each patient hospitalization is an underutilized opportunity to deliver effective smoking cessation counseling.

Drawing from our experience in Indian medical schools, the MS-CHAT collaborators aim to implement a curriculum in smoking cessation counselling at the Case Western Reserve University (CWRU) School of Medicine.

TRAINING

- Communication curriculum workshop for all M1 students – half day
- 8 volunteer M1 students receive an additional refresher lecture specific to smoking cessation counselling – 1 hour

INPATIENT COUNSELLING

- Hospitalized patients from 5 internal medicine teams
- 15- 30 minute student encounter with each patient
- The student sets the patient's expectations for follow up after discharge

AIM

We describe the design of a program evaluating the effectiveness of a medical student-driven counseling intervention for hospitalized smokers.

We hypothesize that training medical students can improve their confidence in counselling for health behavior change, while simultaneously helping hospitalized smokers quit.

FOLLOW UP

- 3-5 phone calls per patient over 2 months
- Stage based counselling
- Student notes the patient's smoking status at last phone call
- Debriefing meetings with students every 4 weeks

OUTCOMES

MEDICAL STUDENT OUTCOMES

- Medical student confidence and comfort with counselling assessed by individual questionnaires.
- Medical student performance in the end-of-year communication skills exam as compared to peers

PATIENT OUTCOMES

- Number of counselled patients who quit smoking at 2 months – self report
- Number of counselled patients who reduced the number of cigarettes smoked by 50% at 2 months – self report
- Average number of phone calls per patient

FEASIBILITY OF THE INTERVENTION

- Feedback from medical students assessed by focus group discussions and individual surveys
- Feedback from residents assessed by focus group discussions

AFFILIATION

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