



Counseling to reduce road injuries and deaths.

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Abstract: To study undergraduate learning of and current clinical practice on counseling to reduce road injuries and deaths.

Questionnaire on high-risk clinical scenarios.

Canadian medical schools, one family medicine program, and a Toronto trauma centre.

Three groups: 338 final-year medical students from 12 Canadian universities, 183 family practice teachers from the Ontario-wide University of Toronto teaching network, and 45 trauma-team members from a Toronto regional trauma centre.

All health promotion items identified by students are relevant to the clinical scenarios presented to them were tabulated to identify general knowledge of health promotion counseling and specific knowledge of road trauma prevention. The trauma-related counseling practices of family practice teachers were tabulated from their responses to one of the student scenarios. The same process tabulated the counseling that trauma-team members would expect family physicians to do in busy practices.

Students' knowledge about health promotion counseling was generally good, except for road trauma prevention, where counseling is seldom done unless heavily prompted. Family practice teacher responses indicated that approximately 15% have not accepted road trauma counseling as part of clinical practice. Trauma-team members ranked trauma prevention items similarly to family practice teachers, but had higher expectations for performance. The neck is the most commonly injured site, but no group identified headrest adjustment as important.

Counseling to prevent road trauma is deficient both in practice and teaching.

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