Keep moving forward: Medical education strives to keep pace with EHR

By Dr. Shannon Pittman

“There is nothing more deceptive than an obvious truth.” – John F. Kennedy

The introduction of the electronic medical record transformed that familiar landscape into one that presents patient information at your fingertips from virtually anywhere. For all of its challenges and all of its advantages, the EMR has moved and continues to move along its own trajectory, at times outpacing the processes that surround patient care.

In an academic medical center, one of those processes is medical education. As we worked to keep pace with technology, we unintentionally marginalized our students. We continued to teach them, but involvement was limited, regulated and, at times, completely restricted.

With tremendous effort, barriers have been eliminated and we are finally catching up. We are diligent to evaluate decisions through multiple lenses and work to continuously safeguard the educational environment while embracing the rapidly evolving EMR.

On Feb. 2, CMS enacted policy that propels us even further. Thanks to the work of a number of our professional organizations to advocate for student involvement, CMS adopted a policy that allows teaching physicians to verify in the medical record any student documentation of components of E&M services, rather than re-documenting the work.

There are many details still to be interpreted in the language of the ruling, but what does this change mean? It means involvement. Engagement expanded. Learning reinvigorated.

As I listen to the student present the patient at the bedside, verify the history and complete my own exam, I am presented the opportunity to teach the student and perhaps the patient at the bedside – and then again in the EMR – when I review the note, make corrections or additions, attest, sign and bill. When a student submits a note for me to review, it is not just an exercise but a meaningful engagement in the patient care process.

Let me be clear: It has always been this way; but without intent, it lost its value for both student and teacher.

“Change is the law of life. And those who look only to the past or present are certain to miss the future.” – John F. Kennedy.

Obstacles remain. Each day brings new opportunities. We are challenged to shape, shift, bend and contort our thinking to embrace our future while honoring our past. Although I don’t miss chasing down transport to scribble my note in the chart quickly and I am confident no one misses the translation meetings to interpret my scribblings, what I value about my days of old is that I did find the secret notebook in radiology and I touched every clipboard dutifully recording the I/Os and when my team rounded, I contributed my part to our team.

It mattered to me. It mattered to them.

As I reflect, I realize the concept of being an active part of the team was intricately woven throughout our clinical years, weaving together a beautiful tapestry of capable hands, inquisitive minds and a confidence that whether we actually had wings or not, we could fly.

Tell me and I forget. Teach me and I remember. Involve me and I learn.”

Education Tip: PowerPoint presentations - inspired or expired?

By Wendell C. Douglas

Perhaps PowerPoint presentations should come with cautionary advice: Warning! Proceed with caution! What you are about to experience may confuse, exasperate or enhance your learning!

In their research about student preferences and the effectiveness of PowerPoint-based teaching, Laura Edelman and Kathleen Harring of Muhlenberg College, Allentown, Pennsylvania, made some interesting discoveries about what students like and dislike about PowerPoint presentations.

Too many words on a slide, clip art, movement (such as word animations) and templates with too many colors made the list of ineffective (“disliked”) elements. Effective (“liked”) features included the use of graphs to illustrate data, meaningful bulleted lists, using PowerPoint to structure lectures, and accompanying verbal explanations of pictures and graphs for clarification of information.

So the question remains . . . Are your PowerPoints inspired (and effective) or expired (tired and ineffective)?

Would you like some feedback on a PowerPoint presentation? We’re happy to help! Email wdouglas@umc.edu.

(Reference: Center for Teaching, Vanderbilt University; https://cft.vanderbilt.edu)
The Southern Group on Educational Affairs Meeting, “Shifting Paradigms in Medical Education,” will take place Thursday-Saturday, April 19-21, at UMMC.

School of Medicine staff members have been busy planning this meeting and cannot wait to host the medical educators who will be visiting from the southern region. They look forward to showing off the new School of Medicine building, learning from the organization and sharing with students what they learned.

Accepted presentations from UMMC include eight posters, three oral presentations, two workshops and five small groups.

Congratulations to the following presenters:

Initial Experience with a Professionalism Assessment Tool
Innovations Abstract
Dr. Ralph Didlake

Innovations in CME: A New Way to Utilize and Engage Students
Innovations Abstract
Dr. Mitzi Norris

Simulated Electronic Medical Record Curriculum:
Teaching Skills to Transitioning Third-year Medical Students
Workshop
Dr. Kimberly Paduda

Table-leader Practice in the Gross Anatomy Laboratory and its Academic Impact
Research Abstract
Dr. Marianne Conway

Train the Trainer: Society of Teachers of Family Medicine Residents as Educators Curriculum
Small Group Discussions
Dr. Sonya Shipley

Adding Hospitality to the Logistics of an LCME Site Visit
Small Group Discussions
Dr. Lecretia Buckley

An Examination of Perceived Barriers to Medical School Among African-American Undergraduate Students
Research Abstract
Dr. Fred Kency

Becoming the Superior Two Hour Teacher
Workshop
Dr. Michelle Horn

Clinical Skills Assessment Performance Following a Transition to Clerkship Boot Camp Course
Research Abstract
Dr. Kathleen Young

Development, Implementation and Evaluation of a Two Week Transitional Course
Innovations Abstract
Dr. Kimberly Paduda

If at First You Don’t Succeed: Promoting Lifelong Learning in Residency
Innovations Abstract
Dr. Kathryn Schneider

Its Digital Game Time: Using Technology to Teach and to Learn
Workshop
Dr. David Norris

Radiology Elective for M4 Medical Students: Inclusion of a Virtual Radiology Workstation
Innovations Abstract
Dr. Tanvir Rizvi

Revising a Traditional Anatomy Graduate Program into a Unique Training Program for Educator Scholars in the Anatomical Sciences
Innovations Abstract
Dr. Andrew Notebaert

Simulated Electronic Medical Record Curriculum: Teaching Skills to Transitioning Third-year Medical Students
Workshop
Dr. Kimberly Paduda

To Err is Human: Mindful Practice to Improve Diagnostic Error
Workshop
Dr. Kathryn Schneider

Using Intensive, Interactive Evidence-based Medicine Sessions to Transition Medical Students to Utilizing Medical Literature and Resources
Innovations Abstract
Dr. Richard Calderone

When Students Stumble; A Case Study of a Struggling Student
Small Group Discussions
Dr. Stephen Manuel