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# How Can I Be Heard?

## LuAnn Wilkerson

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Today is the second day of five one-hour tutorials on *The Case of the Fainting Soccer Player*. The six first-year medical students have been struggling to explain the sequence of events experienced by the 17 year old woman in the case who collapses while playing soccer with subsequent ventricular fibrillation and coma. An older female student, Pat, had spoken little during the first 15 minutes of discussion as the group alternately considered the role of brain and heart in the patient's collapse. Finally, Pat quietly commented.

"I read that arterial venous malformation is a major cause of seizures in 15 to 24 year olds. Often this condition shows up during athletic activity when demand exceeds capacity."

"I read that profound syncope can cause seizures," George quickly asserted, and the discussion was off on electrical activity in the brain and the heart, the definition of seizure, and the use of lidocaine in this case. The faculty tutor neither encouraged nor discouraged these avenues of exploration. Pat appeared to be listening closely to the brain versus heart debate and in a pause in the exchange, put in her vote for a congenital vascular malformation as the initiating event.

Once again her suggestion failed to attract any attention and the group continued to puzzle over the possible sequence and relationship of events. Did the young woman in the case suffer a seizure which caused her to fall? Or did she have a cardiac event which caused her to fall? How could a seizure cause ventricular fibrillation? These questions led to a discussion of parasympathetic control of heart rate.

At last, George suggested that everyone should propose possible explanations, which he would write on the board. Jim volunteered epilepsy; however, he could not explain how it might cause fibrillation and ended by abandoning his proposal: "I don't think it is epilepsy." Debby proposed fibrillation as the primary problem but had difficulty explaining the cause of

the fibrillation. Pat volunteered next. "I still think it is a congenital heart problem and it could cause more problems later if it's not corrected now."

"It's not a heart problem," insisted Jim.

At the board, George paused in his writing to ask, "If it is congenital, what could it be?"

Pat responded quickly. "Here is a table of common defects in *Harrison's Textbook of Medicine*. I'm not sure how to decide which exact one it is but we could look at the major symptoms associated with each and compare that to the case."

"Let's go back to the brain," suggested Jim.

## Use of the Case entitled “How Can I Be Heard?”

At medical and veterinary schools around the world, problem-based learning that involves students in discussion of cases is becoming an important approach to professional education. Although such discussion can occur in the large group setting, most schools using this approach have students work in small groups in order to increase the opportunity for student-directed discussion. In a problem-based course, students work in groups of six to ten with a faculty or peer tutor who is largely a facilitator rather than a group leader. The shift for faculty tutors from a Socratic, teacher-directed form of discussion to student-directed discussion is a difficult one. In addition, the interaction of students within the small group format is significantly different from that which occurs in a large lecture hall.

“How Can I Be Heard?” is a snapshot from a small group, problem-based tutorial in the first course of the first year medical student curriculum at Harvard Medical School. The case, written for use in a 1 1/2 hour workshop focused on increasing attention to group process, is taken from the observation of an actual problem-based tutorial and written with the cooperation of the faculty tutor and the female student involved. It is intended to provoke discussion of group interaction, the role of gender and age in influencing student interaction, and the strategies that can be used by a faculty tutor to resolve conflict among students. The case can be used in either of the formats described in the article in this volume: “Using Cases about Teaching for Faculty Development.”

In the situation described, students are working with a patient case as a stimulus for learning the anatomy that underlies the clinical dilemma and how to reason about a structural problem. This session is the second of five one-hour tutorials on the case. In between each session, students are expected to pursue learning issues that they have identified during the discussion of the case. They come to subsequent tutorials for the purpose of teaching one another. The questions to be considered include:

- Why is Pat having difficulty being heard?
- If you were the tutor, what would you do?