Methods The previous e-ELCA lead worked with a team to map e-ELCA against the Association for Palliative Medicine (APM) medical school curriculum, identifying 64 relevant sessions. Further work from a team at Liverpool Medical School identified sessions that covered areas of the APM curriculum that were not covered by their local medical school curriculum. This previous work was combined to generate a provisional medical student learning path. This was presented at the APM undergraduate education special interest forum (APMUESIF). Feedback was gained on the choice of sessions but also the size and structure of the learning path. This feedback and the provisional learning path were used alongside the General Medical Council’s (GMC’s) Outcomes for Graduates document and the APM curriculum to produce a final learning path.

Results A compact medical student learning path comprising 5 core, 5 additional and 5 case study sessions has been developed.

Conclusions An e-ELCA medical student learning path has been developed following guidance from a number of sources. This will allow e-ELCA to be used more readily for undergraduate medical education.