

Involving UGs in
Psychiatry
Theory &
Clinics

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Learning Objectives:

At the end of this session the we should be able to appreciate

1. Need for Involvement of UGs
2. Strategies in Theory & Clinics

At Induction, Continuation & Conclusion of each session

4. Connecting & Building parallel networks that can be

Rewarding for Teachers of Psychiatry as well as students



If you were a student,

What would make you attend Psychiatry
Class?





If you were heading a Teaching Institution?
what would you expect from Teachers?





It is but unethical to be in Teaching Institution and not being involved in Teaching Students!!!!



Two important Understanding

First (A Fact)

In India, Learning psychiatry for Medical students is **Entirely** optional (Attendance & classes).

Even for PG entrance examination!!

This Scenario is **Unlikely** to Change

This are not dramatically different for Dermatology
ENT-Ophthal



LATEST

its general secretary for 2014-16. For an Indian psychiatrist, the Society (IPS) represents the professional mother and nothing gives more satisfaction than attending to its needs and requirements. The job was taken with the idea that it would be not only taxing and challenging, but also exciting.

When the names of the new Executive Council (EC) members was announced in Pune, the Herculean tasks ahead of us were many, but most important were including Psychiatry as independent subject in the UG curriculum and bringing professional and patient friendly modifications in the upcoming Mental Health Care Bill (MHCB) 2013. The EC was well aware that both were at a stage where nothing but a miracle would work in favour of the society. Still IPS decided to draw a road map to crawl uphill, no matter how many times it would be pulled down.

The first task was to work in unison. A team comprising of the office bearers and UG committee went to the office of the Medical Council of India (MCI) and had a meeting with Dr. Ved Prakash, Chairman of the Academic Committee, who was quiet friendly and very vocal. He explained that in the present scenario it would be very difficult, to insert a new subject (Psychiatry) with an independent examination, within the already overcrowded MBBS curriculum. However he assured that the MCI was contemplating an integrated curriculum which would be more skill based covering all practical areas than theory based. The entire examination pattern would be overhauled and he would be more than willing to accommodate Psychiatry in the new syllabus. The members wanted to know who would be given the assignment of assessing the skills during examination and Dr. Ved Prakash affirmed that it would be the faculty of Psychiatry. He agreed to include a member of IPS in the core team which would draw the final draft and Dr. Rakesh Chadda, Professor of Psychiatry, AIIMS was nominated to be the official representative of IPS for all future discussion whenever MCI contemplates to change the pattern. I sincerely appreciate the efforts of Dr. T. V. Asokan, Dr. Vidyadhar Watve, Dr. Vinay Kumar, Dr. T. S. S. Rao and Dr. Rakesh Chadda in addition to Dr. Ajay Kumar, a member of MCI Ethics Committee who facilitated the meeting on record. An official memorandum explaining the IPS stand was presented to Dr. Ved Prakash.



IJP 2014- Oct issue Sect Report
MCI: At Present Scenario it is VERY DIFFCULT



Second Important Understanding

A Faculty in Psychiatry should be

Enthusiastic,

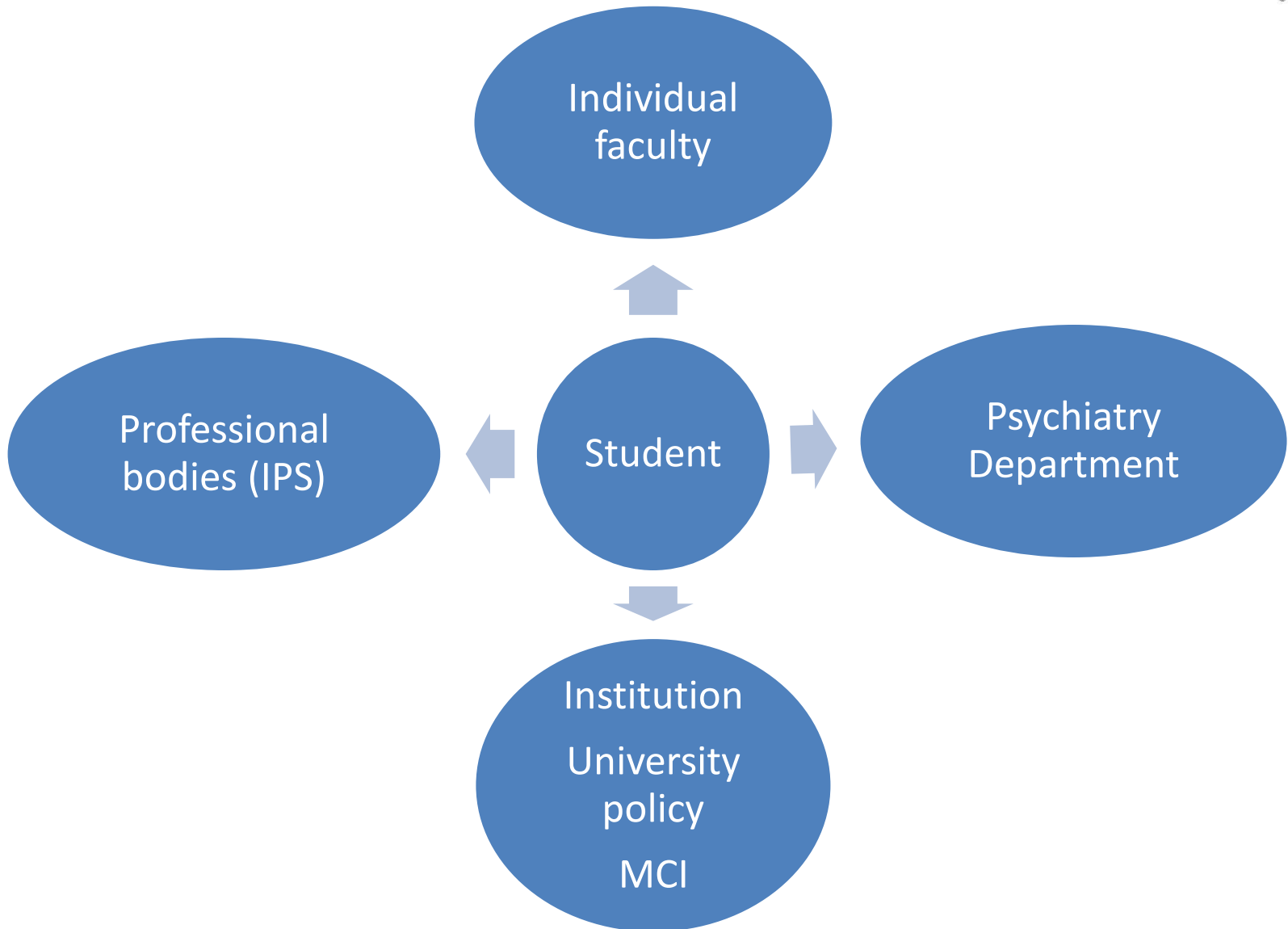
Persistent,

Flexible

&

Innovative to teach psychiatry

Onus of Involving Students





A Teacher's Task is to

1. Kindle interest in Psychiatry
2. Explore & Understand various aspects of Psychiatry
3. Incorporate basic skills in Psychiatry
4. Utilize those skills for gaining more knowledge and or, for benefit of their areas of interest

Learning

Involves Teachers & Students As Equal Partners
in the Process of Acquisition & Utilization of knowledge,
which is mutually beneficial and rewarding

What Do We Need Improve?



- ✓ Medical Students
- ✓ Faculty (who teach psychiatry)

NOT SO MUCH IMPORTANT
MCI
INSTITUTION



THE
CHECKLIST
MANIFESTO

HOW TO GET THINGS RIGHT

ATUL GAWANDE

Check List



- ✓ Are We **Utilizing** the allotted 20hrs of clinic & theory **effectively**?
- ✓ Are We Engaging **Interns** in **meaningful & Interesting** Manner?
- ✓ Have we tried **new ways to engage** the students?
- ✓ How much of time do we invest **in linking psychiatry with their Interest**?
- ✓ Are we sharing **our ideas**, making **joint efforts**?



There are something that can be done

At

Individual Level

Intradepartment Level

Institutional Level

Level of Organization

*There are too many possibilities at Individual level
As Teachers of Psychiatry in Undergraduate Medical
colleges*



To Involve UGs

What should we strive for ?

learners' attention

Clear objectives

learner participation

Our job is not to entertain —
but we don't have to be boring.



Physiology of a Lecture – 3 Ps

- *preparation,*
- *presentation and*
- *Post Class Reflection*

How many classes will each one of us get??

Never Cancel A Class – Even if it is Just one student!!!



Induction

How Do You Like to Start Your Class?





Set induction-Gaining attention

Verbal questioning, MCQ

Case scenarios/Problem/exercises

Picture/Video clip

quotation

statistics

unusual story

current events

Humor



JSS MEDICAL COLLEGE

(Constituent College of JSS University, established under section 3 of UGC Act)
SRI SHIVARATREESHWARA NAGARA, MYSORE - 570 015

☎ : 0821-2548338, Fax : 2493819, 2548345 , Website : www.jssmedicalcollege.in, e-mail: jssmc09@gmail.com

JSSMC/PA/512 /10-11

Date: 08.06.10

CIRCULAR

- Sub: 1. Introduction of Multiple Choice Question (MCQ) at the end of each theory class.
2. Compulsory wearing of Apron during working hours.

1. Introduction of Multiple Choice Questions (MCQ) at the end of each theory class.

It was decided in the College Council Meeting held on 21.05.2010 to introduce MCQ's solving at the end of each theory class.

All the teaching staff are hereby requested to prepare at least 5 MCQ's and solve the same at the end of each class, this process would help the students to prepare for the entrance exams.

Break up for 1 hour theory class is as follows:

- 10 min for attendance & introduction
- 40 min for lecture
- 10 min for MCQ solving from the topic taught.





Content

- Select content from the learners' point of view -
Relevance - Tailor the content to their needs
- 'less is more' - so decide what you want to say, then cut it down! Avoid overload of contents
- Each class can be balanced view of " Bio-psyhco-social"

CATATONIA



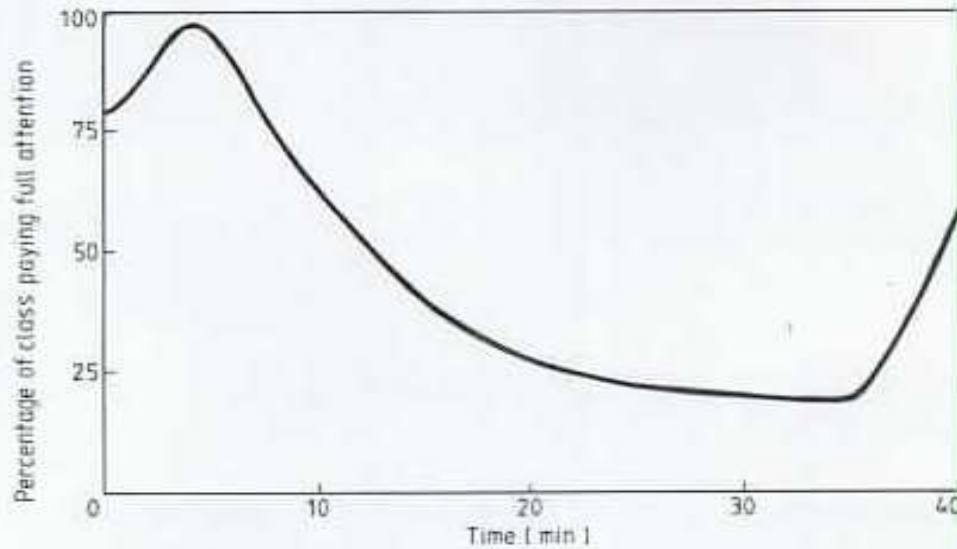


Figure 1 The attention curve^{2,3}

Once you have started the class

How Do you
Maintain Tempo?

How would you make it
Inclusive ?



Class is most attractive if it is Interactive,

Audio- Visual aids,

Images that help in retaining the information in memory,

Part of class by a student (whoever is interested) or in rotation.

Each class in 3 parts –each beginning with what they know/think/experiences





FISH BOWL

Basic idea. Presenter conducts a coaching session with an individual participant.

Other participants observe and learn vicariously.



INTELLIGENT INTERRUPTIONS

Basic idea. Presenter stops the lecture at random intervals and selects a participant.

This participant asks a question, makes a comment, or challenges a statement as a way of demonstrating that he or she has been intelligently processing the presentation.



INTERPRETED LECTURE

Basic idea. The presenter pauses from time to time during the lecture. A randomly selected participant “translates” the lecture into plain English.



RAPID REFLECTION

Basic idea. Presenter pauses at different junctures during the presentation.

Participants reflect on the latest segment of the presentation and write down one insight or application idea.

A few random reflections are shared with the entire group.



How Should it End????

-





How Should it End

Conclusion : Provides a logical ending – a sense of completeness and structure.

Check to see whether students have accomplished the main purpose of the lecture

Summary

review the important facts and major concepts of the presentation.

opportunity for the take-home message

Revisiting the learning objectives -a powerful way of summarizing

Interesting Task: Watch “Beautiful Mind”

Option of enrolling to examine a “patient”



Teaching by Demonstration

Students wish to see patients to get the first hand information

At end of class enlist their email Id & contact number

Whenever patients are available & are willing for interview

Yourself or PGs can demonstrate in small groups 2-3

LINKING theory & clinics

A Good Teacher



- Generate curiosity -early in the lecture
- Present the material- clear & logical sequence
- Make the material accessible, intelligible and meaningful
- Cover the subject matter adequately
- Show the enthusiasm & passion for the subject
- Pace the lecture appropriately -Be concise
- Illustrate the practical applications of the theory presented
- Are constructive & Accept criticism



Psychiatry Clinics

How are They Different??

How do you conduct Clinics?

What are the challenges?





Small group teaching
Once in lifetime ???
Very erratic attendance
2-3 hours

Interview skills - approach to patient
>Role play
Scenario as presenting to physician
Audience discuss +/- of physician approach

Even a cooperative Patients can be considered &
patient perspective considered



Psychiatry history taking vs other
pattern of history taking

Brief - easy to understand - emphasis on
MSE

Focused - cases for discussion -Mood-
psychotic - substance dependence-
suicide- anxiety

Students -Split group -Make teams-
anyone can be chosen for presentation

Teams moderate others presentation - competitive-comprehensive discussion in short span



Clinician demonstrates is one of best practice to be incorporated

Pre- post - case discussion through TEC Breaks / SMART breaks!!!!

Assigning the case a day before

Sorting task in relation to case BUT relevant for UG - pharmacology - pathology - forensic

Linking - the language barriers



Follow up of the cases- getting in touch with PGs

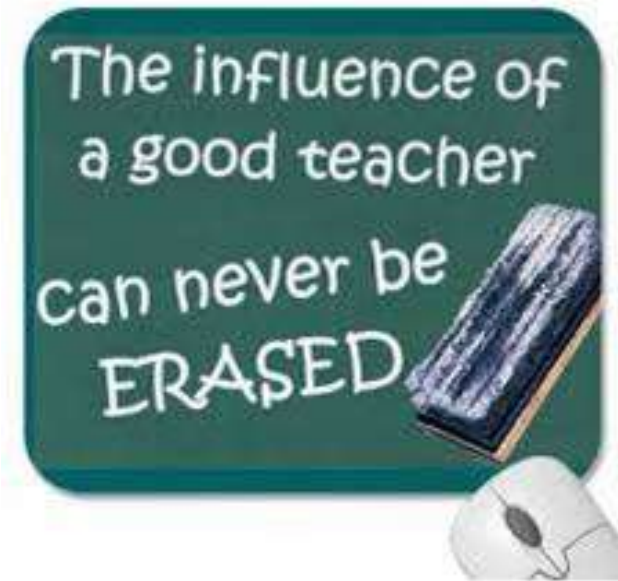
Allowing Q&A

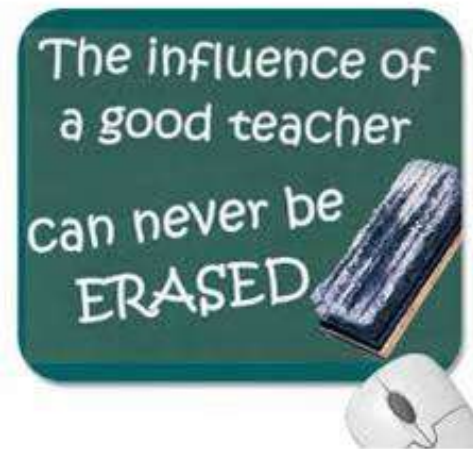
A neutral break of 10 mins in 2-3 hrs on knowing who these students are, what are their talents are.

Fishing -Encouraging -connecting the interested!!!

THE CRUX OF INVOLVING UGs

Connecting & Building parallel networks that
can be Rewarding for Teachers of Psychiatry
as well as students





Making it Relevant

Networking With Medicine Department / others also?

Requesting for

One question in every medicine Internals

ANCIPS 2012- IJP 54, April 2012

Awareness about depressive Disorder among Final year medical Students

Using the opportunities to teach Psychiatry

IPS QUIZ-Written & Oral

Those who want to compete

Those who want to try

Rewarding them



State level Psychiatry Prize
Examination – 2010

(Being conducted by Indian Psychiatric Society, Karnataka State Branch)

**All undergraduate students
& Interns are eligible**

Date : 2nd July, 2010, (Friday)

Time : 2 – 3 pm

Venue : **In our College**

Pattern : MCQ s in the field of Psychiatry [**Written**]

Prize : 1st – Rs. 2000 /- & Certificate of merit

2nd – Rs. 1500 /- & Certificate of merit

3rd – Rs. 1000 /- & Certificate of merit

DEPARTMENT OF PSYCHIATRY, AIMS
ALSO SPONSORS ATTRACTIVE PRIZES FOR
TOP 3 OF OUR COLLEGE !!!!

Interested candidates can register their names paying Rs.30 /-

Last date for registration : 15th June, 2010

Register with : Dr. Vinay.H.R.,

Senior resident, Dept. of Psychiatry, AIMS



Don't delay.. Tomorrow never comes. As
soon as it does, it becomes Today..!!!!
HURRY UP.. REGISTER TODAY !!



Teaching

Post Quiz : Interactive Sessions on what is right & Why?



Adichunchanagiri Institute of Medical Sciences (AIMS)

Balagangadharanatha Nagar, Nagamangala Taluk Mandya dist, Karnataka (India)

Psychiatry Mock MCQ test

- What are the features of Tourette's syndrome?
 - OCD, Dyslexia, ADHD
 - OCD, Dystonias, Dyslexia
 - OCD, Vocal /Motor Tics
 - OCD, Phobia, Dyslexia
- A 25 yr old female was brought to the casualty after she allegedly attempted suicide, her wrists are slashed. She has a past H/O difficulty in maintaining interpersonal relationships and also recurrent mood fluctuation episodes. What is the most likely diagnosis?
 - Dependent Personality Disorder
 - Borderline Personality Disorder
 - Histrionic Personality Disorder
 - Multiple Personality Disorder
- Lack of insight is not a feature of
 - Panic disorder.
 - Schizophrenia.
 - Mania
 - Depressive psychosis
- All are true regarding Management of Schizophrenia, except
 - Haloperidol alone can be used
 - Hypnosis/psychotherapy alone is used
 - Electroconvulsive therapy can be used
 - Resperidone alone can be used
- Well recognized side effects of prolonged Phenytoin use include the following except:
 - Renal stones
 - Ataxia
 - lymphadenopathy
 - Hirsutism
- A 9 year old child who disturbs other people is destructive, interferes when two people are talking, does not follow instructions and cannot wait for his turn while playing a game. He is suffering from:
 - Emotional disorders
 - Behavioural problems
 - No disorders
 - Attention deficit hyperactivity disorder
- Person who laughs one minute and cries the next without any clear stimulus is said to have?
 - Incongruent affect
 - Euphoria
 - Labile affect
 - "Split personality"
- In Alcohol De-addiction the following can be given as choice to Patient
 - Disulfiram
 - Acamprosate
 - Baclofen
 - Any of above
- Which of these is not approved for Nicotine De-addiction?
 - Naltrexone
 - Bupropion
 - Bupirone
 - Nicotine
- Which of these is not an SSRI?
 - Escitalopram
 - Sertaline
 - Duloxetine
 - Fluoxetine
- Which of these Rx of choice in Panic disorder?
 - Benzodiazepine



Adichunchanagiri Institute of Medical Sciences (AIMS)

Balagangadharanatha Nagar, Nagamangala Taluk Mandya dist, Karnataka (India)

ASTERIX ...reloaded !!

Psychiatry Mock MCQ test for PG aspirants

** With the Blessings of His Holiness Sri Sri Sri Dr Balagangadharanatha Swamiji and support by our beloved principal Dr M.E.Mohan.

* Purpose

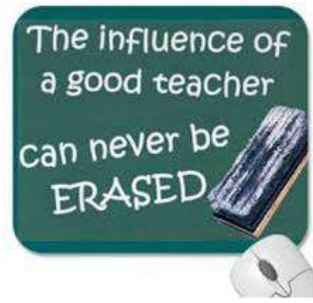
- To initiate the trend of preparing for competitive PG entrances along with the clinical work during internship.
- To promote a conducive academic environment among the staff and students for career oriented discussion
- To strengthen the academic skills among students/ interns through individualized approach.

* Schedule and pattern of tests

- The tests are conducted on every Thursday from 5.00 to 6.15 pm starting from 16th September till last week of December at lecture hall-1, College building
- 100 MCQs from particular subject to be answered in 75 min
- The question paper is being framed by concerned staff of each department and they will also take up the responsibility of discussing with students/interns regarding any clarifications based on their convenience
- The tentative schedule of subject wise mock tests is as follow:

• Psychiatry & General Medicine	- 16 th Sep
• Anesthesia & General Medicine	- 23 rd Sep
• Skin & General Medicine	- 30 th Sep
• ENT & General Surgery	- 07 th Oct
• Orthopedics & General Surgery	- 14 th Oct
• Ophthalmology & General Surgery	- 21 st Oct
• Anatomy	- 28 th Oct
• Physiology	- 04 th Nov
• Biochemistry	- 11 th Nov
• Pathology	- 18 th Nov
• Microbiology	- 25 th Nov
• Pharmacology	- 02 nd Dec
• Obstetrics & Gynecology	- 09 th Dec
• Community Medicine & Pediatrics	- 16 th Dec
• Radiology & Forensic Medicine	- 23 rd Dec

Utilizing Students Talents To Teach psychiatry



Art of Developing Rapport to teach Psychiatry
Many students are keen in

Writing stories, poem, Articles
Newspapers, Magazine, newsletter,
Debate
Enacting Skits

KIRAN from AIMS got an Award for Story in Kannada on Depression
JATIN from JSS Published Poem in IJP

Department of psychiatry should be like
“college *adda* for curricular & extra curricular activities ”

Channelizing those interactions
for enhancing their understanding of subject &
To kindle their interest for exploring more



Getting a feedback

They are adults

Anonymous

At end of every 3 months

Credits from NAAC !!!



③ Not much change should be ~~to~~ done in teaching methodology because it is ~~the~~ the perfect method i.e. the Power Point Presentations especially when it comes to psychiatry.

* One suggestion that I would like to give is to include MCQ section in theory, so as to encourage the students & either only questionnaire section will do much help.

According to my opinion No. 69 teaching methodology is perfect and doesn't need any changes, but I wish and hope that even other departments make theory classes more interesting like Psychiatric department.

... during exams was

Teaching Psychiatry by Building Bridges



Use of Technology

Internet

E-groups

E-Newsletter: Simple, Zero Cost

Many formats

Facebook

Twitter

whatsapp



Other Avenues To Teach

Research

ICMR

Conference

Other Issues

Awards for best student /intern in Psychiatry

Being Visible

Re-evaluate & Re-frame Strategies

Investing in UG Teaching Highly REWARDING INVESTMENT



Innovative ways and customizing psychiatry training for undergraduates

Sir,

Psychiatry training of medical undergraduates and enhancing their skills is considered the most important issue in addressing mental health concerns at every stage of care in the society.^[1] Indian Psychiatry society is playing an important role in appraising Medical Council of India (MCI) about the urgent need to bring psychiatry as an essential subject to be incorporated in examination and evaluation of medical student to become a doctor.^[2] Unfortunately, there are no definitive steps from MCI in that direction, in the current medical curriculum for undergraduates 20 h of theory, 20 h of clinical and 2 weeks internship is what has been allotted

for psychiatry. Most students do not utilize even this training as psychiatry is not a subject for exams. Considering these ground realities the concept of psychiatry training boils down to individual intuitions, Departments and Faculty in Psychiatry to do the maximum possible in imparting training.

In this context, we would like to bring list of initiatives and outcome that was tried to maximize the undergraduate's training in psychiatry. This may be beneficial for other faculty/ departments to replicate these strategies. Adichunchanagiri Institution of Medical Sciences (AIMS), BG Nagar, Mandya District, Karnataka, is truly a rural institution as the nearest district is about 100 km away. In 2009, as new faculty with

How to cite this article: Kishor M, Vinay HR. Innovative ways and customizing psychiatry training for undergraduates. Indian J Psychiatry 2015;57:431-3.

ORIGINAL ARTICLE

Mysore study: A study of suicide notes

Namratha, *et al.*: A study of suicide notes

Indian J Psychiatry 2015;57:379-82.

Do they Work? What is the Evidence?



Our Students Won state IPS Quiz
Prize Examination & Oral
2010,2011,2012,

2013 (4 teams in final 7 out of 60 teams contesting in Kar. state IPS
Quiz were from AIMS & JSS
Won the South Zone 2011-2012
(Could not participate in National Quiz 2012-
2016 winners were from AIMS, 2nd runner up JSS
Karnataka UG Exams during ANCIPS every time)

International Award for Medical Litterateur in Kannada
Creating Awareness on Depression

Research: UGs & Interns presented free paper at ANCIPS 2012 &
KANCIPS 2012, ICONS 2012 and many other university meet
2013 SAARC

UGs received Hon. Remuneration for writing article in Magazines
on psychiatry



To Conclude

Newer Methods of Involving UGs
should - just pop up - now and then- in all of us,
in relations to experiences and challenges



“There's a way to do it better—find it”
Thomas Edison



Thank you for Listening & Kind Interaction

Any Questions???

