Resident physicians are in a unique position. They are treating patients and learning their craft in tandem. Pulling off that balance is challenging.

A study published in Academic Medicine examined how residents plan their learning and how it could be improved using the framework of the master adaptive learner model offers some useful direction for physicians during their graduate medical education. The study’s lead author, Jeremy Branzetti, MD, offered four practical takeaways for residents.

Look out for the atypical

The master adaptive learner model has been a major focus of the AMA ChangeMedEd Initiative, formerly known as the AMA Accelerating Change in Medical Education initiative. The model’s aim is to help medical students and residents develop problem-solving proficiency as well as the ability to learn and innovate when faced with a novel challenge.

To hone both capabilities requires going beyond what you see every day, Dr. Branzetti said.

“The people who only learn from content that they see—there's a limit to their ability to be adaptive experts,” noted Dr. Branzetti, a professional coach and emergency physician at Geisinger Community Medical Center in Scranton, Pennsylvania, which is part of Geisinger Health System, a member of the AMA Health System Program that provides enterprise solutions to equip leadership, physicians and care teams with resources to help drive the future of medicine.

“Understanding patterns or how typical conditions behave is a core element of patient care,” Dr. Branzetti said. “Recognizing when an atypical situation is occurring—and figuring out how to adapt your prior knowledge to address it—is the tougher skill to develop.
“People have a sort of internal sensor that helps them assess their current situation: Is this a familiar pattern, and therefore I can continue per routine? Or they notice that something doesn't fit—I need to pump the brakes and then think actively about this novel situation. What's different here?”

Curiosity creates capability

When that situation you don’t recognize arises, you can use resources and be self-directed to gain knowledge. It’s also helpful to ask questions.

“If you’re a resident, cultivate your curiosity. Asking questions is incredibly important,” Dr. Branzetti said. You're in training. So you’re supposed to be using the resources around you that may know more or may be able to provide you more information. You’re building that sensor and you could use other trusted people with more experience and just say: ‘Hey, my head's thinking this. What do you think about it?’”

Own your learning

In residency, there aren’t grades or exams to reinforce what you need to learn. Residents need to be self-directed learners.

“The people who are effective resident learners take ownership of that learning process, where they don't wait for anybody to tell them when, or what, to learn,” said Dr. Branzetti. “And it is not always a smooth, fluid process. Sometimes [residents] try a learning resource or technique and realize ‘well, that didn't work.’ But instead of giving up, they reassess what they did, and look for another way to address the learning gap.”

Make goals fungible

When you are a medical student, learning goals can be largely static. If you want to get through three question banks in a single day, your most significant limitation is likely time. That’s hardly the case in residency, however.

“As an EM doctor, I may say I want to see five chest-pain patients today, but I don't actually control whether chest-pain patients come into the ER,” Dr. Branzetti said. “So it can be really hard to set a goal in advance and successfully meet it.
“If you work in an environment where you don’t control what you see, be flexible and say: OK, what happened today? What learning opportunities can I extrapolate based on my clinical experiences today?”

Hone resource utilization

Part of growing your knowledge and skills is understanding what works best for your development.

“There isn’t one objectively correct resource that works for everyone in every situation,” Dr. Branzetti said. “The key thing is to be able to critically assess a resource. See how it works for you, and then see when you would use it again, if at all.” Circumstances also matter. “If I'm in the clinical space where there's a limited amount of time, I need a quick answer, maybe I'll go to UpToDate. If I need to learn the concept in more depth, then maybe that's not enough and I want to go to a textbook. Neither is better than the other, but have a specific value in a given circumstance.”

Such resources can be used in the same way you would a medication: proper use depends on the circumstances.