

Title: Enhancing clinical skills through experience at the primary health unit during the pre-rotation year in Brazil.

Authors: Amaral E, Sarian, LO, Inhaia C, Bicudo-Zeferino AM, School of Medical Sciences (FCM), State University of Campinas (UNICAMP).

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Background:

The new curriculum at FCM-UNICAMP aims to integrate disciplines vertically and horizontally, in order to meet the Brazilian health system's strategy plan to move healthcare delivery towards a family health model, using novel learning strategies.

Objectives:

The study was design to enhance clinical skills and clinical reasoning, through structured learning while caring for the most prevalent outpatient clinical situations among children, adolescents and adults. This experience was conducted under supervision, at the primary level of the public health system.

Method:

During the 4th of a six-year curriculum, 114 students were distributed in six urban primary health units (PHU), having five students rotating daily under supervision of one faculty and one previously trained local tutor for Pediatrics (Ped), Obstetrics & Gynecology (ObGyn), and Internal Medicine (IntMed). There were a total of 12 clinical hours/week, every other week, during nine months. Integrated seminars on the expected more common clinical conditions were conducted to build the clinical knowledge base. Student assessment was comprised of five clinical case-based multiple choice & short answer tests (MCQ&SA), formative clinical structured assessment with real patients (RP-CSA), summative RP-CSA, and student portfolio (including logbook, MCQ&SA scores, selected cases with literature review, and self-criticism on clinical skills acquisition and experience). Passing the course required a score averaging minimum 7.0 (0-10.0 scale). Program evaluation consisted of inter-institutional evaluation workshops with students, health managers, faculties and tutors.

Results:

There were 4,958 appointments in 14 clinical weeks, similarly distributed for the three disciplines and health units. There was 80 to 100% match between items at the seminars and top-10 diagnoses from clinical encounters in each discipline. The median scores were 8.6, 9.2 and 7.0 for portfolio, RP-CSA and MCQ&SA. The inter-institutional evaluation workshop concluded that the educational experience was successful regarding the cooperation between university-health services, reported client satisfaction, tutor performance, acquisition of clinical skills and reasoning, and professionalism.

Conclusions:

An early clinical experience was an efficient method to enable students to acquire clinical skills and professionalism, and to offer a comprehensive understanding of the patient needs and environment at PHU into the public health system. The most common clinical situations cared for fulfilled the expected profile, and were reinforced through the complimentary seminar program. The portfolio and RP-CSA assessment procedures were experienced as powerful tools for student evaluation, self-learning and criticism. Tutors from the health system were a valuable resource when teaching students clinical skills.

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