The Use of Interactive Virtual Patients in an Integrated Psychiatry-Neuroanatomy Course and a Psychiatry Clerkship

Authors: Foster, Londino, Noseworthy, Lind, Shah, Lok, Chuah and Rossen

Educational Objectives

The participant should be proficient in:

Hands-on use of a interactive virtual psychiatric patient (VP)

Understanding potential uses of interactive VPs in medical-student education.

Background

Medical schools are challenged to augment classroom experience with clinical correlations through small group learning and student self-study. This challenge is particularly relevant at Medical College of Georgia due to expanding class size and development of distinct campuses. The Psychiatry clerkship involves 12 distinct sites as far as 225-miles apart. We will explore if interactive VP scenarios\(^1\) can provide consistent self-study experiences in behavioral-health courses for 1\(^{st}\)-year students and can augment clerkship clinical exposure.

Description

We developed Web-based psychiatric scenarios in collaboration with University of Florida’s Virtual Experiences Research Group. Cynthia Young’s scenario, a 21 years-old college student with major depression, was described elsewhere\(^2\) (Figure 1). Two-hundred students will interact with this scenario as self-study in 1st-year psychiatry-neuroanatomy course in November-December 2009 and will then take a quiz based on the information obtained from the VP and in the classroom. Denise, a VP with bipolar disorder (Figure 2), was tested on twelve 3\(^{rd}\) and 4\(^{th}\) year students after obtaining Human Assurance Committee approval and informed consent. In the 1\(^{st}\) part of the scenario, Denise comes to establish care; in the 2\(^{nd}\) part of the scenario, the student interacts with her husband who calls with information relevant to her management. This scenario can substitute for a longitudinal experience during the psychiatry clerkship. We plan to implement the bipolar scenario in upcoming clerkship rotations and follow each part with quizzes about disease mechanisms, suicide risk and treatment options.

Evaluation:

Students appeared receptive to using these novel tools. Feedback from the implementation of these scenarios in the 1\(^{st}\)-year course and respectively in the clerkship will be presented at the meeting.

Conclusion:

Interactive virtual patient scenarios have the potential to become versatile tools of varying complexity that can augment classroom and clinical medical student education in psychiatry.

References:


Figure 1
Cynthia Young Depression Virtual Patient Scenario
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Figure 2

Denise Bipolar Virtual Patient

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