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on graduate nurse practitioner student
learning and performance of genital
examinations

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Effects of Standardized Patient Encounter on Graduate Nurse Practitioner Student Learning and Performance of Genital Examinations

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Purpose

Previous methods for teaching genital examinations to nurse practitioner students enrolled in a laboratory portion of an advanced health assessment course have included videotapes, plastic models for both male and female genital examinations, and voluntary examinations of a classmate for the female exam.

Standardized patients are specially trained consumers who teach physical examination techniques during the student's performance of the examination. Medical schools have successfully used these patients to teach physical assessment.

The purpose of this study was to determine if standardized patients were the best method for graduate nurse practitioner students to learn genital examinations in comparison to previous teaching methods.

Population

26 graduate students (24 females, 2 males) from the FNP and Psychiatric NP specialties who were enrolled in the advanced health assessment course from 1999-2002.

Three cohorts of students participated. Each had a different teaching strategy for learning the genital examination:

Group 1 (n=13): voluntarily examined classmates for the exam, performed male exam on a plastic model

Group 2 (n=9): performed pelvic exam with a standardized patient and performed male exam on a plastic model

Group 3 (n=4): performed both male and female exams with standardized patients

Method

A comparative descriptive design using both quantitative and qualitative methods.

Surveys consisting of closed-ended questions with Likert scales and open-ended questions were filled out by students anonymously at two points in their education:

- 1) after learning genital examination the laboratory
- 2) after performing genital examinations in clinical sites for 1-2 semesters.

Findings

Some of the students in group 1 felt uncomfortable performing a pelvic examination on a classmate. Only half of this group felt that this teaching method was an appropriate or positive learning experience. After the laboratory session half felt that they had an adequate understanding or felt confident about performing exams as a beginning NP student.

Students in groups 2 & 3 were pleased with the standardized patient and relieved not to have to do this examination on a classmate. In contrast, 100% of these students felt that the experience was positive and an appropriate learning experience.

The students in group 3 felt that the male and female standardized patients were excellent & reported that their anxiety was low while learning the examination techniques

All of the students felt that it was important to perform at least one genital examination before performing the exam on a client and that a plastic model was inadequate for either male or female examination.

STUDY CONCLUSIONS

The findings of this study indicate that genital examination is best taught by standardized patients. The challenges for NP faculty may include access to standardized patient programs for their students and determination of funding to pay for these programs.

The standardized patients were from the program at the University of Massachusetts Medical School

Group 1:

Time 1 (After lab exp) :

"A great learning experience, especially because faculty was able to walk us through the experience. It was a painless part of the assessment course."

"Having to do the examination on a classmate I feel was more nerve provoking than doing the pelvic exam."

Time 2 (after performing genital exams during clinical):

"The experience was very anxiety producing because my skills were definitely lacking secondary to never done before in examining situation."

"I felt slightly anxious the first time. I do feel that the lab experience prepared me adequately."

Male Plastic Model:

"The experience was negative as I was not sure what it was supposed to feel like and felt an inadequate exam was performed."

Group 2:

Time 1:

"The instructor was very patient and thorough. We got feedback if we were hurting her or if we were just right. It was a wonderful experience."

Time 2:

"Because I had performed the exam before I felt I think I was more relaxed and the whole process went smoothly."

Male Plastic Model:

"We didn't have any hands-on experience. We should have had a real model as we did for the female exam."

Group 3:

Time 1:

"The standardized patient created an environment that was conducive to learning and helped me feel more comfortable."

"It was excellent. No other method could suffice."

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