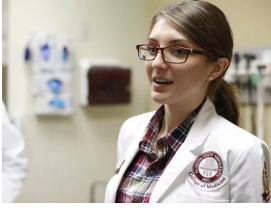


'Does it hurt?' Med students practice on 'real' patients

Marina Brown, Democrat correspondent Published 3:23 p.m. ET Aug. 5, 2017 | Updated 5:07 p.m. ET Aug. 5, 2017



(Photo: Hali Tauxe/Democrat)

Remember when your mother told you, “Don’t cry wolf... you’re just pretending you’ve got a tummy ache.” Or how you practiced in the mirror looking sick enough to stay home on Monday? Maybe it was that “limp” designed to garner a little sympathy from the PE coach?

At the Florida State University Medical School’s Charlotte E. Maguire, M.D. and TMH Clinical Learning Center, it may be that just such home theatrics turn out to be the right kind of preliminaries for the 120 paid volunteers who play sick every day for medical students learning to identify and treat illnesses.



Second-Year Medical Student Reema Tawfiq demonstrates an interaction with Standardized Patient Janet Evans in the Clinical Learning Center of Florida State’s College of Medicine on July 19. (Photo: Hali Tauxe/Democrat)

Associate Professor Debra Danforth is the Director of the Maguire Clinical Learning Center, and in many ways, its conceptual brain. Throughout the year, Bridge Program students, full-fledged medical students, as well as hospital residents cycle through settings that replicate a modern doctor’s office suite and its examining rooms, as well as a hospital setting. And in each room, there is a “faux” patient waiting with a complaint, a pain, a symptom for the young doctors-to-be to figure out.

Debra Danforth arrived in 2006 with the mandate to design not only a physical setting that would simulate actual clinical settings but also create means of evaluating students’ performance. From the Mayo Clinic to Stanford, more and more medical schools’ simulation settings provide students with early hands-on experience even as they are learning about the symptoms whose malfunctioning systems will make a patient ill.

“This is how it works,” says Danforth, literally bubbling with enthusiasm as she turns out the lights in a room equipped with two-way mirrors facing two separate examining rooms. “First, the new students will have practiced assessments on each other even before coming to the simulation setting. Then he or she will watch a second-year student and a physician perform the examination on a standardized patient, one of the paid volunteers. Then, the new student performs the exam, mentored by a second-year student who is already skilled in assessing the patient through history-taking, physical exam and making sense of what was seen. The next day, the new student conducts the exam himself. Students can see video of themselves afterward for critiquing... as can the clinical staff.”

From the darkened observation room, replete with monitors and recording equipment, a young pony-tailed student is snapping her fingers beside the ears of a “patient.” The same middle-aged woman will be asked to track the student’s finger as it moves back and forth across her field of vision. Then the budding doctor will palpate the lymph nodes of the neck, listen to the heart and breath sounds, and take the blood pressure of the ersatz patient. And then the student does something else. Something that the doctors and Debra Danforth think is just as important as being an expert technician. She will listen to the patient.



Second-Year medical student Jordan Carbono, left, demonstrates an interaction with Standardized Patient Bobbi Hill in the Clinical Learning Center of Florida State's College of Medicine on July 19. (Photo: Hali Tauxe/Democrat)

"Being 'patient-centered.' That's what we're really being taught here," says Reema Tawfiq, a second-year medical student from Tallahassee. "That's how I'm going to run my practice... giving a patient time to develop a relationship with me. I want them to know I am really listening and be willing to tell me even the little things that often make a difference in the kind of treatment I may give."

Jordan Carbono, a student from Kissimmee finds working with real human beings revelatory... even though he's fully aware they are 'stand-ins' for actual sick individuals. "Doing this allows me to learn how to ask the right questions... how to feel comfortable with topics... like sex or death... things that in the beginning were uncomfortable to talk about, especially if the person is older or younger than I am." Going back and critiquing his 'performance' on video he says has, "made me be able to see the doctor/patient interaction through the patient's eyes."

And what about the "standardized patients," those who are willing to show up with complaints of emphysema, arthritis, heart palpitations, bum knees, chronic headaches, dementia, and yes, even genitourinary problems?

Bobbi Hill and Janet Evans have been "SPs" for eight years. Learning about the program through word of mouth or public presentations, they have developed friendships within the group of paid volunteers and at the same time see it as a "kind of public service." "We are given a one page 'script' that tells us about our malady," says Evans. "We memorize symptoms and tell them to the 'doctors'. But we don't give them any more information than that. We make them ask the questions. It's up to them to extract the information... and that's really a skill they will learn."



Robert Neff, pictured July 19, has been a standardized patient at the Clinical Learning Center in Florida State's College of Medicine for a decade. (Photo: Hali Tauxe/Democrat)

Robert Neff is another SP. "We're called 'standardized patients' because we work from the same template," he says. Over the last 12 years, Neff has portrayed someone with stomach, heart, lung, and joint problems. "It takes about two days of prep time," he says. And though people without actual acting experience are preferred, Neff says there is some acting going on.

"Once I had to be a person whose lab tests had been lost. I had to get irate and demand that they be found. But the student got so befuddled he panicked, turned and left the room!" Neff laughs like a grandfather remembering a moment when a grandchild grew up. "But Ms. Danforth just told him to go back in the room and handle it... and he did..." Now Neff's wife and children all do stints as SPs.

After each day's session, not only will the second-year teaching assistants score the students, but so will these volunteer SPs. "We rate them on their ability to communicate with us. How comfortable they seemed dealing with us. On their bedside manner. And if they asked the right follow-up questions. "We make them earn the information," chuckles Neff.

And while the Standardized Patients are taking a snack break between groups of students on the way for the afternoon session, there is another group of 'patients' who appear to be taking very extended naps.



Sophisticated patient simulators in the "mannequin morgue" at the Clinical Learning Center in Florida State's College of Medicine July 19. (Photo: Hali Tauxe/Democrat)

Debra Danforth throws open the double doors of two large closets. Inside are banks of bodies, each decorously covered by a sheet. With a tug, she pulls one of the bed-shelves out on rollers. "The Annies are in this closet, the Sim 3-G men in the other," she says, adjusting a drape over a woman's chest.

These are some of the 20 anatomically correct medical mannequins that the Clinical Learning Center uses to give students practice in everything from starting IVs to intubating to catheterizations. "They are very expensive," she says. "Each one costs from \$65,000 to \$200,000...but are sophisticated enough that you can hear types of heart sounds, bowel sounds, even cause a patient to become cyanotic or have a seizure."



Director of the Clinical Learning Center Debra Danforth holds "Baby T.K.," an infant patient simulator, July 19. (Photo: Hali Tauxe/Democrat)

Here, Danforth pulls out one of the six baby mannequins. “We call him “T.K.,” she says, cradling an infant with soft skin and the look of an imminent squall on his face. Then with a touch of a button, little T.K. starts to whimper, then wail, and around his little mouth, a bluish tinge is spreading. Suddenly, his arms and legs are flailing. T.K. needs a doctor! Luckily, a dozen are just around the corner.

“We take the mannequins, even the baby, with us when a bus-load of SPs and boxes of mannequins make the 10-day trip to other FSU medical facilities around the state,” she says. “We want to share the same experiences we are giving here. It’s amazing how much the students learn.”

Meanwhile, standardized-patient, Robert Neff is smiling. He’s recalling a recent real-life visit he’d had to make to the Tallahassee Memorial Healthcare Emergency Room. “I said to the doctor, you look real familiar. And he said I did too. Then we realized that he’d been my doctor back before he was a real doctor at the FSU Clinical Learning Center.”

Neff’s smile broadens. “From the way he treated me, I think he probably learned a whole lot.”

Interested in becoming a Standardized Patient? Learn more at: <http://med.fsu.edu/index.cfm?page=clc.sp>
Or contact: Stormie Andrews, Standardized Patient Manager at: stormie.andrews@med.fsu.edu

Contact Marina Brown at mcdb100@comcast.net

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