



Education Prescriptions

Teaching in a clinic or ward can be fatiguing. Simultaneously, certain constraints on an instructor's availability make the teachable moment elusive. Yet, unquestionably, situations that might normally drive good learning moments arise time and again in these settings. Making sure that these moments are captured and followed-up on are chief roles of a clinical instructor. Students are there not only to learn core elements of the particular clinical rotation, but also to experience the whirlwind of possibilities that arise therein. Often it will be the latter that stimulates significant teachable moments for the student.

To make sure that these moments are not lost in the inexorable pace of clinical work, instructors can use a tool called Educational Prescriptions. These specific and brief documents:

- Specify the clinical problem to be explored
 - Clarify the question to be answered
 - Identify the person responsible for answering the question
 - Set a deadline for the material to be collected and presented
- Indicate potential searching practices for the particular problem

Born of the KWHL charts used in more traditional education settings, Educational Prescriptions outline what the student **K**nows, describe what the student **W**ants to know, explain **H**ow the student will come to know this, and then allow the student to report what was **L**earned. Moreover, an Educational Prescriptions keep both the student and the instructor in sync on the particular question being explored.

Essentially, Educational Prescriptions help the preceptor and the learner ask better and more intentional questions about the health care being practiced. This skill is based on the premise that first there must be an identification of a patient's needs, then there is selection of an opportunity for learning that fits both the patient's and the learner's needs, then there must be guidance for the learner to transform knowledge gaps, and finally there is an assessment of the learner's skill and performance.



Educational Prescriptions can be used in all facets of medical education: at the bedside, in Journal Clubs, on morning rounds, at noon reports, and during grand rounds, etc. They even have a place in general didactic sessions in small group problem solving. They can be initiated by either the instructor or the student, and in the right circumstances, they can be completed by both as well. (It is a wise instructor who knows when to demonstrate life-long learning skills to her students!)

Occasionally, Educational Prescriptions can be used as a general assignment for all students involved in the learning engagement. Having each student submit a question as an Educational Prescription allows the instructor to have a source of clinical issues to call on regularly. Common themes can be identified. Specific discussion groups can be arranged. All-in-all, Educational Prescriptions can become a highly functional part of your teaching tool box.

So when the busy world of clinical practice makes teachable moments hard to corral, think of the Educational Prescription. Outline the topic raised by the student, clarify the question being asked, set a time line for finishing the research, and make two copies of the prescription—one for the student and one for you.

These documents can be organized in many ways, but we've included one here as a model.



Educational Prescription

Patient's Name

Learner:

3-part Clinical Question

Target Disorder:

Intervention (+/- comparison):

Outcome:

Date and place to be filled:

Presentations will cover:
search strategy;
search results;
the validity of this evidence;
the importance of this valid evidence;