ISSN: 0975-833X

INTERNATIONAL JOURNAL OF

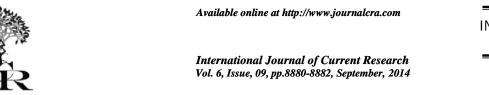
CURRENT RESEARCH

Vol.6, Issue 09, September - 2014



Impact Factor: SJIF: 3.845

Indexing: Thomson Reuters: ENDNOTE



INTERNATIONAL JOURNAL OF CURRENT RESEARCH

RESEARCH ARTICLE

STUDENTS PERSPECTIVE OF IMPROVING LEARNING IN ANATOMY

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ARTICLE INFO

ISSN: 0975-833X

Article History: Received 06th June, 2014 Received in revised form 22nd July, 2014 Accepted 04th August, 2014 Published online 30th September, 2014

Key words:

Participation, Anatomy, Learner centric, Questionnaire.

ABSTRACT

Teaching anatomy faces challenge as a huge portion has to be covered in a limited time frame. The attitude of students towards learning anatomy is also changing as they are constantly attracted to newer methods of teaching which also involves active participation from their side. With the dearth of cadavers in most of the medical institutions it becomes imperative on the part of anatomy teachers to make learning anatomy more attractive, effective and learner centric. This paper aims to highlight the manners through which students learnt anatomy effectively based on their feedback through a questionnaire.

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INTRODUCTION

Anatomy has always been the foundation of Medical Science (Nagar *et al.*, 2012). A sound knowledge of Anatomy would go a long way in strengthening the clinical and diagnostic skills. The curriculum designed for first year MBBS students also allots maximum teaching hours to Anatomy. There is always the pressure to finish the allotted syllabus in the limited time frame of one year. Teaching anatomy faces constant challenge as the subject is loaded with complex terms and terminologies which are intimidating to the students who are from diverse academic, cultural and socioeconomic backgrounds and entry levels. Our role as Anatomy teachers have not been limited to teaching factual anatomy but to develop learning skills which can be applied in clinics. This paper aims to improve teaching in Anatomy through student feedback on learning methods.

MATERIALS AND METHODS

A questionnaire comprising of a set of 25 close ended questions on various learning methods was distributed to first year MBBS students at the end of completion of one year to assess the learning method of their choice. Students were briefed about the questionnaire and its purpose and asked to respond freely. To promote this, they were asked not to divulge their name on the questionnaire. Faculty participation was

avoided during this process. The questionnaire was collected back and all the questions were analyzed.

RESULTS

Following were the points on which students strongly agreed on. 53% of the students felt more confident to dissect if the topic had been covered in theory. 60% of the students felt that gross anatomy atlas helped them in identifying structures in the cadaver better than Cunningham manual. 60% of the students felt difficulty in understanding Cunningham manuals. 60% of the students felt more confident to dissect if the table teacher was simultaneously dissecting the other side. 57% of the students felt that rotation of table teachers is a must in dissection hall. 60% were of the opinion that weekly table viva at the end of the week would be helpful in the long run.7 0% of the students felt that every student should be given a chance to dissect on rotation. 65% of the students felt that frequent part completion tests would improve their writing skills. 64% felt that embryology model demonstrations should be at par with lecture classes. 67% of the students wanted embryology part completion tests also to be introduced. 70% of the students opined that all the internal assessments should be on the lines of university examinations. (Figure 1 to 8)

DISCUSSION

It is ironical that the time frame for preclinical subjects have been reduced to one year whereas the syllabus remains the same. To cover the portions effectively in the limited time

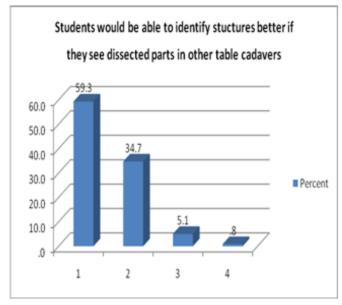


Figure 1

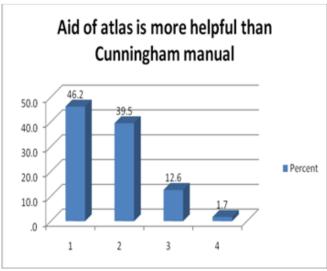


Figure 2

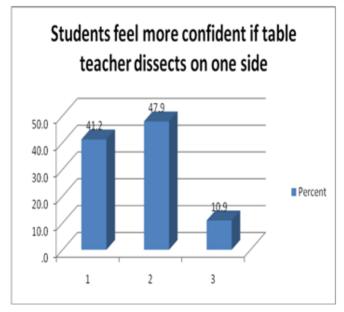


Figure 3

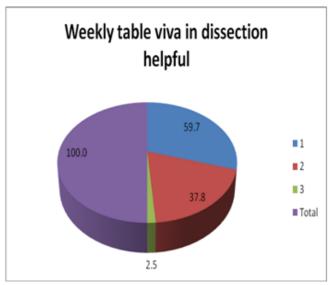


Figure 4

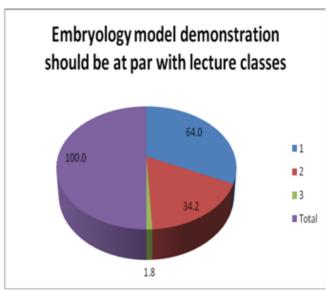


Figure 5

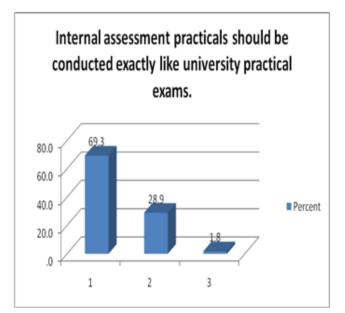


Figure 6

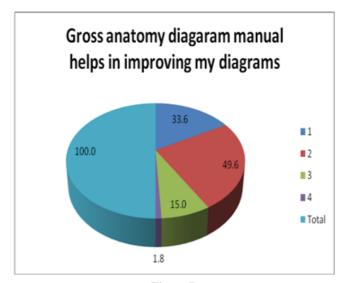


Figure 7

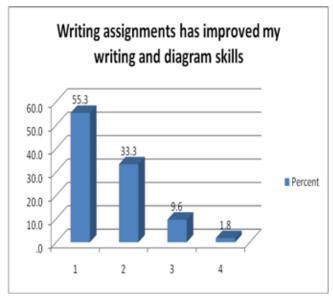


Figure 8

frame presents a challenge. Medical Education workshops for teachers highlight the need to make teaching more learner centric. Self directed learning is the need of the hour, the role of teachers being replaced to facilitators. Many a times the theory and practical schedules do not go at par. It becomes mandatory on the part of teachers to have finished the theory topic before proceeding to dissect the region. Even in dissection tables, if one of the students is asked to brief about the dissection topic it facilitates learning for the whole table. A good number of students felt that they found difficulty in understanding Cunningham manuals and they could identify structures with the aid of atlas and with the table teacher also actively participating in dissection of that region. Now a days with the introduction of different dissectors students feel more confident and easy to understand their language in terms of the steps of dissection. Weekly table viva will go a long way in helping the students because students are exposed to commonly asked questions. They get an idea on what to read and how much to stress on which topics. Every student should be made to dissect on rotation, many a times the same students are found dissecting others playing a passive role. Frequent part

completion tests will improve their writing, diagrams and timing skills. Sometimes one feels it's a waste of time and teaching hour. Many a times we demonstrate the embryology models just before the summative assessments which the students find it difficult to grasp all at one go. Students also do not concentrate on embryology to the extent they do for gross anatomy. Most of them do not even read the must know portions in embryology. Frequent embryology viva at least once a month would ensure that they do update their knowledge in this. Demonstration of certain topics like rotation of gut by a plastic pipe, role play to show the parts of uterus would go a long way in retaining the topics (Chan, 2011 and Struges et al., 2011). Small group teaching in histology with a facilitator with the group actively participating in discussing a given slide and drawing it themselves would ensure a good performance in histology practical's rather than mere identification (Chase et al., 2011). All the internal assessments should be in the same pattern as University Exams to instill confidence to face the university exams. Computer assisted learning is an effective supplement to conventional methods of teaching since it provides the student with an important additional resource and facilitates alternative modes of learning that are well suited to the requirements of students allied to health professionals (Levine et al., 2005 and Dake et al., 2005).

To conclude, the curriculum, teaching and assessment must encourage the learning of clinically meaningful anatomy. Cadaveric dissection or prosected cadaveric speceimens, life models, radiographs maximize learning. Integration of newer teaching modalities and modern technology will encourage interest and retention of anatomical knowledge and its clinical relevance (Anastasios and Vartholomaros, 2012). Above all, a caring and motivating spirit on the part of teachers will go along way in inducing a learning environment which will make anatomy learning fun rather than rote memorization.

REFERENCES

Anastasios, A Vartholomaros. 2012. Modern teaching and learning anatomy in Health Professionals undergraduate and potgraduate training curricule. *Health Science Journal*; 6(4):784-787.

Chan L.K. 2011. Pulling my gut out-simple tools for engaging students in gross anatomy lectures. *Anat Sci. Edu*; 3:148-150

Chase, C.C and Geldenhuys K.M. 2011. Student centered teaching in a large heterogenous class. *Medical Education*; 35:107.

Dake R.L, Vogl W, Mitchell A.W. Grays Anatomy for students. Eds., Elsevier/Churchill Livingstone Philadelphia. 2005.

Levine M G, Stempak J, Conyers G. Implementing and integrating computer based activities into a Problem based goss anatomy. 5 Ed. Eds., Lippincott Williams and Wilkins, Philadelphia.2005.

Nagar, S.K. Malukar, O et al. 2012. Students perspective on Anatomy teaching methodologies. National Journal of Medical Sciences., 2(1):111-112.

Struges D.T, Maurer, and Cole, O. 2011. Understanding protein synthesis: a role play approach in large undergraduate human anatomy and physiology clsses. *Adv. Physiol Educ*; 33:103-110.































