



**CanMEDS Best Practices Submission Form**  
**The Royal College of Physicians and Surgeons of Canada**  
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**CATEGORY**

- Curriculum** — a design for education around the CanMEDS competencies.
- Teaching Tool** — a submission that will assist the teaching the specific CanMEDS competencies.
- Assessment Tool** — a submission that will assist in the assessment/evaluation of the CanMEDS competencies.

**TYPE OF TOOL**

- ITER     Manual or Module     OSCE     Rotation specific objectives     Workshops     Facilitated Discussions  
 FITER     **Group exercise**     Rotation     Portfolios & Logbooks     Website     **Other: Research Project**

**CanMEDS ROLES**

- Medical Expert     Communicator     Collaborator     Manager     Health Advocate     Scholar     Professional     **General**

**TITLE** Limit of 100 characters

**CO-OPERATIVE LEARNING AS AN INSTRUCTIONAL STRATEGY IN UNDERGRADUATE MEDICAL EDUCATION**

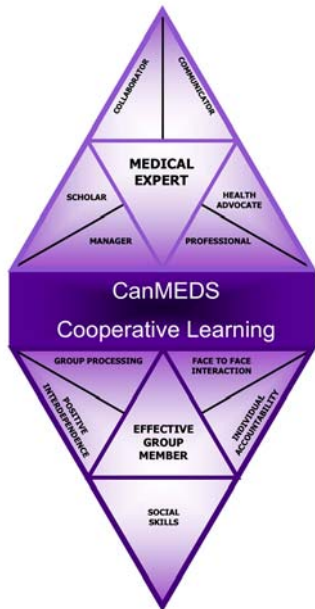
**AUTHOR(S)**

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**ABSTRACT** Limit of 500 characters



Co-operative learning has been shown to result in higher achievement, creation of positive relationships and greater psychological health. Five key principles distinguish cooperative learning from other small group learning: (1) face-to-face interaction, (2) individual accountability, (3) group processing, (4) positive interdependence; and (5) interpersonal, small group skills. These principles reinforce the CanMEDS competencies of communication, collaboration, manager, professional and medical expertise.

We designed an activity incorporating these principles for 90 Year 1 medical/dental Pathology students. Students were informed 3 weeks ahead of time that they were responsible for learning and summarizing chemical mediators of inflammation by creating a poster (Principles 1, 2, 3) in self-chosen groups of four/five (1, 4, 5). Each group member signed their poster acknowledging ownership (2). On "Poster Day," the posters were displayed in the hallway. Each group reflected on and evaluated another poster. At the end of the session, students completed an individual reflection questionnaire (3, 5). Their understanding was tested at the Midterm examination by questions on this subject (2). Preliminary qualitative content analysis of individual responses indicates positive outcomes. Cooperative learning is a valuable strategy that can be used by undergraduate medical educators. Such methods serve as a tool for the practice of CanMEDS roles implicitly as part of the hidden curriculum in the undergraduate medical education.

**REFERENCES**

1) Frank, JR (Ed) 2005. The CanMEDS 2005 physician competency framework. Better standards. Better physicians. Better care. Ottawa: The Royal College of Physicians and Surgeons of Canada.

2) Kanthan, R. & Mills, S. 2005. Active learning strategies in undergraduate medical education of Pathology: A Saskatoon experience. Journal of International Association of Medical and Science Education [JIAMSE], vol 15; p12-18.