Session: F332
“Have a Disease”: Using Students to Teach Patient Interview Skills

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Objectives

• Develop a customizable template for a peer teaching exercise
• Help students build interview skills through the use of role-play
• Design a format to develop and evaluate clinical reasoning skills
Why “Have a Disease”? 

• **Curriculum Challenges**
  • Need to integrate more self directed learning into curriculum
  • Challenges in engaging students in the learning process
  • Need to develop clinical reasoning and critical thinking skills
  • Limited opportunities for patient contact and clinical practice during the didactic year
  • Challenges in identifying real patients with matching disease states
  • Increased cost of using standardized patients
What is the “Have a Disease” Project?

- An instructional modality
  - Students serve as peer teachers
- A role playing activity
  - Students function as both the “diseased” patient and the clinician
- A template for promoting research on common diseases
- An economical method for providing patient simulations
Goals of the Activity

• Teach clinical presentations of common diseases
• Enhance medical knowledge
• Improve communication skills
• Teach data collection and interpretation
• Develop clinical reasoning skills
• Empower students to be more responsible for their own learning
• Keep students engaged
• Encourage team building
• Improve preparation for the PANCE exam
Have a Disease Student Assignment

- Students anonymously assigned a disease topic from the NCCPA Blueprint
  - Research the topic and submit paper on assigned disease
  - Use the data to develop a patient case
  - Participate in a “round robin” interview session as both patient and interviewer
  - Interview 3 or more students during the class session
  - Generate a “SAP” or “SOAP” note for one of the mock patients interviewed.
    - Submit the clinical note to course director for evaluation
  - Give an oral presentation of the patient case to the class
  - Post assignment to a discussion board
## HEENT - NCCPA Blueprint

<table>
<thead>
<tr>
<th>Benign Positional Vertigo</th>
<th>Corneal Abrasion</th>
<th>Epiglottitis</th>
<th>Subconjunctival Hemorrhage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Acute Otitis Media</td>
<td>Retropharyngeal Abscess</td>
<td>Laryngitis</td>
<td>Orbital Cellulitis</td>
</tr>
<tr>
<td>Otitis Externa Abscess</td>
<td>Blepharitis</td>
<td>Oral cancer</td>
<td>Allergic Conjunctivitis</td>
</tr>
<tr>
<td>Peritonsillar Abscess</td>
<td>Meniere’s Disease</td>
<td>Sialadenitis</td>
<td>Leukoplakia</td>
</tr>
<tr>
<td>Hordeolum</td>
<td>Pharyngitis</td>
<td>Parotitis</td>
<td>Allergic Rhinitis</td>
</tr>
<tr>
<td>Acute Angle Glaucoma</td>
<td>Macular Degeneration</td>
<td>Acute Labyrinthitis</td>
<td>Chronic Sinusitis</td>
</tr>
<tr>
<td>Retinal Glaucoma</td>
<td>Hyphema</td>
<td>Epistaxis</td>
<td>Corneal Ulcer</td>
</tr>
<tr>
<td>Detachment</td>
<td>Acute Sinusitis</td>
<td>Tinnitus</td>
<td>Cerumen</td>
</tr>
<tr>
<td>Herpes Simplex Keratitis</td>
<td>Mastoiditis</td>
<td>Ocular Foreign Body</td>
<td>Impaction</td>
</tr>
<tr>
<td>Bacterial Keratitis</td>
<td>Cataract</td>
<td>Pinguecula</td>
<td>Foreign Body in the Ear Canal</td>
</tr>
<tr>
<td></td>
<td>Optic Neuritis</td>
<td>Pterygium</td>
<td>Septal Hematoma</td>
</tr>
<tr>
<td></td>
<td>Tonsillitis</td>
<td>Tripod Fracture</td>
<td>Ludwig’s Angina</td>
</tr>
<tr>
<td></td>
<td>Conjunctivitis</td>
<td>Uveitis (Iritis)</td>
<td>Neck Mass</td>
</tr>
<tr>
<td></td>
<td>Viral</td>
<td>Central Retinal Artery Occlusion</td>
<td>Central Retinal Vein Occlusion</td>
</tr>
<tr>
<td></td>
<td>Conjunctivitis</td>
<td>Presbycusis</td>
<td></td>
</tr>
</tbody>
</table>

“Round Robin” Even Number of Students in Group

Student 1

Student 2

Student 3

Student 4

Round I

Round II

Round III
“Round Robin” Odd Number of Students in Group

Student 1 <-> Student 2
Student 1 <-> Student 3
Student 1 <-> Student 4
Student 2 <-> Student 3
Student 2 <-> Student 4
Student 3 <-> Student 4

Round I:
- Student 1 <-> Student 2
- Student 1 <-> Student 3
- Student 1 <-> Student 4
- Student 2 <-> Student 3
- Student 2 <-> Student 4
- Student 3 <-> Student 4

Round II:
- Student 1 <-> Student 2
- Student 1 <-> Student 3
- Student 1 <-> Student 4
- Student 2 <-> Student 3
- Student 2 <-> Student 4
- Student 3 <-> Student 4

Round III:
- No new matches

“Odd man out”

Legend:
- Red: Round I
- Blue: Round II
- Green: Round III
Evaluation Process

• Peer critique

• Faculty assessment
  • Research paper evaluation
  • Test questions
  • Mock patient SAP review
  • Activity participation
  • Oral presentation evaluation
**HEENT MODULE GRADING RUBRIC**

<table>
<thead>
<tr>
<th>Pts. Assigned</th>
<th>Max. Points</th>
<th>Item</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>55 pts total</td>
<td>Research Paper includes the following:</td>
</tr>
<tr>
<td></td>
<td>10 pts.</td>
<td>a) Description of the disorder (includes etiology, risk factors &amp; pathophysiology)</td>
</tr>
<tr>
<td></td>
<td>10 pts.</td>
<td>b) Clinical Manifestations (common Hx. &amp; PE findings)</td>
</tr>
<tr>
<td></td>
<td>10 pts.</td>
<td>c) Diagnostic work-up (lab/radiology)</td>
</tr>
<tr>
<td></td>
<td>10 pts.</td>
<td>d) Clinical Management (treatment/referrals)</td>
</tr>
<tr>
<td></td>
<td>5 pts.</td>
<td>d) Associated complications (if any)</td>
</tr>
<tr>
<td></td>
<td>4 pts.</td>
<td>f) DDX to consider</td>
</tr>
<tr>
<td></td>
<td>1 pt.</td>
<td>g) Cover sheet</td>
</tr>
<tr>
<td></td>
<td>5 pts.</td>
<td>h) References used include review articles within past 6 years and assigned readings</td>
</tr>
<tr>
<td></td>
<td>10 pts total</td>
<td>Development of 3 test Questions with answers</td>
</tr>
<tr>
<td></td>
<td>35 pt. total</td>
<td>SAP note for Mock Patient</td>
</tr>
<tr>
<td></td>
<td>10 pts.</td>
<td>a) Explores pt hx.: identifies and explores chief complaint using LOCATES</td>
</tr>
<tr>
<td></td>
<td>5 pts.</td>
<td>b) pt. hx includes pertinent risk factors from Past medical hx., family hx., social hx. And review of systems</td>
</tr>
<tr>
<td></td>
<td>10 pts.</td>
<td>c) Assessment includes a DDX relevant to chief complaint (minimum of 3)</td>
</tr>
<tr>
<td></td>
<td>10 pts.</td>
<td>d) Plan includes appropriate diagnostic, therapeutic &amp; patient education for each DDX</td>
</tr>
<tr>
<td></td>
<td>100 PTS</td>
<td>TOTAL POINTS ASSIGNED</td>
</tr>
</tbody>
</table>
## Oral Presentation Rubric

<table>
<thead>
<tr>
<th></th>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Neutral</th>
<th>Agree</th>
<th>Strongly Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>The presenter is prepared.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>The presenter is knowledgeable about the subject.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>The presentation is the appropriate time length.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>The presenter speaks clearly.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>The presenter is able to answer questions.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>The presenter uses good eye contact.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>The presenter is professional in appearance.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>The presenter listens intently to other presentations.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>
Additional Strategies

• Basic Science Review
  • “Have a Bug”
  • “Have a Drug Adverse Side Effect”
  • “Interpret that lab”

• Inclusion of Physical Exam
  • Develop a SOAP note
  • Clinical teaching
    • Patient Education
    • Team based training for Patient Centered Care
Workshop Activity

• Research the topic
  • Spend 25 minutes for review of provided references and develop a script for patient case simulation
• Research and script to include
  • Clinical manifestations of the disease
    • Common symptoms and signs associated with the disease
    • Severity and character of symptoms
  • Relevant data from the PMH, FH, SH and ROS
Workshop Activity Continued

• Mock interview/role play
  • Interview a colleague to collect the clinical data (10 minutes each interview session)

• Generate a SAP note
  • Develop a SOAP note for the “patient” interviewed (20 minutes)
    • Include 3 differential diagnoses
    • Include diagnostic and treatment plan
Conclusion

• In summary, “Have a Disease”:
  • Is a creative instructional modality
  • Helps students become active learners
  • Enhances oral communication and data collection skills
  • Reviews common disease states
  • Is economical and efficient

• Comments/Feedback
References


