

## **Model for Case Conferences & Journal Clubs**

Courtesy of Dr. David Price, Kaiser Permanente, Colorado

- Avoid “fascinomas”
  - Choose cases or identify evidence-based articles that can be applied to practice
- Include a series objective like:
  - Attendees will be able to identify at least two learnings they will incorporate into their practice.
- During the last five minutes of each session:
  - Ask attendees to identify the key concepts from the presentation
  - Ask attendees to write down for themselves 1-2 learnings that they plan to use in practice
- During the first five minutes of the next session, ask attendees:
  - Who tried any of the key learnings from the last session?
  - Which were successful, which weren't, and why?
- Provide a summary of key learnings, and later, successes or barriers identified as a result of trying these learning, to the CME Office
- Share identified barriers with department Chief (may also share changes in practice, where appropriate)

This model not only meets CME requirements, but creates a learning opportunity among attendees and establishes continuity between series sessions.

See also *Journal of Continuing Education in the Health Professions*, Volume 28, Issue 3, Summer 2008

## **Suggestions for Tumor Boards**

- Ask the clinician who suggests the case to briefly note why
  - i.e., difficult case; common case; specialist expertise needed
- Choose cases where there is a gap in practice
  - i.e., challenging problem; new guidelines; frequent problem
- Summarize the practice recommendations made for each case (blinded)
- If case recommendations can't be provided, consider adapting the Price case conferences model where appropriate