

Faculty Playbook

A Shared Commitment

This curriculum represents a partnership among faculty, residents, and the educational system.

We designed this curriculum because we believe faculty time is far too valuable to be spent repeating information that residents can learn independently. Instead, we want to create in-person educational experiences that make the very best use of something no textbook, online resource, or artificial intelligence system can replace: **You**.

Facilitating Learning in an Intentionally Designed Curriculum

Each subject is broken down into individual **learning modules**. Each learning module has 3 phases: **Preparation** (before an in-person learning session)→ **Application** (in-person learning session)→ **Reinforcement** (after an in-person learning session). Each phase serves a different purpose, and each build upon the one before it; they cannot stand in isolation.

In this curriculum, your primary responsibility is to facilitate learning.

Residents are expected to arrive having completed the assigned Preparation phase. They should have read the assigned BCSC chapter, completed the generation activity, used the educational resources provided, and completed the pre-session self-assessment.

Because that foundational work has already occurred, your in-person time can be devoted to the work that benefits most from your expertise:

- Discussing difficult concepts.
- Exploring clinical reasoning.
- Interpreting diagnostic uncertainty.
- Sharing practical experience.

Help residents discover understanding through thoughtful questioning, guided discussion, and reflection.

Some of the most meaningful teaching moments begin not with an answer, but with a question:

“What makes you think that?”

“What else could this be?”

“What finding changes your differential?”

“How would this change if the patient were...?”

What You Will Receive

Each learning module is designed to minimize your preparation time while maximizing the educational value of the in-person session. Before facilitating a module, you will receive the educational objectives, assigned BCSC reading, educational resources provided to residents, pre-session self-assessment results, suggested discussion topics, clinical cases or application activities, and faculty guidance for facilitating the session.

Your role is to build upon the foundational knowledge that has already been established during the Preparation phase. Use your clinical experience to guide discussion, challenge resident thinking, address misconceptions revealed by the pre-session assessment, and help residents connect foundational knowledge with patient care.

1. Preparation (Before the Session)

Residents have responsibilities before they arrive.

They are expected to:

- Complete the generation activity.
- Complete the assigned pre-reading (often a BCSC chapter).
- Use the educational resources provided.
- Complete the pre-session self-assessment.

Review the results of the pre-session assessment:

- Look for patterns rather than individual scores.
- Where are residents struggling?
- Which concepts are well/poorly understood?
- What misconceptions have emerged?

Allow those observations to shape the discussion.

2. Application (the Didactic Session)

Resist the temptation to reteach the chapter. Instead, assume the Preparation phase has accomplished its purpose and build upon it. The application phase is designed to be engaging.

The Module will provide cases to discuss with the residents.

Spend your time where you create the greatest educational value:

- Explore decision making.
- Ask residents to explain their reasoning.
- Encourage disagreement.

- Share lessons that cannot be found in the BCSC
- Normalize uncertainty.

3. Reinforcement (After the Session)

Encourage residents to continue using the educational resources developed by the module.

Remind them to revisit their flashcards. Check in with provided periodic quizzes. Bring up topics in subsequent didactics.