# **Teaching Cognitive Skills**



# **Question for Discussion**

- Who is the audience?
- How do you teach fellows cognitive skills?
  Setting
  - Style
  - Substance
- How does it fit in the structure of your program?
- Resources



# **Questions to Consider:**

- How can the endoscopy teacher promote trainee detection and identification of abnormal findings?
- How much of this must be learned as pathology arises during cases?
- What resources or methods of exposure can make this learning process more efficient



Teaching Novices Cognitive Skills: Breaking it Down

- Teaching trainees to detect abnormalities—and not miss things
- Teaching trainees to correctly identify those abnormalities they discover
- Teaching trainees how to know what to do once they identify an abnormality



Tips for Teaching Novices to Recognize Abnormalities

Look closer

- Know what to look for [Normal vs. Abnormal]

Look slower

#### Look more completely

Know where to look





#### Freeze Frame



- Capture button allows more than taking nice pictures
- Image stabilization allows time to assess details



# Look for Subtle Alterations





#### **Notice Color Differences**





Hyperplastic Polyp







Adenomas

#### **Detection—Close Focus**









#### **Detection of Tiny Cancer**



#### Know Where to Look!





#### Detection: Know What to Look For and Where to Look: Mucous & Debris / Egg-Drop Soup



Tadepalli U. et al. Gastrointest Endosc 2011;1360-1368.



#### Knowing What to Look For: Anything Unusual Below?







This aerial reconnaissance photo of the San Cristobal medium range ballistic missile site No. 3 in Cuba, is one of 27 photos given to Sen. Kenneth Keeting, R-NY, February 7, 1963, by Defense Secretary Robert McNamara to document the administration's claim that Russian offensive missiles have been withdrawn. This photo, the Department of Defense says, shows the site at its maximum readiness on October 27, 1962. (AP Photo/U.S. Defense Department)

# Steps in Learning Pattern Recognition:

- Lesion characterization: knowing what it is that you are seeing
  - Identify component features of pathologies
  - Process sum of all features and deduce the most likely pathology with varying confidence
  - Alternatively, based on exposure to multiple examples recognize the entire pattern as a whole akin to facial recognition



# Feathers + Web feet + Beak, and it Flies = A Duck



OR . . .

# It Looks Like a Duck = A Duck!



#### **Teach Characteristic Features**

- Stark color difference from surrounding mucosa
- Thick brown vessels around white structures
- Branched & oval white structures surrounded by brown





Recognizing and Identifying Atypical and Worrisome Lesions How Would You Maximize the Teaching Moment When Your Fellow Encounters This Finding?





# How do novices actually get this cognitive training?

- What are the practical considerations in your program?
- What resources do you use outside the endo unit?
- How do you deal with infrequent pathologies?



# Detection & Recognition: Case Scenario

- 2 cases of routine screening colonoscopy
- "On-demand colonoscopy" with no indication of any particular increased risk for neoplasia
- No history of major co-morbid illnesses, abnormal immune function, or particular abdominal or perirectal complaints
- Normal pre-procedure routine lab tests





# Squamous esophagus IPCL patterns (intra-epithelial papillary capillary loops)





# Tips to Didactic Presentations of Imaging Material

- Theoretical background-how it works
- Introduce characteristic features to identify
- Provide many examples
  - Annotate images to clearly point out identifying features
  - Illustrate contrasting features
- Testing with feedback



#### **Repetition of Examples is Key**



#### **Annotated Images Helpful**

Linear or convoluted tubular structures

**Tubulogyrus pattern - Adenoma** 



# NBI patterns- Areas of Confusion: Juxtapose Contrasting Findings

Circular pattern with dots (Hyperplastic polyp) NYU Langone

Round or Oval pattern (Adenoma)

#### **Exercise: Examples for Practice**

- Polyp Color:
  - () Brown from vessels
  - () Same as background
- Polyp Vessels:

NYU Langone

- () Brown around white
- () None or lacy

CENTER

- Surface Pattern of Polyp:
  - () Oval, tubular or branched white surrounded by vessels
  - () Dark spots surrounded by white



#### Immediate Review of Answers

- Polyp Color:
  - (X) Brown from vessels
  - () Same as background
- Polyp Vessels:

NYU Langone

- (X) Brown around white
- () None or lacy

CENTER

- Surface Pattern of Polyp:
  - (X) Oval, tubular or branched white surrounded by vessels
  - () Dark spots surrounded by white



# Teaching Appropriate Management of Endoscopic Findings

- Intra-procedure teaching
- Post-procedure activities
- Real time endotherapy decision making
- When and how best to sample
- Understanding quality indicators
- Maximizing safety/minimizing risk
- EBM awareness and application



# Cognitive Teaching: Management of Endoscopic Findings





#### **Summary Discussion:**

# Any Take Home Ideas?

