



Web-based Training in Shared Decision-Making: A DBPNet Medical Education RCT

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Purpose: Shared decision-making (SDM) is a recommended practice in cases of medical uncertainty. Autism Spectrum Disorder (ASD) is a complex condition with many treatment options, offering opportunities for SDM use. An RCT investigated the differential impact of 2 on-line interactive case-based learning experiences on SDM. We hypothesized that, in DBP fellows, Intervention case would increase SDM more than Comparison case.

Methods: 97 DBP fellows were enrolled and 95 completed training. Participants were randomly assigned to Intervention or Comparison groups. Data were gathered electronically, at Pre- and Post-Intervention.

Intervention. Clinical cases were presented on-line, using Design-A-Case (DAC) software suite. The Intervention Case addressed enhancement of SDM when caring for children with ASD, with direct teaching about SDM. The Comparison Case described evidence-based practice (EBP) using risperidone in children with ASD. The DAC virtual clinical encounter employed problem-based learning, with asynchronous faculty responses, clinical pearls, and links to resources.

Variables

Participant characteristics. Sociodemographics; fellow level, past SDM training; ASD experience; EBP attitude.

Primary outcome. SDM level collected pre- and post-intervention, using SDM Questionnaire Physician, SDM-Q-Doc.

Secondary outcome. Collaborative health communication attitude, collected pre- and post-intervention, using Leeds Attitude to Concordance, LATCon II.

Results: Pre-intervention participant characteristics are presented in Table 1. Groups were similar at pre-intervention. About 25% of participants reported no past SDM training. Table 2 shows pre- and post-intervention data and repeated measures ANCOVA results. At 4 weeks post-educational intervention, both groups showed significantly increased SDM (by about 15%, measured by SDM-Q-Doc). Neither group changed related to collaborative health communication attitude. The model was unchanged after inclusion of fellow level, SDM training, ASD experience, and EBP attitude.

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Conclusion: SDM can be enhanced by an online case-based training, either focused on evidence-based practice or focused on SDM principles. Consistent and measurable SDM education can be provided to all trainees, irrespective of training site location.

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