A Discussion on Bedside Teaching

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- What are characteristics of a good teacher? What would the residents say? personality traits: enthusiasm, interest in teaching, approachability (create a safe learning environment) practical skills: knowledge, clinical ability, organizational (time mgmt) skills
- 2. What are obstacles to teaching—Time Management (for the teacher and the learner) Being efficient in the running the ER and being an efficient teacher—What strategies have worked for you? When do you teach?—finding the right time, deferring the discussion to that time
- 3. Learner's perception: Framing (labeling) behavior: *Give two examples of the same case and compare* Say, "the teaching point is," "the take home message is," "Do you have any questions about [disease, C.C]" Learner's obligation to learn something on every case, and teacher's obligation to teach on every case
- 4. How do we teach: Teaching Scripts: *Define and give/solicit an example* Limit each case to one teaching point/script (*why?*): *Create a list of examples for a case of Chest Pain*
- 5. What to teach: Must be useful/practical/pertinent (example: *What is your goal for teaching rotators?*) *How do you decide what to teach?*

By year of training/time of year (ie. anticipating learner needs): *What would you teach an intern about the Chest Pain case? What would you teach a student? What about a third year?* By asking the learner what they'd like to learn (*give example*)

By assessing (diagnosing) the individual learner—must explore knowledge and skills of learner

Direct Observation (ie. spying)—great for knowledge, communication skills, physical exam, etc. The SO<u>A</u>P note/presentation (follow their reasoning)

"One Minute Preceptor" Micro-skills Model (see reference below)

- 1) Get a commitment
- 2) Probe for supporting evidence
- 3) Teach general[izable] rules
- 4) Reinforce what was done right
- 5) Correct mistakes

6. Teaching Methods:

Socratic Method vs. Mini lecturing (*why*?—being invested in the answer will help them retain the info.) Use of leading questions (*Give example*)

Use open-ended questions (define, why?); List examples of good open ended questions*

Role Modeling—esp. for behaviors (clinical judgement, decision making, communication skills, pt. rapport, teamwork, values)

Demonstration (examination and procedural skills)

7. Principles of Feedback: *Why is this important? What are some approaches that have worked for you?* Give it frequently, be specific, be non-judgmental, use Feedback Sandwich (give example)

*Open ended questions:
What is your thinking on this patient?
What is your Differential Diagnosis?
What led you to that Diagnosis?
Are there any other questions/physical exam findings you want to go back and find out?
Why did you want to order that test/medication/treatment?
What would you do if that test/consultant/treatment was unavailable?
What else did you consider and what kept you from that choice?
Who would you admit with this diagnosis?
What complications would you worry about with this diagnosis?

What if the case was [different in this way]?

Read the "One Minute Preceptor" Article—it's a well written, simple method. I have copies for you if you want— Neher JO, et.al. A Five-Step "Microskills" Model of Clinical Teaching. J Am Board Fam Pract 1992; 5:419-24.



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Objectives

- List characteristics of a good teacher.
- Propose strategies for time management. Create learner's perceptions by framing
- Create learner's perceptions by framing behavior.
- Define teaching scripts and list examples.
- Evaluate what to teach based on strategies of learner assessment.
- Compare and contrast various teaching methods.
- Discuss Principles of Feedback.

Characteristics of a Good Teacher? What would the residents say?

Personality Traits

- Enthusiasm
- Interest in Teaching
- Approachability (create a safe learning environment)
- Practical Skills
- Knowledge
- Clinical Ability
- Organizational
 - (Time Mgmt) Skills

Obstacles to Teaching? Time Management

- Efficient in Running the ER
- Efficient in Teaching

What Strategies Have Worked for You?

Obstacles to Teaching? Time Management

When do you teach?

- Finding the right time
- Deferring Discussion to that Time – After We Stabilize the Patient
 - After Rounds at the End of the Shift
 - Read and We'll Talk Afterwards/Tomorrow

Learner's Perception: Framing (labeling) Behavior

Telling Residents when they are "Learning" and not just "Working" during their Shifts.

Say:

- "The Teaching Point is..."
- "The Take-Home Message is..."
- "Do You have any Questions about [chief complaint, disease, etc.]

Learner's Perception:

Learner's Obligation to Learn on Every CaseTeacher's Obligation to Teach on Every Case

How Do We Teach? Teaching Scripts

Your mental "file cabinet" of teaching points.

- Ottawa Ankle Rules
- How to Read a Chest X-Ray
- TPA indications and contraindications
- How to Document this Chart as a Level 5

How Do We Teach? Teaching Scripts

• Limit One Teaching Point per Case

Why?

- Avoid "Information Overload"
 more learner retention
- More Time Efficient
- There will be another patient like this one to go over the other teaching points later.

How Do We Teach? Example: List some Potential Teaching Scripts for a Patient with Chest Pain

What to Teach?

Must Be:

- Useful
- Practical
 - Pertinent

What is your goal for teaching rotating residents?

How Do You Decide What to Teach?

Anticipated Learner Needs (by Year of Training)

- For the Patient with Chest Pain, which Script would you Teach the:
 - Intern?
 - PGY 3?
 - Medical Student? (In August? In April?)

How Do You Decide What to Teach?

Ask the Learner What they'd like to Discuss.

"For this Asthma Patient, we can talk about:"

- Steroids in Asthma
- Broncho-Dilators in Status-Asthmaticus
- Discharge Criteria for Asthma

"What would you like to talk about?"

How Do You Decide What to Teach?

Assessing (Diagnosing) the Individual Learner Must Explore their Knowledge and Skills

- The SOAP Note/Presentation
 - Follow their Reasoning
- Direct Observation (ie. Spying on Them)
 - Knowledge
 - Communication Skills
 - Physical Exam

How Do You Decide What to Teach?

"The One Minute Preceptor" Micro Skills Mode

- Get a Commitment
- Probe for Supporting Evidence
- Teach General[izable] Rules
- Reinforce What Was Done Right
- Correct Mistakes

Teaching Methods

Socratic Method—Questions, Discussion (vs. Mini-Lecturing) Why?

- Use Leading Questions. Example?
- Use Open Ended Questions. Why?

Teaching Methods Top 10 Open Ended Questions:

- What is your thinking on this patient?
- What is your Differential Diagnosis
- What led you to that diagnosis?
- Are there any other questions/physical exam findings you want to go back and find out?
- Why did you want to order that test/medication/treatment?

Teaching Methods Top 10 Open Ended Questions:

- What would you do if that test/ consultation/treatment was unavailable?
- What else did you consider and what kept you from that choice?
- Who would you admit with this diagnosis?
- What complications would you worry about with this diagnosis?
- What if the case was [different in this way]?

Teaching Methods

Role Modeling (esp. for Behaviors)

- Clinical Judgement
- Decision Making
- Communication Skills
- Patient Rapport
- Teamwork
- Values

Teaching Methods

Demonstration

- Physical Examination
- Procedural Skills

Principles of Feedback

- Why is Feedback Important?
- What are some Approaches that have Worked for you?

Principles of Feedback

- Give it Frequently
- Be Specific
- Use the "Feedback Sandwich"
 - Start Positive
 - then Give Negatives
 - End Positive
- Be Non-Judgmental

Summary

- Use time management strategies to be an organized, efficient teacher.
- Let learners know when they are being taught by framing (labeling) behavior.
- Teach one (and only one) teaching point on every patient by using teaching scripts.
- Decide what to teach based on assessing (diagnosing) your learner's needs.
- Teach by using open ended questions, discussion, role modeling and demonstration. Limit mini-lecturing.
- Give specific, non-judgmental feedback frequently.

