

Five Tips for Teaching When Time is Limited

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Balancing patient care and teaching can be a challenge, particularly with ever-increasing ED volumes. Efficiency in teaching is important, specifically given the high acuity of patients and frequency of interruptions. This article provides five practical tips for effective and efficient bedside teaching for the busy clinician.

Step 1: Identify Learner Needs

It is impossible to address the wide breadth of knowledge required in emergency medicine in one shift. By first identifying the learner's needs, you can focus on teaching to those needs, thereby saving time by not teaching what the learner already knows or is not yet ready to learn. Initially, it can be helpful to have learners set a goal for each shift. Ask them to identify a specific skill or topic they would like to improve upon, then together seek out opportunities to focus teaching on this topic. For example, if the learner is struggling with evaluation and disposition of the patient with dizziness, the teacher can direct them toward patients with dizziness and use hypotheticals to cover atypical scenarios for the learner. As you have more interactions with the learner, you can further assist them by identifying deficits in their knowledge that they may not have been aware of and focusing on these components.

Step 2: Use Existing Teaching Frameworks

Several well-described teaching models exist to assist with performing rapid learner assessment and targeted teaching. Three of the most well-known are outlined briefly below.

A. The "One-Minute Preceptor" Model

The "One-minute Preceptor" is one of the most researched and widely-cited teaching methods.¹⁻³ This approach involves identifying the needs of the learner, targeting those needs, and providing feedback using the following five-step approach:

1. Get a commitment about what the learner believes is going on with the patient
2. Probe for supporting evidence or alternative explanations
3. Teach a general principle
4. Provide positive feedback to reinforce what the learner did right
5. Correct any errors and provide strategies for future encounters

B. The "Aunt Minnie" Model

The "Aunt Minnie" model was designed to promote rapid pattern recognition.⁴ The name derives from the idea that if you see a woman across the street who walks and dresses like your Aunt Minnie, then she is probably your Aunt Minnie, even if you can't yet see her face. For this model, the learner and teacher must examine the patient independently. The learner then presents the patient to the teacher using only a one-line description (e.g., this is a 40-year-old male with past medical history of prostate cancer and prior deep venous thromboses presenting with sudden onset, pleuritic chest pain) along



with his or her presumptive diagnosis with supporting evidence. The teacher then reviews the case and discusses the supporting findings and potential errors. The teacher ends by providing pearls and pitfalls for future cases.

C. The SNAPPS model

The SNAPPS (Summarize, Narrow Down, Analyze, Probe, Plan, Select) model is a learner-centered model best suited for the advanced learner.^{5,6} Following this approach, the learner should:

1. Summarize (briefly) the history and findings
2. Narrow down the differential to two or three possibilities
3. Analyze the differential by comparing and contrasting the above possibilities
4. Probe the teacher regarding learner uncertainties or alternate approaches
5. Plan the management for the patient
6. Select a case-related problem for further self-directed learning

Step 3: Be Selective in Your Teaching Topics

It is important to select topics that can be covered in short intervals and that are amenable to interruption. For example, while all EM learners should understand the evaluation and management of patients with likely acute coronary syndrome (ACS), proper coverage of this topic is usually not feasible during a busy ED shift. Attempting to cover this entire topic while on shift would lead to superficial or incomplete coverage. However, a subsection of ACS such as Wellens' syndrome or the HEART score, chosen based on the learner's needs, can easily be taught in several minutes. Targeted topics are even amenable to interruption as the learner can research a specific focused question if you need to step away.

Step 4: Use Existing FOAM Resources

With the increasing availability of Free Open Access Medical Education (FOAM or #FOAMed), resources to supplement teaching abound. Utilize existing blogs (e.g., www.lifeinthefastlane.com, www.aliem.com,

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www.rebelem.com) to provide additional resources while on shift. There are also a large number of open access image archives (e.g., www.dermis.net, www.orthobullets.com, www.wikimedia.org) to provide images and teaching cases. Additionally, one can utilize the *New England Journal of Medicine* video series or YouTube™ to allow the learner to review a procedure prior to assisting with or performing it on the patient. However, be cognizant that not all resources are high quality and it is important to review the resources prior to the learner to ensure that only accurate and high quality resources are provided.

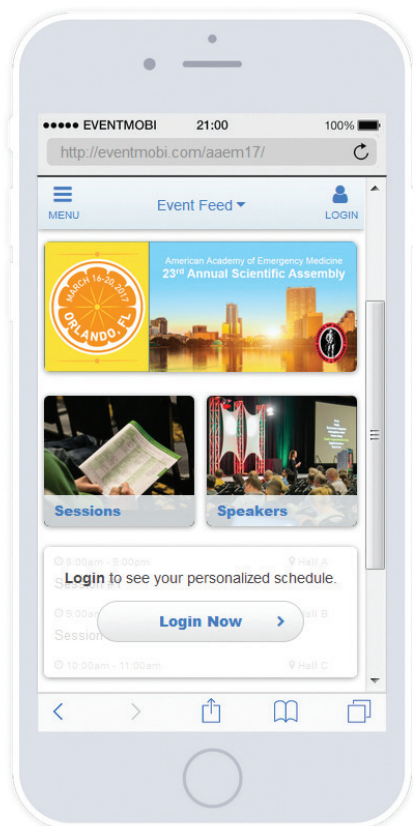
Step 5: Give Homework

This doesn't mean homework in the traditional sense. Rather, have a set of articles or FOAM resources which you can provide the learner on any given topic. This may be verbally provided at the end of the shift or later via email. While many experienced educators have a set of "teaching papers" or "files," this is not required. Finding a high-quality resource can be relatively quick and keeping a list of resources will save the teacher from duplicating work. Additionally, *Academic Life in Emergency Medicine* has been developing a series called Approved Instructional Resources (AIR series) to assist with identifying high-quality resources which may be of value (<https://www.aliem.com/aliem-approved-instructional-resources-air-series/>).

Hopefully, these simple strategies will make teaching in the busy ED more efficient, effective, and enjoyable. For more information, please review the above websites and references. Additionally, RSA/YPS will be hosting an education session on bedside teaching at the 2017 AAEM Scientific Assembly and all are encouraged to attend.

References:

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