Medical students are provided with limited opportunity to practice performing patient education during the pre-clinical years of their education. They have many opportunities to practice patient interviews and physical examinations with standardized patients but there is limited focus on allowing the students to practice educating their patients in language that said patients can understand. The studies focusing on improving medical student’s communication with patients have mainly involved the patient interview and generally use standardized patients. Two of the goals of this study is to focus specifically on patient education with the assistance of persons from a specific patient population as opposed to standardized patients.

RESEARCH QUESTIONS

- Can a second year medical student explain autonomic dysreflexia to a person with a spinal cord injury?
- Do students with this training have an improved comfort level with patient interaction and patient education as a result?

STUDY POPULATION

- Second year medical students at the Brody School of Medicine.
- Individuals in the local community who have been diagnosed with a spinal cord injury. Community volunteers will be chosen from individuals who have previously participated in the Spinal Cord Injury Rehabilitation program at Vidant Medical Centers’ Regional Rehabilitation Center.

METHODOLOGY/RESULTS

- Students will be provided with a short power point presentation on autonomic dysreflexia prior to initiating this exercise.
- Students will perform patient education on autonomic dysreflexia with an individual from the community with SCI and receive feedback from this person. Community volunteers will be instructed to provide feedback to the students based on their own experiences, no formal training will be given.
- Students will complete a short survey on the experience using a 7 point Likert scale to determine if this experience was helpful to them and if it improved their comfort level with patient interaction and education.
- There will be a follow up survey to all second year medical students upon completion of their core clinical rotations to assess students’ level of comfort with patient interaction and education.

IMPACT/LESSONS LEARNED

It is the hope of the authors that this exercise will illustrate the need for increased exposure to and practice of performing patient education during the pre-clinical years of medical school. The authors believe that to implement such activities into the medical school curriculum will result in improved medical student performance and interaction with patients during the clinical years, and will set a precedent for continued quality patient education as these students become physicians.

SOURCES

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