

# VALIDATION OF TWO E-LEARNING EXERCISES: FACS AND VP IN MEDICAL TEACHING

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# TEACHING UNDERGRADUATE ANAESTHESIA

- Final-Year Students attend a 2-week module
  - 40 weeks of Medical & Surgical clinical attachments
- Difficult to cover syllabus & Essential topics missed
  - Suitable clinical cases not always available



# TEACHING UNDERGRADUATE ANAESTHESIA

- E-learning used to supplement clinical teaching
- Introduced two types of Virtual Patient on course
  - Summer 2006:  
Formative Assessment Case Studies (FACS)
  - Summer 2008:  
Story-line Virtual Patient (VP)



# WHAT IS A VP?

## *VIRTUAL PATIENT*

- “specific type of computer program that simulates real-life clinical scenarios; learners emulate the roles of health care providers to obtain a history, conduct a physical exam, and make diagnostic and therapeutic decisions”

Association of American Medical Colleges



# WHAT IS A VP?

## *VIRTUAL PATIENT*

- Many formats described:
  - Interactive clinical cases (FACS)
  - Anatomical Virtual Patients
  - Longitudinal Virtual Patients (Storyline VPs)



# WHAT IS FAQS?

## *FORMATIVE ASSESSMENT CASE STUDIES*

- Short *interactive* cases
  - 20-30 min to compete
- Usually focus on a single topics
  - e.g. Peri-operative management of Diabetes



# WHAT IS FAUS?

## *FORMATIVE ASSESSMENT CASE STUDIES*

- Network of interlinking web-pages
  - A series of decision steps (n= 9-13)
- Student progresses by answering questions correctly
  - Mostly MCQ about the case scenario
- Feedback for wrong selections (i.e. Formative )



# FACS Administration

## Case Management

[Cases](#) - [Add Case](#) - [Delete Case](#)

[Student Management](#)  
[Case Management](#)  
[Admin Management](#)  
[Results](#)  
[Admin Log](#)

[Change Password](#)

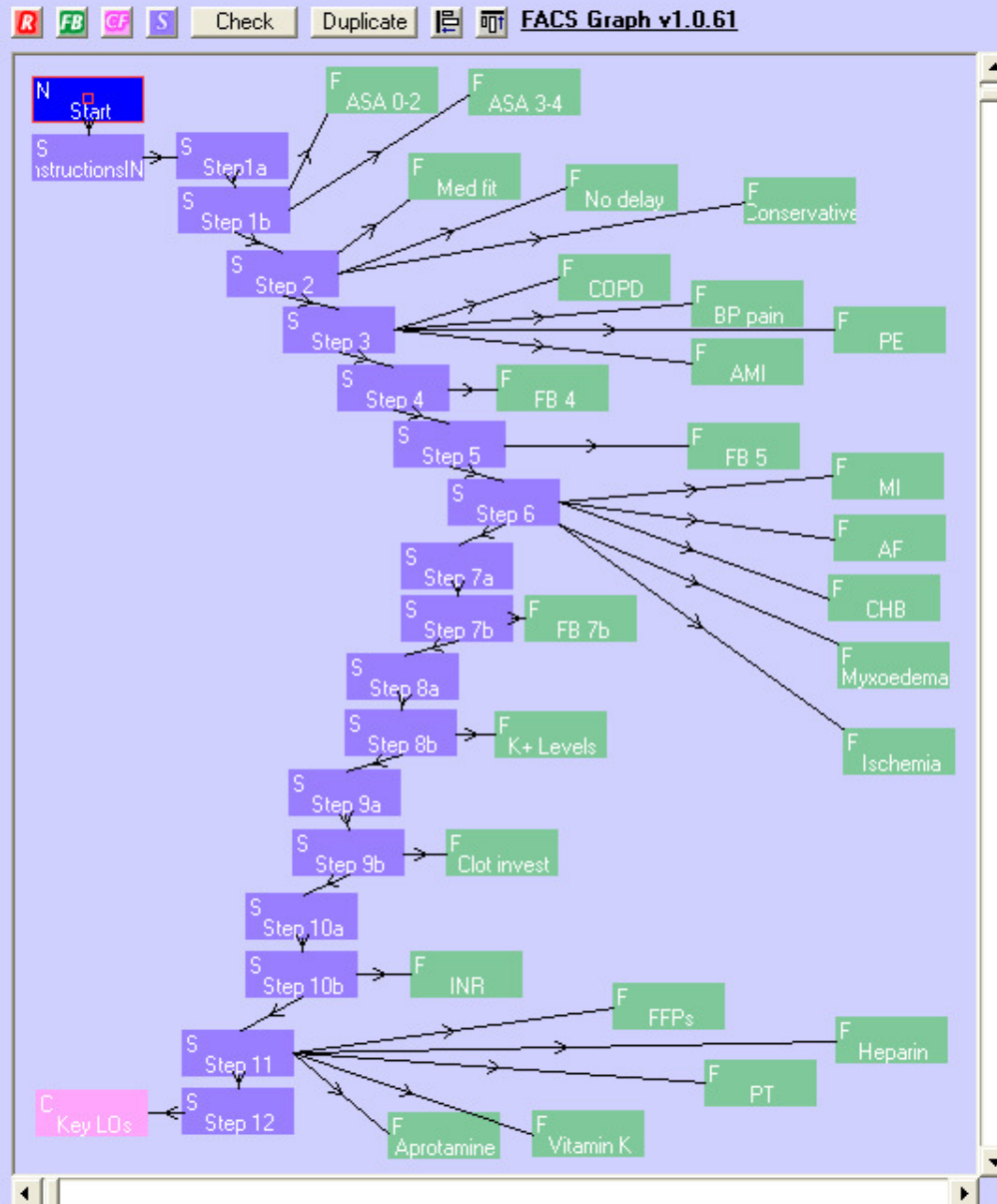
[Help](#)

[Logout](#)

Welcome Lester!  
 System Administrator

5/14/2009 2:41:33 PM


FACS v1.0.47



Start	
<b>Case ID</b>	157
<b>Case Name</b>	Laboratory data
<b>Category</b>	Anaesthesia
<b>Description</b>	An elderly woman has a traumatic hip fracture. <font color=blue><b>To be done in week 1</b></font color=blue>
<b>Activated</b>	<input checked="" type="checkbox"/>
	<input type="checkbox"/> Workshop Group <input type="checkbox"/> Surgery C - Group 4 <input type="checkbox"/> Group 8 <input type="checkbox"/> Surgery B - 8AB <input type="checkbox"/> Surgery B - 8CD <input type="checkbox"/> Guests <input type="checkbox"/> Test <input type="checkbox"/> Med5210WBSA <input type="checkbox"/> DemoGroup <input type="checkbox"/> Virtual AE <input type="checkbox"/> Workshop Virtual AE <input type="checkbox"/> ENT - Med 5 <input type="checkbox"/> Public <input type="checkbox"/> Traditional Chinese Medicine <input type="checkbox"/> FACS Tour <input type="checkbox"/> Student Result Logging <input type="checkbox"/> ORT




# EXAMPLE OF FACS WEB-PAGE: *TYPICAL DECISION STEP*



## ANAESTHESIA FACS CASES

FACS Med5 Two-Week Module - ANAGuest



**Score**  
0%

### Case 231: Pain Management Case A

#### Step 8b

Once the morphine syringe chamber is closed, the pump needs to be programmed. The front console has programming buttons.

Fig. 1 shows Alaris pump console used for inputting the pump settings (program) and displaying pump usage data. (Click to Enlarge)




Fig. 1

- Infusion rate
- Max 1h dose
- Demand ratio
- Syringe size
- Bolus dose
- Delivery ratio
- Max 4h dose
- Lockout time

Submit

**Question:**  
What program settings need to be entered (select three)?

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Anaesthesia FACS Cases   Anaesthesia FACS Cases - 2... x



# STORYLINE VPS

- An illness takes place over days / months / years
  - Condenses important clinical events into a story
  - Viewed independent of time
  - Provide an overview of the case from beginning to end
- 2005-2008 Teaching Development Grant



# EXAMPLE OF STORYLINE VP WEB-PAGE:

## Section Three B: Starting The Operation

### Shirley is anaesthetized



Shirley is now wheeled down the long corridor to theatre five. She is escorted by one of the nurses from theatre five. The trolley is wheeled through the main door of theatre and parked besides the operating table (Pic 1). Another check to confirm her identity and nature of her operation is performed. Her name is checked against the identification bracelet on her wrist, including Hong Kong ID number (Pic 2). The side of the trolley is lowered and she is told to shuffle across onto the black hard flat surface of the operating table. She lies on a white draw sheet, with her head supported by a narrow pillow. She stares up at the ceiling and operating lights (Pic 3). They are switched off. The trolley is wheeled away.



# QUESTIONS ABOUT VIRTUAL PATIENTS

Does their introduction into a course improve student learning?

- ✓ New & exciting teaching innovations
- ✓ Overcome logistic problems:
  - Finding suitable patients / cases
  - Lack of Student - Teacher contact time
- ✓ Surveys of Student Opinion support their use

But little scientific evidence that student performance improved following exposure

# WHAT DID WE DO?

- Introduced a new topic (Acute Pain Management):
  - into our existing FACS and VP E-learning syllabus.
- Studied VPs effect on examination performance
  - in three separate exams over one academic year.
- Students were not informed of changes.




# OUTLINE OF STUDY DESIGN

- July 2009 to April 2010
  - N=132
  - Split into 16 groups of 7-10 students
  
- Introduced into Anaesthesia module curriculum:
  - THREE new Pain Management FACSs
  - ONE new section in the storyline VP (post op pain mx)





# OUTLINE OF STUDY DESIGN- CON'T

- Exposed half to Pain FACS and half to the new section on pain management in the VP (2 x 2 split)
  - Given 1-hour introductory session on using FACS and VP
  - Previously students had only:
    - (a) 1-morning acute pain service ward round and
    - (b) 1-hour tutorial on pain.
- 

# STUDENTS GROUP EXPOSURE

		FACS	
		Exposed to FACS	Not exposed
VP	Exposed to VP	B	C
	Not exposed	D	A

N = 132 students  
16 groups in total





# ANAESTHESIA STUDENT EXAMS (2009-2010)

- End of Module Exam
  1. Written MEQ
  2. MCQ
  
- Final-year surgery exam
  3. Written MEQ

An MEQ is Modified Essay Question where student provides short notes answers



# MODULE MEQ

- 20 min
- 4-5 questions including 2-3 on pain related topics
- Used 4-different papers A, B, C & D – rotated 4 times



# MODULE MEQ

- (ii) What preoperative laboratory investigations should the house officer order and give reasons for each?
- After operation, restart patient on half dose of drip and keep monitoring of H+STIX perioperatively.

Routine investigations include:

## - Complete blood picture

→ Haemoglobin level as an indicator of any pre-operative anaemia or act as a baseline for transfusion of blood later.

→ White cell count can suggest infection if increase

→ Platelet count, if low, mean increase risk of peri-op bleeding

## - Renal function test (urea & electrolytes)

→ assess renal impairment that may result of DM.


## - Clotting profile → check if any coagulopathy that contraindicate the epidural/spinal route of drug administration.

- ECG → underlying heart disease

- CXR → chest x-ray

9

# MODULE-MCQ

- Anaesthesia uses a bank of 300+ five items questions
    - Managed using IDEAL software (OES – C. Haslett)
    - Items reviewed and upgraded annually
      - Based on level of Difficulty & Discrimination
  - 75 min
  - 60 item with 6-9 items on pain
  - Used 3 different exams –A, B, B, C rotated 4 times
- 

# MODULE-MCQ

- Analyzed MCQ data from only exam B
    - Two middle modules (n=69 students)
  - Compared marks from 9 pain management items against 11 general items\*
- \*(high quality IDEAL criteria).



# MODULE-MCQ

## Ques 20

A 32-year old secretary is dignosed with breast cancer. She is admitted for a simple mastectomy. Post operatively, the anaesthetist prescribes appropriate pain management.

What does he prescibe?

- A. Intramuscular morphine
- B. Intravenous PCA morphine
- C. No pain relief is required
- D. NSAIDS administered orally
- E. Paravertebral LA infusion



# FINAL-MEQ

- Final-year surgery exam
  - May 2010
- 10 items
  - 4 items on pain related topics
- 20 mins
- 1 set by anaesthesia



# FINAL-MEQ

c. What additional laboratory tests are indicated in this case?

[3 marks]

- (i) Arterial blood gas analysis (0.5 mark)
- (ii) Lung function tests / Spirometry (0.5 mark)
- (iii) Send sputum for culture and sensitivity (0.5 mark)
- (iv) Coagulation screen (0.5 mark)
- (v) Group & Save / Cross match (1.0 mark)

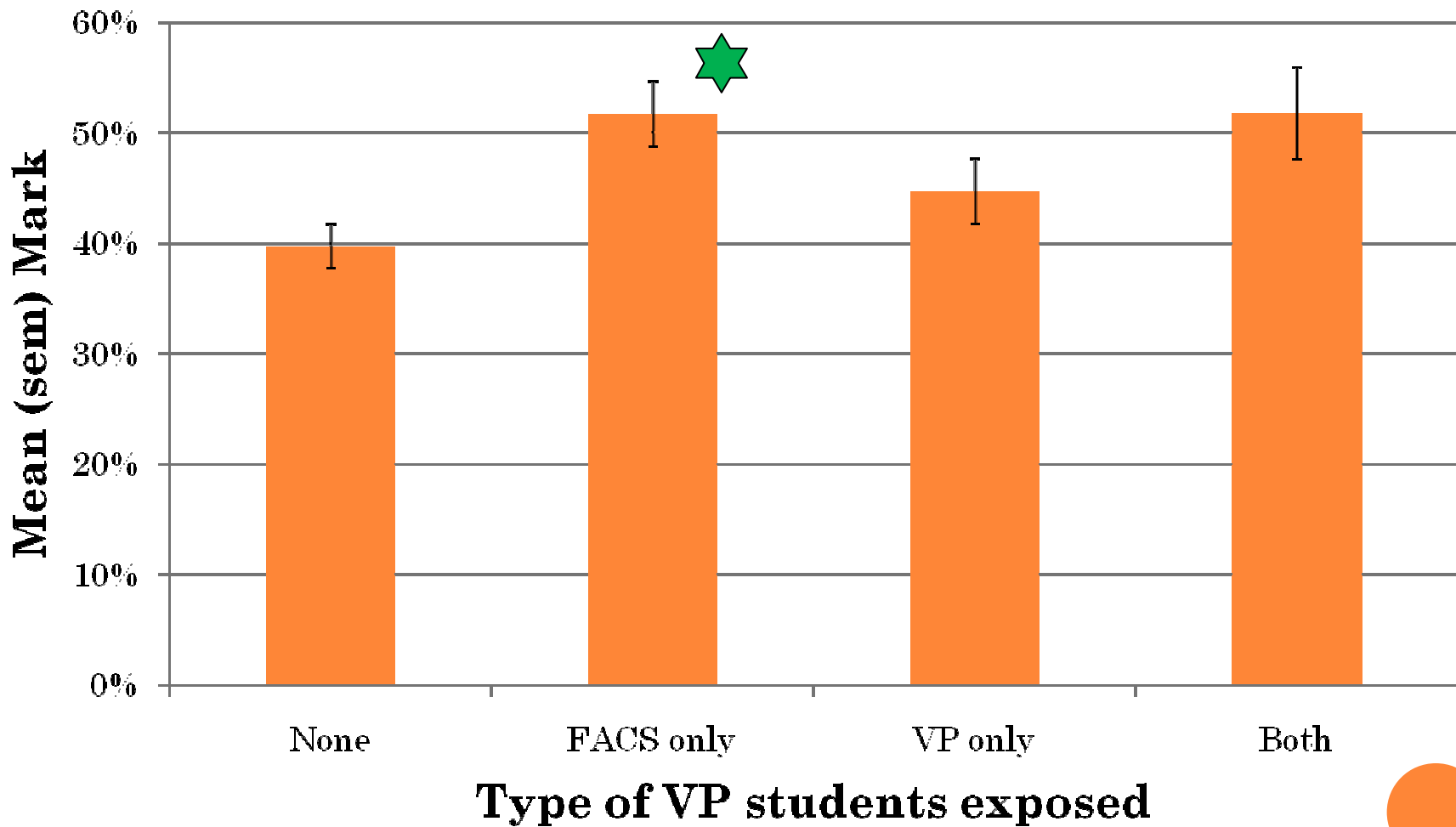






# RESULTS

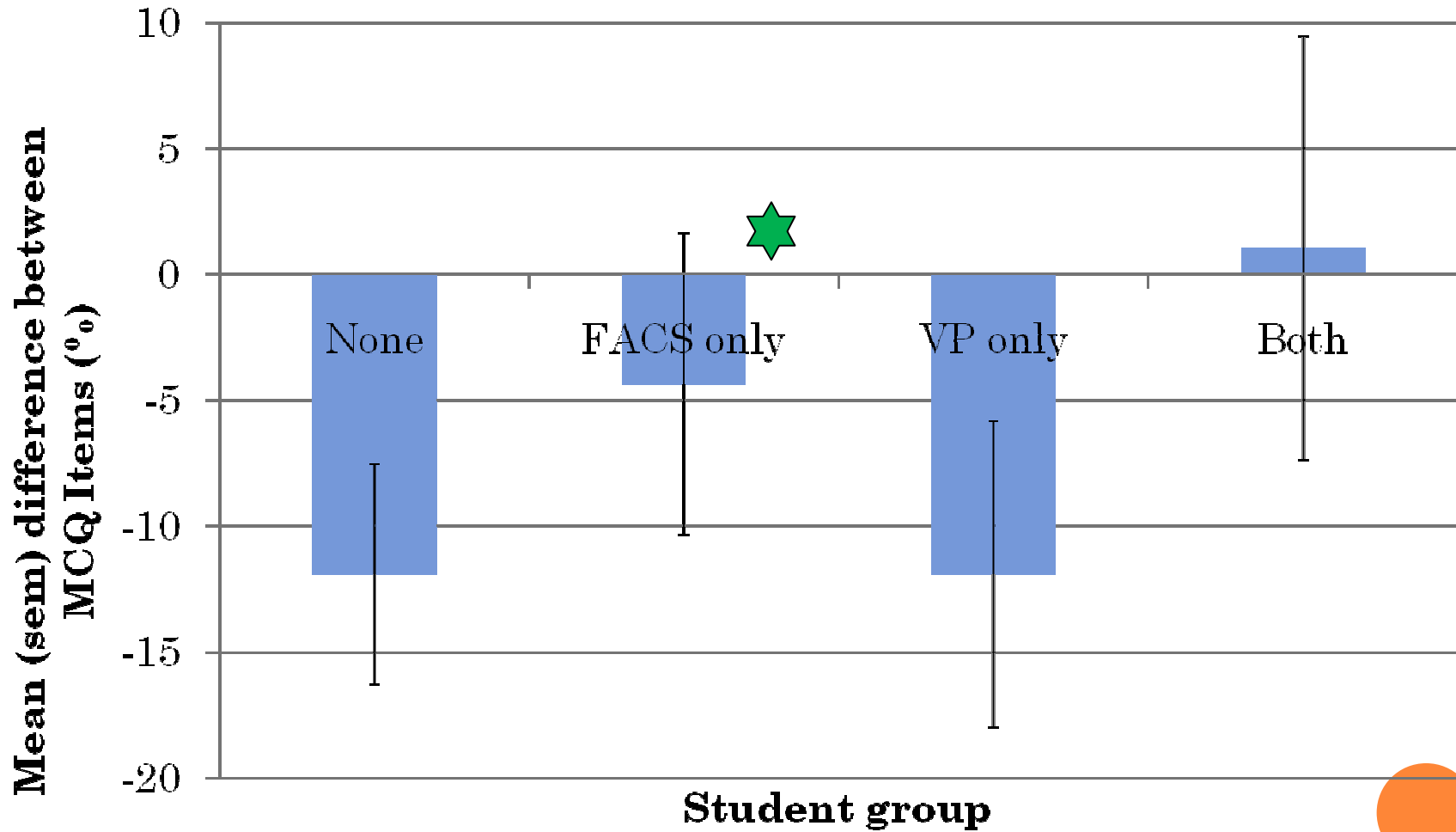
# END OF MODULE MEQ MARKS FOR SECTION ON PAIN MANAGEMENT



•Significant difference between groups for FACS only [univariate model]  $P=0.001$

END OF MODULE MCQ

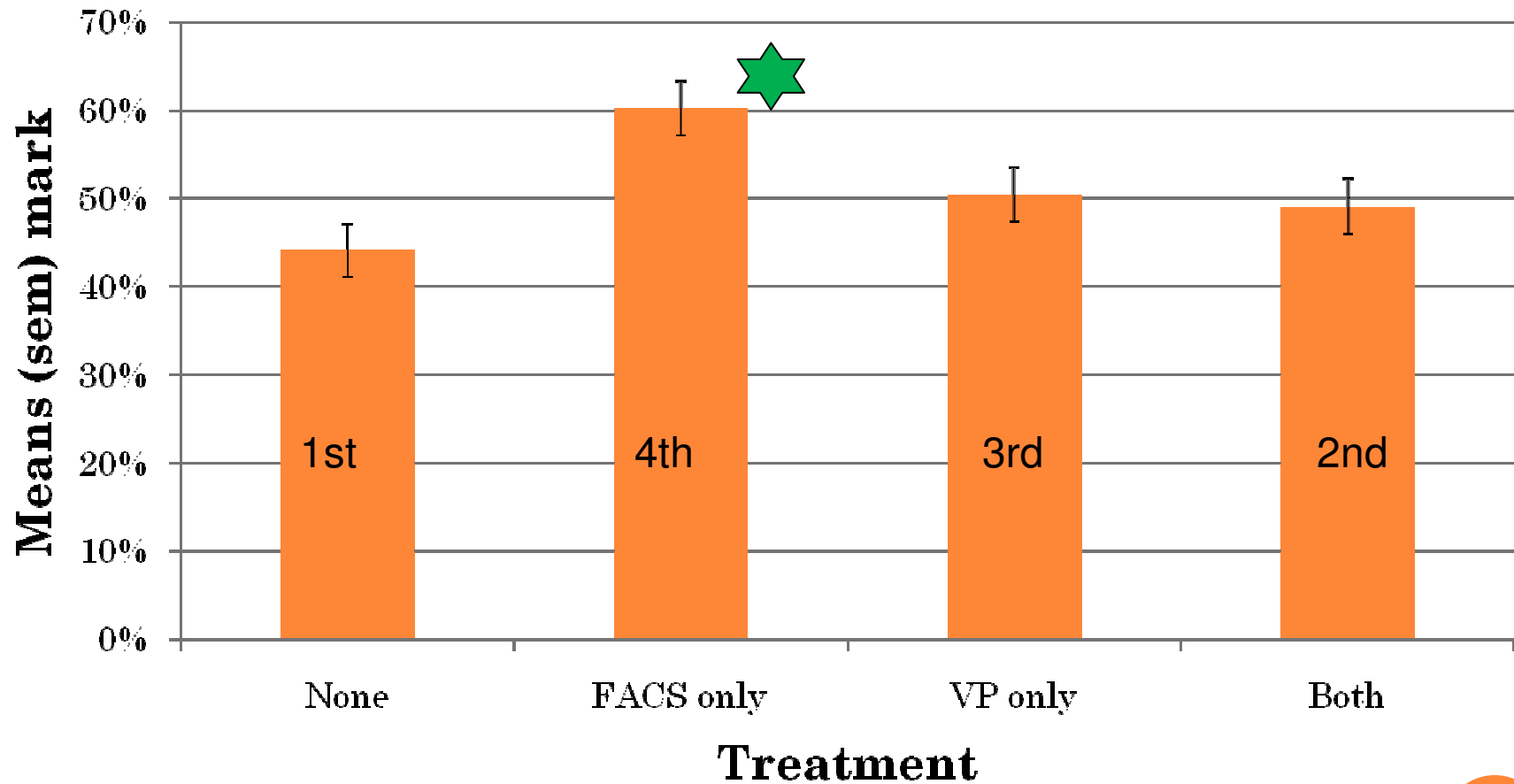
# PERCENTAGE DIFFERENCE BETWEEN PAIN AND GENERAL ITEMS: ADJUSTED EFFECT



**E-learning on pain management**

\* Significant difference between groups  $P=0.02$

# FINAL SURGERY – ANAESTHESIA MEQ MARKS FOR SECTION ON PAIN MANAGEMENT



•Significant difference between groups for FACS only  $P=0.02$



## IN SUMMARY ...

Method	Result
1. End of Module – MEQ (written paper)	FACS ↑ Pain ( $P=0.001$ )
2. End of Module MCQ (Pain vs. Gen)	FACS ↑ Pain ( $P<0.02$ )
3. Final Surgery MEQ (Anae writtten)	FACS ↑ Pain ( $P<0.02$ )

## IN CONCLUSION ...

- Clear evidence that the introduction of Pain FACS exercises improved students' performance in both End of Module and End of Year Exams
- However, time may have an effect on the End of Year Exams' result
- Storyline VP did not significantly effect students' performance.





**THANK YOU**

**Questions?**