



Podcasting for Continuing Medical Education

Challenges and Opportunities

The rate of podcast listening has grown substantially over the past 10 years. Currently, there are more than 1 million active podcasts, with 30 million podcast episodes available as of April 2020.¹ The considerable growth in the number of available podcasts is also associated with an increased growth in the number listeners. In 2006, only 11% of individuals in the United States aged 12 and older had ever listened to a podcast.² By 2019, that percentage grew to 51%, which was the highest number of listeners up to that point.² Furthermore, in 2019, 1 of 3 individuals reported listening to at least 1 podcast within the past month, representing approximately 90 million listeners.^{2,3}

Podcasts have become a rapidly increasing channel for a wide range of listening experiences, such as accessing daily news, entertainment, and education. The rise in podcast popularity makes sense because this medium allows people to stay in touch with the information they want to

receive, provides an endless variety of options for information delivery, and affords listeners the ability to multitask while listening. The ability to “learn and do” is a game changer regarding the increase in podcast listening and is a standout element when compared with other technologies, such as learning via computer or television. According to the Podcast Consumer 2019 report, when asking participants where they had ever listened to a podcast, 90% responded at home, 64% responded in the car, 37% responded at work, and 43% responded while exercising.⁴



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With their rapid growth, an increased market for listeners seeking informative and educational content, and positive preliminary research, podcasts present an immense opportunity for the field of continuing medical education (CME). However, the simplicity of podcast use presents numerous challenges for health care professionals (HCPs) hoping to claim credit for the medical education.⁵

Simple, Innovative, and Efficient

Podcasting delivers a new kind of innovation, meeting the demands of people in a generation that is accustomed to accessing content whenever and wherever they want to consume it, as evidenced by the normal-use practice of other media channels, such as social media or streaming services.⁵ In addition, podcasts are an affordable and efficient activity option for medical education providers. Although a live conference or CME event can cost thousands of dollars, podcasts can be created for a few hundred dollars while delivering a quality product to learners.

Although medical education podcasting is still new, existing research has supported the efficacy of incorporating podcasting into CME. A 2019 study found that podcasts were effective in delivering information to pediatric providers,⁶ and other studies have documented the use of podcasts in educating medical students, resident physicians, and fellows.⁵ In addition, podcasting has been shown to be an effective learning strategy in other disciplines, such as language learning⁷ and higher education.⁸

Potential Barriers and Challenges

While there is enormous learning opportunity in podcasting, challenges exist as use of this technology continues on the rise. One of the most pressing challenges is the lack of evidence-based practices in podcasting that is intended for medical education. According to a 2017 literature review, there are no evidence-based guidelines to direct the development of educational podcasts.⁵

Although podcast utilization is surging for leisure learning, the issue of preferred learning style remains a factor. In a study of first-year medical students, using the VARK (visual, aural, read/

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write, kinesthetic) Questionnaire to categorize learning preferences, 39% preferred unimodal learning, with kinesthetic being the most preferred style.⁹ However, most (61%) had multimodal preferences, implying that a blended approach may be more impactful.⁹ It is important to note that there is no single best teaching–learning strategy that can work for every student, regardless of the effectiveness of the approach. However, delivering innovative educational opportunities that address the needs of people of all generations and media preferences as they develop help to effectively meet learners’ preferences.

Another challenge is that traditional data collection around podcasts for medical education has focused on utilization, such as number of downloads or total listening minutes. However, most accrediting bodies require additional information for an HCP to claim CME credit.

To address this issue, Vindico Medical Education has developed a podcast platform called *MedEdTalks*, which provides the flexibility for on-demand medical education while offering HCPs an opportunity to claim CME credit. With this approach and the careful design of our assessment questions, we also can evaluate the targeted measures of attitude, skill, and knowledge, which is typically more challenging with a podcast-only approach.



MedEdTalks is a medical education podcast series created by Vindico Medical Education covering a wide variety of specialty areas.

The podcasts can be found on your favorite podcast player, but to obtain credit, you must be a registered user of the Healio network and complete the CME activity on MedEdTalks.com to receive your credit certificate.



Want to listen to Vindico Medical Education’s *MedEdTalks* CE Podcasts? Click [here](#).

Vindico Medical Education Approach: Helping HCPs to Learn on Their Own Schedules

Vindico’s solution for the utilization of podcasts in CME bridges 2 essential factors in progressive medical education delivery: meeting participants’ preferences for learning style and employing evidence-based measures to allow participants to complete the necessary assessments for obtaining continuing education credits.

MedEdTalks currently offers podcasts in 7 different medical specialty areas. Fourteen months after its inception in April 2019, the network already has 10,093 unique downloads from 9,182 learners (Table), with an average of approximately 180 downloads per episode. Its success and reach is largely attributed to the innovative approach of the specialty-focused medical education podcasts, but the delivery approach plays a large role in adaption of this learning modality as well. Because the podcast space is competitive, it is essential not to make discovery or participation

more difficult by requiring listeners to complete extra steps to engage in the education. To this end, MedEdTalks is published on traditional podcast channels with which users are already familiar, such as Spotify and Apple Podcasts.

MedEdTalks by the Numbers

Podcast Name	Episodes (n)	Downloads (n)	Learners (n)	Test Takers (n)
MedEdTalks Cardiology	3	396	488	135
MedEdTalks Gastroenterology	4	1,564	841	245
MedEdTalks Neurology	6	674	674	251
MedEdTalks Oncology	4	338	338	166
MedEdTalks Ophthalmology	17	3,466	1,565	817
MedEdTalks Primary Care	4	375	2,928	1,567
MedEdTalks Rheumatology	19	3,446	2,189	1,012

Data as of June 2020

Because of Vindico's experience in the podcasting field, our staff has identified patterns and best practices in audio-only education. One consistent need is the continued cognizance of the reasons listeners choose podcasts in the first place, as well as from what outlets they choose and why. Seventy-nine percent of podcast listeners in the past 6 months reported that they preferred podcasts to be less than 30 minutes in length. Although this could be because many listeners are accessing podcasts when multitasking, such as during work breaks or while driving, this knowledge provides a basic framework for content development that addresses the needs of learners. Developing quality, functional content that meets learners' expectations is as important as providing the content via platforms that learners are already using.

To make podcasting an actionable learning tool, medical education providers need to incorporate a method of measuring outcome assessment. In Vindico's model, listeners are directed to an audio-only, CME-certified activity to complete the necessary assessments to obtain credits. Overall, 95% of learners who complete 1 podcast online to obtain CME credit plan to complete another episode in the series. In a sampling of podcast shows, 80%, 81%, and 97% of learners completed 1 or more activities in a show in the specialties of cardiology, primary care, and gastroenterology, respectively.



To learn more about Vindico Medical Education's MedEdTalks in your speciality area or listen to MedEdtalks, click [here](#).

In your opinion, what is the ideal length of a medical education podcast? (n=1,381)

<15 minutes	15-30 minutes	30-60 minutes	>60 minutes
21%	58%	20%	1%

By providing the educational content assessment of the podcasts in an easily accessible and efficient manner, we can effectively assess the outcomes of participant learning via podcast education, with the user experience in mind.

Conclusion

From the existing knowledge about learning and a growing body of promising research, it is evident that podcasting is a medium that is conducive to learning, and we expect to see an increase in its use within medical education. From Vindico's experience, MedEdTalks has attracted a loyal viewership that is actively seeking additional education, demonstrating a demand for education delivery that is growing with each new generation of medical practitioners. At a minimum, podcasts present the opportunity to supplement medical education learning when coupled with traditional continuing education outlets, providing listeners with optionality in their educational information-seeking modalities. However, the possibilities and accessibilities provided through podcasting can truly take medical education innovation to the next level.

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