# How to develop a curriculum in Neurology

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- There is nothing to disclose
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- The author is presently an officer of the WFN, and of the UEMS CME governance board
- Previous affiliations were with the EFNS (now EAN), and UEMS EBN (board of neurology)

### Learning Objectives

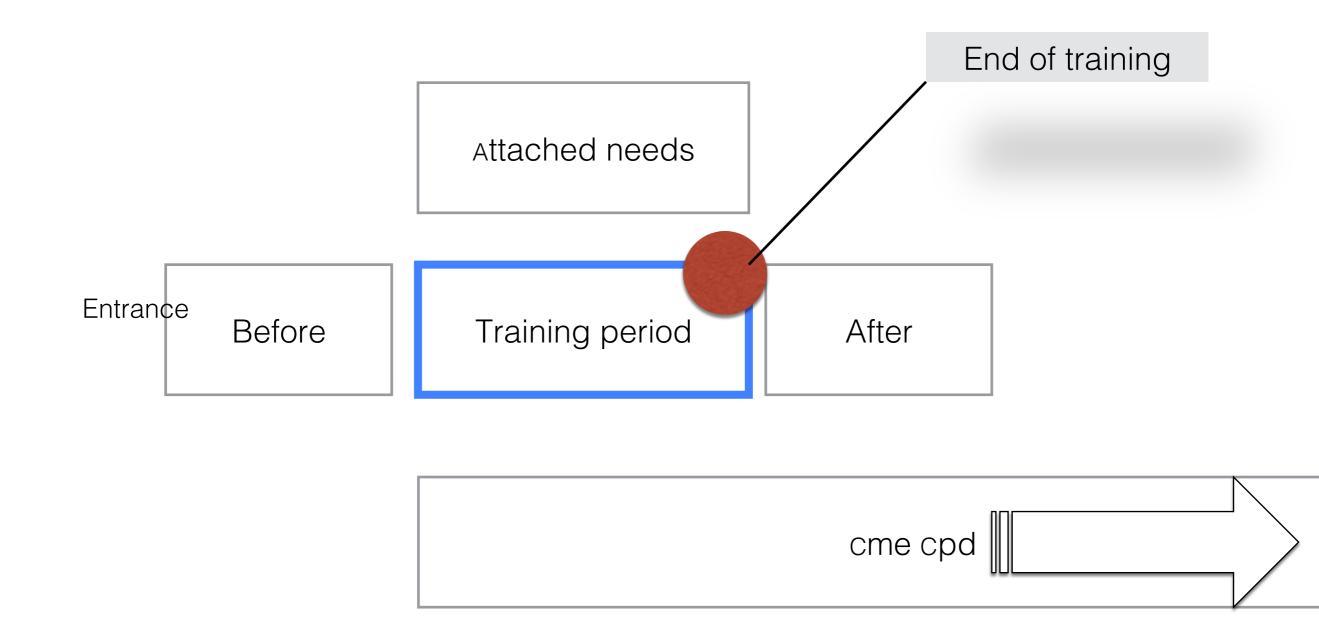
- 1 What is a neurological curriculum?
- 2 Position of neurology within the national/regional situation.
- 3 How to choose contents and sources?
- 4 Structure and Tools.
- 5 How to assess.
- 6 Resources.
- 7 References.

#### Key message

- Training curricula are indispensible and need structure and content.
- Content and sources are determined by international development and by local needs and structures.
- Tools must be reasonable and viable.
- Assessment loops should be integrated.
- CME follows training and can also be used in a parallel way.

## 1 What is a neurological curriculum?

- A neurological curriculum for training defines time and content of neurological training. It defines knowledge, skills, competence and attitude and methods of assessment.
- The goal is to train a fully competent neurologist



#### Elements

Knowledge

skill

Competence

Attitude

Scientific approach Research

Advocacy Administration "Politics"

## 2 Position of neurology within the national/regional situation

Other Medical and Surgical fields

National Aspects, Legislation

Neurology

Multidisciplinary and multiprofessional interests

### Training Curriculum

- Entrance conditions
- Duration
- Content
- Knowledge, skill, competence, attitude
- Administration- Advocacy
- Scientific methodology

## 3 How to choose contents and sources?

- Neurological basic structures:
  - Eg nomenclature of the American Board exam or European Board exam.
- Eg EAN core curriculum

Text books (international)

Reviews and guidelines

- Local text books
- Internet- sources

#### Define content of training

- In patient/out patient
- Emergency room
- Bedside consultations
- Neurological auxilliary examinations
- Define "Milestones"

#### Consider "soft "facts"

- Ethics
- Palliative and end of life
- Advocacy, department and health politics
- Management and administration

# Subspecialities or Core? Skills

- Skill/techniques
- Electrophysiology
- EEG
- Ultrasound
- Neuropathology, CSF analysis

### Content-Competence

- To act independently and responsibly in out/in patient conditions
- To be able to manage general neurology
- Teamwork
- Multiprofessional
- Patient and Carer relations

#### 4 Structure and Tools.

- Practical training: institutions
- Definition of depth of content
- Rotation (in/out patients and departments)
- Work hours
- Teaching tools

### Organize training

- Traditional "Apprenticeship"
- Internet:
- Courses
- Exchange/rotation
- Presentations/journal club

#### 5 How to assess.

- Assessments at different time points
- Interim assessments
- Final (exit) examinations
- Projects, scientific work, diploma paper
- Feedback, 360 o degree

#### 6 Resources

- Neurological society
- Local medical Society
- National medical society/health authority
- Persons qualified to support work
- Secreterial working hours

## CME follows training and can also be used in a parallel way.

- CME programs are available in most countries.
- CME programs consist of different formats.
- Trainees can be integrated in CME programs.

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