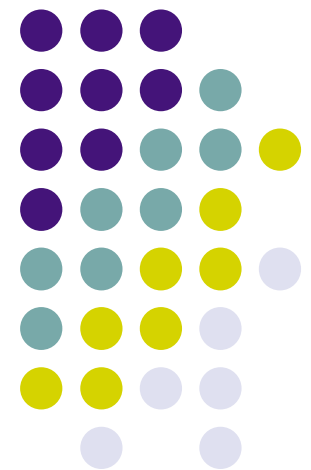


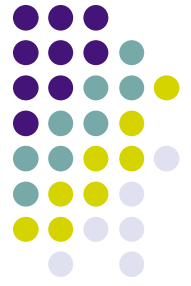
# Residents as Teachers

## Seven Mistakes to Avoid In Teaching Medical Students

Jerry Short, Ph.D.  
Associate Dean  
School of Medicine  
University of Virginia

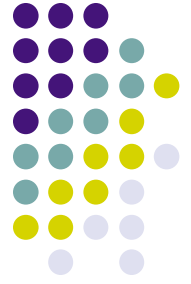


# Mistake 1: Just ask, “Do you understand?”

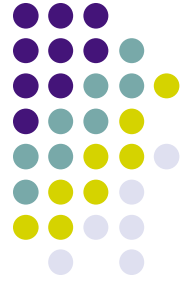


- Some residents end a teaching session by asking students, “Do you understand?”
- Most students, no matter how confused, will answer, “Yes.”
- A better way to end a teaching session is to ask the students to demonstrate that they understand.

# Who's the better teacher, Resident A or Resident B?



- Resident A: “Is all that clear?”  
Student: “Yeah.”
  
- Resident B: “Here’s another x-ray. Read it for me.”  
Student: “Well, here it looks like...”



## Answer: Resident B

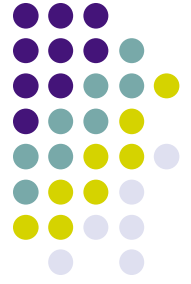
- Avoid Mistake 1 by asking your student to show you that they know what you have taught.
  - Present a similar case for them to analyze.
  - Ask them to perform the procedure you've just taught them.
  - Ask them to summarize the concept you have just taught them.

## Mistake 2. Give no feedback

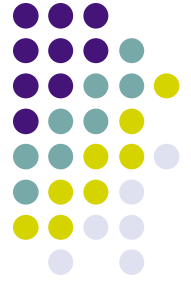


- Students sometime say, “I kept asking if I was doing OK and everyone said, ‘Sure, just keep doing what you’re doing.’ Then I got a B in the clerkship. I’m angry as hell.”
- Even if students practice and practice, they will not improve -- unless they get feedback about their performance.

# Mistake 2: Give no feedback



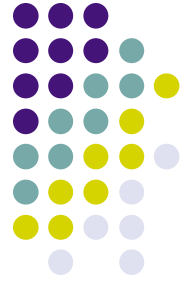
- Critical feedback is most effective when it is sandwiched between 2 positive comments:
  - Positive: You're good about being here in the clinic when I need you.
  - Critical: However, you were late this morning for rounds. What can you do in the future?
  - Positive: By the way, that article you brought in yesterday was really helpful.
- The feedback sandwich makes the student less defensive and more willing to try to change.



# Who's the better teacher?

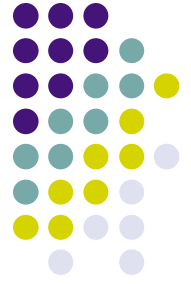
- Student: How am I doing?  
**Resident A:** I like the way you often ask me if you can help me. However, you could sharpen your presentations by looking me in the eye and talking louder...I like the way you really get to know your patients
- Student: How am I doing?  
**Resident B :** Fine. Keep it up.

# Mistake 3. Criticize personality, not behavior



- It's easier for most students to change their behavior than their personality.
- Therefore, give specific feedback about what students can change.
  - Poor: You're too shy. (Personality)
  - Better: Try to ask one question after the lecture today. (Behavior)



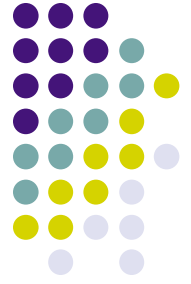


# Who is the better teacher?

- Resident A: You are so disorganized.
- Resident B: Your report today didn't follow our standard SOAP format. Try it again using that format.

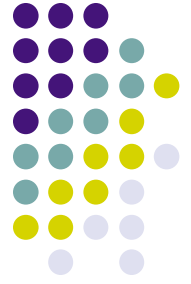
## Answer: Resident B

Try to describe the student's behavior rather than his personality traits. Behaviors are easier for students to change.



- Student's Personality Trait
  - Lazy
  - Unmotivated
  - Incompetent
  - Passive aggressive
  - Defensive
- Student's Behavior
  - Not here when needed.
  - Does not volunteer when asked.
  - Does not know subject.
  - Does not carry out assigned tasks.
  - Does not accept criticism.

# Review: The first three mistakes

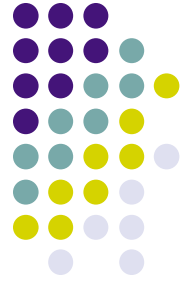


1. Asking “Do you understand?”
2. Giving no feedback.
3. Giving feedback about personality, not behavior.

## Getting it right:

1. Ask students to demonstrate their knowledge.
2. Give a feedback sandwich: positive, critical, positive.
3. Give feedback about behavior, not personality

# Case: Which resident is teaching better?

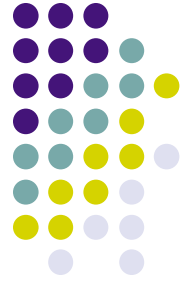


## Resident A

You're doing a fine job, but you should be a little more aggressive in getting the work done. Are you clear about how to do this procedure?

## Resident B

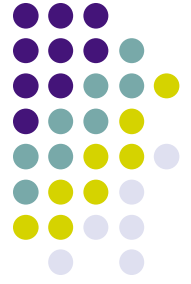
Thanks for bringing that recent article this morning. It was right on target. Remember the procedure we practiced yesterday? Show me how you would do it again this morning?



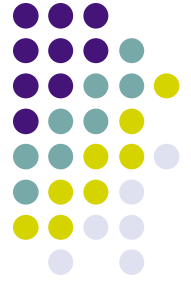
## Mistake 4: No objective

- If you don't know where you want to go, it's hard to get there.
- Begin a teaching session by telling the students what they are going to learn.
- Do this for every teaching session, whether it's a brief teaching moment or for a one-hour lesson.

# Which resident is teaching better?



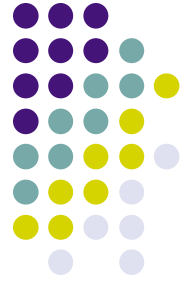
- Resident A: Fever is often caused by different factors and different actions are indicated...
- Resident B: I'd like you to learn what causes fever and when it needs to be treated...



## Answer: Resident B

- Remember, we learn better when we know what we are expected to learn.
- There's no reason to keep objectives secret.
- Just tell them:
  - Today, you will learn how to distinguish a normal lung x-ray from an abnormal one showing serious infection.
  - I'd like you to learn the steps to prepare a site for out-patient surgery.

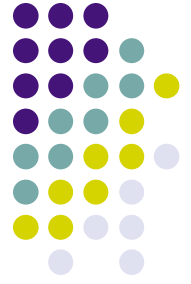
# Mistake 5: Just talk to the student when you teach.



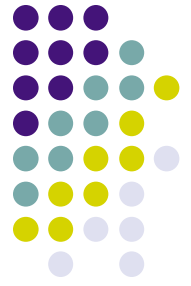
- Most students prefer active learning over passive listening.
- You can teach and test in the same lesson.
- Follow the 3 minute rule: Don't talk for more than 3 minutes without asking the student to do something.



# Which resident is teaching better?



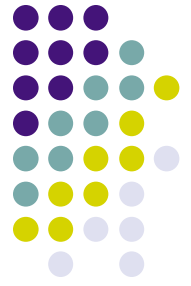
- Resident A: (After teaching a few minutes.)  
Let me erase the diagram on the board and have you draw the diagram showing blood flow and explain it to me as you go.
- Resident B: (After teaching a few minutes.)  
That's one diagram that illustrates the physiology. Now let me show you another one.



## Answer Resident B.

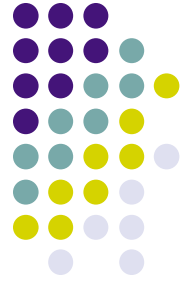
- A good way to keep students motivated is to keep them actively involved in learning.
- Ask them a question, ask them to show you a few steps in a procedure, or ask them to teach you or another student.
- Observe how much you talk and how much the student talks. Try to have the student talk 10%-50% of the time.

# Mistake 6. Don't find time to teach.



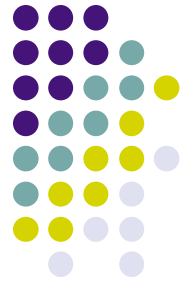
- Some students complain that some residents never have time to teach them.
- Some student praise residents who are always teaching while they work.
- Try to make sure that every contact you have with a student includes a teaching moment.

# Which resident is the better teacher?

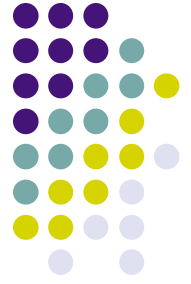


- Resident A: We're too busy today to get any teaching done. Why don't you just go read this afternoon.
- Resident B: We're really busy in clinic today. At 5:00 pm, I'd like you to choose one patient you've seen and present the patient to me.

# Mistake 7. Be bored with teaching.



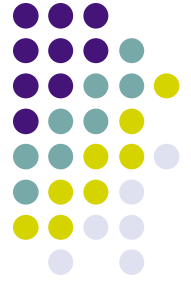
- If a resident is unenthusiastic about teaching, the student will know it.
- Boredom is catching. So is enthusiasm.
- The good teacher is often a good actor. Fake enthusiasm if you don't feel it. It may even help you feel enthusiasm.
- Which would you prefer? An instructor who talks in a monotone or one who is animated?



## Which resident is better?

Resident A: I know you've probably heard this several times, but it's really important. I've given this lecture many times, but students seem to forget it.

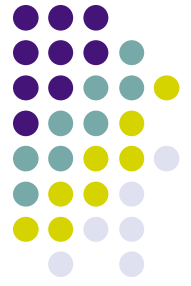
Resident B: Here's a case of an interesting patient that came in yesterday. Let me present her and you ask me questions. I'll learn some new things too.



**Answer: B**

- **Review: Seven Mistakes to Avoid**
  1. After a lesson just ask, “Do you understand?”
  2. Don’t give feedback to students.
  3. Tell students to change their personality traits rather than their behavior.
  4. Don’t tell students what you want them to learn.
  5. Do all the talking; make the students do all the listening.
  6. Be too busy to teach students.
  7. Be boring when you teach.

# On the other hand, here are 7 things to do:



1. Ask students to demonstrate what they have learned.
2. Give students feedback. Use the feedback sandwich
3. Ask students to change their behavior, rather than their personality traits.
4. Tell students what you want them to learn: the objectives.
5. Talk and demonstrate for short periods; have students do the same.
6. Never be too busy to teach students.
7. Teach enthusiastically.