

## **Tips for Leading a Case Discussion**

### **Introduction**

Leading a case discussion is very different from giving a presentation. When making a presentation you are usually "telling." When leading a case discussion you are almost always "asking." A good case discussion leader reveals each component of the case in succession and asks participants questions as a way to guide them through case in a way that facilitates the acquisition of information as well as clinical reasoning skills. An effective discussion leader shows students how smart they are as opposed to how smart he/she is. It is the difference between being the "sage on the stage" or the "guide by the side." *This handout is designed to help you lead a case discussion successfully as a "guide by the side."*

### **Prior to the Session**

- Examine and become familiar with the following materials sent to you by your regional office.
  - Case
  - Objectives for the case
  - Facilitator's guide
  - Schedule
  - Quizzes (pre-test and post-test)
  - References/Readings
  - PowerPoint Presentation
  - Time Schedule
- Read through the entire case prior to conducting the discussion.
- Be aware of the student learning objectives for the case. Your job as a "facilitator" for the discussion is to help the students accomplish the "learning objectives."
- Become very familiar with the facilitator's guide. The guide has answers and notes in blue. These notes can give you cues as to questions you can ask. These notes will help you stay on track and will also help you keep the students on track.
- As you look through the case think about how much time each section of the case will take to discuss and plan accordingly so that you do not have to rush through the latter parts of the case.
- If you are not familiar with the regional campus conference/class room, make arrangements to visit the office and to see the setting where you will be leading the case discussion. You may want to have the technology person show you how the AV equipment works and to practice with it.
- Learn about the Students
  - All the students in your group will be 3<sup>rd</sup> year students who are in their first, second, or third clerkship.
  - Get to know something about the students by viewing information about them on the web. You can see a biosketch on each student at <http://med.fsu.edu/students/2006profiles.asp>. Just click on the name of each student at your site who is in the 2006 class to see picture and information.

### **On-Site Logistics Just Prior to the Beginning of the Session**

- Arrange the tables and chairs in a horseshoe arrangement. (This may be already done for you.) This arrangement facilitates communication among the students as it makes it easier for them to make eye contact and to clearly hear each other. This suggested seating arrangement is critically important and the importance of it should not be underestimated. The traditional classroom sitting arrangement in which students are in rows does not work well for a good discussion.

- Work with the education technology person to help you bring up the visuals on the smart podium and then review how to change slides. Practice with the equipment by actually bringing up the slides and moving back and forth through them.

### **Starting Off the Discussion Session**

- Introduce yourself to the students.
  - Tell them about your practice and let them know something personal about you such as a hobby, family information, etc. The idea is to say something to help the students relate to you as a person.
  - Smile. Be friendly.
  - Self disclose (e.g. Tell them a story about yourself when you were a third year student.)
- Ask students to introduce themselves.
- Having the students make a name tent to place in front of them can be very helpful. They can do this in just a minute with a piece of notebook paper.
- Invite all of them to participate and let them know that they are in a safe environment where incorrect answers are learning opportunities and that no one will be made to look ignorant.
- Encourage students to direct their answers and comments to their peers and not always to you.

### **During the discussion**

- Withhold Your Assumptions about What Students Do and Do Not Know. It is okay to ask what you might consider very basic information.
  - Ask the students to define basic medical terms when they come up in the case (e.g. icterus, tachypneic)
  - You might ask a question like, "Are you familiar with the JNC Guidelines for .....?"
  - Ask basic anatomy and physiology questions when they are relevant. For example, "What other structures are in this region of the body?" We see that the patient has to sleep almost sitting up. In physiological terms how do we explain this?
- Make the Patient Real
  - Sometimes the case may refer to the patient only by initials. Give the patient a name. You might say, "Let's refer to our patient today as Mrs Graham."
  - When the opportunity presents itself in a case ask the students how they would explain something to a patient. Role play can be very effective in this situation. You might say, "Pretend for a moment I am Mr. Stone and you are the physician. Tell me you believe I have kidney stones and explain to me the treatment you recommend?" After a student does a role play answer, ask other students to comment on what they would say the same or differently.
  - You may also want to ask the students how they might involve the patient's family members in the flow of communication.
- Don't Fall Into the Trap of Always Being the "Answer Man."
  - When asked a question, redirect the question to the group. This gets everyone involved and lets learners know that their peers are also a source of information.
  - Every time you find yourself starting to answer a question or "telling" the students something – STOP – and try asking a question instead.
- Encourage Expansive Thinking
  - When the question comes up asking the students to develop a working differential in order of probability allow the students to develop a complete list. Too often students in the clinical setting get the message that it is wrong to give consideration to diseases or conditions that have a low probability of occurring. This discourages thoroughness in their thinking process.

- When exhibits such as radiographs, CT scans, etc. are shown in a case. A good general question is, "What do you see here?" You may want to hand the laser pointer to a student and ask him/her to point out particular features on the exhibit. *Don't forget to get your laser pointer back.*
  - If the patient is a 50 year old and discussing the implications of a particular finding, ask students what the implications of the finding might be if the patient was 80 years old.
  - Use "What if" questions. (e.g. What if the bowel sounds in Mr. Jones were increased instead of decreased? What would we then be thinking?)
- Facilitate Clinical Reasoning
    - Leading a case discussion involves helping the students think (process) and also helping the student remember (product). So a big part of a case discussion involves the exposing of the students' thinking processes. As the facilitator look for opportunities throughout the case for this. The trick to getting the student to share his/her thinking process without sounding threatening is in how you phrase the question or statement. For example you might say, "Explain why you would order a thyroid function test?" This might be threatening to the student if said in the wrong way. Alternatively, you might ask, "How did your thinking go relative to ordering a thyroid function test? OR "If you had to justify the ordering of a thyroid function test to your managed care organization, what would you say?"
    - Look for opportunities to ask the students to demonstrate a relationship between subjective information (S) and objective (O) information. For example the case might show some lab data. Your question might be, "What might be the relationship between some of this data and the patient's chief complaint? The goal is to help students to start examining the congruency/relationship among the S, O, A, and P.
  - Use good/effective questioning and interactive techniques. Here are some ideas and examples.
    - If you want a particular student to answer a question, call the student by name.
    - Alternatively, do not call students by name when asking a question that you want everyone in the group to think about. When you ask a specific student a question, it is quite possible that everyone else will cease thinking about an answer.
    - You ask a question and one of the students gives a partially correct answer. You might say,

"Could someone else add to John's answer?" OR

"Good. That is partially correct. Could someone else add to John's answer?" OR

"What do some others think?"

Note: You can also say, "What do some others think?" to an answer which is fully correct.

- Periodically do a role-play. For example, suppose you asked the question, "What are some questions you would like to ask Ms. Jones? A student answers, "I would like to know how much pain she feels in her legs when she gets up from a chair." You say, "That would be a good question. Pretend I am Ms. Jones and ask me your question."
- Use a technique known as wait-time. Wait-time is a period of silence (3-5 seconds) after you ask a question which gives learners time to construct an answer. Too frequently, teachers wait less than 1-second after a question before they say something. Using wait-time after a student gives an answer is also a good strategy because it gives time for students to add to the comments of their colleagues without you asking them to do so.

- Reinforce Students
  - Calling students by name is reinforcing especially when they have answered a question correctly or asked a good question (e.g. "Dave's suggestion that we need to check for interaction between the two drugs prescribed for this patient is very important.")
  - When students are generating a differential, write down each differential on the board or document camera stand (probably easier to do this on the white board).
- Attempt to Get Every Student Involved
  - Try to ask every student a question or get them involved in some way. Early in the discussion use some strategies to make participation non-threatening. For example, you might say, "Would everyone who thinks we need a pulmonary function test done raise their hands."
  - Try to make sure you ask every student a question. Going systematically around the room might be too predictable but you could go back and forth across the room with your questions to be systematic but less predictable.

### **Summarize at the End of the Case Discussion**

- One way to summarize a case is to ask the students to provide a summary in a very succinct fashion (e.g. complete essence of the case in two minutes). Then ask each student going around the table to express one really important thing he/she learned from the case.
- Another way to conduct a summary is to read or show the student the learning objectives of the case and ask them if they feel that they accomplished the learning objectives as a result of participating in the discussion.
- Another strategy is to ask each student to write down the one most important thing he/she learned from the case discussion and then have each student read his/her statement.