Innovative Instructional Models for Undergraduate Medical Education

AACOM
Washington DC
UNTHSC Reynolds IGET-IT Next Steps

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UNTHSC Reynolds IGET-IT Next Steps Background

University of North Texas, Health Science Center Est. 1970
Cultural District Fort Worth Texas
TCOM*, Biomedical Sci., Public Health, Health Prof, Pharm

*Texas College of Osteopathic Medicine, Fort Worth, TX
Known for training physicians in primary and rural medicine
900+ students, 259 FT faculty, 650 PT faculty
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Background

Learning Objective for the presentation
• An instructional method to develop medical students’ ability to facilitate end of life discussions

Instructional methodology
Generative Strategies

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Research

Aging & Health Care Survey (n=805)
Pre- and Post- Survey / 4th Year students
Decline in comfort discussing end of life issues
Pre-test 4.20 / Post-test 3.59, (p<0.001)

Essays from the clerkship
Common themes - difficulty identifying their role in the death experience
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• Didactic was implemented into the clerkship
• Learning objectives
  • Provide knowledge about ethical challenges / emotional stress
  • Develop emotional awareness associated with grief
  • Develop ability to respond personally / professionally
  • Identify and utilize available community resources
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Generative Strategies
Adult learning theory
Integration of existing knowledge with new
Methods used
summarizing, questioning, self-regulating
learner responsibility for processing
internal and external connections
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Instructional Design

Two 75-90 minute sessions

Small groups (10-14 students)

Preceded by self-study / followed by lecture

Discussion, reflection and personal integration

Faculty facilitation / written surveys
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- Reflective essays used for discussion
  - Topics on death and dying
  - Observations on the
    - Physicians role
    - Patient
    - Patients family
Assessment

Pre-clerkship students reported an average of 1.97 or less-than some ability on end-of-life topics.

Post-clerkship scores increased over the four year period to an average of 3.06 or significant ability.

Limitations

Results are drawn from a self-report survey.
Didactic Session using Generative Strategies
• Facilitated discussion
• Reflective Writing

Limitations
Recommendations
### Pre and Post Survey Averages Over Four Years

<table>
<thead>
<tr>
<th>Event</th>
<th>Pre-Survey</th>
<th>Post-Survey</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medication Reviews</td>
<td>2.27</td>
<td>3.01</td>
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<tr>
<td>Geriatric Syndromes</td>
<td>2.35</td>
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<td>Osteopathic Principles</td>
<td>2.20</td>
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<td>Community Resources</td>
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<tr>
<td>Neuropsychological Testing</td>
<td>2.13</td>
<td>3.14</td>
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<tr>
<td>End of Life Care</td>
<td>1.97</td>
<td>3.06</td>
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<tr>
<td>Continuum of Care</td>
<td>2.04</td>
<td>3.07</td>
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</tbody>
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*Note: The chart above compares the pre and post survey averages for various events over a four-year period.*

