

ANTICIPATION FROM A MEDICAL TEACHER

Over the last two decades medical education faced major changes. In parallel there is also a changing role for a medical teacher. Medical teaching is a very complex as well as demanding task. A medical teacher has different roles which can be grouped into six areas :

- 1) The information provider in the lecture, and in the clinical context
- 2) The role model on-the-job, and in more formal teaching settings
- 3) The facilitator as a mentor and learning facilitator
- 4) The student assessor and curriculum evaluator
- 5) The curriculum and course planner, and
- 6) The resource material creator, and study guide producer

All these roles require both medical expertise and educational expertise. Some teacher accomplishes only one role and others act in several roles. The teachers not only had to direct face-to-face contact with students but also had to encourage independent learning, help the student or examine their competence.

Now a days community based learning, problem based learning, integrated teaching in horizontal or vertical way and systemic curriculum planning with elective option for core curriculum have been advocated. But it is difficult to adopt in a universal way. Unprecedented growth of private medical colleges, voluntary retirement from government medical colleges due to frustration of promotion and unwanted transfer, hunt for medical teachers and unusual promotion of the teachers in private medical colleges and admission of students in private medical colleges with huge amount of fees have made the story into criticism that teachers in private medical colleges are in pressure for more success of the students in examination.

Survival of a medical teacher does not depend on how many students have been passed but in what way the students respond practically when they deal with patients.

Due to open access to internet facilities good medical students are aware of their challenges. So a medical teacher has to be highly knowledgeable beforehand, otherwise he will not be accepted by the institution as well as by students. A good teacher needs to be equally qualified at teaching, research and clinical practice. It is necessary for a teacher to show highest degree of enthusiasm and interest in teaching his discipline. Though internet facilities are available to give vast information, students may not acquire the basic facts, so in real life situation they may fail to apply acquired knowledge in skillful and competent way. Medical teachers have to improve the quality of teaching by integrating e-learning with increased emphasis on performance assessment, the use of techniques such as the objective structured clinical examination, the use of standardised patients, log books, portfolio assessment and self assessment. The teachers themselves should be technically sound in using computers and world wide web resources.

A teacher is now a facilitator rather than a disseminator. He should facilitate students about e-learning in a more student-centered way. It demands upgrade skills in teaching and technology from the teachers. In the past teaching has not been perceived as important as clinical work, research and administration, it has always been an added-on task. But in this century it is the time to take teaching as the integral part of a doctor's role.

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