

Education Element (E²)

Evidence Based learning principles for Medical Education

- Scenario: A rotating medical student approaches you for advice regarding their studying as they begin their 3rd year of school. They express they are having difficulty balancing the increased stresses of clinical work and patient contact, as well as the length of days on their clerkship rotations, with their past study habits. What are some general principles you can reference to help them find balance?
- Perspectives from the literature:
 - Spaced Practice: Promote more frequent use of short-duration blocks of study (1-2 hours) rather than long 'cramming' sessions. This is an effective coping strategy when balancing demands of clinical work with the need for continuous study
 - **Testing effect, Self-Regulation**: Begin study sessions with a quick mental review of the last topic studies (cumulative review). It is also important to assess whether you are retaining or understanding the material currently being reviewed.
 - Explanation and Deep Questioning: When speaking to the learners, or even patients, encourage them to justify their claims and explain their rationale. Encourage exploring problems from multiple angles or teaching concepts to peers to boost one's own comprehension.
 - **Anchoring**: Learning scenarios require <u>CONTEXT!</u> Rather than rote memorization, encourage learners to imagine and apply real-world scenarios to concepts in order to build a framework for why a concept is relevant and boost comprehension. 'Case of the Week' sessions are a good example of this.

Cutting, Maris F., and Norma Susswein Saks. "Twelve Tips for Utilizing Principles of Learning to Support Medical Education." Medical Teacher, vol. 34, no. 1, 2012, pp. 20–24, https://doi.org/10.3109/0142159X.2011.558143.