2015

Transformation from cramming for the test to caring for patients: perspective of a maturing clinician

Kyle McKinney
kyle.mckinney@oakwood.org

Follow this and additional works at: https://digitalcommons.wayne.edu/crp

Part of the Medical Education Commons, and the Translational Medical Research Commons

Recommended Citation

This Reflection is brought to you for free and open access by the Open Access Journals at DigitalCommons@WayneState. It has been accepted for inclusion in Clinical Research in Practice: The Journal of Team Hippocrates by an authorized editor of DigitalCommons@WayneState.
REFLECTION:
Transformation from cramming for the test to caring for patients: perspective of a maturing clinician

KYLE McKinney, DO, Oakwood Health System

I have a distant medical school memory of the evidence based medicine (EBM) class, with all of the equations and definitions that seemed so foreign at the time. I remember thinking how unnecessary it was to learn this material, especially compared to other classes such as cardiology or nephrology. Alas, I crammed all of the calculations and words necessary to get through the exam, just to forget them right afterwards.

Fast-forward to my intern year cardiology rotation: during rounds, my team began to discuss a medication being used to treat a patient’s illness. The pharmacist in our group gave us a journal article that discussed the medication’s utility due to its high relative risk reduction. I read the article, looked at the graphs and concluded the relative risk reduction looked too good. When I had free time, I worked on my own calculations to the absolute risk reduction and number needed to treat. I decided the medication helped some people, but not as many as the pharmacist had led us to believe.

I wanted to discuss my findings and my concerns regarding the validity of the research, but it would be the first time I disagreed with my senior residents or attending. I contemplated whether or not to broach the subject, fearing the consequences if I offended my seniors. In the end, I believed my concerns had important implications for the care of the patient, and during our next rounds I explained my conclusion.

I anticipated strong negative feedback or discussion about why I was wrong; however the team’s response was the opposite. My seniors agreed with me and seemed impressed that I put in my own extracurricular effort.

This scenario showed me how important it is to have a developed skill set when reading and interpreting journal articles. Understanding the definitions of EBM helps me to better interpret the validity of research articles and develop better treatment plans for my future patients. I have also learned that properly interpreting research can help you become an integral part of the treatment team—even if you are just an intern.

KYLE McKinney, DO practices in the Oakwood Health System