



## Action Research

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### What is Action Research ?

Action research has been defined in the following ways by various authors.

1. " Action research is a way of generating knowledge about a social system while, at the same time, attempting to change it." ( Lewin, 1946)<sup>1</sup>
2. " Action research is a style of research rather than a specific method which contributes simultaneously to social science and social change."(Meyer, 2000)<sup>2</sup>
3. " Action research can be described as a family of systematic, investigative approaches which pursue action ( or change) and research ( or understanding ) at the same time." ( Todd, 2002)<sup>3</sup>

Action research differs from other types of research because the fundamental aim is to improve practice rather than to produce knowledge.<sup>4</sup> Action research has been successfully used to improve service provision in industrial, educational and healthcare organizations.<sup>5</sup> Action research is greatly underutilized as an approach to medical educational reform.

### Action Research is a Part of Graduate Medical Education.

The importance of action research has recently been recognized by Medical Council of India which has incorporated action research as a topic in the Institutional Goals of Medical Graduate Training Program by its Amendment Notification dated 15<sup>th</sup> December, 2008.<sup>6</sup> The Institutional Goal No.(e) before the Amendment read as given below:

" The undergraduate students coming out of a medical institute should possess the attitude for continued self learning and to seek further expertise or to pursue research in any chosen area of medicine."

This Institutional Goal No.(e) after the Amendment reads as given below :

" The undergraduate students coming out of a medical institute should possess the attitude for continued self learning and to seek further expertise or to pursue research in any chosen area of medicine, action research and documentation skills ."

### Steps of Action Research.

Action research has following steps.<sup>6</sup>

1. Identifying a problem in a particular situation.
2. Selecting a possible solution in the situation.
3. Implementing the solution in the situation.
4. Evaluating the solution in the situation.
5. Changing practice in the light of evaluation findings in the situation.

Steps 1,2 and 3 involve research process because problems and their solutions and evaluation are systematically approached. Steps 3 involves action or change process.

### An Education Project is Action Research.

An educational project is defined as a purposeful planned activity by individual(s) to solve an identified problem within a specified time. An educational project has following steps which are similar to the steps of action research.

1. Educational situation analysis and identification of a problem which could be a lacuna or weakness in the educational process of a particular department or college.
2. Selection of a possible solution ( or project title ) which can remove the lacuna or strengthen the weakness.
3. Planning the implementation of the selected solution involving setting objectives, stating methodology and anticipating constraints and designing strategies to overcome them and actual implementation of the solution.

4. Planning the evaluation of the implementation of the solution and actual implementation of the evaluation.
5. Changing practice in light of evaluation findings.

#### Common Problems in Graduate Medical Education Needing Educational Projects / Action Research

1. Lack of learning objectives for facilitating learning.
2. Lack of simulation methods for facilitating skill learning.
3. Lack of buzz sessions in lectures.
4. Lack of handouts for facilitating learning during lectures.
5. Lack of problem solving exercises for facilitating learning of problem solving.
6. Lack of small group discussion, graduate lecture and graduate symposium for teaching learning.
7. Lack of assignments / projects for self learning.
8. Lack of programs for helping low achievers.
9. Lack of Objective Structured Clinical Examination (OSCE) / Objective Structured Practical Examination (OSPE) for teaching learning.
10. Lack of computer assisted learning programs.
11. Lack of web based learning programs.
12. Lack of microteaching for facilitating learning of presentation skills.
13. Lack of student feedback programs.
14. Lack of prevalidation for improving assessment tools (eg. prevalidation to improve MCQs).
15. Lack of postvalidation for improving assessment tools ( eg. item analysis to improve MCQs).
16. Lack of assessment tool bank (eg. MCQ bank).
17. Lack of Objective Structured Clinical Examination (OSCE) / Objective Structured Practical Examination (OSPE)

for assessment.

18. Lack of peer assessment and self assessment programs.
19. Lack of modules for integrated teaching learning.

#### References

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2. Meyer J. Using qualitative methods in health related action research. *British Medical Journal*. 2000 ; 320 : 1778-81
3. Todd R. Evidence Based Practice II : getting into the action. *Scan*. 2002 ; 21 (2) : 34-41.
4. Elliott J. Action Research for Educational Change. Buckingham : Open University Press; 1991
5. Hampshire AJ. What is action research and can it promote change in primary care ? *Eval Clin Pract*. 2000 ; 6 : 337-343.
6. Medical Council of India Notification, New Delhi, the 15<sup>th</sup> December, 2008.

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#### Project Report Use of Group Discussion as a Teaching Learning Method to Introduce Pharmacotherapeutics and Rational Drug Use.

*Dr. Padmaja G. Nair, Associate Professor, Department of Pharmacology, Amala Institute of Medical Sciences, Thrissur, Kerala.*

#### Introduction

Medical students in the 3<sup>rd</sup> to 5<sup>th</sup> semesters mostly do not take the trouble of correlating text book learning to clinical problems, due to which Pharmacology learning has become largely theoretical. Also the knowledge gained by a student during clinical postings is not shared with the rest of the batch mates. Therefore it was thought that group discussion can be effectively

used to address these issues. The objectives of the study were

- To utilize group discussion as an effective teaching-learning method and
- To introduce the concepts of rational drug use and pharmacotherapeutics to undergraduates.

## Methods

The study was conducted in the department of Pharmacology of Amala Institute of Medical Sciences for a period of 3 weeks during the practical hours of the MBBS students. The students had completed most of the regular theory and practical portions and were towards the completion of the 5<sup>th</sup> semester.

Each batch of 33 students was subdivided into 4 groups of about 8 students each. One student from each group, who had been previously asked to record the history, physical findings, investigations and treatment schedule of a pre-identified case, presented the case to the group. The students had group discussion on the rationale of the use of these drugs, which in turn led to discussion on the action, mechanism of action, rationale for use, adverse effects, drug interactions etc of each of the drug prescribed. Each group then presented their point of view to the entire batch in the presence of the faculty member.

All the students got an opportunity and took turns in presenting cases in the subsequent classes. The cases discussed included coronary artery disease, diabetes mellitus, chronic obstructive pulmonary disease and cirrhosis of liver.

## Results

A written feedback on this teaching-learning method was obtained from the students. 77% of the students found this method very effective and reported that it takes learning from the knowledge level to the application level. 23% students did not find the method that useful, especially with the impending final internal assessment examination.

## Discussion

The limitations of the study were that

- Discussion could not be limited to the stipulated time for the sake of completion of case discussion and that
- Peer faculty evaluation could not be done.

Majority of the students were in favour of having group discussion as an effective teaching-learning method to understand the concepts of pharmacotherapeutics and rational drug use. Hence this method can be continued for the ensuing batches of students after devising strategies to overcome the drawbacks and incorporating suggestions for improvement from the peer staff and students.

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Project Report

## Group Discussion as Teaching-Learning Method in Problem Learners.

*Dr. TB. Ramakrishna, Professor, Department of E.N.T., SVS Medical College, Mahabubnagar, Andhrapradesh.*

## Introduction

It is common experience to all teachers that the level of understanding differs widely from student to student. Generally 8 to 10% of students in a regular batch of admissions fare poorly. There are several reasons like language problems, lack of motivation, to mention a few. They form a group of 'slow learners or problem learners'. A teacher can take up these problem learners as a special group, evaluate their needs and help them out to face not only the examinations but build confidence to practice the profession. This requires attention to develop their communication skills along with analytical thinking.

Group discussion as teaching-learning method is a known method that addresses the problems of communication and cognitive skills. A small group of 2-6 students can interact well

rather than a large group. This teaching-learning method theoretically appears to be an approach for problem learners. Hence a study is undertaken where group discussion as teaching-learning method is applied in the problem learners and its efficacy is evaluated.

### Methods

A batch of 30 students of VI semester (problem learners) was taken under the study. The group were taught subjects covering Ear disorders by Lecture method(15 sessions) for a period of 8 weeks. At the end of sessions the group was evaluated by a test with MCQs – 60 in number. Nose and Para nasal sinus disorders were taught by Group Discussion method. A total of 14 classes were taken for a period of 8 weeks and evaluation was conducted by MCQs (60 in number) at the end of sessions. Each group discussion contained clinical problems given by hand outs. Each clinical situation is either related to pathology or diagnosis, or management. Some clinical situations were presented by way of power point slides. Students' feedback was obtained at the end of every group discussion session. The students were asked to write their comments on the content, hand outs, power point slides and any difficulties faced during the session. Out of 30 students, two were absent in both examinations and two were absent in the second assessment only. Thus only 26 students participated in both evaluations. The results were analyzed by comparing the percentage scores obtained at the end of lecture sessions and group discussions. Feedback comments from the students in each session constituted their attendance and it varied from session to session.

### Results

Percentage scores of each student obtained after I and II examinations were compared. There were 13 students who did not succeed (less than 50% score) in the first test (Group A). Those who scored more than 50% were labeled 'Group B'. There were no failures in the second test (Table I). A 30% gain in the scores is

arbitrarily taken as "significant" (The lowest scorer has 18% in the first test) to evaluate whether group discussion as teaching-learning method has any benefit over the standard lecture method. The students were divided (based on the scores in the first test) into three groups – one with scores 0-30%, 31-49% and 50-70%(Table II). The upper limit of 70% was taken into account as 30% gain is not feasible for high scorers.

The feedback scores on group discussion out of 14 sessions with variable attendance were obtained on the content, hand outs, power point slides and other tools( radiographs, audiograms and skull bones). The total feedback forms obtained were 366. Content was found to be useful by 95.6% handouts were found to be useful by 94.2% power point slides were found useful by 93.1% and other tools were found to be useful by 95%.

Table I:

	No. of students with 0-49 % Score	No. of students 50 % and above
I test	13 (Group A)	13(Group B)
II test	0	26

Table II :

Gain of 30% score among the groups (score less than 30%, 31-49% , 50% and above in the I Examination )

I test performance	No. of students N=26	No. of students who gained 30% over the previous scores
0-30% scores	5	5
31-49% scores	8	7
50 % to 70%	11(13)*	2

\*Two were not considered as their scores were >70%

### Discussion

Face to face interaction between members of a small group(5 to 10 persons) is termed "group discussion". The main ingredient of the

group discussion is activity on the part of the learner and it is democratic. The more the modalities of learning challenges presented, the more the activity of the learner, that results in a greater experience and insight. Active learning involves some kind of experience and some kind of dialogue. The two main kinds of dialogue are "dialogue with self" and "dialogue with others". Both are achieved in the group discussion as teaching-learning method.

In the present study, the problem learners who could not fare well in the first test were 13 (50%). The remaining students fared well in the both examinations. When a gain of 30% score is taken as significant improvement in the performance of a student, the group with poorer scores (less than 30%) showed tremendous improvement. The overall improvement was found in 12 out of 13 students. However, in Group B (50% and above) did not benefit much from the group discussion. Only 2 out of 11 could achieve a gain of 30% score. It appears that group discussion as teaching-learning method is a reliable method for low achievers or problem learners.

The feed back assessment scores clearly showed that active processes like various tools, hand outs along with problem oriented learning will enhance the efficacy of group discussion as teaching-learning method. In our study, there was a good turn out for the group discussion sessions as the attendance was doubled. Group discussion involved the students in heated debates. It also helped the group to respect the other's view point. It also made clear that everyone in the room may not share their beliefs.

Some of the students asked for frequent shuffling of groups. Regrouping periodically makes an inactive group suddenly becoming active. Teacher should always consider how to maintain the group dynamics. The study has not evaluated the communication skill improvement. Most of the examinations on clinical subjects incorporate case presentations and viva. It would be interesting to study whether group discussion

as teaching-learning method makes the learners any better in their communication skills.

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Project Report

## Evaluation of Effectiveness of Lecture by Pre-test and Post-test Analysis

*Dr. Ashakiran S., Associate Professor, Department of Biochemistry, Sri Devaraj Urs Medical College, Kolar.*

### Introduction

In the subject of Biochemistry, a 1<sup>st</sup> year M.B.B.S. student attends about 120 hours of didactic lectures, in which the theory syllabus prescribed by the university is covered. Of late, teaching media used for lecture classes have been shifted from traditional blackboard teaching to the use of 'Over Head Projector' and 'Power-Point' presentations, solely or in combination. A teacher must know the proper use of such media for effective learning. Also, the effectiveness of their use in lecture classes needs to be assessed and learn to improve upon their use as teaching tool more valuably. The objectives of the study were

- To evaluate the effectiveness of lecture and attentiveness of students at the end of lecture class by assessing whether the learner has followed the contents taken in a lecture class by means of Pre-test and Post-test scores and
- To evaluate the overall effectiveness of a series of lecture classes by using a feedback questionnaire.

### Methods

The study was conducted on the students of 1<sup>st</sup> M.B.B.S. (2008–2009 Batch) attending didactic lecture classes at Sri Devaraj Urs Medical College, Kolar. A series of 10 lecture classes was used for the study. A set of 10 Multiple Choice Questions (MCOs) having four choices as Pre-test were provided at the beginning of respective lecture class in the first 10 minutes and the students were instructed to mark the best

response. After collecting the Pre-test sheets, topic was presented by using both power-point and blackboard in the same lecture. In the last 10 minutes, the same set of 10 MCQs were given as Post-test to all the students. MCQs were designed based on specific learning objectives of the topic taken in the lecture class. At the end of the study, a questionnaire ( set of 10 questions ) was given to all students and feedback was taken to evaluate the effectiveness of these lectures.

The Pre-test and Post-test MCQs were evaluated and the scores were compiled for each lecture. Statistical analysis was carried out between the Pre-test and Post-test scores of each lecture by using paired 't' test.

### Results

Table depicts the average scores of Pre-test and Post-test of each of the 10 lecture classes. There is a clear increase in the mean score of Post-test compared to Pre-test in all the 10 lectures.

**Table : Profile of Pre-test and Post-test Scores**

Lecture	No. of Subjects	Mean ± S.D	
		Pre-test	Post-test
1.	121	2.9 ± 1.524	9.6 ± 0.941*
2.	131	3.5 ± 1.248	9.2 ± 1.261*
3.	137	5.0 ± 1.534	9.3 ± 1.141*
4.	141	3.6 ± 1.623	8.8 ± 1.582*
5.	142	3.3 ± 1.445	8.9 ± 1.496*
6.	146	3.2 ± 1.502	8.7 ± 1.559*
7.	141	4.4 ± 1.730	8.8 ± 1.224*
8.	144	4.4 ± 1.520	8.6 ± 1.578*
9.	138	5.1 ± 1.686	9.0 ± 1.740*
10.	83	3.4 ± 1.659	8.7 ± 1.802*

\* p < 0.001

In the overall ratings of lecture class on a 5-point scale from excellent to worse, 90% of students agreed that the lecture classes were 'Good-Excellent' category.

The use of AV aids was found to be appropriate by 97% of students. The background for slides was found to be appropriate by 88% of students and font and letter size were deemed to be appropriate by 94% of students. The total number of slides per lecture were thought to be adequate by 94% of students and explanation of each slide was felt to be adequate by 82% of students. 18% of students felt that some more explanation was required. 90% of students said that there was no overcrowding of slides and 97% of students commented that there were no distracting animations. Audibility of lecture was found to be good by 96% of students. 97% of students felt that equal attention was paid to all students and 98% of students found that testing of knowledge improvement was useful.

### Discussion

It is a general observation that the didactic lectures taken by use of single yet popular media namely blackboard is hard to concentrate for the entire hour from the student perspective and also it is difficult from teacher perspective to concentrate on students and keep them attentive for the entire hour. Proper use of newer media like power point presentation along with blackboard can make the lecture more interesting and also helps in keeping them attentive.

This study suggests the lecture classes by using such media were effective and also the use of media was appropriate to cover the portions in the didactic lectures. Improvement in Post-test scores in each lecture class was highly significant with p < 0.001. Also 90% of students agreed that these lecture classes were in 'Good-Excellent' category. 98% of students said that the tool used for testing of knowledge was useful. Also the feed back clearly reveals the adequate use of number of slides per lecture, with proper use of fonts, letter size and animations. Focus of slides and audibility of lecture with attention paid to the students was very well appreciated. However, since 18% of students responded that some of the slides needed more explanations, which is one of the areas that

need to be focused upon for improvement.

MCOs designed as an assessment tool in the present study served three purposes :

1. 'Set induction' to the lecture
2. Keeping the students alert by orienting them to the topic as a whole.
3. 'Summary' at the end of the lecture.

Positive feedback given by the students regarding the entire set of lectures was highly encouraging and such feedback creates interest among teachers to improve and also towards more interactive and effective teaching-learning sessions.

### Conclusion

Orienting a student towards the topic taken for didactic lecture along with the proper use of media not only creates interest in the learner but also makes them attentive and keeps them alert to learn better. Pre-test and Post-test MCOs can be used as one of the means of evaluating the effectiveness of lecture. Feedback from students can not only evaluate the lecture effectiveness, but also bridge the gap by teacher-student interaction and help the teacher to improve.

### Acknowledgements

1. NTTC teaching faculty, JIPMER, Pondicherry for their guidance in designing the study.
2. Dr. Deepthi Kiran, Assistant professor of Community Medicine, Sri Devaraj Urs Medical College, Kolar for the preparation of feedback questionnaire and statistical assistance.
3. Dr. Krishna Murthy. N. Professor and H.O.D. and my fellow colleagues in the Department of Biochemistry, Sri Devaraj Urs Medical College, Kolar for their support and encouragement in conducting the study.
4. All the Staff of Medical Education Unit, Sri Devaraj Urs Medical College, Kolar for their support and guidance.

5. All my dear students of 1<sup>st</sup> M.B.B.S. (2008-09 Batch) for their active participation in this teaching-learning activity.

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### Project Report Validation of Question Papers in Community Medicine Set by RGUHS, Bangalore.

*Dr. Rekha Udgiri, Associate Professor, Department of  
Community Medicine, B.L.D.E.A's Shri. B.M. Patil  
Medical College, Bijapur.*

### Introduction

Majority of the times the question papers are not structured properly with relation to its content, objective and form of questions which makes it difficult for students to understand them. Many times the question paper will not test all three domains viz cognitive, affective and psychomotor. To overcome this problem the present study was undertaken to validate whether the question paper structuring is effective or not by the students and staff by using checklist. The objectives of the study were to

- Validate Community Medicine question paper by undergraduates and staff members and
- To analyze the responses between these two groups.

### Methods

The participants involved in the study were 6<sup>th</sup> term and 8<sup>th</sup> term students and staff of Community Medicine Department in B.L.D.E.A's. University Shri. B.M. Patil Medical College, Bijapur.

A total of 30 students were selected by simple random technique, 15 students each were selected from 6<sup>th</sup> and 8<sup>th</sup> term.

Question papers from the previous five years i.e. 2004 – 2008 were selected. Each year has 2 examinations and each examination has two question papers. So a total of 20 question papers

were validated. The validation of question paper was done by using the following checklist which consists of 10 questions.

1. Has the paper covered the syllabus ?
2. Does the paper test full range of abilities?
3. Has the weightage to different topics/forms of questions / objectives been adhered to?
4. Are the questions neither too easy nor too difficult to average students?
5. Does the question paper has comparability of options in terms of objective, content, form and difficulty?
6. Are the questions precise and unambiguous?
7. Is there any excessive overlap between questions?
8. Can the paper be satisfactorily answered in the time allotted?
9. Is the question paper comparable in standard with those of previous years?
10. Does the paper avoid repetition of questions which appeared in previous year ?

Apart from the checklist, open ended questions were asked –to give their opinion regarding the question papers. Statistical analysis was done by using percentage proportion and Chi-square test.

## Results

Table - I

Responses of 6<sup>th</sup> and 8<sup>th</sup> term students

Checklist Nos.	6 <sup>th</sup> Term Students	8 <sup>th</sup> Term Students	Total	%
1	43	66	109	15.37
2	41	64	105	14.80
3	73	55	128	18.05
4	20	30	50	7.05
5	45	50	95	13.39
6	21	9	30	4.23
7	23	20	43	6.06
8	62	70	132	18.61
9	2	9	11	1.55
10	2	4	6	0.85
Total	332	377	709	100.00

Pooled  $X^2 = 26.13$

$P < 0.001$

The Table I shows that 18.6 1% of students were of opinion that time allotted was not sufficient and 18.05% of students thought that weightage of different topics, form of question and objective was not proper.

The statistical significance was found between 6<sup>th</sup> and 8<sup>th</sup> term students at  $P < 0.001$ . This could be due to the fact that 6<sup>th</sup> term students though had completed the syllabus were not thorough as they were yet to appear for exam in 7<sup>th</sup> term, where as 8<sup>th</sup> term students had passed in the subject.

Table . II  
Responses of Teaching Staff

Checklist No.	Staff	%
1.	13	17.56
2.	5	6.75
3.	1	1.35
4.	7	9.45
5.	10	13.51
6.	8	10.81
7.	5	6.75
8.	6	8.10
9.	5	6.75
10.	14	18.91
Total	74	100.00

The Table II shows that 18.91% of the staff said that repetition of questions was maximum and 17.56% of them noticed that question paper has not covered the syllabus.

Apart from the checklist there were other findings in question papers like spelling mistakes, same questions being asked for short essay and short answer question, some questions which were asked the answers of which were not given in new editions of books, break up of marks distribution was not proper, too lengthy answer for 3 marks questions and too short answer for 5 marks questions.

## Discussion

From the study it is obvious that there is need to improve the standard of question paper setting in relation to objective, content and form of questions , marks distribution according to questions, uniform coverage of the entire subject and avoiding repetition of questions.

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## MEDICAL EDUCATION CONFERENCE 2009 ( MEDUCON 2009 )

The Medical Education Conference 2009 ( MEDUCON 2009 ) was held on 04.10.2009 in the Conference Hall of the Super Specialty Block, JIPMER under the auspices of JIPMER NTTC Alumni Association ( JNAA ). Fifty three participants ( including 10 outstation delegates ) took part in MEDUCON 2009 besides present and former faculty members of JIPMER NTTC and Executive Committee members of JNAA. M/s Medical Resources India Pvt. Ltd., Chennai – 28 and M/s Trans Health Care India Pvt. Ltd., Chennai – 78 provided sponsorship support.

The MEDUCON 2009 was inaugurated by Dr. S. Badrinath, the Project Coordinator & Acting Director, JIPMER and the inaugural function was presided over by Dr. P.H. Ananthanarayanan, Professor and HOD of Biochemistry, JIPMER.

Following former NTTC, JIPMER resource persons were honoured for their valuable contribution to NTTC, JIPMER, by the Acting Director of JIPMER.

1. Dr. D.S. Dubey, Ex. Director, JIPMER.
2. Dr. S. Sankaran, Ex. Professor of Medicine.
3. Dr. ( Mrs.) Vanaja Sankaran, Ex. Professor of Pathology.
4. Dr. S.C. Mitra, Ex. Professor of Anatomy.
5. Dr. A.J. Veliath, Ex. Medical Superintendent.
6. Dr. D.K. Srinivasa, Ex. Dean.
7. Dr. R. Narasimhan, Ex. Director Professor of Pathology.
8. Dr. C.H. Shashindran, Ex. Director Professor of Pharmacology and
9. Dr. N. Ananthkrishnan, Ex. Director Professor of Surgery.

Dr. D.K. Srinivas, Former Dean, JIPMER and Former Consultant, Curriculum Development, Rajiv Gandhi University of Health sciences, Bangalore, delivered the Keynote Address on "Faculty Development Program in Medical Education" . Invited talk on "Newer Methods of Assessment" was delivered by Dr. P.H. Ananthanarayanan, Professor and HOD , Department of Biochemistry, JIPMER. Dr. N. Ananthkrishnan, Professor of Surgery, Mahatma Gandhi Medical College and Research Institute, Puducherry, delivered Invited Talk on "Faculty Shortage in Medical Colleges : Problems & Solutions". The Keynote address and the Invited Talks were followed by enthusiastic interactions and were greatly appreciated by all.

Following papers were presented in the free Paper Sessions.

### Pre Lunch Session

1. Antenatal counseling on breastfeeding-A need for training health personnel. unasekaran D, \*Adhisivam B, Arulkumar.A & Shanthi Ananthkrishnan, department of Padiatrics, JIPMER, Pondicherry.
2. Learning gross anatomy by vide reconstruction. Dr. M. Batmanabane & Dr. M. Nandakumar, Department of Anatomy, Sri Manakula Vinayagar Medical College & Hospital, Pondicherry.
3. Formulating a curriculum in clinical pharmacology for medical undergraduates in Delphi experience. Dr.B.Gitanjali & Dr.C.H.Shashindran, Department of Pharmacology, JIPMER.

### Post Lunch Session

1. Evaluation of effectiveness of lecture by pre-test and post-test analysis. Dr. Ashakaran.S. Associate Professor, Department of Biochemistry, Sri Devaraj Urs Medical College, Kolar.
2. Review analysis of question paper setting with new objectives. Dr. T. B. Ramakrishna, SVS Medical College, Mahabubnagar.
3. Inculcating the discipline of reporting adverse drug reactions among medical students: trying to catch them young ? Akthar S & Surendiran A, Department of Pharmacology, JIPMER
4. Continuous assessment of residency training in ophthalmology- an online interactive tool. Dr. Vaishnavi Prakash & Dr. N. Venkatesh Prajna, Aravind Eye Hospital & PG Institute of Ophthalmology, Madurai ( This paper won the Best Paper Award – I )
5. Reinforcing 'must know' topics in problem learners through assignments facilities academic performance. Dr. M. Jayanthi, Senior Resident, Department of Pharmacology, JIPMER. ( This paper won the Best Paper Award – II )
6. Teachings aids in learning process:- Student opinion. Dr. Suman Lata, Department of Anaesthesiology, JIPMER

The post-lunch session also included a Video Demonstration on simulators by Medical Resources India Pvt. Ltd., Chennai. MEDUCAON 2009 concluded with the General Body Meeting of JIPMER NTTC Alumni Association ( JNAA ).

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## Educational Projects Initiated during 59<sup>th</sup> National Course

The 59<sup>th</sup> National course was held at JIPMER, Puducherry from 9<sup>th</sup> to 19<sup>th</sup> September 2009. The following projects were presented by the participants and approved. We wish them speedy execution of the projects and looking forward for receiving the final report.

Submitted by	College	Title
1. Dr. J. V. Dixit	Government Medical College, Aurangabad	Using item analysis for improving MCQs in question bank of PSM department at GMC, Aurangabad.
2. A.R.Joshi	Government Medical College, Aurangabad	To prepare lesson plan for general pathology lectures.
3. Dr.B.P.Ravikumar,	Mamata Medical College, Khammam	To incorporate OSPE/OSCE as learning and evaluative method in U.G. Education.
4. Dr.S.Panduranga Rao	Mamata Medical College, Khammam	Using MCQ's for assessing learning outcome of lecture classes..
5. Dr.Padmalatha K	Dr. B.R.Ambedkar Medical College, Bangalore.	Assessment of lecture by feedback from undergraduate students.
6. Dr.Mamatha.Y	Dr. B.R.Ambedkar Medical College, Bangalore	To compare the effectiveness of lectures using different visual aids for MBBS undergraduates.
7. Dr.Shobha.K	Dr. B.R.Ambedkar Medical College, Bangalore	Using MCQ's for assessing learning outcome of lecture classes
8. Dr.Jamuna.B.L	Rajaraeswari Medical College & Hospital, Bangalore.	Use of small group discussion as T/L method for I MBBS students in Physiology
9. Dr. Sureka Varalakshmi	Sut Academy of Medical Sciences, Trivandrum.	To prepare problem solving exercises in Gastro Intestinal Physiology.
10. Dr.Deepa Susan Joy Philip	Sut Academy of Medical Sciences, Trivandrum	"MOTIVATE" To motivate third-semester students to learn internal medicine, via self learning materials, after theory sessional examination.
11. Dr.Jiji Inassi	Sut Academy of Medical Sciences, Trivandrum	MCQs as a tool for formative assessment of undergraduates in Physiology.
12. Dr.Rini Raveendran	Amala Institute of Medical Sciences, Thrissur	Use of group discussions for enhancing the understanding of various epidemiological study designs in undergraduate students.
13. Dr. V. Kanan	PSG Institute of Medical Sciences & Research, Coimbatore	Making of problem solving exercises in Physiology in cardiovascular system for teaching-learning and formative assessment.
14. Dr. G. Kalai Selvi	PSG Institute of Medical Sciences & Research, Coimbatore	Use of OSPE as a Teaching Learning Method and for formative assessment of II MBBS students in internal assessment practical examination
15. Dr. R. Purushothaman,	PSG Institute of Medical Sciences & Research, Coimbatore	Use of tutorials for improving learning outcome of supplementary batch students.
16. Dr. Sandeep Kumar Mishra	JIPMER, Puducherry.	Effectiveness of use of manikin and Audio visual presentation for the development of endotracheal Intubation skills in Interns before their Anaesthesiology posting
17. Dr. Bibekanand Jindal	JIPMER, Puducherry.	Preparation of lesson plan for lectures in Pediatric Surgery for medical undergraduate teaching
18. Dr.Adhisiwam.B.	JIPMER, Puducherry.	"Intern corner" – a simple use of Department notice board to improve knowledge component among Pediatric Interns.
19. Dr.R.Manikandan,	JIPMER, Puducherry.	Preparation of multiple choice questions for final year MBBS students in Urology.
20. Dr.H.Nandeeshha	JIPMER, Puducherry.	Seminar presentation after group discussion by MBBS students as a mode of revision exercise in Biochemistry
21. Dr. Kadiravan, T	JIPMER, Puducherry.	Interview and counseling of slow-learning medical undergraduates at JIPMER
22. Dr. Manwar Ali	JIPMER, Puducherry.	Teaching Interns to perform a proper surgical scrub
23. Dr.Basant Manjari Naik	JIPMER, Puducherry.	Improving physical examination skills of first year undergraduate medical students using audio visual aids.
24. Dr.D.Thiruselvakumar	JIPMER, Puducherry.	Perceived competency, experience and satisfaction on UG learning to practice as Interns