Info-Morsels

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Info-Morsel: Teaching and Learning Procedural Skills

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This info-morsel outlines a structured "Ready, Set, Go" framework for learning procedural skills, ensuring a gradual and effective learning process. Learners progress through three key stages: conceptualizing and visualizing, practicing and proving, and finally, performing the procedure independently. The attached infographic provides a clear teaching path to help learners build competence, offering educators a structured approach to skill development in medical and procedural training.

Read the full article for more details!
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TEACHING AND LEARNING PROCEDURAL SKILLS

	Learning Tasks	Learning Outcomes	Preceptor Tasks	Learner Tasks	Assessment
READY "COGNITIVE LEARNING PHASE"	**LEARN** ***(Conceptualization)***	-Learn what to do and why - Most Importantly learn when NOT to do procedure	1) Didactic Sessions (lectures/videos) • Can by asynchronous (previously recorded) or synchronous 2) Assigned Readings • Text based v. multimedia/Web based	1) Problem Based Small groups 2) Case based learning 3) Flipped Classroom (Assigned reading done before small group session, learner led questions with facilitator)	Learning should be verified and demonstrated via assessment BEFORE moving forward
	SEE ***(Visualization)***	Initial exposure to the procedure from start to finish	**Non-Verbal Instruction** - Watching expert instructor complete the procedure - Passive in nature - Involves seeing the entire procedure from start to finish without commentary	**Deconstruction** 1) Demonstration of each step of the procedure with accompanying verbal description - The "What" and the "Why" 2) Can also do this as flipped procedure - learner describes step and then preceptor does this	Learning should be verified and demonstrated via assessment BEFORE moving forward
SET "PSYCHOMOTOR LEARNING PHASE"	**PRACTICE**	Deliberate practice of the entire process		Practice task on High Fidelity (Simulators/Models) OR Low Fidelity (Objects that are available and approximate the task) simulation	Formative assessment given (Constructive Feedback)
	PROVE	Demonstrates mastery learning	Observes task on High Fidelity (Simulators/Models) OR Low Fidelity (Objects that are available and approximate the task) simulation		Summative assessment: Performance based assessment and feedback
GO "TASK COMPLETION"	**DO**	Performance of task on a human	Direct Observation		Performance based assessment and feedback
	MAINTAIN	Maintenance of skill through clinical practice		Ongoing practice for mastery	Procedure logs, Continuous quality improvement activities, Maintenance of

Sawyer T, et. Al; Acad Med. 2015;90:1025–1033
Peyton JWR. Teaching and Learning in Medical Practice. Rickmansworth, UK: Manticore Publishing House Europe Limited; 1998.

SUMMARY BY: DR. AMIE DAVIS, 2025