Effective Learning in an Ambulatory Family Medicine Clerkship: A Qualitative Study of Medical Student Mid-point Feedback

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**Research** suggests explaining exams and their relevance. Teaching proper methods to examine MSK joints helps students focus. He also helps me take a more focused HPI/allows me to do procedures together leveraging learning at all.

**Methods**

**Data Collection**

- VCU 3rd-year family medicine clerkship mid-point feedback forms from 2012-2014
- N=314 student feedback forms

**Statistical Data Analysis**

- Independent data review
- Researchers then shared impressions, discussed key themes and developed code list
- Each code described by a short phrase, given a definition and an "exemplar" response sample
- Definitions of codes were refined or merged to avoid redundancy, then grouped into themes after all responses were coded.

**Results**

**Top Ten Code Names, Definitions and Sample Comments**

<table>
<thead>
<tr>
<th>Code Name</th>
<th>Code Definition</th>
<th>Sample Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Autonomy / Independence</td>
<td>Seeing the patient first on his or her own</td>
<td>Allowing me to see patients on my own and then present cases</td>
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<tr>
<td></td>
<td></td>
<td>Allowing me autonomy to see patients on my own, come up with differential diagnoses and work on an appropriate plan</td>
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<td>Encouraging me to participate independently</td>
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<tr>
<td>Stimulating Critical Thinking</td>
<td>Preceptor stimulates student thinking and involvement in the patient case</td>
<td>He also helps me take a more focused HP/allows me to do procedures together</td>
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<td></td>
<td></td>
<td>Showing the big picture and pointing out new connections in the DDX</td>
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<td></td>
<td></td>
<td>Also helped me work through management options and challenged me to consider further differences, considerations</td>
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<tr>
<td>Feedback</td>
<td>Specific feedback to each patient encounter</td>
<td>I have received lots of constructive feedback to improve my PES, clinical skills and patient presentations</td>
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<tr>
<td></td>
<td>Balance of autonomy and guidance and constructive criticism</td>
<td>Constructive criticism is very appreciated!!</td>
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<tr>
<td></td>
<td></td>
<td>Listening to my plans and adjusting them accordingly and most importantly explaining why!</td>
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<tr>
<td>Patient / Case-Specific Teaching</td>
<td>Help the student focus on key learning issues in the patient with leveraging learning at all opportunities</td>
<td>Teaching me about diseases, complications, &quot;pearls&quot;, questions that might be pertinent to ask a particular patient</td>
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<td>Finding specific teaching points in patient encounters</td>
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<td></td>
<td></td>
<td>Reviewing relevant details, teaching me practical aspects of medicine, always asking questions related to case</td>
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<tr>
<td>Sharing Thought Processes</td>
<td>Walking through the plan, preceptor taking it out loud</td>
<td>Great at explaining his plan and concerns to me/patient</td>
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<td></td>
<td>Explaining thought process behind DDX and appropriate steps to diagnose and treat</td>
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<td></td>
<td></td>
<td>Teaching after each patient, analyzing physical findings and thought process was out loud – asking about my thought process</td>
</tr>
</tbody>
</table>

**“Step Up to Learning”**

- Making student jump in/challenging/pushing the student, more than just "asking"
- Encouraging further research into clinical questions
- Testing my knowledge, asking me how to treat the patient and what to treat with
- Continuously engaging and challenging me, sending me in to work with challenging patients from medical and personality perspective

**Hands-on Practice Opportunities**

- Patient exposure
- Providing lots of opportunities for patient interaction, presentations, and note writing
- Showing and allowing me to practice special physical exam maneuvers, work within a new EMR system to write notes, participate in lab work, and encouraging hands-on experience
- Exposing me to different patient encounters, explaining why we choose certain treatment, explaining what to ask during interviews

**Conducive Learning Environment**

- Non intimidating/accessible/non threatening
- Providing a safe and friendly environment to learn...
- Allowing me to set a comfortable pace of patients I see and respecting my HP

**Physical Exam Techniques**

- Actively showing exam techniques to the student in real patient care time
- ... showing aspects of physical exam that could be done in different ways...
- Showing me proper techniques for various exams, having me complete physical exams with her
- Explaining exams and there relevance. Teaching proper methods to examine msk joints

**Teaching Pharmacology**

- The preceptor explains use of medications
- Having me look up Rx doses, etc.
- Explaining possible complications, going over Rx options
- Guiding me along with the correct line of thinking in terms of diagnosis and treatment

**Practice Presenting Patients**

- Practice skills organizing patient presentations and thinking
- Giving feedback on my presenting style...
- Allowing me to practice my presentation skills...
- Allowing me to present frequently to improve with repetition

**References**