The Teachable Moment
“a.k.a. teaching on the fly.....”

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Following the presentation, participants should be able to:

- Recognize opportunities for teaching in the clinical setting.
- List several characteristics of an effective learning experience.
- Be able to briefly assess the learner, outline the teaching objective(s), and give timely feedback.
Definitions

- Teaching vs. Learning
- Teaching vs. Entertainment
The Learning Experience

- Assess the learner
  - Level of training
  - Level of interest (personal vs. professional)
  - Prior/additional interest/knowledge/skills

- Assess the learning environment
  - Clinic
  - Emergency Department
  - Ward
  - Operating Room
  - ICU
Traditional Environment

- Classroom/Lecture Hall
- Laboratories
Teaching Formats

- Lectures
- Demonstrations
- Simulations
- The virtual patient
- Apprenticeship
- Case Based (CBL)
- Problem Based (PBL)
Efficient and effective ambulatory care teaching requires that both the student and preceptor accept the limitations of the outpatient setting.

Extensive discussions of differential diagnosis, pathophysiology and psychosocial problems are not possible nor necessarily desirable.
Teachable Moments

- Barriers to Clinical Teaching
  - Time
  - Service needs
  - Complexity of care
  - Multiple learners
  - Sensitive medical/social/emotional issues
  - Language/cultural variables
Teachable Moments

- What makes a good vs. great learning experience?
  - timely/accurate information
  - relevant/applicable
  - logical/easy to follow
    * verbal vs. visual
    * active vs. passive
  - non-threatening/intimidating/demeaning
Teachable Moments

- Adjunct Teachers
  - Nurse
  - PT/OT
  - Pharm D/Pharmacist
  - Social Services
  - Patients/Parents
The 5-Step Microskills Method

1. Get a Commitment
2. Probe for Supporting Evidence
3. Reinforce What Was Done Well
4. Give Guidance About Errors or Omissions
   Feedback: correct mistakes
5. Teach a General Principle
   Take each encounter to a learning point
Get a Commitment

Why?…
Encourages learner to process further and problem solve.

Examples...
“What do you think is going on here?”
“What would you like to do next?”
Probe for Supporting Evidence

Why?…
Helps you to assess the learners knowledge and thinking process.

Examples…
“What factors support your diagnosis?”
“Why did you choose that treatment?”
“What led you to that conclusion?”
Reinforce What Was Done Well

Describe specific behaviors and likely outcomes.

Why?... Behaviors that are reinforced will be more firmly established.

Examples “I liked that your differential took into account the patient’s age, recent exposures, & symptoms.”
Guide Errors/ Omissions

Describe what was wrong (be specific), what the consequence might be, and how to correct it for the future

Why?… Corrects mistakes and forms foundation for improvement.

Example… “During the ear exam the patient seemed uncomfortable. Let’s go over holding the otoscope.”
Teach a General Principle

Symptoms, treatment options, or resources to look information up

Why?… Allows learning to be more easily transferred to other situations.

Examples… “Remember 10-15% people are carriers of strep, which can lead to false positive strep tests.”
Expectations

- Learner’s role in clinical care vs. education
- Format (active vs. passive)
- Comfort Level
- Follow-up (lab, x-rays)
Examples
Independent assessment

A. Traditional approach
   - Learner does history and PE
   - Reports overview and findings
   - Staff & learner – repeat history/PE
   - Disposition
   - Debriefing of learner

Is there a viable alternative?
Alternate Teaching Styles
Concurrent Visit

- Staff and Learners see patient together
- Learner directs the visit
- Open discussion, including patient/patients
- Consensus re assessment/disposition
The Unfamiliar Diagnosis/Treatment

- Example:
  Faculty encounters an unfamiliar diagnosis/treatment

  “Look that up and report back tomorrow”
  - Frequently no follow-up
  - Demonstrates lack of information
The Disruptive Encounter

- Example:
  Child/parent who are …
  - questioning
  - limited information / cooperation
  - hostile
The “Train Wreck” Learning Experience

- The unexpected response …
  - Patient with a “goiter”
  - Learner – “this is most likely thyroid cancer”
The “Bait and Switch” Learning Experience

Example:

- Newborn with Down’s syndrome who presented with duodenal atresia.
- Review findings/interventions

Parent who refuses surgery
Discuss the ethical dilemma
“Focused” Learning Experience

- Concomitant visit
- Apprentice HX and PE
- Learner has a focused role:
  - “Explain Immunization”
  - “Discuss anticipating guidance”
  - “Review medications/side effects”
  - “Outline lifestyle changes”
The “Observation Model”

- Example:
  - Learner performs HX and PE
  - Faculty observes/supervises the visit
  - Learner responsible for assessment and disposition
  - Feedback
Education “Fillers”
a.k.a. How to get your dictation done

- Patient handouts/letters
- Case studies
- Web search
- Games/puzzles
Providing Feedback

- Concurrent
- Summary
  - verbal
  - “score card”
Feedback Score Card

- Professionalism
  - Patient/parent interaction
  - Empathy
  - Respect

- History Taking
  - Focused
  - Relevant
  - Accurate and complete

- Physical Exam
  - Pertinent to diagnosis
  - Accurate

- Assessment
  - General knowledge
  - Reasonable discussion
  - Awareness of differential diagnosis, complications and comorbidities

- Management
  - Therapeutic options
  - Encouraging adherence vs. compliance
Providing Feedback

- Concurrent
- Summary
  - verbal
  - “score card”
- Using the learner as an assessor
  - Self evaluator
  - Faculty evaluation
  - Peer evaluation
- Patients/parents
Pitfalls in Clinical Teaching

- “Taking over” the case
- Inappropriate mini-lectures
- Insufficient “wait-time”
  
  3-5 sec to answer questions
Pitfalls in Clinical Teaching

- Pre-programmed answers
  - *What do you think is going on? Could it be an ulcer?*

- Rapid reward
  - Effectively shuts down the student’s thinking

- Pushing past ability
  - Persist in carrying the students beyond their understanding
The Teachable Moment

To teach is to touch a life forever

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Resources

- www.med.uiuc.edu/FacultyDev/ClinicalEnviron/OneMinutePreceptor.ppt
- www.hopkinsmedicine.org/fac_development/teaching/EffectiveambulatoryteachingDec2006
- www.stfm.org/PreDocConf/pd02/SUNSY2.PPT