

officers. In 2007, the syllabus and examination required review in line with other competency-based examinations in the UK.

Methods: A panel of experienced examiners examined the current syllabus and a core competency list was developed. External medical educationalists were involved in advising how the examination should be developed.

Results: The new format of the examination must be based on reliable and repeatable formats, rather than the viva voce format in the past. The results show the need for a Short Answer Question format together with an Objective Structured Clinical Skills Examination.

Conclusions: The new examination is being developed, and will replace the current examination held in the UK, Netherlands, US, and Philippines.

Keywords: competencies; education; examination; syllabus; training
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Resident Training in Disaster Medicine Using the *disastermed.ca* Emergency Department Simulator and an Expedited Problem-Based Curriculum

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Introduction: Disaster medicine is an increasingly important part of medicine. Emergency medicine residency programs have high curriculum commitments, and adding disaster medicine training to this busy schedule can be difficult. Development of a short disaster medicine curriculum that is effective and enjoyable for the participants may be a valuable addition to emergency medicine residency training.

Methods: A simulation-based curriculum was developed using the *disastermed.ca* Emergency Department Simulator. Curriculum design was centered on published guidelines for Canadian medical schools.

Results: As suggested by published guidelines, topics for residency training include (1) definition of terms; (2) philosophy of disaster medicine; (3) description of disaster management; (4) history of Canadian disasters; (5) risk analysis; (6) emergency medical services; (7) hospital disaster planning; (8) medical management of disasters; and (9) psychosocial aspects of disaster medicine. However, since all residents are in emergency medicine programs, the curriculum mostly focused on hospital disaster management. The teaching curriculum consisted of four, one-hour academic sessions each with a separate focus: (1) basics of disaster medicine; (2) hazard-vulnerability analysis; (3) command and control; and (4) triage. During each session, residents participated in an exercise that focused on the development of a hospital disaster plan for a simulated hospital, followed by a short tutorial on use of the simulator software. The overall goal was to have the participants develop a disaster plan for a simulated hospital, using facilitated discussions regarding hazard-vulnerability analysis, command and control, and triage. Following the four academic sessions, the participants would use this hospital disaster plan that they had created during subsequent disaster simulation lasting approximately four hours.

Conclusions: A simulation-based model of disaster medicine training, requiring only approximately eight hours of classroom time, may represent a time-effective manner for teaching disaster medicine to emergency medicine residents.

Keywords: curriculum; disaster medicine; education; residency; simulation; training
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Inter-Professional Disaster and Emergency Action Studies Project: Serious Games

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Five Toronto colleges and universities recently piloted an undergraduate curriculum in inter-professional collaboration and patient-focused care for medicine, nursing, allied health, police, emergency medical services, social work and media students. The challenge was to bring students from different locations together in a manner that was engaging, accessible, and did not disrupt their schedule. The result: a multi-player Internet game. Students self-schedule and play the game in real time for 60 minutes with others who could be located anywhere in the world. An online curriculum supports the game, allowing students the opportunity to explore team-building theories, media clips, and asynchronous discussions. At the conclusion of the course, participants meet face-to-face in a live, mass-casualty exercise where they play a patient, family member, or student professional assisting victims. Workshop participants will play a facilitated tabletop board game based on the innovative, multi-player Internet game.

The objective of the game is to work together as a team to protect the community. The scenario is based on real-world events. Workshop participants also will experience a “hot wash debrief” on critical lessons learned.

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Specialized Training for Uncommon Circumstances

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Search and rescue in the waterborne environment is a specialized business. The Maritime Rescue Institute (MRI), based in Stonehaven, Scotland, promotes and advances education in maritime rescue by acting as an advisory center and by compiling specialized courses.

Many rescuers operating at sea or in the coastal zones have attended specialized courses at the MRI and benefit from the specific knowledge and skills gained with the help of this Institute. A good example is the Netherlands Sea Rescue organization KNRM, which found its way to the MRI in the 1980s and since then, a progressive cooperation has occurred.

As the demands for specialized waterborne search-and-rescue training still are inclining, due to cultural chances (less and less seafarers are available to act as lifeboat crew), opportunities for training in this specialized field must grow to establish the worldwide Global Search-and-rescue