



A Newer Approach to Bed Side Teaching in R.D. Gardi Medical College Ujjain (MP)

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INTRODUCTION

Teaching at the bed side is defined as teaching in the presence of the patients. It is applicable only to the hospital setting.

Sir William (1849-1920) a renowned clinician and teacher said that there should be no teaching without patients.

Whitman (1990:23) said "My method (is to) lead my students by hand to the practice of medicine, taking them every day to see patients in the public Hospital, that they may hear the patient's symptoms and see their physical finding & then I question the students as to what they have noted in their patients and about their thought and perceptions regarding the causes of illness and the principles of treatment" Bed side teaching in the hospital setting also provides opportunities to expose the students to a sea of knowledge and skill that cannot be taught in lecture hall.

The Goals for this project is

- To review the past and present bed side teaching.
- To discuss the advantages and disadvantages of teaching at bed side.

- To explore the newer approach for in proving bed side teaching.

Teaching at the bed side in the past

Hippocrates (460-370 BC) was a teacher at that period. The first two methods (noted below) laid down by Hippocrates

1. Observe all.
2. Study the patients with their symptoms.

But Hippocrates methods of teaching are not known.

Teaching at the Bed side in the present time

Bed side teaching practice can be demonstrated to the students by showing various teaching skills. Correct History taking and physical examination have been shown to have a correct diagnosis in 73% of patients.

But the recent use of imaging technique and laboratory test have decreased the bed side teaching.

1. Interview with the students of R.D. Gardi Medical College Regarding bed side teaching. The students (75%) are in the favor of bed side teaching.



Photo of students (R.D. Gardi Medical College)

2. Interview with two group of students

Group A – (9 students)



Photo of Group A

Group A said – sir “we have understood every teaching skills in the bed side”

Group B – (24 students)**Photo of Group B**

Group B said – sir (above 10 students) “We did not understand regarding this method of teaching. The teacher observed few students in the backside engaged in gossiping”

Bed side teaching procedures

- Take permission from the patient and the attendant for examination.
- Explain all examinations procedures to the patient.
- Examination the female patient in presence of presence of female attendant/female nurse.
- Duration of bed side teaching should be 25-30 minutes.
- Thanks to the patient after examination is over.

Bed side teaching includes

1. One teacher.
2. Few students (Maximum 9 students).
3. Patient on a bed.

Bed side teaching skill includes

1. History taking.
2. Physical examination.
3. Local and systemic examination.

4. Discussion and demonstration of physical signs and provisional diagnosis. Final diagnosis and plan for treatment are to be discussed in the conference room.

Disadvantage of Bed side teaching

1. Privacy is not maintained.
2. Counseling of high risk patient can't be discussed in front of the patient.
3. Teacher may be uncomfortable due to prolong standing.
4. Negative aspect — Adverse effect on patient (if examination done improperly)
5. Negative feedback to the students may effect patient's perception.

Proposed Project

The newer approach to bed side teaching.

Aims1. How to improve the bed side teaching practices as it is declining in the present scenario

Discussion in the conference room should be fulfilled following criteria

A

- to discuss the presentation.
- to arrive to a provisional diagnosis.
- to know the recent investigations.
- planning for treatment.

B

- use of internet is very important for this purpose

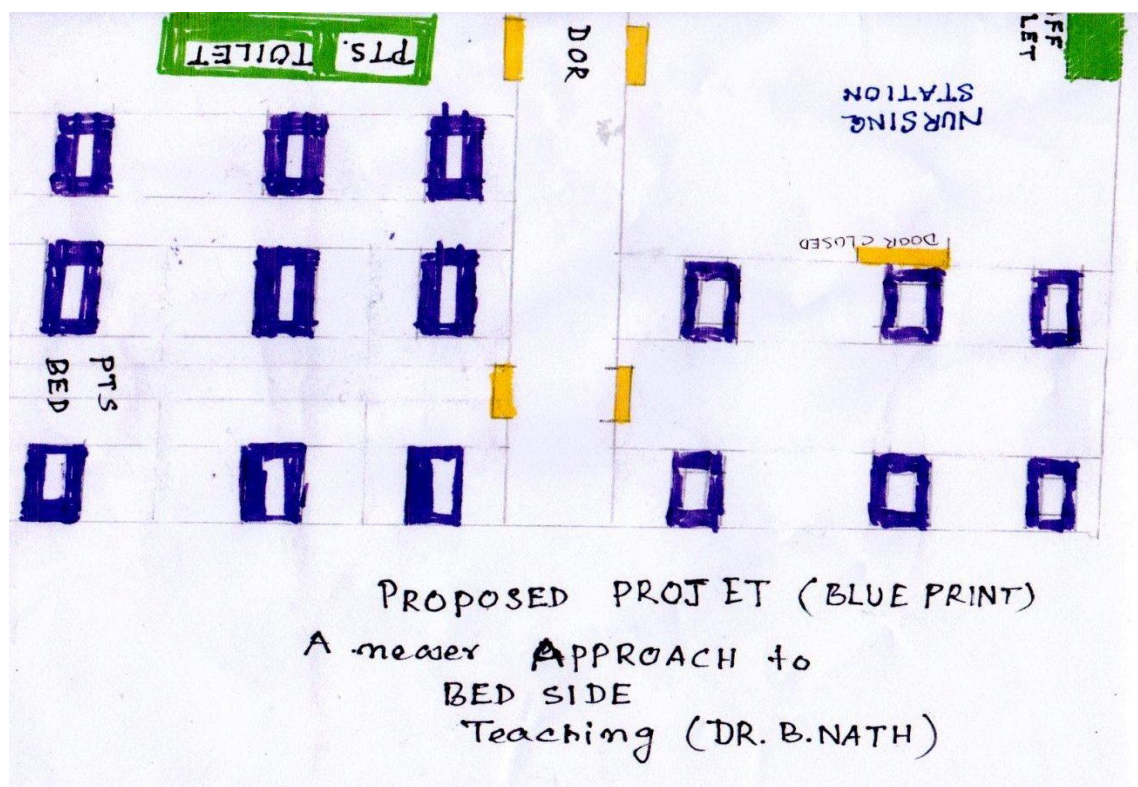
BLUE PRINT OF THE PROJECT SHOWING

Patient's bed

Nursing station

Conference room with well equipped internet connection and others.





After bed side study of the patient, the students are to attend the conference room (Discussion chamber)

CONCLUSION

- Bed side teaching should be 20-30 minutes duration.
- History taking, physical examination, local and systemic examination (like C.V.S., RS, C.N.S., Abd, skeletal system) are a must for bed side teaching.
- Demonstration of signs – like Murphy sign, Rovsing sign, etc. should be done at bed side.
- Demonstration of jerks and sensation etc should be done at bed side.
- Students are to be shifted to conference room (where every facilities are available)
- Bed side teaching regarding questions of the students to be discussed in the conference room (discussion chamber)
- Recent investigations and recent treatment to be discussed under umbrella of internet.
- Recent bed side teaching as discussed will improve the teaching from 16% to 100%.
- Our teachers should welcome this newer method.

On conclusion

This is my message to respected teachers of R.D. Gardi Medical College.

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