Statements
accompanying the dissertation

Virtual Patients for learning of clinical reasoning
by Sören Huwendiek, 25th November 2016

1. The instructional design and content of a Virtual Patient (VP) are nowadays a bigger challenge than are the technical qualities of a VP system. (This dissertation)

2. Not only the design, but also the way in which a VP is integrated into a curriculum is relevant to learning. (This dissertation)

3. The alignment of learning objectives with learning and assessment methods is also crucial when using VPs for learning of clinical reasoning in clerkships. (This dissertation)

4. With well-designed and well-integrated VPs clinical supervisors can expose a lot of medical students to helpful learning experiences. (This dissertation)

5. Students and skills lab tutors are favourable to the use of Virtual Patients as a preparation for skills lab training (Lehmann et al. 2013).

6. Virtual Patients can be repurposed from one country to another (Balasubramaniam et al. 2009).

7. In an international survey, more than 88% of the teachers expressed a great need for the use of VPs in their curriculum. (Davies et al. 2009).

8. According to an international survey, medical educators face challenges as they feel a particular need for more academic recognition, funding and academic development opportunities in medical education. (Huwendiek et al. 2010).

9. ‘Live as if you were to die tomorrow. Learn as if you were to live forever’. (Mahatma Gandhi)

10. ‘Educating the mind without educating the heart is no education at all’. (Aristotle)

Literature:

