TEACHING COMPREHENSIVE GERIATRIC ASSESSMENT TO MEDICAL STUDENTS VIA MODIFIED PROBLEM BASED LEARNING- A PILOT PROJECT IN NORTHAMPTON GENERAL HOSPITAL

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Introduction: Comprehensive Geriatric Assessment (CGA) is an important tool for assessing complex elderly patients. Teaching medical students on CGA over a short period is challenging. The medical education department of the Northampton General Hospital undertook a pilot CGA project over 5 seven week blocks, based on modified problem based learning (PBL), for 30 University of Leicester final year medical students of the elderly care block.

Methods: The project was done in three phases. There were five blocks of six students each. Phase 1 was a lecture on prior knowledge and assessment of CGA, the tools involved and a problem was presented. Phase 2 involved the intensive phase of literature review based on the problem, attending ward rounds, multidisciplinary team meetings, outpatient geriatric clinics and group discussions with assessment and feedback. Phase 3 involved powerpoint presentation of the problem and the patient journey with assessment and feedback from both peers and the tutor. A pre and post PBL questionnaire survey about CGA was done on a rating scale of 1–5.

Results: 29 self assessment questionnaires and feedback forms were analysed and results obtained based on the average rating. Rating skills for doing a CGA improved from an average of 1.8/5 to 3.4/5. 100% of the students wanted to learn more about geriatric medicine. Learning objectives of understanding and performing CGA were met in 100%. 76% recommend PBL as a learning tool to the University. After the PBL sessions 40% were very likely to pursue Geriatrics as a career.

Conclusion: Medical students found learning CGA via a modified PBL approach to be an effective method. Understanding and assessing complex elderly patients via CGA is vital to the training of medical students and modified PBL, though time consuming, provides a more hands on and mature approach to understanding this complex process.