

[P01.021] Neurology Continuity Clinic: Improving the Timing of the Experience

Joel Morgenlander, Durham, NC, Cheryl Bushnell, Winston-Salem, NC

OBJECTIVE: To compare the traditional weekly schedule for Neurology resident continuity clinic to a new schedule favoring more clinic time during outpatient rotations and less during inpatient rotations. **BACKGROUND:** The Neurology RRC mandates a weekly continuity clinic for Adult Neurology Residency Training Programs. Most neurological patients, however, are seen in return every few months and emergencies are not seen in continuity clinic. Residents on inpatient rotations leave their rotation to go to clinic, resulting in discontinuity of inpatient care, extra handoffs, and additional distractions in clinic. **DESIGN/METHODS:** With the permission of the Neurology RRC, we devised a pilot study. In one 6 month block, first year Neurology residents attended weekly continuity clinic. In another 6 month block, they attended 2 clinics/week on outpatient rotations, 1 clinic/week on ward rotations, and no clinics on Neuro-ICU and inpatient consult rotations. Numbers of new and return patients seen were compared between blocks. Residents and faculty completed a questionnaire to assess their satisfaction with the new schedule. **RESULTS:** There was no significant difference in the number of new and return patients seen comparing the 6 month blocks. The new schedule was favored by 3 of 5 residents (2 residents were neutral) and 13 of 15 faculty. Advantages of the new schedule included better care of inpatients due to improved continuity, less disruption of schedules for residents pulled to cover consults, and fewer disruptive pages in clinic when residents are more outpatient based. The major disadvantage of the new system was difficulty in scheduling patients due to a variable resident clinic schedule. **CONCLUSIONS/RELEVANCE:** Our pilot study showed that the total number of new and return patients seen by Neurology residents in continuity clinic can be kept stable while allowing more flexibility in clinic session scheduling. Residents and faculty favored the new schedule for continuity clinic over the traditional schedule.