

Anesthesiology Residents as Teachers: Curriculum Development for a Resident Teaching Elective

Danielle Roussel, Harriet W Hopf, Michael K Cahalan, Lazarre L Ogden
University of Utah School of Medicine, Department of Anesthesiology

Learner Audience: Anesthesiology Residents

Background: Teaching skills development is an important component of residency training. The AAMC recommends implementing structured resident curriculum for developing residents as teachers. The ACGME expects that residents “develop skills and habits to be able to participate in the education of patients, families, students, residents and other health professionals.”

Needs Assessment: Most anesthesiology residents have had little or no formal training in medical education; their teaching skills have been acquired primarily through an informal curriculum of observation and practice. Prior to the introduction of the Resident Teaching Elective our anesthesiology department did not have a curriculum for developing residents as teachers.

Hypothesis: Anesthesiology residents serve an integral role in the clinical anesthesiology education of rotating medical students; residents who choose to pursue a career in academic anesthesiology will continue to rely on their teaching skills as they participate in medical student and resident education. The development of a formal Resident Teaching Elective curriculum will improve resident teaching.

Curriculum Design: The Resident Teaching Elective is offered to senior anesthesiology residents during four-week rotations in the University Operating Rooms. The curriculum emphasizes five categories of medical education: characteristics of effective teachers, learning and education theory, curriculum development, teaching skills for different learning environments, and feedback and evaluation. Learning modalities are directed reading, faculty mentorship, and practical experience. Practical teaching experiences with rotating medical students include providing one-on-one clinical teaching in the perioperative setting, developing and delivering OR teaching topics, facilitating skills development workshops in our patient simulator, and preparing a one-hour didactic conference.

Outcome: Faculty observation suggests that the curriculum has favorably affected resident teaching. Feedback from faculty mentors, resident participants, and medical students has been positive. Improvement strategies for the elective include increasing faculty mentoring, compiling resident deliverables, and minimizing logistic challenges. We are formulating an evaluation plan to objectively measure the impact of the Resident Teaching Elective.

References:

Whitcomb, W. *The Clinical Education of Medical Students: Report on Millennium Conferences I & II*. in *Millenium Conferences I & II*. 2001, 2002.

<http://www.acgme.org/outcome/comp/GeneralCompetenciesStandards21307.pdf>.