

An innovated PBL in improving the abilities of self-directed learning and clinical application: for obstetric and gynecologic clerkship

Shen CJ, Long CU, Lai CS, Chan TF
Kaohsiung Medical University Hospital, Kaohsiung, Taiwan

Objective

Problem-based learning (PBL) has widely adopted in medical curricula for early years training in Taiwan. In traditional PBL, students capture the information from paper-based scenario and discuss in a group setting. The goal of PBL included development of clinical reasoning and self-directed learning, increased motivation for learning and refining acquiring knowledge. However PBL in pre-clinical has the remarkable lack of clinical attachments, so the clinical reasoning could not be fully developed. First, the interval between pre-clinical PBL and clinical year is too long, so that the student can hardly apply the knowledge and skills to real patients immediately. Second, the clinical cues in PBL scenarios are delivered passively, so students can not perform clinical skills in this kind of setting. We design the modified model of PBL- the standardpatient-based PBL(SPPBL) to improved the problem of cross over between PBL and clinical attachments. In SPPBL, standard patient involved the whole learning process. Students take medical history, perform physical examination and provide patient education on standard patient. These clinical skills are essential for clinical reasoning and could not be trained well in traditional PBL.

Methods

Participants include 200 year 5 medical students. Except basic gynecology/obstetrics clerkship curricula, some core lectures will be replaced with SPPBL in six-weeks rotation programs. Standard patient simulation may present case history in response to questioning by students and undergo a limited physical examination at the student's direction. In certain scenarios, they may also assist students in developing the communication and clinical skills. The SPPBL model takes the principles of PBL and applies the students to learning during clinical attachments. The tutors facilitate group discussion and ensure that the group achieves the appropriate learning objectives. But the tutors do not give a lecture to the students. Evaluation of SP-PBL model consists of formative and summative assessments(OSCE) by tutor, peer evaluation, questionnaires and focus groups.

Results

The students found SPPBL a positive learning experience and achieved better learning outcome. SPPBL integrated basic and clinical knowledge, clinical experiences and skills more efficiently.

Conclusion

SPPBL improved self-directed learning and offered better clinical attachment than traditional gynecology and obstetrics clerkship curriculum.