

Facing Our Fears: Teaching at the Bedside

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Objectives

- Define the term “bedside teaching”
- Outline successes/opportunities for better bedside teaching
- Identify different learning activities to be used at the bedside
- Identify resources to improve our self-directed learning in this area

Definition

Definition

- Learning that occurs with the *actual patient* as the focus

Historical Perspective

- Hippocrates 1st two principles
 - Observe all
 - Study the patient not the disease

Historical Perspective

- Sylvius (1614-72) of Sylvian fissure fame
 - "My method (is to) lead my students by hand to the practice of medicine, taking them everyday to see patients in the public hospital, that they may hear the patient's symptoms and see their physical findings. Then I question the students as to what they have noted in their patients and about their thoughts and perceptions regarding the causes of the illness and the principles of treatment." (Whitman, 1990: 23)

Statistics

- 90 minute session
 - Median time spent in classroom : 69 minutes
 - Median time spent at bedside 2.5 minutes

Tremonti et al J Med Ed 1982

Good News!

- 2009 Gonzolo et al
- 27.7% time spent at bedside
- Case presentations at bedside <25% of the time
- 89% ≤ 2 physical exam skills taught/reviewed/day and 45% < 1/day

More Statistics

- Breakdown of those who prefer bedside rounds
 - Patients 85%
 - Attendings 35%
 - Students 4%
 - Residents 2%
- 48% thought had been given enough BST
- 100% thought best way to learn

Nair et al. Med Ed. 2009;31.

Benefits to Bedside Teaching: The Teacher

- Direct observation of clinical skills of learners
- Observing ability to interact with patient
- Role modeling
- Learning from our students

Benefits: The Students

- Role model
- Change of venue
- Practicing skills while being observed
- Feedback
- Teaching the teacher
- No medscape = all on same level

Successes

Obstacles to Bedside Teaching

- Time
- Patients not there
- Large group of learners
- Own discomfort

Why the Discomfort?

- Uncomfortable with our own skills
- Invasion of patient's privacy
- Cases are messy
- Overreliance on technology: what's the point?

Reasons NOT to Do Bedside Teaching

- Patient truly paranoid or delusional/psychotic
- Patient refuses
- Patient anxiety level

Overcoming Our Discomfort

- Read
- Practice
- Practice
- Practice

Practice: High Tech

- www.rale.ca
- http://www.texasheart.org/education/cme/explore/events/eventdetail_5469.cfm
- Mp3 audio
- www.clinicalskills.pitt.edu
- Nothing helpful on youtube or Google in terms of bedside teaching per se

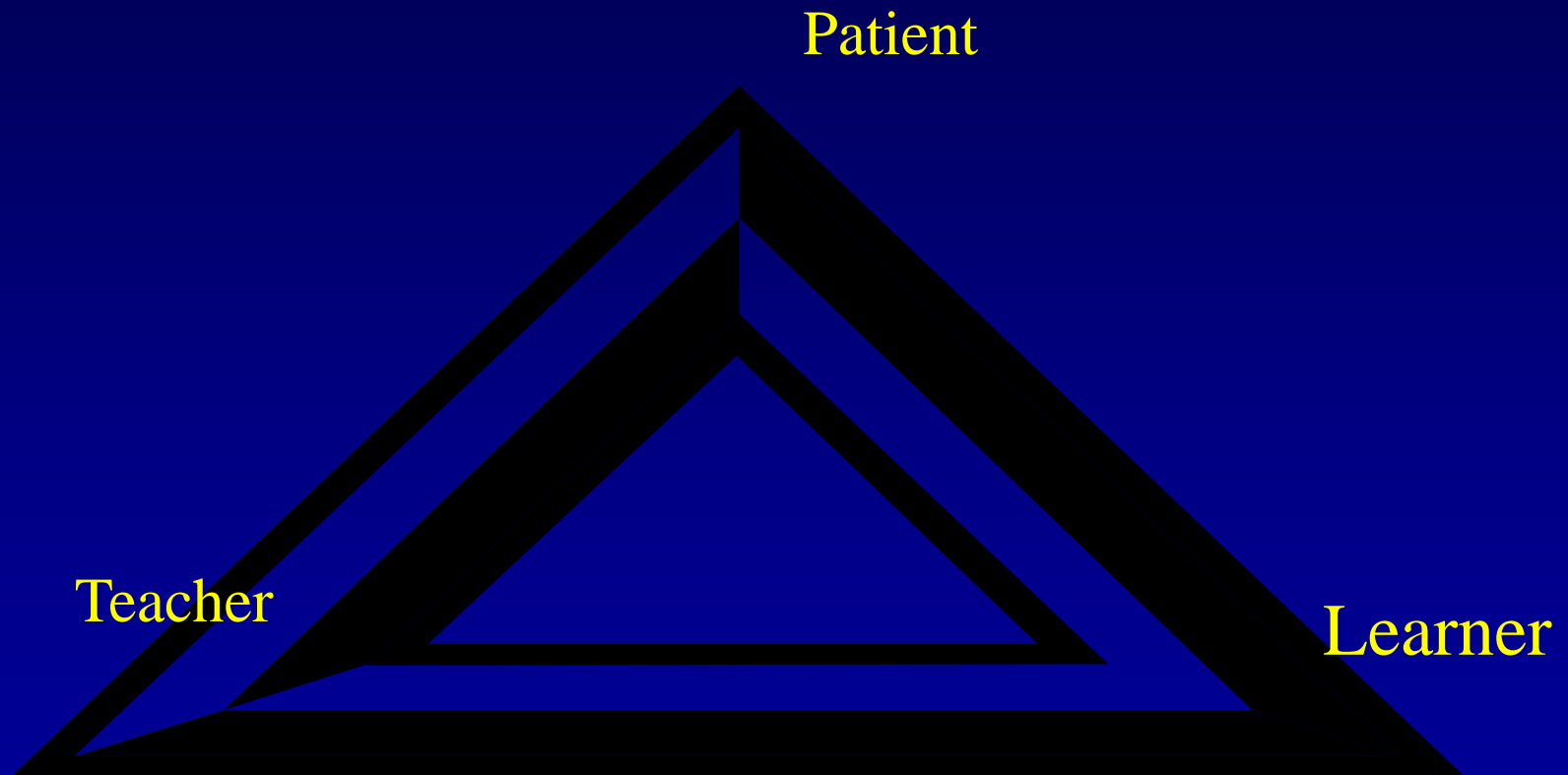
Practice: Low Tech

- Texts
- Rational Clinical Exam Series
- Tapes/CD's

Teaching Skills for the Encounter

- Guiding communication throughout the learning triad
- Demonstrating findings and how to elicit them

Learning Triad



Teaching Skills for the Encounter

- Supervise learner performance/give feedback
- Challenge learner interpretations
- Model professionalism

An Example of Bedside Teaching

Planning the Session

- Pre-planning
- Activities
- Post session discussion

Pre-Planning

- What do you hope to accomplish?
- What will you emphasize?
- How will your learners be engaged?
- Was bedside teaching successful?

Ende, J. JGIM 1997;12:s41-47.

Choosing Your Cases

- Call ahead
- Can't do every case → be selective

What is to be learned?

- Communication
- Perception
- Manual procedures
- Reasoning
- Management

Group Dynamics

- Do all students learn all skills?
- Overcoming difficulties
 - student vs. intern vs. resident role
 - comfort level with bedside teaching

Before You Enter: Negotiation

- Negotiate goal(s) of bedside session
- Negotiate roles
- Consider how to involve all members of the team

Options for Including Whole Team

- Tell them they will be expected to point out three physical findings on a patient the following day
- Ask more skilled learner demonstrate to others
- Ask learners to identify focus of bedside teaching or conduct rounds for others

Before You Enter: Patient-Centered Process

Explicit description

- Introduction
- Requesting permission to interview/examine/discuss
- Checking patient comfort level
- Involving the patient in the discussion
- Thanking patient at conclusion
- Patient feedback?!!!

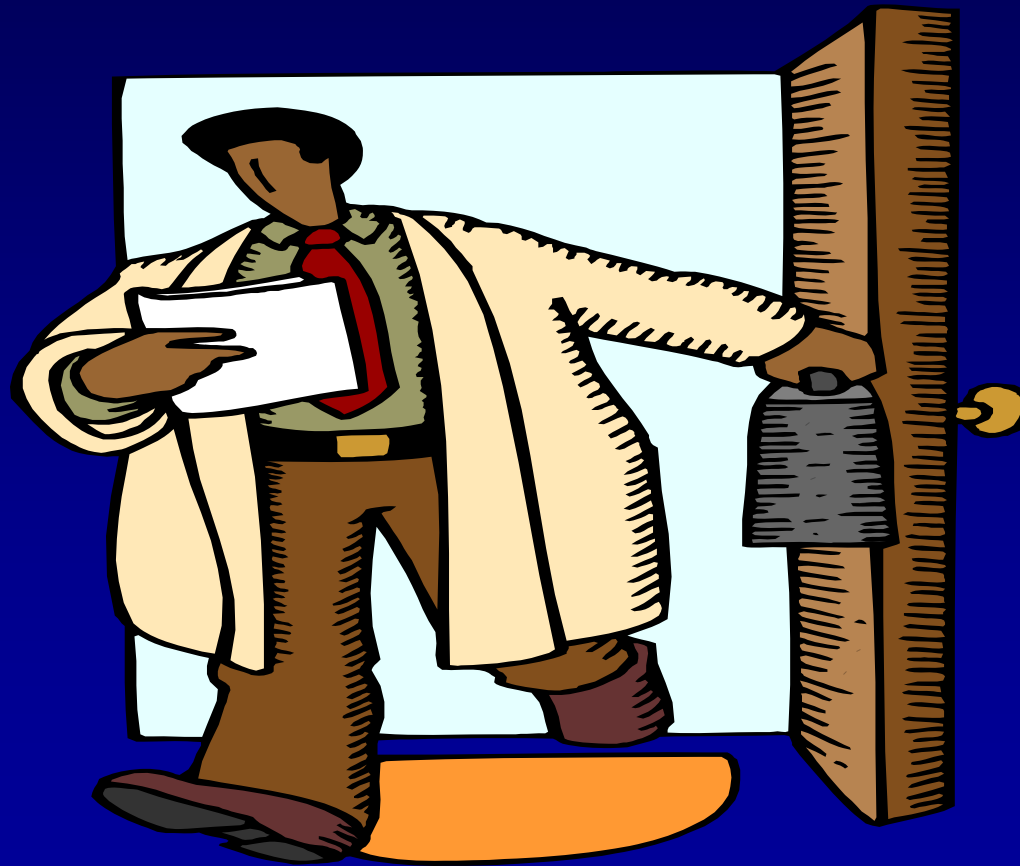
Before You Enter: Learning Ground Rules

- Bedside teaching is not punitive
- Rounding team is a learning community -- questions are encouraged by all including the patient
- No medspeak



“Correct. And in the case of a cardiac arrest, every second counts. Who can tell me why? Anyone? Clock’s ticking.”

Crossing the Threshold (yes you have to go in the room)



At the Bedside



What is Important to the Patient

Patient-Team

- Information exchange
- Bedside manner
- Evidence of caring
- Involvement in teaching
- Knowing the team

Team characteristics

- Team attributes
- Team collaboration/communication

Learning Activities: The Standards

- Interview skills
- Presenting the history
- Doctor/patient interaction

Learning Activities: The Standards

- Doctor/Patient interaction
 - nonverbal cues
 - verbal clues
 - role modeling

Learning Activities: The Standards

- Physical Exam
 - understand what they're looking for
 - technique
 - make sure they find the finding!

Learning Activities: Slightly Less Standard

- Discuss the patient's living arrangements/social history
- Walk the patient
- EBM
- Demonstrate how to say "I don't know" in front of a patient

EBM/Epidemiology

- Physical exam
- Likelihood Ratios

Activities: Off the Beaten Path But Still Learning

- “Deconstruct” the room

Deconstructing



Deconstructing

- How many reindeer?
- How antlers?
- What color is Santa's sack?
- Who authored the cartoon?

Deconstructing

- Identify all the restraints
- Identify all physical hazards in a room
- What was on the patient's bedside table?

Debriefing

Debriefing: Setting

- Private
- Immediate
- Learning climate
- Rules

Debriefing Skills: Teacher

- Control of session
- Reasoning
- Listening
- Feedback



"I expect you all to be independent, innovative, critical thinkers who will do exactly as I say!"

Evaluation

- Did you achieve what you set out to do?
- Did the students want to continue to learn?
- Knowledge, skills, attitudes
- Structured: Team Observed Structured
Bedside Assessment

Reflection

- A single encounter
- Bedside rounds as a whole
- Our teaching
 - Group
 - Individual

The Grand Finale

- 15 patients on service
- 7 new admissions, 8 previous patients
- AI, 2 medical students, 2 interns, resident
- Develop a bedside teaching plan

Summary

- Definition of bedside teaching
- Identified different learning activities that can occur at the bedside
- Provided resources for additional self directed learning