2019

Follow Up: Medical Rhetoric – Making the Case for Oral Presentations

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Goal:
- Oral case presentation skill is fundamental in clinical communication
- This skill is first developed in medical school pre-clinical training
- Continued development is often by “Trial and Error” – often without a formal curriculum

Proposal:
- Development of a new curriculum designed to:
  - Acknowledge the importance of this skill development
  - Create a method in building this skill mindfully

Method:
- During orientation, medical students receive a didactic titled: “Oral Presentation – Decoding the Attending Feedback and More” – Featuring these points:
  - The Values of a “Good Oral Presentation”
  - Key components & expectations
  - Common pitfalls
- Peer-to-Peer Feedback:
  - Peer evaluation forms were distributed to teams during their VA clerkship rotation (Figure 1)
  - Forms were anonymous but were identified by “Student A or B” & Team Assignment
  - Three evaluations were expected weekly for a total of 6 per half rotation; 12 total per block
  - Evaluations were collected at the midpoint and at the end of the rotation
  - Scoring was numeric with a total of 30 points possible for evaluation
  - Never – 1; Rarely – 2; Sometimes – 3; Often – 4; Always – 5
- RIME Feedback
  - Academic attendings at the VA reviewed feedback methods adopting the RIME nomenclature to improve specific feedback on oral presentations to their students

Discussion:
- Genesis for this project developed after VA academic attendings suggested students required further development on oral presentation skills
- Orientation presentation laid the groundwork well and was quickly adopted from the VA specific orientation to the main clerkship orientation
- Current peer-to-peer feedback data shows improvement in evaluation scores between collection blocks
- Improvement can not be completely linked to the start of this curriculum
- Strong emphasis on peer evaluations helped improve students’ self-awareness and promoted active reflection which may have helped in skill development

Follow Up:
- Reported feedback is non-specific and general – Further education on providing productive feedback may be warranted
- Peer evaluation sessions were not witnessed and some evaluation sets only had perfect scores calling into question their credibility
- Formalization of this reasonability may improve compliance and increase impact
- Students may benefit from a “de-briefing” at the end of their rotations to share any gained insights and experiences

Results:

| Total Number of Students: 64 | 1st Session: 94% |
| Total Evaluations: 409 | 2nd Session: 97% |
| Complete Data Sets: 46 | Total Comments: 524 |

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Rabia Qaiser MD & Patrick Fadden MD

Student Comments:
- Great job summarizing pertinent lab findings
- Can summarize a little more might be helpful
- Good concise summary
- General Remarks
- Specific Remarks
- Good direct quote from patient
- Great at PE findings
- May help to reframe chronology to feel more confident when presenting
- Includes pertinent values and provides commenting
- Thorough exam
- Don’t forget general appearance!

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