Enhancing Veterinary Education: Leveraging Digital Platforms and Artificial Intelligence for Efficient Case-Based Learning

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OVERVIEW

- Perspective: Historical and Philosophical
- Why Case-Based Learning (CBL) and Critical Clinical Thinking?
- Didactic framework and focus on competencies
- Experience with Early-Year CBL at the University of Illinois
- Why is CBL so hard to implement?
- Digital "Extensions" of the Instructor- LMS tools and AI
- Summary

CBL IN VETERINARY EDUCATION

- Focuses on real-world cases to promote critical thinking
- Engages students in problem-solving
- **Survey:** Have you tried it with a vet class?



WHAT WE LEARNED FROM ONLINE CE

- First online CE for vets –VIN-19902000
- Practitioners applied content as they learned.
- Case discussions were more personal and engaging.

 Conclusion: Practical *application* should be embedded in every aspect of training, as it *deepens and personalizes its meaning, leading to longer term retention.*



DALLE-2: Prompt: excited veterinary students working together on a computer to solve a clinical case

FIRST YEAR CURRICULUM AT UNIV OF ILLINOIS CVM –2009



OBSERVATIONS

PASSIVE!

- Integrated courses, but poor retention
- More evaluation than guiding
- Clinical Correlation sessions: initially more content than process
 - **Conclusion:** more guidance on critical clinical thinking needed

WHY CRITICAL CLINICAL THINKING (CCT)?

- Practice and peer teaching = highest retention rates
- **Decision-making** is at the heart of clinical practice
- CCT and evidence-based medicine (EBM) may engender negative reactions in practice, so it should be reinforced during training





STUDENTS NEED PRACTICE WITH CLINICAL UNCERTAINTY

..."not teaching clinicians about clinical uncertainty has been referred to as 'the greatest deficiency of medical education throughout the twentieth century."

Gambrill E. (2005) Critical thinking in clinical practice: improving the quality of judgments and decisions. 2nd ed. Hoboken: Wiley and Sons.

FULBRIGHT KOMMISSION





Critical Thinking heißt selbstgesteuertes, selbstdiszipliniertes, selbstüberwachtes und

selbstüberwachtes und selbstkorrigierendes Denken.

Foto: spgirolamo/Fotolia

ANALYTISCH DENKEN

In dem Kooperationsprojekt "Kritisches klinisches Denken" lernen die Studierenden, die richtigen Fragen zu stellen und klinische Fälle zu lösen.

Professor Duncan Ferguson, VMD PhD, von der Universität in Illinois Foto: M. Leirer



COMPARING STUDENT PERFORMANCE OVER A YEAR

Hypothesis 1: Given practice at critical clinical thinking over a year of instruction, students would improve standardized general critical thinking test scores and case analysis rubric scores
Hypothesis 2: Paired group work performance would correlate with improvement in individual scores

CYCLE OF CRITICAL CLINICAL THINKING (CCT) EXERCISES



Ferguson DC, McNeil LK, Schaeffer DJ, Mills EM (2017): Encouraging critical clinical thinking (CCT) skills in firstyear veterinary students. J Vet Med Ed 44(3): 531–54. <u>https://doi.org/10.3138/jvme.0216-032R1</u>

NOTE

 \checkmark CCT exercises focus more on process than on content. ✓ However, studies have shown that exercises have areatest impact when they are **discipline**specific.

ADDISON'S DISEASE CASE: CHOOSING RELEVANT OBSERVATIONS

Show help	Presenting information	Build your formulation	Entire Case - Copy to clipboard]	
Presenting Information for: Todd, Weak and Lethargic Dog Relevant Observations						
SIGNALMENT: "Todd", 4.5 yo MC La PRESENTING COMPLAINT: recumt HISTORY: For the past week-Todd-h and decreased appetite. Todd vomite days and has lost weight recently. To as normal, but the radiographs are in heartworm preventative. PREVIOUS DIAGNOSTICS AND TR and plasma [K+] was 6.1 meq/liter. T PHYSICAL EXAM: General: quiet, weak on presentation Wt: 38.5 kg Body Condition Score: HR: 140 T=100.3°F Resp Rate: 20 th Mucous Membranes (MM): darkly pic	 SIGNALMENT: "Todd", 4.5 yo MC L recumbency and weakness anorexic and lethargic intermittent lethargy and decreased scant tarry stools over the past coup bloodwork was performed abnormality noted was plasma [Na+] administered 500 ml 0.9% NaCl SQ weak on presentation and appeared d appeared year decreased 					
Ear/Eyes/Nose/Throat (EENT): within Peripheral lymph nodes: palpated no Abdomen: no abnormalities were felt Heart/Lupp: The patient's heart and L Clinical Patholo	n normal limits (WNL) - clear OU/AU, o rmally on abdominal palpation, and the patie upos auscultated normal, although the 9 9	oral negative, no oculonasal discharge ent did not appear painful as this exam a heart rate was increased and femora	a. The teeth had a set famount of tartar n was performed - soft, no masses or flu al pulses were weak. No murmurs or an	and halitosis was noted. id wave, no distension. bythmias present. Rectal	 HR: 140 T=100.3°F Resp Rate: 20 MM were tacky and CRT was >2 se heart rate was increased and femor stool was greenish brown 	
Test	Results	Nor	mal Range		weak to rise and ambulate	
Na+	135	141-	152 (mmol/L)	Obs>	vomited 2 days ago, and has had se	
K+	5.6	3.9-5	5.5 (mmol/L)	Obs>	stemal recumbency	
CI-	112	107-	-118 (mmol/L)	Ob	✓ 8% dehydrated	
Ca++	1.06	1.04	-1.2 (mmol/L)	Obs>	ACTH stimulation test was performed	
Mg++	0.52	0.38	3-0.58 (mmol/L)	Obs>	blood sample is drawn	
Glucose	87	68-1	26 (mg/dl)	Obs>	pharmaceutical preparation of ACTH	
Lactate	1	<2.5	5 (mmol/L)	Obs>	second blood sample 60 minutes	
Blood Urea Nitrogen	34	6-30	(mg/dl)	Obs>	Na+ 135 141-152 (mmol/L)	
Creatinine	1.3	0.5-1	l.5 (mg/dl)	Obs>	K+ 5.6 3.9-5.5 (mmol/L)	
Anion Gap	8.1	8-25	(mmol/L)	Obs>	▼ Blood Urea Nitrogen 34 6-30 (m ▼	

https://www.whenknowingmatters.com/

RUBRIC (USED BY FACULTY)

- Questions: development of refining (or clarifying) questions to answer based on an honest assessment of current knowledge base;
- *Approach*: approach to seeking answers to developed questions (e.g., literature search);
- Judgment: judgment of quality of information (awareness and application of standards of a discipline, bias detection including appropriate humility to detect one's own potential bias, and the application of statistical concepts);
- Analysis: analysis of an argument;
- Clarity: clarity and communication of thought (conciseness, grammar, spelling, and written presentation); and
- *Application*: application and understanding of appropriate disciplinary content.

Rubric Scoring Novice (1) Advanced Beginner (2) Competent (3) Proficient (4) Expert (5)

IMPROVEMENT IN RUBRIC SCORES OVER YEAR



CORRELATION OF GROUP TOTAL RUBRIC SCORES WITH ASSIGNMENT NUMBER



CORRELATION BETWEEN INDIVIDUAL RUBRIC SCORES AND END-OF-YEAR GRADE AVERAGE



SUMMARY AND CONCLUSIONS

- A year of case analysis exercises had *no impact* on individual general critical thinking skills as measured by a standardized test (CCTTZ).
- 2. Rubric-based *instructor evaluation* of discipline-specific student performance *improved* significantly throughout the year.
- 3. Group *total rubric scores improved* even more significantly.
- 4. Students with *higher end-of-year GPA performed slightly better on the pre-year CCTTZ.*
- 5. There was a *mild but significant correlation between individual rubric scores and the end-of-year grade average.*

CBL: WHY IS IT SO HARD TO IMPLEMENT?

 Survey: For those who have tried it, or based upon what I just described, what do you see as the *impediments* to implementation?



FACULTY ISSUES IN DESIGNING CASE-BASED LEARNING

- 1. CBL scenarios should be:
 - Aligned with curriculum
 - Clinically relevant
 - Tailored to student level, challenging enough for growth
- 2. Time-consuming preparing case and providing feedback
- 3. Expertise needed?
 - Non-DVMs often believe they cannot devise or engage in CBL – FALSE!



ISSUES REVIEWING STUDENT WORK

- Useful feedback is:
- 1. Detailed
- 2. Personalized
- 3. Consistent
- 4. Prompt
 - Class sizes are large and growing



7 AFFORDANCES OF TECHNOLOGY FOR LEARNING – KALANTZIS AND COPE

- 1. Ubiquitous Learning
- 2. Differentiated Learning
- 3. Active Knowledge Making
- 4. Multimodal meaning
- 5. Metacognition
- 6. Collaborative Intelligence
- 7. Recursive Feedback





New Learning

Elements of a science of education

Mary Kalantzis and Bill Cope

- Knowledge makers
- Recursive and formative
- Differentiated
- Emphasize selfreflection

"NEW LEARNING" COPE AND KALANTZIS

Characteristics	Didactic	Reflexive	
Time and Place	Fixed	Ubiquitous	
Learner	Knowledge Consumer	Knowledge Maker	
Interactive Modality	Textbooks, Assignments, Tests	Multimodal Knowledge Artifacts	
Assessment	Retroactive and Summative Recursive and Form		
Social	Isolated and Individual	Collaborative Intelligence	
Cognition	Remembering Facts/Theories	Metacognition: Self- Reflection	
Approach	Standardized, Homogenized	Flexible, Differentiated	

CBVE FRAMEWORK FOCUSES ON HIGHER ORDER THINKING

- Evaluation progress towards a standard of performance
- American Association of
 Veterinary Medical Colleges is
 espousing the development of
 competency-based curricular
 standards:

https://aavmc.org/programs/cbv

<u>e</u>



DOMAIN 1 Clinical Reasoning and Decision-making

The graduate demonstrates critical thinking and problem solving to arrive at evidence-based decisions that consider animal and client needs, available resources, and social context.

COMPETENCIES		ILLUSTRATIVE SUBCOMPETENCIES	
1.1	Gathers and assimilates relevant information about animals	 a. Collects history b. Performs physical examination c. Interprets diagnostic test results d. Performs necropsy examination 	
1.2	Synthesizes and prioritizes problems to arrive at differential diagnoses	 a. Identifies problems b. Creates refined problem list c. Prioritizes differential diagnoses 	
1.3	Creates and adjusts a diagnostic and/or treatment plan based on available evidence	 a. Appraises available clinical information and acts accordingly despite uncertainty b. Explains justification for plan c. Re-evaluates animal or population in a timely manner to adjust plan d. Uses critical thinking to determine appropriate action when unexpected outcomes occur (e.g., complications, changed diagnosis) 	

CBVE: PREPARE FOR LIFELONG AND LIFE-WIDE LEARNING

 Half-life of medical information is down to 70 days

 Day 1 competencies include evidence-based reasoning, argumentation in support of verifiable claims, and testable judgement calls 1.7

https://aavmc.org/programs/cbve

Recognizes limitations of knowledge, skill and resources, and consults as needed

MILESTONES



NOVICE:

Overestimates abilities and unaware of limitations. Reluctant to reveal shortcomings or seek advice from others.

ADVANCED BEGINNER:

Recognizes some limitations but overestimates other abilities. Needs help identifying resources for consultation and/or referral.

COMPETENT:

Recognizes own limitations in most situations. Usually seeks guidance when warranted. Occasionally delays timely consultation.

PROFICIENT:

Recognizes own limitations. Anticipates the need for consultation and pursues referral when warranted.

COMMON DIGITAL PLATFORMS IN CASE-BASED LEARNING

- Moodle, Canvas, Blackboard, etc. generally replicate standard classroom functions
- Monitor student progress and interactions and can be adaptive
- Evaluations (exams, quizzes) most often used to reinforce learning
- H5P tools for interactive video, etc. (<u>https://h5.org</u> and <u>https://h5p.com</u>



CGSCHOLAR (CYBERSCHOLAR)

- "Social knowledge" communities that document all interactions and allows learner to see progress against instructor goals
- Multimedia writing projects focused on formative review:
- Peer
- Self
- AI and AI RAG
- Faculty formative or summative

Scholar Community Creator Publisher Analytics Event Bookstore



https://cgnetworks.org/medialab/cgscholar

Photo 1: Rat Terrier Litter: 3 stunted puppies with 1 normal littermate

case introduction shows the thyroid gland on the lefthand side compared with the kidney on the

righthand side

COMMUNITY ADMINS (4)

Duncan Ferguson

William Cope

Adam Rusch

You created the update

Constructive Feedback:

Share a file or link ...

Annotations.

MULTIMEDIA CASE ANALYSES WITH SCHOLAR

- 1. Instructor Demonstration Case "See One"
- 2. Case Analyzed by Entire Class: "Do One": Peer Reviewer Also Analyzes Case
- 3. ¹/₄ of class analyzes a particular case and peer reviews 3 others. "*Review 3*"

Course & Semester	Case # : Title	Medical Condition	Special Notes
2015 - 1st	0: Stunted Puppies	Congenital Hypothyroidism	Demonstration by Instructor
	1: Rottie	Diabetes Mellitus	1 of 4 cases assigned to 1/4 of class
	2: Cow 202	Cow with Periparturient Hypocalcemia	
	3: Pom Pom and Foo Foo	Pups with Pituitary Dwarfism	
	4: Jazzy	Dog with Addison's Disease	
2016 - 2nd	5: Charlie, the Coughing Dog	Bronchiectasis	Analyzed by all students
	6: Nala the Coughing Dog	Mitral valve prolapse and Congestive Heart Failure	1 of 4 cases assigned to 1/4 of class
	7: Maggie, the Vomiting Dog	Pancreatitis	
	8: Miss Tiggles, Cat with Inappropriate Urination	Cat with Inappropriate Urination	
	9: Bovine Herd Health Case	Traumatic Reticulitis and Sepsis	
2016 - 2nd	10: Buggy	Primary hyperparathyroidism	
	11: Saddle Up	Reproductive Failure in Mare	
	12: Schatzie	Polydipsia	
2017 & 2018 - 2nd	13: Lemur Case	Tetralogy of Fallot	All students assigned case
	14: Paint Filly	Red Maple Leaf Toxicosis in a Horse	1 of 4 cases assigned to 1/4 of class
	15: Natalie	Stasis of Rumen and Intestine in a Cow	
	16: Hank	Pulmonic Stenosis in a Dog	
	17: Randall	Megacolon in a Cat	

UPDATED RUBRIC AND PEER SCORING

- **Problems:** the student should list the three most serious clinical problems in this case,and defend his/her reasoning.
- **Differentials:** the student should identify at least two major differential diagnoses for the animal and defend his/her choices with evidence from the case and information from the literature.
- Evidence: The student should identify the clinical observations in this case to support his problem list and differential diagnosis list.
- **Understanding:** The student should respond to various questions in order to evaluate his understanding of the case. For example: "If unmanaged, what kind of additional clinical signs would you expect?"
- **Conclusions:** The student should identify and explain at least 2 personal learning issues from the exercise.
- **References:** The student should provide references that helped him with understanding of this case.
- **Overall:** The overall impression of the reviewer from the analysis.
- Peers scored from 1-4 for strongly disagree, disagree, agree, strongly agree

LEARNER ASTER PLOT



Analytics



COMPOSITE CLASS ASTERPLOT



This visualization of learning metrics is based on 10,500 metric values derived from 1,654,640 total data points collected across all members of this community.

RETROSPECTIVE STUDY OF STUDENT OPINION ABOUT CGSCHOLAR: CLASSES OF 2019-2021 AT ILLINOIS

Hypothesis: Iterative improvement in platform format for timely student feedback led to a more positive experience during case analysis exercises

McMichael MA, Ferguson DC, Allender MC, Cope W, Kalantzis M, Haniya S, Searsmith MCS (2021). Use of a multimodal, peer-to-peer learning management system for introduction of critical clinical thinking to first year veterinary students. J. Vet. Med. Ed. 48(2):170-180. https://doi.org/10.3138/jvme.2019-0029

SURVEY QUESTIONS

- Q2: Inclusion of *multi-media* in my work enhanced my ability to communicate my thoughts about the assigned case exercise
- Q3: When I performed *peer review* on a classmate's case analysis, the use of *multi-media* enhanced my ability to understand my peers' answers
- Q4: The case exercises gave me a better understanding of what constitutes high quality *literature evidence*
- Q5: Peer review of a classmate's work was helpful in identifying <u>weaknesses</u> in my own analysis
- Q6: Peer review of my work was important in the improvements I made between the first and final drafts of my analysis
- Scale: Highly Disagree (1), Disagree (2), (Neutral (3), Agree (4), Highly Agree (5)

SURVEY TOTAL SCORES (max=25)

Class





CONCLUSIONS

- Students in Years 2 and 3 were generally positive about the experience; Students in Year 1 were neutral
- Multi-media enhanced the experience for students in Years 2 and 3
- Students in Year 2 saw connection with understanding quality of evidence; other years may have tired of the message
- Most students in Years 2 and 3 felt that they had positive benefits from the peer review process

NEAR FUTURE

LEVERAGING AI AND RAG MODELS

- Retrieval-Augmented Generation (RAG) combines language generation (LLM) with a knowledge database
- Realtime accurate guidance of students as they practice medical reasoning
- Crucial *extension of the instructor* via rubric-driven goals and principles



DALL-E 3

USING RAG WITH RELIABLE MEDICAL SOURCES

- Diminishes "hallucination" around crucial medical facts
- Real-time access to *peer- reviewed* medical source(s) –
 e.g. *Merck Veterinary Manual*



Modified DALL-E 3

EXAMPLE: USING AI IN A VETERINARY CASE

Example Scenario: Case of Hepatic Lymphoma in the Dog

- Students prepare S/O/A/P
 from case record
- Analysis created by RAG-LLM ChatGPT interaction using Retool app



DALL-E 3

STEPS INCLUDING RAG LLM IN AI REVIEW PROCESS

- **1. Medical Text** (e.g. student case analysis) entered or drawn from "work" in CyberScholar
- 2. Rubric entered or drawn from instructor-created rubric
- **3. Knowledgebase** (e.g. Merck Veterinary Manual) queried with vector search for relevant "chunks" of data to inform model
- 4. **Prompt** created from a prompt prefix (general directions), rubric, Knowledgebase excerpts and case text.
- 5. ChatGPT interaction to create the AI Review
- 6. Top articles referenced provided as URL links.



RAG LLM AI REVIEW



RUBRICS (PROMPTS) TO SUPPORT AI-DRIVEN FEEDBACK

- Provide a clear *framework* for assessment by peers or AI tool
- Guide students in their case analysis approach
- Standardize formative
 feedback: Al rigorously follows
 rubric criteria, and is evidence based, providing the reference
 source



DALL-E 3

CONCLUSIONS AND FUTURE DIRECTIONS

- 1. CBL enhances *student engagement and learning outcomes*, including self-reflection.
- AI has the potential to *reduce faculty workload* in grading and
 feedback
- 3. Continuous improvements in Al technology will enhance this "extension" of an instructor and allow more complex case scenarios and assessments.



OPEN EDUCATIONAL RESOURCE-SHARING: VETMEDACADEMY

- Free to students, faculty, and others in the veterinary profession
- International: 70 countries
- Self-study or review
- Modular content is portable and adaptable for interested instructors
- Open Educational Resources
 encouraged: Creative Commons
 Attribution model
- Content partners: Merck Veterinary Manual Vet-Library.com, and Clinician's Brief



Info Site: <u>https://vetmedacademy.org</u> Moodle LMS (register): <u>https://vmacad.org</u>

THANK YOU

ANY QUESTIONS?



Simulated oil painting of actual photograph of students working on a clinical case