IDENTIFYING GAPS IN GASTROENTEROLOGY APP ONBOARDING: RESULTS FROM A NATIONAL SURVEY AND EARLY OUTCOMES FROM A PILOT INPATIENT TRAINING CURRICULUM

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BACKGROUND

Advanced Practice Providers (APPs) play an essential role in gastroenterology, yet structured onboarding practices remain highly variable.[1-3] Limited specialty-specific training may affect provider confidence, clinical readiness, and patient care quality.[4-6] Emerging evidence supports the development of formalized postgraduate APP training programs, including fellowships and residencies, to bridge the gap between generalist education and specialty practice.[6-7] This study characterized national GI APP onboarding experiences and evaluated early outcomes of a pilot inpatient GI training curriculum.

NEEDS ASSEMENT SURVEY

Thirteen question survey distributed to AGA APP listserv (289 APPs).
Sixty-seven responded

Identified themes and gaps in training.

SURVEY OUTCOMES

80% with less than 3 months onboarding

40% less than moderately confident

57% with limited formal training

Specific gaps in hepatology, IBD and gut-brain disorders

95% **Would benefit from additional training**

CURRICULUM DESIGN

Four-week inpatient curriculum designed on competency-based principles

Targeted didactics based on survey knowledge gaps

Attending evaluations at week one & week four

Pre & post knowledge exams compared

CURRICULUM OUTCOMES

Most effective learning modalities

Bedside Teaching

Case-Based

Online Modules

Pre/post test

"Exceeding Expected Performance"

26% **Improvement in clinical knowledge gaps**

CONCLUSION

- There is a national need in GI APP onboarding
- Structured competency-based curriculum is feasible and associated with improved knowledge and preparedness
- Scalable framework with generalizable components and institution specific implementation
- Future directions include multi center studies to evaluate performance, outcomes and readiness

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