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RESPONSE TO LETTER

Reflecting on Experiences of Senior Medical Students' External Clinical Teaching Visits in General Practice Placements: A Pilot Study [Response to Letter]

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Dear editor

Thanks for all the positive comments and compliments regarding the above manuscript.

With respect to the following comments by Muhammad Shah Zaib Ilyas¹, Mohammed Hasan Qureshi², Laiba Minhas³

The study shows positive findings regarding the use of ECT visits as a formative assessment tool within the context of undergraduate medical education, reporting positive feedback from participating students. However, the authors acknowledged challenges in directly linking ECT visits to current general practice norms, highlighting concerns related to the external validity of the study [2]. This underscores the importance of further research to establish stronger correlations between ECT experiences and the everyday practices observed in those specific GP settings.

Further research is underway for the entire cohorts of the final two years (Year 4 and 5 of 5-year undergraduate MBBS course in Australia) using the ECT visit style with the adoption of mini-CEX style during the feedback with the students. The ultimate goal of this research is to provide every senior medical student having opportunities to act as a doctor under supervision in a real-life setting, maximising the benefit of clinical reasoning learning in general practice placement. In response to the concluding comments by Muhammad Shah Zaib Ilyas¹, Mohammed Hasan Qureshi², Laiba Minhas³

In conclusion, Feng et al have highlighted the positive role of ECT in undergraduate medical education, illustrating how it can be implemented across different curricula and cultures. To enhance this, refined data collection encompassing wider contextual factors, alongside a coherent analysis will better the procedure used in this study. This could potentially also accentuate the long-term impact of using ECT, and how it can affect students as they progress with their careers.

Thanks again for the very encouraging comments and our team is currently progressing the ECT research project to encompass the wider contextual factors including feedback from supervisors and participating patients. We believe the ECT teaching model will be one of the best teaching models for improving clinical reasoning learning among senior medical students undertaking clinical placements.

Disclosure

The authors report no conflicts of interest in this communication.

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