Goals and Objectives:
Our goal is to evaluate critical characteristics of longitudinal education sites that best promote enhancement of learning and preservation of clinical skills during research years, allowing dual degree students to better thrive in their roles as physician-scientists. Findings may also be extended to inform creation of Longitudinal Clinical Experiences (LCE’s) within traditional MD curricula, reflecting the growing acknowledgment in medical education of the need for instruction of students in the nuances of outpatient care.

Background and Theoretical Framework:
Historically, medical schools have better prepared students for delivering inpatient care than outpatient care and chronic disease management. While several schools have begun instituting LCE’s as part of their curricula, there is still considerable variability in students’ exposure to long-term outpatient care. Preparation of MD/PhD students has been additionally complicated by possible deterioration of existing clinical skills during pre- and post-clerkship years when these students conduct laboratory research.

Instructional Methods and Materials:
Our institution has sought to simultaneously address both of these issues by allowing MD/PhD trainees to attend clinic half a day per week while conducting PhD research at a number of different adult primary care centers. Several years after program commencement, we are now using interviews and focus groups with participating students to learn how experiences: (1) strengthened students’ clinical knowledge and skills; (2) informed patient interaction style; (3) provided interprofessional education on roles in the health care team; and (4) reinforced scientific research. Preliminary interviews have been one-on-one, with focus groups to include 4-6 students per LCE site. A Grounded Theory approach is used to analyze narrative data.

Reflective Critique:
The primary strength of our study is the wealth of data generated by our open-ended approach, which allows us to identify a variety of themes and actionable critiques. This may simultaneously prove to be a limitation, however, as divergent responses may necessitate follow-up targeted questioning. Future studies may expand data collection to traditional medical students participating in longitudinal experiences, as well as students working in fields beyond primary care.