Student-Centered Learning & Patient-Centered Care: Using Clinical Presentation in UGME

Presented by
Lisa R. Chun, DO, MS, FNAOME
Associate Professor
OMM CUSOM

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Disclosure

- There is no interest in selling a technology, program, product, and/or service to CME/CE professionals.
- There are no financial relationships.
- The content of this presentation does not relate to any product of a commercial interest.
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As post-graduate medical education undergoes changes to unified GME accreditation, there is a need for the osteopathic profession to continue to evolve its definition of osteopathic distinctiveness.

Examples of curricular and extra-curricular peer and near-peer taught programs will be given that develop first and second year medical students to:

1. Advocate for the use of OMT in the appropriate clinical setting by advancing the utilization of OMM/OPP in the diagnosis and treatment of patients and its recognition as a contributing medical therapy among physicians, regulators, payers and patients

2. Demonstrate the ability to explain to non-osteopathic health professionals and patients the indications and benefits of osteopathic medicine and manipulative therapies, including the clinical indications for its application and risks.
In the 2014-15 academic year, more that 20% of US medical students are being educated in osteopathic medical colleges.

30 accredited colleges of osteopathic medicine delivered in 42 teaching locations in 28 states. More colleges and campuses are currently being started and considered-New Mexico, Texas, Arkansas, Alabama.

Current student population-millennial generation being taught by basic science and clinical faculty spanning several generations.

The millennial learner values: information, relevance, timeliness, and social interaction, use of technology.
David Cook

Stated that a balance of learner-centered and patient-centered education and care is needed. His rationale was that education is learned by the student and therefore needs to meet their requirements and needs.\textsuperscript{8, 9}
Millenial Learners

**Learning Preference**
- Individual: 32%
- Small group: 63%
- Large group: 5%

**Preferred Learning Sense**
- Visual: 56%
- Tactile: 42%
- Auditory: 15%
- Olfactory: 0.0%
- Gustatory: 1%
- Combined: 32%
Extra-curricular
The project

As an extra-curricular activity of the Student American Academy of Osteopathy, student volunteers were asked to develop a short presentation that integrated osteopathic thought and osteopathic manipulative medicine into a clinical scenario.

Parameters:

- On average, 50 minute presentation and lab for 4 month period
- Target audience first and second year students in the fall semester; number of participants 16
- Given clinical conditions
Participant Results

92% either agreed or strongly agreed

7% answered “neutral”
Participant Results

97% either agreed or strongly agreed
Participant Results

The session helped me to integrate my osteopathic knowledge and skills

75% either agreed or strongly agreed
25% answered “neutral”
Participant Results

I would recommend the experience to another osteopathic medical student

94% either agree or strongly agreed
Participant Results

I am more likely to use osteopathic manipulative medicine as a result of this experience

- 62% either agreed or strongly agreed
- 39% answered “neutral”
Participant Results

The session increased my osteopathic palpatory diagnostic and treatment skills

77% either agreed or strongly agreed
19% replied “neutral”
Participant Results

75% agreed or strongly agreed
15% replies “neutral”
Participant Results

I am more confident in explaining osteopathic concepts and treatments to non-osteopathic personnel

75% agreed or strongly agreed
Student Presenter Comments

- I am more confident in explaining osteopathic concepts and treatments to non-osteopathic personnel
  
  100% strongly agreed

- The experience helped me integrate and develop my osteopathic knowledge and application to clinical situations
  
  100% strongly agreed

- The experience helped me organize my thoughts and presentation of a clinical case
  
  100% strongly agreed
Conclusions

• The use of second year Teaching Assistants in Osteopathic Manipulative Medicine provides educational support for first and second year medical students.

• Benefits were obtained from both classes.

• Early in osteopathic medical education, students are able to apply clinical correlation to basic osteopathic concepts.

• The social and educational congruence seen in other undergraduate peer and near-peer teaching assistant programs apply to this pilot for osteopathic manipulative medicine.
Limitations

- Relatively small sample size
- Relatively short pilot period
- Pilot period in the first semester for OMS I and the third semester for OMS II
- Presenter participants were self-selected and highly interested in OMM/OPP
Resources


Resources


Various schools have commonly used student presented cases during the clinical rotations of the third and fourth years. Presentation to an attending or supervising resident allows for development of organization of thought, integration and filtering of relevant material, and in certain situations development into a scholarly project.

These patient cases can be developed into a poster or Powerpoint presentation that can be shared and allows the learner the opportunity to obtain feedback from multiple experts and sources.

Review of the literature also shows that some clinical cases are co-authored by students.
Curricular

Outcomes:

- Clinical integration of basic osteopathic philosophy and sciences
- Clinically relevant
- Opportunities for feedback from multiple faculty of different specialties and experience levels
- Organization of student thought
- Use of multiple learning modalities
Curricular

Outcomes:

- Research of the current literature
- Practice of oral clinical case presentation skills
- Practice of powerpoint presentation preparation and use
- Student-centered, self-learning activity