

## Recent Advances in Medical Education

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To help the learners to transfer their knowledge, skills, and attitudes focus should be made to teaching knowledge, skills and attitudes in clinically relevant contexts, using integrative patient scenarios, or cases. This will allow the students to build on success, reinforce prior learning, and become prepared to transfer their learning to new and different situations.

A new way of designing the curriculum have been published known as the **CASE Curriculum Model** that focus on the achievement of Competencies through Cooperative, Active, Self Directed, and Experiential learning.

*Cooperative Learning (CL) in the CASE Curriculum* has five important and necessary features: 1) positive interdependence, 2) face-to-face promotive interaction, 3) individual accountability, 4) interpersonal, and 5) small group skills uses Active Learning (AL) of the CASE Curriculum incorporates one or more of the five elements of: 1) talking and listening, 2) reading, 3) writing, 4) reflecting, and 5) creating into the engagement by learners in relevant and authentic tasks in a supportive environment. Compared to a traditional approach of passive information transmission, Active Learning produces better learning, includ-

ing concept formation; increased motivation; discovery of misconceptions; and the acquisition of knowledge, critical thinking, attitudes and values, and interpersonal skills.

*Self – Directed Learning (SDL) of the CASE Curriculum* incorporates opportunities for students ranging from near – complete teacher or institutional control of the learning tasks and environment to greater learner control.

*Experiential Learning (EL) of the CASE Curriculum* is based on the process by which students will tackle these progressively more complex tasks, sometimes in groups. Beginning with a particular experience such as a patient encounter or paper case, students first plan a response to the situation and then carry out their plans. The cycle moves on to an observation or data collection stage and finally to reflection and the creation of general rules and principles. This simple cycle comprising of 1) plan, 2) act, 3) observe and 4) Reflect is a process that will help students approach and learn from experiences they encounter.

It is hoped the medical educators will find this piece of information very interesting and useful.



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