

RESIDENT AS TEACHER



7 Deadly Teaching Sins and How Residents Can Avoid Them

1. End each teaching session by asking, “Do you understand?”
 - Students will invariably say yes, and won’t feel that they can ask questions that reveal they don’t fully understand.
 - Instead, ask the student to demonstrate what they have learned or explain (“teach back”) what they know.
2. Don’t Give Feedback or say, “Just keep doing what you’re doing.”
 - Students want feedback and need feedback to improve. Explain what they are doing well, what needs to improve and how they should improve.
 - Ask – “Tell me how you think you are doing”
 - Tell – “This is where I think you could improve..”
 - Ask – “How will you make that happen?” or “How will you incorporate the advice I am giving you?”
3. Critique Personality instead of Behavior
 - Instead of saying “you are so disorganized,” say “your presentation today didn’t follow our standard SOAP format. Try it again using that format.”
4. Don’t Clarify What You Want Student to Learn
 - We all learn better when someone shares the objective from the start: “In the next 10 minutes I am going to explain how to develop a differential diagnosis for fever.”
5. Talk at the Student When You Teach
 - 3 minute rule: “Don’t talk for more than 3 minutes without asking the student to explain or demonstrate something.”
 - Try to have the student talk 10%-50% of the time.
6. Don’t make time to teach
 - Teach while you work, but also set aside time to spend with students and focus that time on specific learning goals.
 - Tip: “We’re really busy in clinic today. At 5:00 pm, I’d like you to choose one patient you’ve seen and present the patient to me.”
7. Be Bored with Teaching
 - Boredom is contagious. Show enthusiasm and engage.

Rewards of Teaching

Sometimes we all need to be reminded why we teach and why it is rewarding:

- You have a significant impact on a student's education and future career choice.
- You are closer to the student experience and remember more clearly what it was like, so you can help them in ways others cannot.
- Teaching has been shown to increase job satisfaction and lessen the likelihood of professional burnout over time.
- Teaching adds variety, intellectual stimulation, and contact with enthusiastic learners.
- Many patients admire and appreciate resident teachers.
- It is required by the ACGME.

Residents as Great Teachers

- **Think aloud.** Thinking aloud before, during, and after patient visits provides a glimpse into your mental processing and allows a student to begin to understand why certain diagnoses are entertained or treatment decisions are made.
- Know the teaching objectives for the course and the expectations for diagnoses and procedures that students should see on that rotation. Students expect that you know these important course requirements, and you can help them accomplish the objectives and guide them in identifying appropriate patients.
- Role model professionalism. Students learn from you regardless of whether there is an explicit attempt to teach.
- Prepare appropriate teaching points. Before entering a patient room you can take a moment to consider high-yield teaching points appropriate to the level of the student.
- Teach during downtime. Even on busy days, it's possible to find moments of downtime to teach practical clinical skills or impart clinical pearls.
- Teach through patient education. While explaining a diagnosis or treatment to a patient, you can speak in a way that also teaches a student who is observing or participating in the visit.

The Teaching Physician

This resource is paid for by MUSC and provides development for teachers on preparation for learners, orienting the learner to objectives and expectations in a new setting, teaching strategies curriculum design, precepting principles, professionalism, health informatics, feedback models, and assessment of learners. Please access it and use it to enhance your teaching!!

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