MS4 Medical Teaching

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“Not every scholar can keep up with developments in his or her field, maintain an enthusiastic attitude toward learning and inspire others with that enthusiasm. Those who can, teach.”

**Proverbs About Medical Education**

Good teachers are born not made.

**Disagree/Neutral /Agree**

No, everyone can & does teach. You can do it.

Not a divine gift or innate ability that you have no control over (Weimer, 1990)

Rather there is research about how the attributes of good teaching can be developed.

- Understanding of teaching & learning
- Skill with organizing & presenting material
- Attitude reflecting the purpose to teach students, not content.

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**Why do they want 4th years to teach the 2nd years?**

1. Students at a level close to the “teacher’s rank” have an easier recall of what is known by the students & what needs to be learned (Edwards & Marier, 1988)

2. Students can learn from students as teachers (Haist et al., 1998)

3. Residents must be prepared for their roles as teachers & evaluators of medical students (LCME, 2000) and students, through sub-internships need to prepare for their role as interns in the formal medical school curriculum (APM, 1998)
“Knowledge is a necessary, but not sufficient, condition for good teaching.”


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**Proverbs About Medical Education**

**As long as you know it, you can teach it.**

Disagree/Neutral/Agree

No, good students are not necessarily the best teachers.

“Lack of Correlation of Resident’s Academic Performance & Teaching Skills” showed resident training exams were not consistent with faculty ratings nor student evaluations.


Rather - medical students taught by faculty or residents in the top 20% highest teaching evaluations improved their pre-clerkship to post-clerkship NMBE scores the most.

What do students look for in a teacher?

“Clinical Teaching Reexamined” n=265 medical students were consistent with 2 main categories:

Intellectual Excitement & Clarity – enthusiastic, dynamic, clear, understandable explanations, practical applications, let students practice, summarized major points, & answered questions carefully.

Interpersonal Rapport: correct w/out belittling, genuinely interested in students, prepared for time with students, were accessible to students.


Proverbs About Medical Education

Teaching is an art, not a science.

Disagree/Neutral/Agree

Actually, it’s both.

2 types of individual skill – natural & developed – and institutional support are critical to good teaching (Woolfolk, Education Psychology 2001).

Requires caring, creativity and knowledge & skill and support for teaching.

The question is how can one develop & improve as a teacher?

• Self-awareness about your strengths
• Investigating instructional methods and apply to the content
• Understand the students’ goals & framework for learning

McKeachie et al. Teaching & Learning in the Classroom 1990.

Beverly Henry, Ph.D., 2002
Proverbs About Medical Education

Medical education is basically, “see one, do one, teach one.”

Disagree/Neutral/Agree

It’s a little more complicated than that.

Imitation – practice with feedback – show how to do it

“Giving Feedback in Medical Education” offers suggested intentions, techniques, & examples for improving feedback.

- Orientation & climate: prepare the person for the session
- Elicitation: ask the person for self-assessment
- Diagnosis & feedback: decide where improvement is needed & how much feedback to give
- Improvement plan: develop specific strategies
- Application: apply strategies to real situation
- Review: check person understands & agrees with plan


How does learning to teach fit into medical training?

Teaching progresses to include student development & evaluation

Beverly Henry, Ph.D., 2002

“A doctor is a teacher. Healthcare professionals educate their patients, students and colleagues as an integral part of their professional lives, yet education is typically not addressed during any part of their training.”

Elizabeth Armstrong, Ph.D., Dr. Med. H.c.
Director of Education Programs
Harvard Medical International
Proverbs About Medical Education

To teach is to learn twice.  Disagree/Neutral/Agree

Yes, preparing to teach can make better students.

“The Assessment of Clinical Skills/Competence/Performance” shows the framework for clinical assessment as:

DOES (Action)
SHOWS HOW (Performance)
KNOWS HOW (Competence)
KNOWS (Knowledge)


How has teaching subjects helped to learn them better?

“To Teach is to Learn Twice” when residents were required to present material in peer teaching situations, the impact on their learning was enhanced.


Proverbs About Medical Education

There is no teaching without learning.  Disagree/Neutral/Agree

Yes, think about what are signs that teaching was effective.

“Making the Continuing Medical Education Lecture Effective” from the learner’s eyes – most important features are:

- clarity of information & visibility of materials (slides)
- relevance of the material to the audience
- speaker’s ability to identify key issues, engage the audience, & present material clearly & with animation


If no one learns, did teaching happen?

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Proverbs About Medical Education

IN SUMMARY

Good teachers are made &

it takes more than telling what you know to teach.

Teaching is both an art & a science and important steps in medicine and in education are:

*observation*imitation*practice*feedback*teaching*

Teaching does involve learning for the teacher & the learner–& the learner’s progress tells you whether teaching happened.

DOCTOR         DOCERE         TO TEACH

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