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Redefining our Territory: Reaching Pre-Matriculation Students With Case-Based, Online Instruction

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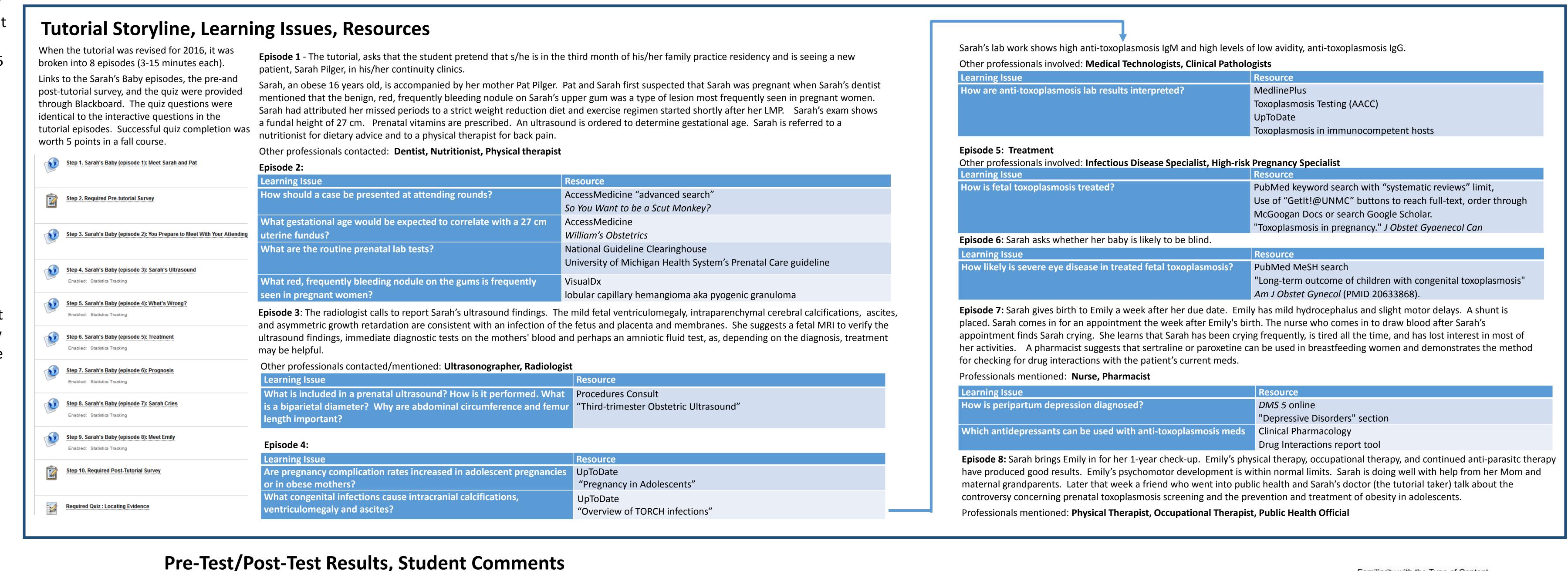
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Redefining our Territory: Reaching Pre-matriculation Students With Case-based, Online Instruction

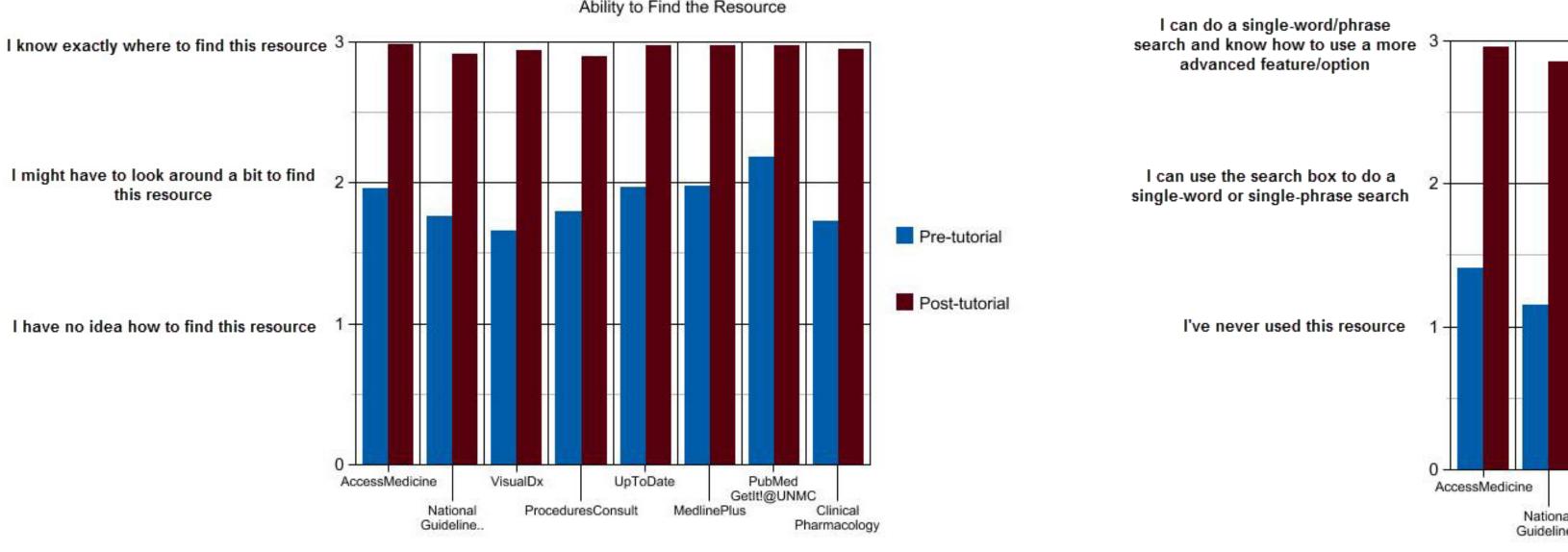
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Abstract:

Online educational tools have made it possible for our library to claim some educational territory that was previously unavailable to us, the prematriculation period. During the summer of 2015 we were able to add a two-part, case-based, online tutorial to our incoming medical students' pre-matriculation materials. We created the story of Sarah Pilger, a hypothetical, obese, pregnant teenager whose pregnancy is complicated by fetal toxoplasmosis. The case introduces the incoming students to almost all the resources they might want to use while enrolled at UNMC and also introduces students to the roles of the many healthcare professionals who are essential to the care of Sarah and her daughter Emily. Questions are posted throughout the Guide-on-the-Side tutorials and instant feedback is provided. Student response to the 2016 tutorial was overwhelmingly positive. We revised the tutorial for use during the summer of 2017, added pre- and post-tests, and will be able to present results of these tests at meeting time. Our dream is to one day have tutorials for each of UNMC's colleges' entering classes based on Sarah's case, and to use these tutorials to foster inter-professional conversation and education. We have already worked with faculty in UNMC's College of Allied Health Professions to create versions of the tutorial for clinical nutrition and ultrasonography students. The new tutorials are now used as the basis of an inter-professional learning experience in these programs' obstetric units



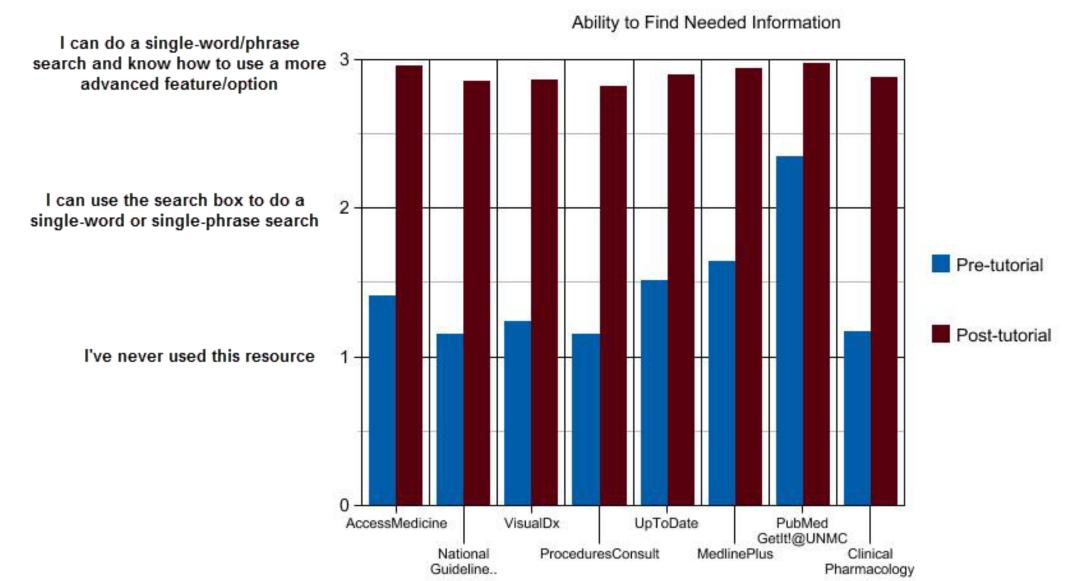
Building the Tutorial Series We used a fetal toxoplasmosis case because this allowed us to introduce the new M1s to a wide variety of healthcare professions as well as a wide variety of information resources. After creating a rough outline of the tutorial case we consulted our campus' Interprofessional Education Committee to insure that methods for introducing the various professionals were realistic. The tutorial was created in Guide-on-the-Side software (freeware from University of Arizona). This software is easy to use, allows for easy insertion of screenshots, linked definitions, and interactive questions (see screenshots below). Guide-on-the-Side also provides for image captions that make the final product ADA compliant. Screenshot from episode 2 showing an interactive question. If the student clicks "Check Answer" after selecting his/her answer.. v 🕶 🖶 Print 💌 Email 🔳 Get Citation 🝳 Search Book 🕈 Top 🤰 CME SARAH'S BABY 2: YOU PREPARE TO MEET WITH YOUR ATTENDING are assessed. Symptoms such as headache, altered vision, abdominal pain, nausea and vomiting, bleeding, vaginal fluid leakage, and dysuria are Learning issue #2 -- fundal sought. Uterine examination measures size from the symphysis to the fundus. In late pregnancy, vaginal examination often provides valuable information that includes confirmation of the presenting part and its station, clinical estimation of pelvic capacity and its general configuration **View Contents** amnionic fluid volume adequacy, and cervical consistency, effacement, 2. Sarah's fundal height is 27 cm, but the and dilatation (Chap. 22, Occiput Anterior Presentation). date of her last menstrual period ← Chapter 9 suggests a gestational age of 24 weeks. **FUNDAL HEIGHT** Based on the information about fundal Between 20 and 34 weeks, the height of the uterine fundus measured in height in William's and your knowledge of Introduction centimeters correlates closely with gestational age in weeks (Calvert. Sarah's history and physical, would you 1982; Jimenez, 1983; Quaranta, 1981). This measurement is used to expect her fundal height measurement to Prenatal Care in the United produce an accurate estimate of monitor fetal growth and amnionic fluid volume. It is measured as the gestational age? distance along the abdominal wall from the top of the symphysis pubis to Diagnosis of Pregnancy the top of the fundus. Importantly, the bladder must be emptied before a. Yes fundal measurement. Worthen and Bustillo (1980) demonstrated that at Initial Prenatal Evaluation 17 to 20 weeks, fundal height was 3 cm higher with a full bladder. Obesity or the presence of uterine masses such as leiomyomata may also limit Subsequent Prenatal Visits fundal height accuracy. In such cases, sonography may be necessary for Nutritional Counseling assessment. Moreover, using fundal height alone, fetal-growth restriction you can enter it in Blackboard later. may be undiagnosed in up to a third of cases (American College of Common Concerns Obstetricians and Gynecologists, 2013b). .. an immediate feedback pop-up will appear. ARAH'S BABY 2: YOU PREPARE TO IEET WITH YOUR ATTENDING Learning issue #2 -- fundal station, clinical estimation of pelvic capacity and its general configuration Great job. Sarah is obese and obesity (like a full bladder or intrauterine tumor) can disrupt the relationship between fundal

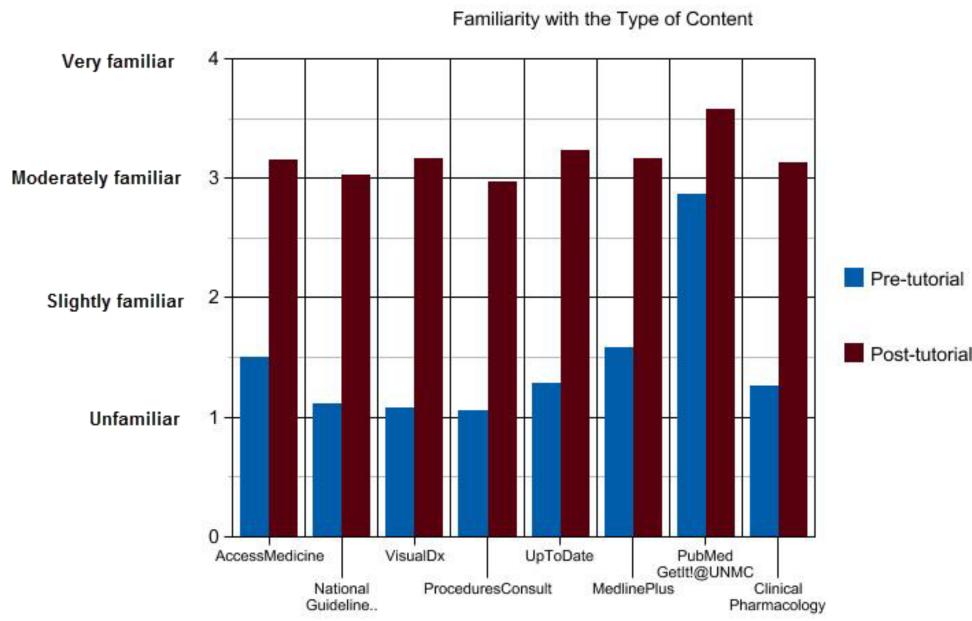


I am Better Prepared to Use Library

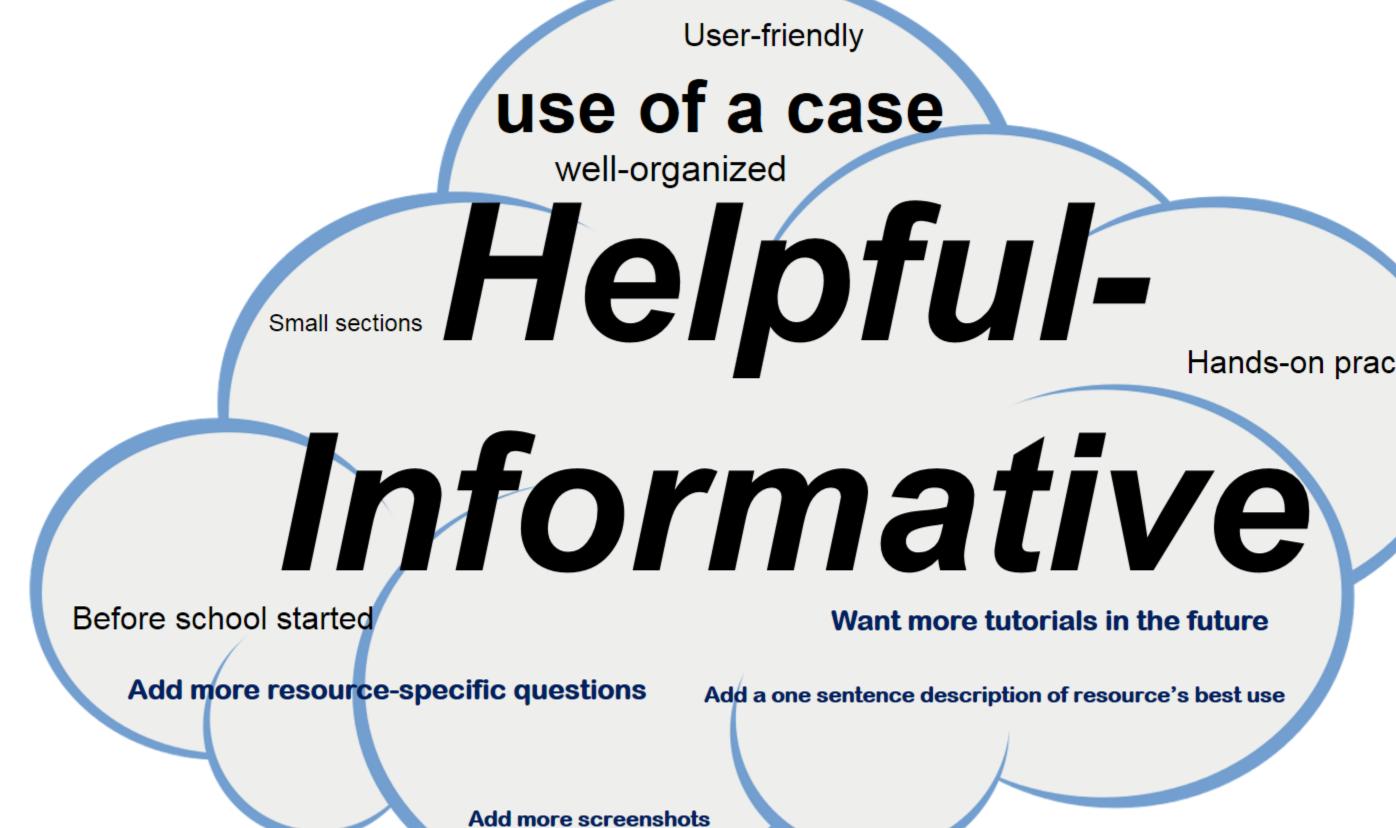
Resources to Address Learning Issues

Disagree Neither Agree Agree









Conclusions:

The Sarah's Baby tutorials were aimed primarily at increasing students' ability to select an appropriate online resource, find, and search that resource. Post-tutorial survey results show that students felt those aims had been achieved. The tutorial did present Pubmed search tips (the use of Boolean operators, parentheses, quotes, asterisks, filters, and the advanced search page). However, student understanding of the tips was not reinforced with interactive, search-tip-related questions. Survey results showed some improvement in students' PubMed searching facility, but not as much improvement as desired. In the comment section of the post-tutorial survey, several students requested more interactive questions focused on search techniques, and additional questions concerning PubMed search techniques will be added next year.

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