



## **Integrating Opioid Use Disorder and Motivational Interviewing Curriculum**

### **University of Kansas Medical Center**

- **Faculty Mentor Name:** Roopa Sethi, MD, [rsethi@kumc.edu](mailto:rsethi@kumc.edu)
- **Faculty Mentor Name:** Shilpa Sachdeva, MD, [ssachdeva@kumc.edu](mailto:ssachdeva@kumc.edu)
- **Student Team Member Name:** Vivek Velagapudi, Class of 2024, [vvelagapudi@kumc.edu](mailto:vvelagapudi@kumc.edu)
- **Student Team Member Name:** Nidhi Patel, Class of 2024, [n344p507@kumc.edu](mailto:n344p507@kumc.edu)

This curriculum was designed for 3<sup>rd</sup> year medical students during their Psychiatry rotation at the University of Kansas Medical Center.

\*Developed for COPE Addiction Medicine Curriculum Challenge 2.0

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#### ABSTRACT:

This curriculum was designed for 3<sup>rd</sup> year medical students during their Psychiatry rotation at the University of Kansas Medical Center. Students will participate in a round table didactic session focused on opioid use disorder and a motivational interviewing session with role play in think-pair-share groups. The faculty member will assess student comprehension through embedded quiz questions and Poll Everywhere questions at the end of each session.

#### DESIRED RESULTS:

As a result of this curriculum, students will be able to:

- Discuss the neurobiologies of addiction.
- Evaluate the four basic treatment modalities and processes for Opioid Use Disorder (OUD); buprenorphine, naltrexone, buprenorphine long-acting injection, and methadone.
- Distinguish opioid poisoning and explain the administration of Naloxone.
- Explain the proper administration of Naloxone.
- Demonstrate rapport with the patient using reflection and summarization, open-ended questioning, and using empathic statements. (Motivational Interviewing-OARS)
- Demonstrate dignity and respect for the patient.
- Develop a willingness to learn and self-reflect through non-judgmental interactions with patients.
- Practice mindfulness.

#### DETERMINE ACCEPTABLE EVIDENCE TO ASSESS LEARNING:

- *Formative:* The faculty member conducts observational assessments during the motivational interviewing skill role play session (MI-OARS) and during clinical case scenarios in a didactic round table format (utilizing the flipped class format & Socratic platform).
- *Summative:* The faculty member evaluates student learning through embedded quiz questions throughout each session, along with Poll Everywhere questions at the end of each presentation; the answers to the questions can be downloaded.

**LEARNING EXPERIENCES:**

Medical students participate in two sessions that focus on performing an appropriate history and physical, diagnosis, and management of opioid use disorder, as well as building rapport with patients using techniques of motivational interviewing in a non-judgmental, empathic manner. In the first session, students participate in a didactic round table session on opioid use disorder and its treatment mainly methadone, buprenorphine and naltrexone once a month injectable. In the second session students role-play using the techniques of motivational interviewing to build rapport with patients.

**POST IMPLEMENTATION:**

The faculty member will analyze the summative results of the PolLEV and the quiz answers to adjust the curriculum as needed. After evidence of student learning is collected, this evidence will be used to guide future teaching activities about OUD and motivational interviewing. If it is determined that the implemented learning sessions and activities did not elicit the desired results, the implementation will be reassessed to establish a more effective way to obtain the expected results. However, if it is determined that students are already equipped with the knowledge of OUD and motivational interviewing, this information will be used to change focus to other aspects of addiction care.

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## Learning Session 1: Opioid Use Disorder

### OPEN THE SESSION:

- *Welcome learners/ Overview session agenda*
  - Intro: This session will educate the audience on opioid use disorder and its treatment mainly methadone, buprenorphine and naltrexone once a month injectable.
  - Outline:
- *Introduce Learning Objectives:* Learners will demonstrate competence in performing an appropriate history and physical, diagnosis, and management of opioid use disorder, as well as building rapport with patients using techniques of motivational interviewing in a non-judgmental, empathic manner.

### ASSESS/ ACTIVATE LEARNERS' PRIOR KNOWLEDGE:

Small groups, think-pair-share with rest of class:

- In your own words, can you explain what addiction is?
- What are potential ways that addiction can affect the lives of our patients?
- What have you learned before about opioid use disorder?

### DEEPEN LEARNING: PowerPoint slides overview

*\*The KUMC OUD Presentation is available on the COPE website*

- Neurobiologies of addiction: official definition, brief review of neurotransmitters, receptors, and locations involved in addiction; operant vs classical conditioning; emphasize this is a chronic brain disease
- Mu-opioid receptors.
- Diagnosis of opioid use disorder (DSM-5 criteria)
- Opioid epidemic: recent trends, types of opioids available
- FDA approved Medications for Opioid Use Disorder (MOUD)
  - buprenorphine, long-acting injectable naltrexone, buprenorphine long-acting injection, and methadone
  - MOA of each medication, clinical use, route of administration, other pertinent considerations, differences in medications
- Stages of treatment: Induction, stabilization, maintenance, tapering
- Opioid poisoning and overdose signs/symptoms -> explain treatment (naloxone) and proper administration
- Case 1: Poll Everywhere with patient scenarios – Students pick and describe what MOUD they will chose for the three scenarios presented to them.
- Barriers to treatment: stigma, lack of providers, lack of understanding of addiction -> how to address
- Think-pair-share vs poll everywhere: What is stigma?? How can we reduce stigma?
- Harm reduction strategies
- Poll Everywhere: Questions about cases

**ASSESSMENT FOR LEARNING/ DEVELOP METACOGNITION/ ASSESSMENT OF LEARNING:**

- *Quiz questions:* embedded throughout session as noted above
- *Prompt/ small group work:* case presentations through role play, review closed-ended questions pre-work
- *Assessment document Knowledge/ Skills/ Attitudes:* Additional Poll Everywhere questions at end over content of entire presentation

**CLOSE SESSION:**

The preceptor:

- *Debriefs:* Asks students about major takeaways. How will this change your care for patients in the future? What other questions do you have?
- *Evaluates:* Has the students fill out an evaluation at the end of the session: What topics are still unclear to you? What did you like? What improvements can we make to this session?
- *Reviews if the learning objectives were met*

Socrative: would be able to download data [<https://www.socrative.com/>]

## Learning Session 2: Motivational Interviewing

### OPEN THE SESSION:

- *Welcome learners/ Overview session agenda*
  - Intro: This session will educate the audience on techniques of motivational interviewing and building rapport with patients.
  - Outline: Describes the flow of activities
- *Introduce Objectives: Learners will demonstrate competence in performing an appropriate history and physical, diagnosis, and management of opioid use disorder, as well as building rapport with patients using techniques of motivational interviewing in a non-judgmental, empathic manner.*

### ASSESS/ ACTIVATE LEARNERS' PRIOR KNOWLEDGE:

Small groups, think-pair-share with rest of class

- In your own words, can you explain what motivational interviewing is?
- What are potential ways that motivational interviewing can help the way we interact with patients?
- What have you learned before about motivational?

### DEEPEN LEARNING: PowerPoint slides overview

*\*The KUMC OUD Presentation is available on the COPE website*

- Flipped Classroom/Prework Case: The presenter and a helper perform the case and show the example video on patient care while taking basic patient history -> motivational interviewing
- Provide example on how to properly take H&P, lab workup, discuss treatment options, follow-up
- Screening techniques for OUD
- Have students note the closed-ended and open-ended questions -> what could they improve?
- Discuss prework case: discuss treatment options, follow-up
- Poll Everywhere: based on the information given, what MOUD would you suggest and why?
- Interactive Activity: Take 10 closed-ended questions and make them open-ended
  
- Case 1: This is done in groups among the participants. A motivational interviewing role playing with paired students where each student takes turns being patient vs doctor vs observer. They approach a patient problem that the other student presents. They use the core of MI, open ended questions, reflective listening, summarizing while using empathy and non-judgmental style of interviewing. They help the other students roll with resistance. A diagram will be available on the screen for them to follow this style. There could be a third student who observes the interaction, looks back at the board and provides feedback as to what MI style of questioning they have used.
- Poll Everywhere: Questions about cases



**ASSESSMENT FOR LEARNING/ DEVELOP METACOGNITION/ ASSESSMENT OF LEARNING:**

- *Quiz questions:* embedded throughout session as noted above
- *Prompt/ small group work:* case presentations through role play, review closed-ended questions pre-work
- *Assessment document KSA's:* Additional Poll Everywhere questions at end over content of entire presentation

**CLOSE SESSION:**

The preceptor:

- *Debriefs:* Asks students about major takeaways and “How will this change your care for patients in the future? What other questions do you have?”
- *Evaluates:* Have the students fill out an evaluation at the end of the session: What topics are still unclear to you? What did you like? What improvements can we make to this session?
- *Were the learning objectives met?*
- *Thank learners for their participation and feedback.*