
Student's Corner
Letter to the Editor

Implementing Problem Based Learning in the Wards- A Final year student's Perspective

Madam, Medical Education has undergone a major paradigm shift since the last few decades. The adoption of Problem Based Learning as a way of imparting medical education in a large number of medical schools around the world¹ has been one of the cornerstone changes seen in medical education.

Instead of conventional lecture based learning (LBL), the PBL system provides a more group orientated, interactive learning environment. In PBL process small groups of students are provided with a clinical problem and asked to find solutions (s). PBL has three sessions. In the first session students use their existing knowledge and identify the gaps of information needed to solve the problem. The second session involves self study, in which students browse through the required literature to solve the clinical problem. This session motivate students towards self learning and the use library and internet as well as group discussions in order to find solution (s) for the given problem.² In the third session, the students present solution (s) to the problem. In all these sessions group dynamics is maintained and active participation of all the students is encouraged by the PBL facilitator.

At Ziauddin Medical College, a hybrid form of PBL was adopted from its inception in 1996.¹ During the pre-clinical years, students were exposed to a wide variety of clinical problems and conditions via PBL. Students worked

as a cohesive unit in order to solve the problem given. Federman³ Dean of Medical education at Harvard Medical School in his article found out that the introduction of clinical problems from the first year has enhanced the interest of First year students and has also provided an opportunity to explore the moral and other issues related to the cases. PBL also helped in building student's confidence in gathering information and stating their opinions.⁴ A recent study from Missouri shows that the mean scores of PBL students in step1 and step2 of USMLE were significantly better from the graduates of traditional curriculum.⁵

As clinical students from 3rd year onwards, students came across different types of medical conditions in the wards and also during their electives. Prior interaction with PBL made the students better attuned to these conditions and helped in directing their clinical management more effectively. It was easier to correlate laboratory data with the clinical condition of the patients and also helped in case presentations in the wards. The interpersonal skills acquired during the PBL went a long way in interacting with the patients and the attendants. It helped in forming a strong bond of trust which eventually leads to a good doctor-patient relationship.

Khurram Anwar

Final Year MBBS, Ziauddin Medical College, Karachi.

References

1. Jafarey N.A, Problem based Learning, JPMA 2001;51.266-7.
 2. Khan I, Fareed A. Problem-based learning variant: transition phase for a large institution J Pak Med Assoc 2001;51:271-4.
 3. Federman D.D. Little heralded Advantages of PBL, Acad Med 1999;74:93-4.
 4. Keswani K. Problem-Based Learning: a student's perspective. J Pak Med Assoc 2001;51;302-3.
 5. Blake R.L, Hosokawa M.C, Riley. Student performance in Step1 and Step2 of USMLE following implementation of a PBL curriculum. Acad Med 2000; 75:66-70.
-
-
-