Didactical Review

iCoViP

Review comments for VP _____
Reviewer _____
Date of Review _____

Metadata:
Complete and correct, (Correct prefix of VP name, Language correctly selected, License selected)

Comment(s):

Suggested solution(s):

Comparison with Blueprint:
Does the VP correspond to the initial outline in the blueprint (e.g. is the stated profession, sexual orientation etc. visible in the VP)

Comment(s):

Suggested solution(s):

Structure:
Are the cards well structured (not too many aspects on one card), has the VP an appropriate length (5-10 cards); is the final diagnosis only revealed after students have to make the decision

Comment(s):

Suggested solution(s):

Multimedia Material:
All clinically relevant images, audio included (e.g. ECG, x-ray, auscultation sounds, etc.), license information entered, card 1 includes a matching patient image in a clinical setting added

Comment(s):

Suggested solution(s):

Text:
Direct speech is used, and patient / accompanying person describes the key symptom and history in own words (might not be applicable in emergency settings)

Comment(s):

Suggested solution(s):

Questions:
Questions are not repeating what students should do in the concept map, Students have to interpret images themselves and are prompted with a question to do so. Such questions include a "normal" or "no pathological finding" option. Appropriate question type is used, and questions and answer options are according to didactical principles, such as avoiding negations, clear and comparable answer items; answer comments explain the correct & incorrect solutions (in case of image interpreting an image with illustration arrows can help)

Comment(s):

Suggested solution(s):

Concept Mapping Tool:
Has a clear final diagnosis and a "reasonable" number of findings, differentials, tests, treatment options, and connections; working diagnosis, must-not-miss, ruled-out and negations are used (if appropriate). Progress is in-sync with the case progression

Comment(s):

Suggested solution(s):

Any other comments:

Comment(s):

Suggested solution(s):