

## **Desirable Components/Characteristics of Cases for Small Group Learning**

Dennis Baker, Ph.D., Assistant Dean for Faculty Development  
Florida State University College of Medicine

*This handout/checklist is designed as a resource for medical school and residency faculty who are developing cases for students or residents who meet with facilitators/tutors in small groups (e.g. 5 to 10 learners) as a learning activity. Please feel welcome to use it and if you have suggestions for improvement please send them to me via e-mail ([dennis.baker@med.fsu.edu](mailto:dennis.baker@med.fsu.edu)) as this is a “work in progress.”*

### **Learning objectives clear and measurable**

The case is based on clearly stated learning objectives and the number of learning objectives should be realistic for the time permitted to complete the case. Information about the process of writing learning objectives can be found on the FSUCOM faculty development web page at <http://www.med.fsu.edu/education/FacultyDevelopment/objectives.asp>.

### **Case content matched to the learning objectives**

The case content is clearly connected to the learning objectives.

### **Effective questions inserted throughout the case that stimulate discussion**

A variety of levels of questions can be used in a case but questions eliciting higher levels of thinking will create more discussion among learners. For example, the question, “What pain medicine would you prescribe for Mrs. Baker?” is not necessarily a bad question but more discussion would be elicited by the following question, “What medicines would you prescribe for Mrs. Baker and what evidence could you use to justify your choices?”

### **Appropriate content and context**

The content of the case is at the appropriate level (e.g. 1<sup>st</sup> year student vs. 2<sup>nd</sup> year student) for the learner. Additionally, the content should reflect the stated values and philosophy of the medical school. For example, if it is stated that the institution values viewing patients in a holistic manner then the patient’s family and social context (e.g. genogram) should be included as part of the case. If the institution says that good care is facilitated by a positive physician-patient relationship then one could argue that all patients in cases should have names. If the institution says it values students understanding cultural differences, then it is important to have cases that reflect and support this philosophy.

### **Authenticity of the problem scenario**

The content of the case reflects clinical situations that health care providers would encounter in practice.

### **Organization of case clear and logical**

The case is structured around a problem situation in a narrative style with events unfolding in a realistic sequence.

### **Length of case appropriate to time allotted**

Students can progress all the way through the case in the time allotted so that no part of case (e.g. psychosocial issues) gets deemphasized because of time.

### **Images/Exhibits of high quality**

Images and other kinds of exhibits provided in the case can be clearly seen and/or easily read.

### **Up-to-date and realistic medical information /patient data**

Lab values should be realistic. Treatments, medicines, etc. should be current.

## **Medical informatics integrated**

Take advantage of opportunities to build in situations for learners to utilize their PDAs and laptops to access information to apply to the case.

## **Connection to content of other courses**

Whenever possible the content of the case should connect to the content of other courses that are going on at the same time or alternatively should connect to content learned in past courses. For example, if a psychosocial issue is designed into a physiology case, try to make it a psychosocial issue that was learned about in the Doctoring Course (Introduction to Clinical Medicine course in many schools) being taught. If clinical reasoning (e.g. developing a problem list) is part of the case, the clinical reasoning process should be consistent with the way it is taught in the Doctoring course.

## **Facilitator's guide**

Listed below are suggested components of a guide for facilitators. There are certainly more possible components and the content of a facilitator's guide is case dependent.

- Overview of the case that gives the facilitator the context / big picture;
- List of topics addressed in the case;
- List of measurable learning objectives that students should accomplish as a result of working through the case;
- Bulleted list of listening points associated with the questions in the case or alternatively, answers to the questions with explanations. The key is to give the facilitator who is not a content expert some guidance for what to listen for as students discuss the case. The facilitator can then listen with some "intelligence" without having to know the content and can subsequently say things like, "I didn't hear anything about ..... Could someone comment on that?";
- Explanations of exhibits (e.g. radiographs);
- A reminder to facilitators to leave some time at the end of a session to do a wrap-up relative to content and to process. Relative to content, the guide might state: *Leave the last 3-5 minutes of the session to ask each student to state the most important thing he/she learned in today's session relative to the learning objectives.* Relative to process, the guide might state: *Leave time at the end of the session to have each student describe some aspect of group process that was especially effective in helping him/her learn in today's session.*

## **Obtain feedback from a colleague who will give you honest and meaningful feedback on the case**

Obtaining feedback may be the most important step in the development of a case. One strategy is to ask a colleague to comment on specific aspects of the case. Ask the colleague face-to-face if you can send him/her a case to look over because you need some feedback. If his/her response is positive, put the request in an e-mail with the case attached. To make your request specific your e-mail might include something like: *John, I would be very grateful if you would read over this case for me and let me know if it flows in a logical sequence and if the questions I have inserted into it make sense. This case will be used as a small group learning activity in my course. If you could send me your comments within a couple of days I would be very appreciative. Thanks so much.*

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Please credit Dennis Baker, Ph.D., Assistant Dean for Faculty Development at Florida State University College of Medicine when using this document. However, this is not intended to represent original work but instead is based on a compilation of print and web resources. Thanks to Daniel Warren, a graduate student in our OME unit, a "gold mine" of resources is available on our faculty development web site at [http://www.med.fsu.edu/education/FacultyDevelopment/case\\_writing\\_resources.asp](http://www.med.fsu.edu/education/FacultyDevelopment/case_writing_resources.asp). At this URL you will see links to: a) Tips & strategies for writing and using cases, b) Ways to evaluate case quality, c) Sources & examples of cases, and d) references on case based learning.