

**MEDICAL EDUCATION COUNCIL PRIORITY EDUCATION TOPICS
DEVELOPED FROM STRATEGY INPUTS**

- Safety Net Populations: destitution and criminal justice issues as related to the stigma of addiction. Addiction medicine physicians find themselves handling “social work” issues, e.g. homelessness, poverty, etc. Working toward a collaborative care model.
- Medical Marijuana: management of medical marijuana and its clinical impact.
- Integration Strategies: educating other health care providers—primary care, counselors, nurses, etc.--about addiction, its underlying causes, diagnosis, treatment and how to integrate care and improve patient outcomes.
- SBIRT, Additional Care and the Role of General Practitioners
- Integrating Pharmacotherapies into Primary Care Settings.
- Referral for Treatment: improving communication between general medical professionals and the addiction specialist.
- Expanding Evidence Related to Pain & Addiction.
- Appropriate Integration of Behavioral Health Issues with Allopathic Medicine.
- Accommodation of Heterogeneity of Providers.
- Improve Skill Performance.
- Eliminating Silos in Treatment Approaches: reconciling different philosophical approaches in various medical models for patient care.
- Detox: Toward Standards and Best Practices
- Training: Best Practices and Updating Delivery Approaches.
- Parity: preparing for expanding numbers of patients entering the health care system.
- Using Simulations to Improve Learning Experiences.
- Addressing Professional Isolation
- Attract younger attendees
- Create colleague Network
- Identify new roles for experienced members
- Pain Management
- Psychiatric issues
- Opioids
- Co-morbidities
- Therapy/counseling
- Accommodating busy schedules
- Meet ABAM requirements—certification, MOC
- Establish tracks—advanced/introductory/career
- Increase interactivity
- Different format
- Increase clinical application
- More 12-Step information
- Programming for Associate Members
- Special populations—pregnancy, neo-natal
- Increase push for outpatient treatment—inpatient treatment discouraged as non-viable
- Accountability for readmission
- Medical disease coaching in the addiction setting
- Address stigma in non-addiction colleagues
- Accountability burdens
- Competency-based learning
- Use of technology
- Practice-based learning/information
- Tele-medicine for A.M.
- Proactive strategic partnerships
- Option comparison—exploring alternatives vs. one solution only approach