
MEDICAL EDUCATION AND DILEMMA OF A CLINICAL TEACHER

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We as clinicians have many jobs to do. Apart from our family, social and religious obligations, we teach, treat, manage patients and have administrative duties. We have been meagerly trained for teaching, administration and other competencies as is evident from our undergraduate and postgraduate medical curriculum. Having been given the role of a teacher in medical profession, we teach many undergraduate and postgraduate students, supervise them, regularly take part in assessments, paper checking and questions development. The dilemma is; is it not enough for us to be designated as teachers? Of course, by doing so many things as mentioned above, we are teachers. Harden and Crosby have described 12 roles of a clinical teacher¹. Clinical teacher is not just an information provider to undergraduate and postgraduate students. Rather, a clinical teacher should be trained enough to develop as a role model, mentor, facilitator, learning resources creator and provider, course organizer and an evaluator. Teaching at undergraduate and postgraduate level needs conversion from tiring, long lectures for presenting a lot of information into objective based, interactive, relevant, and short lectures keeping in mind the learning styles of students. This can be achieved by following the Gagne's nine events of instructions². The clinical teachers need to follow these guidelines to make their lectures at par with international standards of teaching. Clinical teachers need to follow the new ways of workplace-based teaching and learning strategies like one-minute preceptor model of bedside teaching to avoid tiring teaching rounds by discussing irrelevant topics, without keeping a focus on patient problems³. The assessment system needs a revamp in our educational system. In addition to good quality multiple choice questions we need to convert as well to key feature format and cluster questions to increase student's problem solving and critical thinking abilities⁴. Similarly, short answer questions need to be designed properly to increase the reliability and validity of assessments. Most of our Objective Structured Practical/Clinical Examinations (OSPE/OSCE) assess the cognitive domain of students but actually these are intended to assess the psychomotor and affective domains. This results in low validity and reliability of our assessments⁵. Regarding paper checking, a uniform policy for checking should be applied. This can be done by developing a proper key for each question by using the proper principles of assessment. Role modelling is considered to be a powerful tool for learning⁶. Teacher should develop the attributes of a good role model to have an impact over student's learning. The system of feedback is rare in our undergraduate and postgraduate medical institutions. Feedback is considered to be the backbone of a teaching organisation⁷, and we the teachers need to learn, apply and habituate feedback in our culture. Evaluation strategies for our teaching, patient's management, administrative actions need to be applied and necessary corrections to be done. To overcome all these shortcomings on part of clinical teachers, it is mandatory for teachers to enroll in a medical education program. These programs are in the form of certificates (6 months), diploma and master degree programs (2 years), and doctoral programs. In the coming years, the Pakistan Medical and Dental Council (PM&DC) is considering these programs mandatory for promotion of faculty from associate professor to the post of professor and appointment of principals and deans of educational institutions. These programs revolve around six basic concepts of medical education; educational psychology, teaching and learning, curriculum, assessment, research, professionalism and academic leadership. If we lag behind in the concept of "Train the Trainee", we will remain in a dilemma and continue to march to the beat of our own drum thinking that everyone else is out of step. The clinical teachers can improve these skills by enrolling themselves in these educational programs of their choice to bring the teaching, assessments, research, and professionalism at par with international standards.

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