

Dissecting anatomy education in the medical curriculum

Citation for published version (APA):

Bergman, E. M. (2014). *Dissecting anatomy education in the medical curriculum*. [Doctoral Thesis, Maastricht University]. Datawyse / Universitaire Pers Maastricht. <https://doi.org/10.26481/dis.20140630eb>

Document status and date:

Published: 01/01/2014

DOI:

[10.26481/dis.20140630eb](https://doi.org/10.26481/dis.20140630eb)

Document Version:

Publisher's PDF, also known as Version of record

Please check the document version of this publication:

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- The final published version features the final layout of the paper including the volume, issue and page numbers.

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Dissecting Anatomy Education in the Medical Curriculum

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30 juni 2014

1. Students' perceived and actual knowledge are probably less determined by the general educational approach of the curriculum than by learning principles like time-on-task, repetition and teaching in context (dit proefschrift).
2. Future research should concentrate on what and how students learn from dissection and other teaching methods before drawing conclusions in favour of one or another (dit proefschrift).
3. For medical students without clinical experience, awareness of the future relevance of anatomy does not automatically mean it is perceived as an important subject as translated in current study effort (dit proefschrift).
4. Stricter assessment might motivate students to study harder and acquire more anatomical knowledge, but repetition is essential for retention of this knowledge (dit proefschrift).
5. A paper-patient context may only improve acquisition of anatomical knowledge when students are able to employ a deep approach to learning (dit proefschrift).
6. More anatomy teachers should be dissecting education (dit proefschrift).
7. Learning anatomy for clinical practice may well benefit from a subtle shift from self-directed learning to 'directed self-learning'. Not suggesting that students should be spoon-fed, rather that self-study should be guided by experts in the subjects of both anatomy and medicine (S. Regan de Bere & K. Mattick¹).
8. We must acknowledge that the most important, indeed the only, thing we have to offer our students is ourselves. Everything else they can read in a book (D.C. Tosteson²).
9. 'Normal' is only the most common variation (R. Pabst³).
10. Het lijkt ruis maar soms is het signaal (Cees van der Vleuten).
11. Do little things with great love (motto voor het moederschap).

¹S. Regan de Bere & K. Mattick (2010). From anatomical 'competence' to complex capability. The views and experiences of UK tutors on how we should teach anatomy to medical students. *Adv Health Sci Educ Theory Pract* 15(4), page 582.

²D.C. Tosteston (1979). Learning in Medicine. *N Eng J Med* 301(13), page 693

³R. Pabst (2002). Modern Macroscopic Anatomy – More than just cadaver dissection. *Anat Rec New Anat* 269(5), page 209