

Year 3 Case-based Learning 2024-25: Case 1 at a Glance

CBL: overview

Student-centred, patient centred small group learning

Skills development (clinical reasoning, problem-solving, communication, documentation, teamwork)

Incorporate and apply GCAT themes

Formative assessment

Mandatory attendance

4 cases throughout Year 3, Case 1 is the introductory case to support transition from Y1/2 style

Student role

Coordinate group agenda

Allocate roles

Work through materials and framework (circles below)

Write learning outcomes

Research independently

Share learning

Part 1 summary

Farah Bibi is a 64-year-old Muslim woman from Bangladesh who lives with her daughter. English is her second language.

She has a short history of altered bowel habit and anaemia which worsens over the weekend so she self-presents to the Emergency Department (ED).

She is admitted under medicine and is reviewed by gastroenterology.

She is discharged for red-flag colonoscopy which reveals colorectal cancer.

Part 2 summary

Mrs Bibi is reviewed at the surgical outpatient department and she meets the colorectal specialist nurse.

She is admitted electively and consented for a hemicolectomy.

She deteriorates day 3 post-op with acute shortness of breath and chest pain.

Investigations reveal pulmonary embolus.

Case 1 timeline

2nd Sept 2024: Y3 LIC1 begins

6th Sept: Information for Part 1 released on portal

From 9th Sept: Part 1 independent student session 1 (facilitator present for case 1)

From 16th Sept: Part 1 facilitated session 2

27th Sept: Information for Part 2 released on portal

From 30th Sept: Part 2 independent student session 1 (facilitator present for case 1)

From 7th Oct: Part 2 facilitated session 2

Facilitator role

Attends all session in Case 1 (exception from other cases)

Undertakes facilitator training and reviews materials

Ensures learning outcomes have been met

Presents additional materials in case progression in session 2 of each Part

Provides email for students to record session on MyProgress

Part 1 key areas of discussion

- Interface of services
- Cancer screening services and factors in participation
- Clinical reasoning
- Differential diagnosis
- Problem lists
- Evidence-based investigation and management

Part 2 key areas of discussion

- Multi-disciplinary care for the patient with cancer
- Risks of surgery and general anaesthesia
- Consent for procedures
- Pathology reports
- Assessment of an acutely unwell postoperative patient
- Prophylaxis and management of venous thromboembolism (VTE)
- Escalation of care

