**English Session** 

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## Teaching Clinical Reasoning in Japan: a 26 year continuing challenge for lucky Dr. Stein

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对象者 医師,後期研修医(卒後3年目以上),初期研修医(卒後1-2年目),学生

Target Doctor, Senior Resident (3+years after graduation), Resident (1-2 years after graduation), Medical student

Lucky Phase 1. The Invitation: At the invitation of Dr. Tadashi Matsumura, then Chief, Maizuru Municipal Hospital, East Maizuru, Kyoto Prefecture, Dr. Gerald H. Stein started a 3 month sabbatical on his first step of a 26 year journey. Culture shock numbed Dr. Stein. Lucky Phase 2. Teaching: Dr. Stein accepted the invitation of the Kameda brothers, who model themselves after the Mayo brothers, to teach clinical skills at Kameda Medical Center, Awa Kamogawa, Chiba Prefecture, Japan. His tenure at KMC lasted 7 years during which he learned to compromises with Japanese cultural ways. Lucky Phase 3. Networking: Learning the Japanese way to network, Dr. Stein was invited to over 40 Japanese medical university and community teaching hospitals to lead clinical seminars with residents and consult with staff.

Lucky Phase 4. Research: Dr. Yasuharu Tokuda, at that time chief, General Internal Medicine, Okinawa, Chubu Hospital, Okinawa Prefecture, Japan, visited Dr. Stein at the College of Medicine, University of Florida, Gainesville, Florida, USA, beginning a multiyear discussion to improve Japanese medical universities' teaching of clinical skills. We started with an unstructured webbased seminar (webinar) with ACP-JC medical students [1], culminating in the 'webinar project,' a prototypical Monkasho-funded project for Japanese clinical instructors to improve their teaching of clinical reasoning skills to 5th year Japanese medical students, resulting in 7 publications [2].

Here is a brief summary of the webinar project: the authors developed an innovative web-based 'Sequential Question and Answer' (SQA) test, rewarding history and differential as proxies for clinical reasoning. We compared the pre and posttest SQA scores of 12 fifth grade tutored medical students at two medical universities, who were tutored during 4 university instructors' led infectious diseases syllabus webinars, to 12 self-study 5<sup>th</sup> grade students; Our results showed that although the pre SQA tests scores of the tutored and self study students were similar, the tutored students' post SQA test scores significantly improved more than that of the self-study students. We concluded that further research may be needed to exploit the potential of our modular clinical reasoning system.

Lucky Phase 5 Understanding: Dr. Stein accepts the cultural differences between the Japanese and American ways of teaching clinical skills. He suggested ways to improve the teaching of clinical skills at Japanese medical universities.[3] I encourage those interested read this article, while thinking about a fundamental question: Are Japanese medical universities interested in teaching high level clinical skills, or are Japanese medical universities basically institutes for conducting medical research, while leaving the teaching of clinical skills to the overworked struggling treating staff of community teaching hospitals?

1. Stein GH, Shibata A, Bautista M, Tokuda Y:Webinar: An initial experience with web-based read-time interactive clinical seminars for Japanese medical students. Gen Med. 2010;11:87–90

https://onlinelibrary.wiley.com/doi/abs/10.14442/general.11.87

2. Stein GH, Tokunaga H, Ando H, Obika M, Miyoshi T, Tokuda Y, Noguchi Y, Kinjo M, Kohsaka S, Honda H, Kitano Y, Kitazono H, Kataoka H, Terasawa, H. Clinical Reasoning Web-based Prototypic Module for Tutors Teaching 5th Grade Medical Students: A Pilot Randomized Study. General Medicine.

Stein GH, Tokunaga H, Ando H, et al: Clinical reasoning Web-based prototypic module for tutors teaching 5thgrade medical students: a pilot randomized study. Gen Med. 2015;16:13–25.

https://onlinelibrary.wiley.com/doi/10.14442/general.16.13

3. Stein,GH. Clinical reasoning: An unfinished journey. General Medicine. 2015; 16(1): 5-7; https://onlinelibrary.wiley.com/doi/10.14442/general.16.5