

Is Asking Questions on Rounds a Teachable Skill? [Response to Letter]

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Dear editor

We appreciate the thoughtful, insightful and helpful comments and suggestions we received in the Letter to the Editor from Seung Min Han, Pylin Parkes and Susannah Wang from the Imperial College School of Medicine, Imperial College, London, United Kingdom, regarding our article "Is asking questions on rounds a teachable skill? A randomized controlled trial to increase attendings' asking questions."¹

We agree that in our future research into the use of questions on bedside rounds, we will utilize their excellent suggestion of audio-video recordings of attending bedside rounds to evaluate the alignment of the attendings' questions with the specific role of each team member.

We recognize that a participant's perception of whether rounds were "worthwhile" or "engaging" is likely multifactorial. It is, not only the number and types of questions asked, but also relevant factors such as tone of voice, humility, kindness, body language, and genuine curiosity that drive the ratings of "worthwhile" and "engaging" to be excellent rather than mediocre. In our one-hour interactive intervention program, Dr. James Honan modeled ideal collegial and collaborative behavior while teaching experimental group attendings to ask a wider variety and number of questions.^{1,2}

We agree with Han, Parkes and Wang that the reasons why residents in the experimental group found rounds statistically significantly more "worthwhile", but not significantly more "engaging" are not clear from the residents' survey comments that we collected. In our future research, we will define these terms concisely and clearly so that the responses we obtain are more meaningful.

Han, Parkes and Wang refer to two verbatim quotes from our free text survey that we interpreted differently. In response to the question, "What would make morning rounds more vibrant, inclusive and high-yield?", residents who rated rounds more "worthwhile" and had rounded with the experimental group attendings noted in their free text verbatim answers that they wanted "Asking questions in a no pressure way, knowing that the attending won't judge incorrect answers" and "Open questions from students encouraged." We interpreted these experimental group residents' comments as asking for more of what they had seen and rated as "worthwhile" on their surveys, namely, that the experimental group attendings had learned to ask questions in a gentle, kind and low-fear factor manner from Dr. James Honan resulting in a collegial climate at the bedside. In addition, the experimental group attendings encouraged questions from the medical students, but

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unfortunately, the number of medical students overall was too small to include in our final analyses.

We look forward to further research into this important area of education at the bedside and will incorporate the excellent comments and suggestions of Han, Parkes and Wang to improve and clarify our research protocols and methods.

Disclosure

The authors have no conflicts of interest in this communication.

References

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