Rising Chiefs: Join Us

The second part of this session will involve small group activities.

Please sit in 5 groups of ~20 people to a group.

Please go to nearpod.com on your phone and stay tuned for join codes.
Not Your Typical Morning Report

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Goal

• Provide chief residents with effective skills to develop brief teaching sessions allowing for the development of clinical reasoning and board preparation
Objectives

• Apply the various modalities of the adult learning theory in creating a teaching session
• Interpret the various levels of expertise when creating teaching sessions aimed at multi-level learners
• Make use of the development of clinical reasoning skills in didactics
• Compile a selection of various modalities available in achieving effective development of clinical reasoning and board preparation
Roadmap

- Adult learning theories
- Bloom’s taxonomy of expertise
- Development of clinical reasoning
- Workshop on modalities
Appealing to the Adult Learner

- Knowledge
- Orientation
- Self-direction
- Experience
- Motivation
- Willingness
## Appealing to Different Learners

<table>
<thead>
<tr>
<th>Visual</th>
<th>Auditory</th>
<th>Read-Write</th>
<th>Kinesthetic</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pictures and images better than explanations</td>
<td>Prefer to hear the message or instructions</td>
<td>Prefer information displayed as words</td>
<td>Sense position and movement of skill or task</td>
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<tr>
<td>Create mental image</td>
<td>Talk through the process</td>
<td>Text-based input and output</td>
<td>Learn best in motion</td>
</tr>
<tr>
<td>Written directions with diagrams</td>
<td>Can recall verbal instructions</td>
<td>Manuals, reports, essays, written assignments</td>
<td>Prefer hands-on activities to didactic session</td>
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</tbody>
</table>
Setting the Stage for the Curriculum

• Set educational goals for morning report
  ✓ Develop critical thinking skills
  ✓ Board content review
  ✓ EBM review
  ✓ Increasing clinical knowledge

Goal Setting --- What's In It For Me?
Bloom’s Taxonomy: Creating Your Learning Objectives

- **Create**
  - Design, Assemble, Construct, Conjecture, Develop, Formulate, Author, investigate

- **Evaluate**
  - Select, Support, Value, Critique, Weigh

- **Analyze**
  - Compare, Contrast, Distinguish, Examine, Experiment, Question, Test
  - *expressed are made explicit*

- **Apply**
  - Schedule, Sketch

- **Understand**
  - Identify, Locate, Recognize, Report, Select, Translate
  - *and can make use of the material... without relating it to the material or seeing its fullest implications*

- **Remember**

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Armstrong. *Bloom’s Taxonomy*. Vanderbilt University Center for teaching.
Bloom’s Taxonomy: Your Learners Dynamic Knowledge

- Create
  - Differentiating, organizing, Attributing
  - Executing and Implementing
  - Interpreting, Exemplifying, Classifying, Summarizing, Inferring, Comparing, Explaining
  - Recognizing and recalling
- Evaluate
  - Generating, Planning, Producing
- Analyze
- Apply
  - Checking and Critiquing
- Understand
- Remember

Armstrong. *Bloom’s Taxonomy*. Vanderbilt University Center for teaching.
The Clinical Teacher

“Must diagnose both the patient’s clinical problem and the learner’s ability and skill”

Clinical Diagnostic Reasoning Process

- **Patient’s story**
- **Data acquisition**
- **Accurate “problem representation”**
- **Generation of hypothesis**
- **Search for and selection of illness script**
- **Diagnosis**

- **KNOWLEDGE**
- **CONTEXT**
- **EXPERIENCE**

Illness Script Formation

• Characterization of the problem
  – Facilitates retrieval of pertinent information from memory

• Semantic qualifiers
  – Paired, opposing descriptors that can be used to compare and contrast diagnostic considerations
    • *Defining and discriminating features*
Illness Scripts

Store and recall knowledge as illness scripts that are connected to problem representations

\[ \downarrow \]

Representations trigger clinical memory

✓ Permit the related knowledge to be accessible for reasoning

\[ \downarrow \]

✓ Knowledge has a predictable structure

- PREDISPOSING CONDITIONS
- PATHOPHYSIOLOGICAL INSULT
- CLINICAL CONSEQUENCES

Bowen. ‘Educational Strategies to Promote clinical Diagnostic Reasoning’. 
Encouraging Active Learning

• Small group sessions
• Competition
• Interactive Presentation Tools/Apps
  ➢ nearpod.com, polleverywhere.com
  ➢ One-on-one questioning
  ➢ Real-time feedback
Morning Report at CCMC and St. Chris

- Monday—Thursday
  - 30 minutes in the morning
- Led by one Chief Resident and Attending
- Typically Case-based
- Approximately 40-50 attendees:
  - Medical Students
  - PGY-1s, PGY-2s, PGY-3s
  - Chief Residents
  - Attendings
Let’s trial this together!

5 Styles
✓ Progressive
✓ Hodgepodge
✓ Teachback: EBM
✓ McChief Rounds
✓ Morning Report for the 21st Century
References

• Armstrong. Bloom’s Taxonomy. Vanderbilt University Center for teaching.
• Parrino TVillanueva A The principles and practice of morning report. JAMA. 1986;256730- 733