

Challenges For Supervisors of Surgical Residency Program

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The teaching and learning strategies have been the subject of extensive research in recent years. Traditional teacher centered approach is gradually being changed to learner centered approach. In teacher centered approach that remained part of teaching strategy for decades teacher's role was to provide information and then assess. Students usually remained passive receiver of the information. With student centered approach emphasis has shifted to students who construct knowledge by collecting, analyzing, synthesizing and finally integrating the acquired information for problem solving. Students are thus actively involved in this approach. They learn in the background of a context and relate information to their prior experiences; an andragogical approach. Teacher's role is to facilitate and guide.¹

Based upon above approach it is now a challenge for traditional supervisors of residency program to update themselves for this paradigm shift. The teaching strategies are different from traditional one way communication of information. Many models of teaching are available for clinical teaching and learning. They can be used in wards, outpatient department and operation theaters.² New electronic technologies are fast entering into the clinical teaching arena.³

At present not all hospital faculty members are aware of this change. In order to adopt this educational strategy, workshops and short courses must be planned. Faculty members may choose from number of such courses offered by many universities and colleges.

Supervisors must train their residents to become competent clinicians. Residents must possess capability of solving complex problems using critical thinking. They must learn to work in a team with good communication skills. They must understand importance of self directed learning and deep thinking. In this regard the CanMED framework is worth mentioning. It is derived from "Canadian Medical Education Directives for

Specialists". This framework is a guide for physicians as to what abilities they must have in order to improve patient care. There are seven key roles which are needed for medical education and practice (Fig 1).⁴

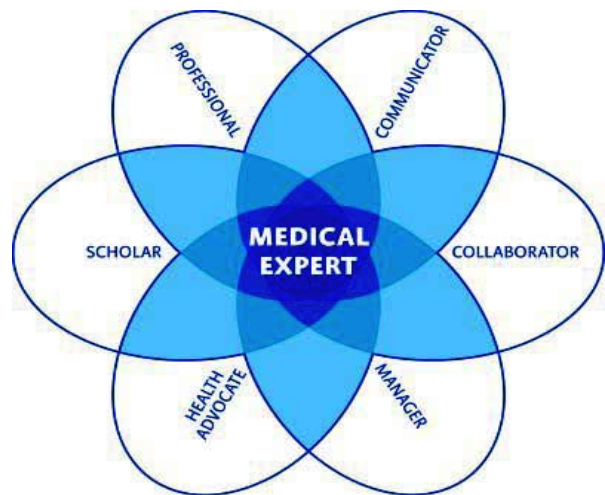


Fig 1: CanMED Framework

Most of the supervisors are not formally trained as teachers. They must therefore, strive hard to fulfill this responsibility by acquiring competencies expected of an effective teacher.

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