

## NEW PERSPECTIVES: PART I

## The Special Needs of Intern Learners: Principles to Guide Their Education

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Internal medicine residency training is challenging and necessarily so. Each month brings new trials that a doctor in training must pass. There is growing concern that medical education has not adapted to the rapidly evolving field of internal medicine. The Society of General Internal Medicine, American College of Physicians, and the Association of Program Directors in Internal Medicine have each issued recent position statements on areas of concern and plans for reform.<sup>1-3</sup> These include the need for more meaningful evaluation systems and the ability to tailor trainees' educational experiences more closely to their learning needs. The experience of the intern is a microcosm of these larger issues.

Within the overall trainee experience, the intern year is arguably the most grueling and is a period of transition that deserves particular attention. In one brief year, an individual must transition from student to intern and then prepare to lead the next group of interns who will follow. Each new intern is thrust into a world that is at once exciting and frightening. Each one has different strengths and weaknesses, but there are some educational needs that are shared by all. Interns universally are expected to expand their knowledge base and clinical acumen while managing innumerable tasks necessary for their daily work.

I vividly remember getting my pager at the beginning of intern year. There were times when that pager seemed to come alive. Nurses called with real problems on real patients—problems that demanded immediate effective action. With alarming clarity, I suddenly saw

the chasm between the role of medical student and that of intern. I felt vulnerable and exposed by my dearth of knowledge. Every difficult experience brought new humility, which in turn engendered a deep respect for those who cared to teach. I absorbed every detail I could from my mentors. I knew that any pearl shared today might prove crucial to the care of my patient tomorrow.

In the recommendations for residency education reform, there is agreement that a "core" education experience must be provided for future internists. Self-directed learning (SDL) must be considered part of that experience.<sup>1</sup> With the explosion of medical information, residency is only the beginning of life-long learning. Interns are capable of developing good habits if faculty can create an environment where real-time SDL can take place. This requires faculty to specifically model life-long learning in the clinic, hospital ward, and classroom.

Interns benefit from conferences that are geared toward their level of skill and that provide opportunities for group learning. No longer can we assume competency based solely on completion of medical school. Problem based learning (PBL) conferences are an ideal venue to address both knowledge gaps and encourage the development of SDL skills. In a PBL conference, interns accept a clinical problem, realize their knowledge gap, seek out and evaluate information, and then apply it to the problem at hand.<sup>1</sup> Interns experiencing these conferences together can see how peers as well as teaching faculty might approach problems encountered in practice.

Finally, interns need patient fac-

ulty who can remember the trials of internship and relate to the obstacles they are experiencing in their education. For example, faculty can encourage conference attendance and relieve clinical burdens when interns are given "protected educational time." A genuine, encouraging faculty member who is mindful of educational priorities sets the right tone for a healthy learning environment. Educators who love their profession energize the learning experience, and those who demonstrate a "zeal for the field of internal medicine" inspire our interns.<sup>2</sup>

If we pay attention to the unique experience of intern year, we can capitalize on the opportunity to build skills suited for modern health care delivery. The investment of time and talent by committed clinician-educators who promote SDL, create dedicated intern group learning experiences, and facilitate learning in the midst of busy clinical experiences can greatly help interns realize their professional potential and enjoy the journey of residency in the process.

### References

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