for the diagnosis of SpA, participants viewed pictures of patients with spondylitis and peripheral involvement (enthesitis, dactylitis, arthritis) seeking to achieve awareness of their sense of sight with respect to the diagnostic approach to patients with suspected SpA and sought to strengthen the logical approach to be implemented when approaching this type of patients. The second part focused on clinical cases applied to clinical simulation models, applying the knowledge acquired during the theoretical phase. Participants made several stations where they where they could appreciate for periods of 15 min each simulators of 3 feet, 6 simulators simulated fingers and a mannequin where they can identify entheses and psoriasis lesions, improving visual and tactile sensitivity in each semiologic findings for the diagnosis of SpA. The participants filled out an pre and post test, which included clinical cases with simulators and photographs of hands and feet of patients with suspected SpA. 102 participants (59% women), average age 32.3 years (SD 7.1). Improvement in the correct diagnosis of SpA of 47% (the correct diagnosis increased from 39% to 86%). laboratories application in the cases presented decreased significantly, from an average of 8–4 exams requested by each clinical case presented. 98.5% of participants would recommend to other colleagues to make this workshop. 97.7% believe that this educational intervention will improve the diagnostic approach to patients with suspected SpA

Abstract AB1395 – Figure 1

Conclusions: We have shown the usefulness of clinical simulation given by an improvement in the diagnostic sensitivity towards the diagnosis of SpA. A significant decrease in the total number of exams requested for each of the clinical cases analysed was documented, which can have a positive effect on costs for the national health systems.

REFERENCE:

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