



UniversitätsKlinikum Heidelberg

## Virtual Microscopy in Curricular Student Teaching – The Heidelberg Experience

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## **General Aspects**

- Lack of (young/skilled) Pathologists
  - General tendency (lower completion rate, other areas/foreign countries, general reception, wages etc.)
  - Overaged Pathologist population
- Lack of skills of applicants
  - General (modular curriculum)
  - Specific (less pathology exposure)
- Pressure to modernize



## **Specific tasks**

- Inproving teaching quality; improving quantitative and qualitative exposure to histopathology
- Reducing unnecessary burden of pathology institutes/teachers
- Increasing flexibility in student learning
- Solving real microscopy problems
- Improving examination in histopathology



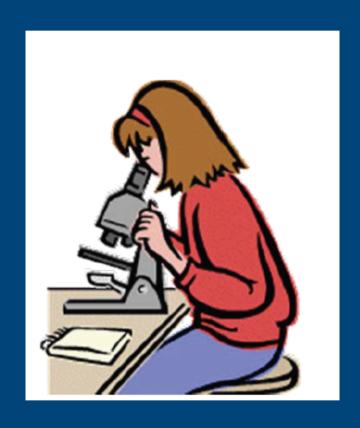
# Problems of real microscopy in curricular education

#### Slides

- High Effort (personnel, consumables)
- Differences between Slides
- Damage, Loss ...

### **Microscopy**

- Not trained
- Effort (supervision, repair)
- Reception (old fashioned)





# Virtual Microscopy in Medical Curricular Teaching

- Histology courses
  - Supportive material
  - Course support
  - Virtual course
- Case based training
  - Organisation
  - Presentation
- Testing



## E-Learning Courses in Pathology, Heidelberg (elearning.uni-heidelberg.de)

- General Pathology and Neuropathology
  - Digitalized histopathology course (supportive)
  - In-course microscopy
  - Testing
- Pathology for Dental Medicine
  - Digitalized histopathology course (supportive)
  - In-course microscopy
- Interdisciplinary courses (Gynecopathology etc.)
  - Digitalized virtual histopathology course
  - Digitalized virtual histopathology test
- Clinical-Pathology-Conference
  - Preparation

## **General Pathology Module**



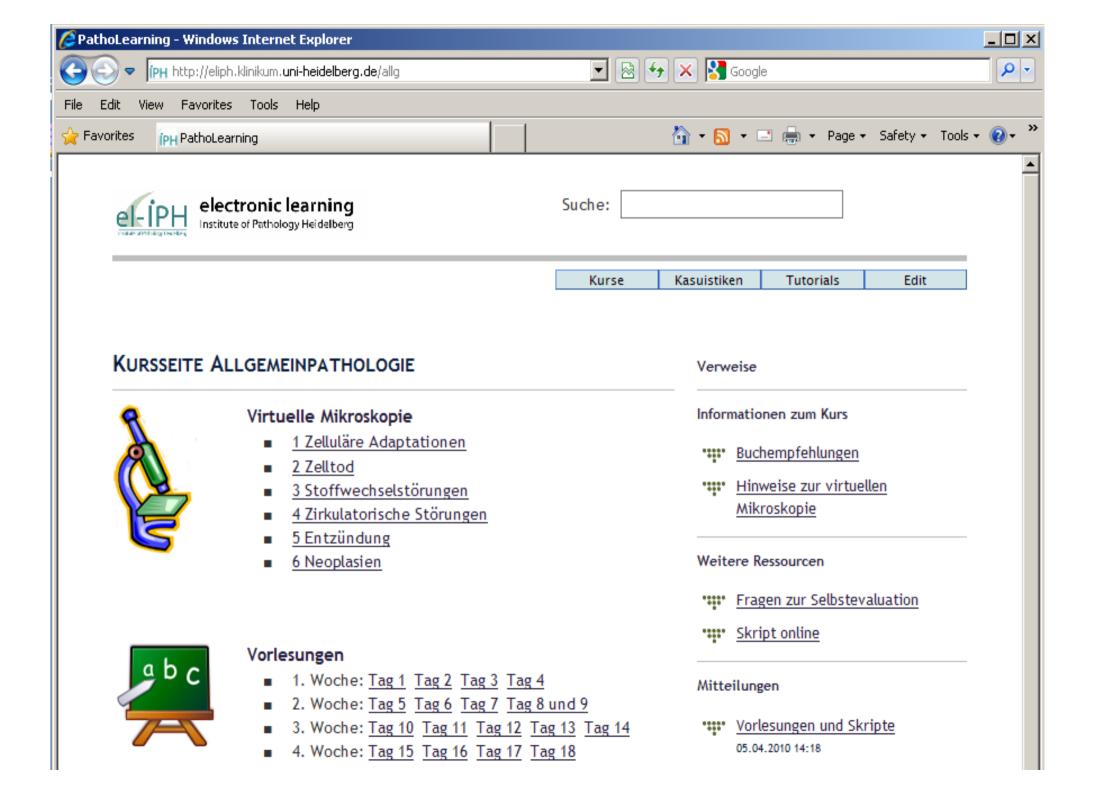


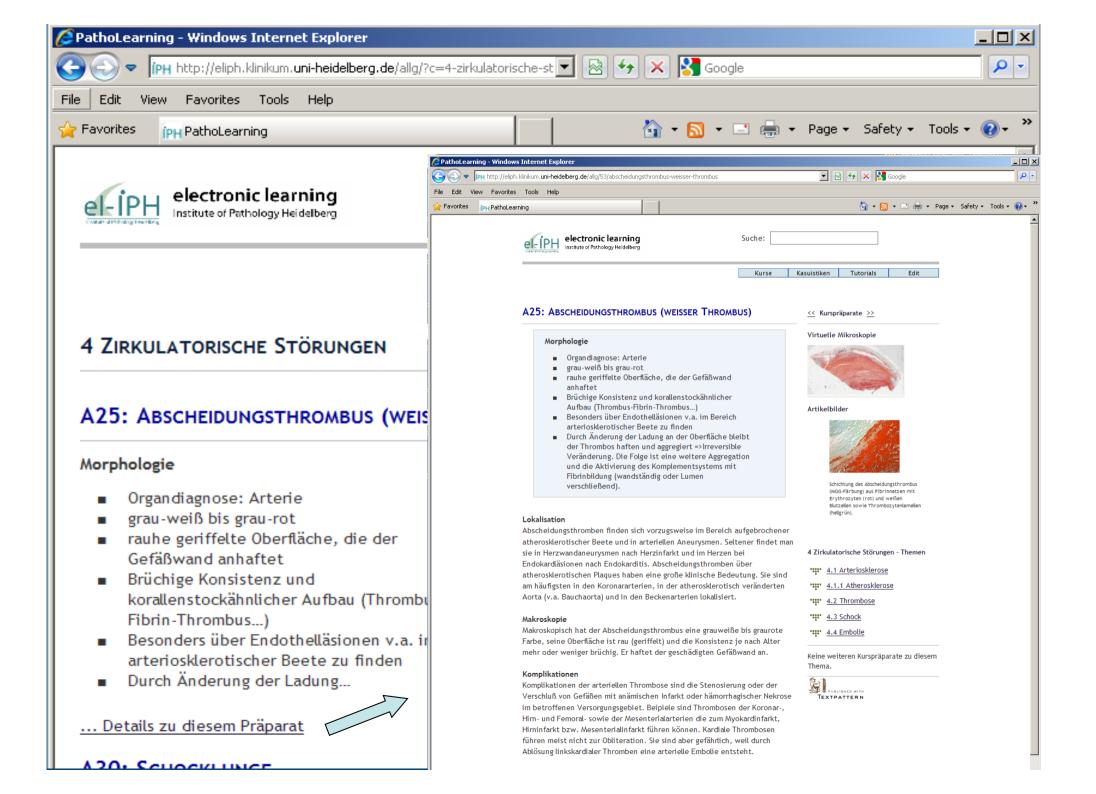


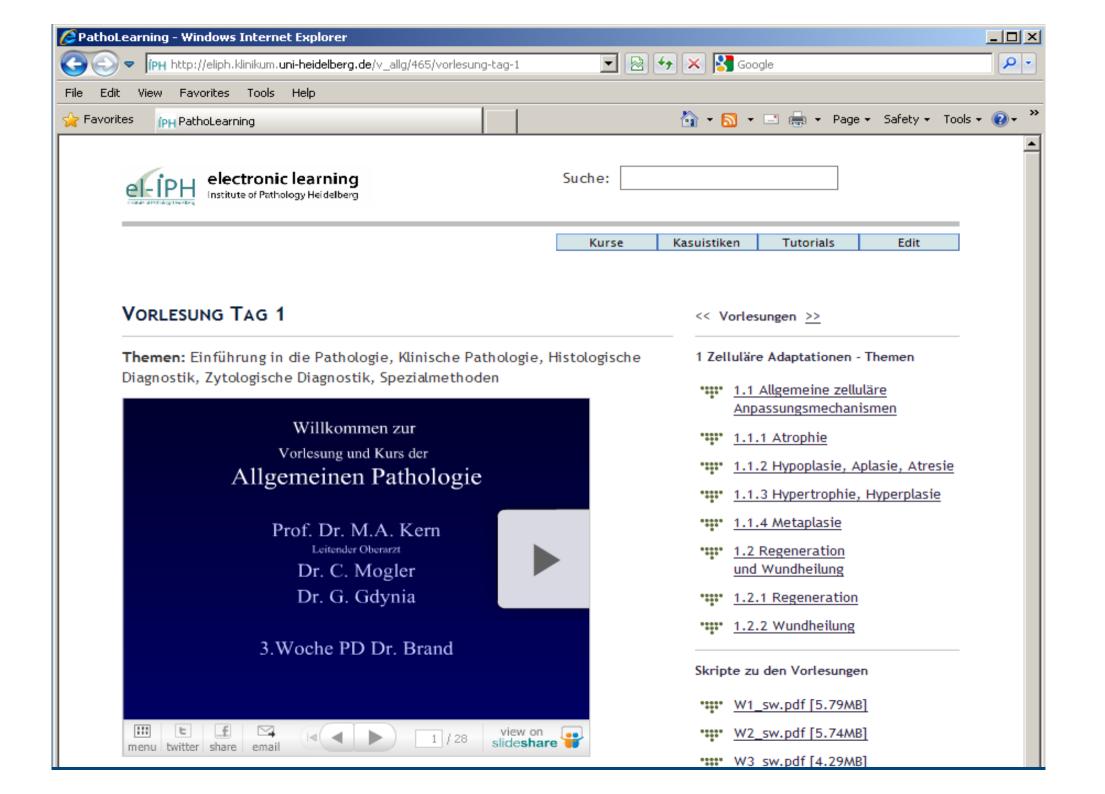




- Introduction to VM at start of course including video clip instruction
- Presentation: interactive whiteboard-presentation of all histology cases by VM
- Full time availability of all cases with annotation via Internet access (upon registration) for VM
- Feedback information on VM
- Integration of VM in final exam (late 2010)







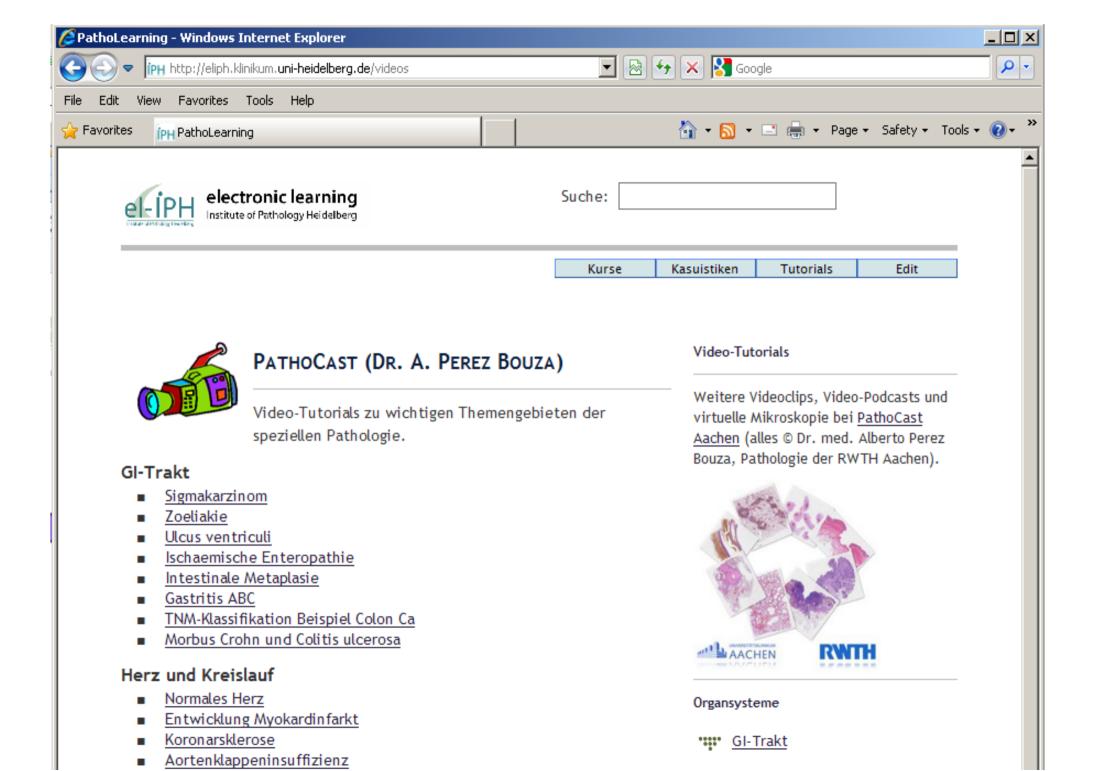


#### HeiCuMed/Kap\_3





Institute of Pathology Heidelberg			1101.11011
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A06_Hyalinose_der_Milz.svs 36000 x 31095 @ 20X (open with ImageScope 8)		<b>6</b>	ScanScope = W1073404 date = 09/13/06, time = 15:51:54 image = 3.1GB, file = 288.1MB, ratio = 11.1
A07_Amyloidose_der_Leber.svs 32000 x 33862 @ 20X (open with ImageScope 8)			ScanScope = W1073404 date = 09/13/06, time = 15:55:05 image = 3.0GB, file = 267.7MB, ratio = 11.6
A09_Amyloidose_der_Niere.svs 56000 x 35690 @ 20X (open with ImageScope 8)	* 87		ScanScope = W1073404 date = 09/13/06, time = 16:00:59 image = 5.6GB, file = 352.9MB, ratio = 16.2
A20_Gichtknoten.svs 42000 x 36341 @ 20X (open with ImageScope 8)			ScanScope = W1073404 date = 09/13/06, time = 16:44:40 image = 4.3GB, file = 305.3MB, ratio = 14.3
A21_Haemochromatose_der_Leber.svs 30000 x 30558 @ 20X (open with ImageScope 8)			ScanScope = W1073404 date = 09/13/06, time = 16:48:52 image = 2.6GB, file = 339.6MB, ratio = 7.7
A85_Diabetische_Nephropathie.svs 48000 x 30194 @ 20X (open with ImageScope 8)		B	ScanScope = W1073404 date = 10/05/06, time = 08:28:44 image = 4.0GB, file = 426.5MB, ratio = 9.7
A91_Fettleber.svs 43200 x 39109 @ 20X (open with ImageScope 8)			ScanScope = W1073404 date = 10/05/06, time = 09:00:38 image = 4.7GB, file = 346.3MB, ratio = 14.0
S07_Alkoholtoxische_Leberzirrhose.svs 50880 x 31445 @ 20X (open with ImageScope 8)			ScanScope = W1073404 date = 10/01/06, time = 23:32:17 image = 4.5GB, file = 472.2MB, ratio = 9.7

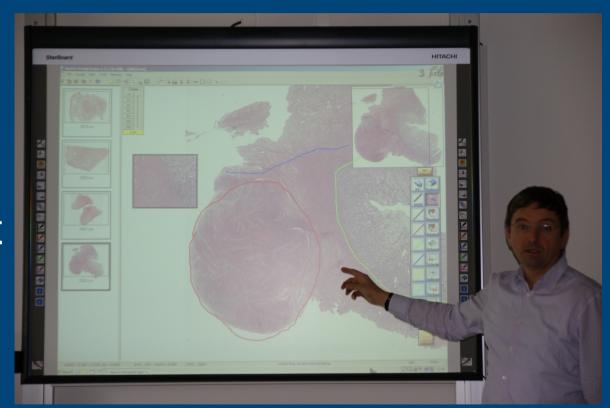






### **Interactive Whiteboards**

- Touch-Screen Technology
- Navigation and Annotation of VM at Whiteboard
- +Projection





#### Positive effects in-course VM

- VM links microscopy to ,fancy technology' (motivation)
- Provides the very best slide (quality)
- Avoids technical problems of students with microscopy (quality/effort teacher)
- Less handling (hand out, control, replacement of slides) (time, personel, costs)
- Makes expert performance in microscopy transparent to students (quality/role model); synchronicity (effort teacher)
- Facilitates student-teacher interaction (quality/motivation)



#### Positive effects off-course VM

- Less supervision time (expert teachers)
- Less occupation of in-house facilities (room, microscope, slides, safety issues)
- More flexibility (and intensity?) in preparation for course and testing (any time, any place, any setting)



## **Negative Effects**

- Raises level of expectation
- Increases dependency on IT
- Supports idleness
- Lowers handling experience with microscope
- Decreases personal contact

#### Conclusion:

Needs adequate complementation by other measures

#### Virtual microscopy causes heavy server load



> 4397 hits/h (av)

> 64730 hits/h (max)

> 105532 hits/d (av)

> 440393 hits/d (max)

> 3217 pages/d (av)

> 6179 pages/d (max)

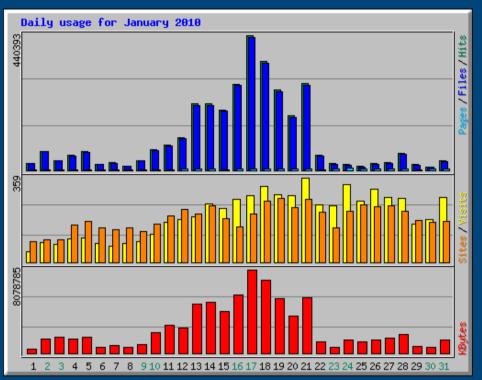
> 198 visits/d (av)

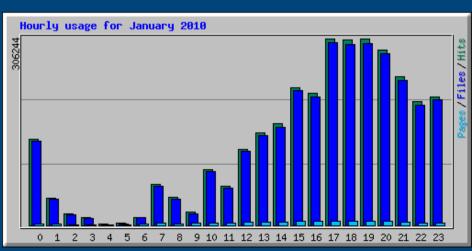
> 359 visits/d (max)

> 2.453 GB/d (av)

> 8.078 GB/d (max)

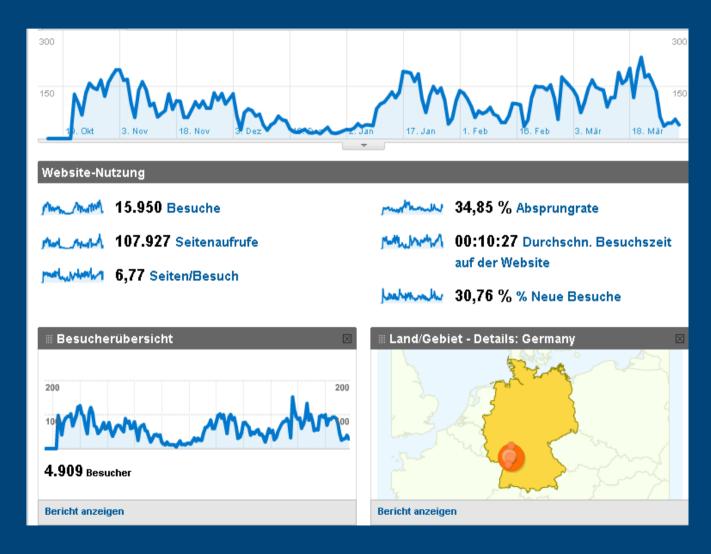
➤ Self registration: 100%





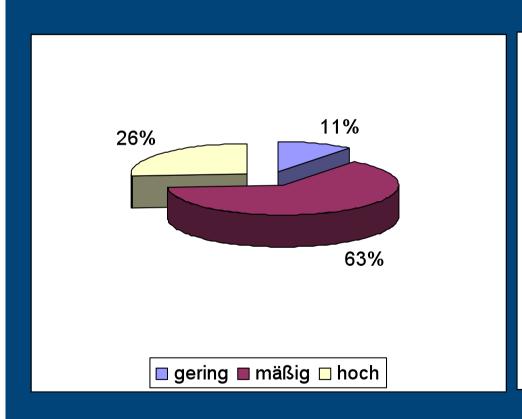


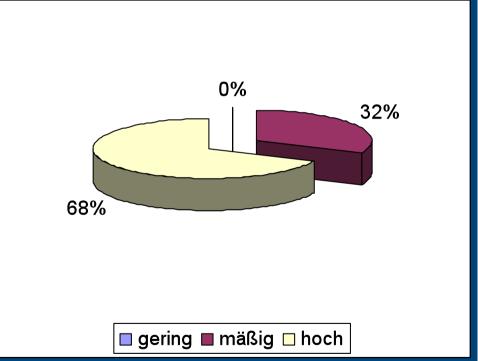
## Google Analytics User statistics winter semester 2009/10





## Interest in Pathology Module General Pathology





Start of course

End of course



## The examination problem in histopathology

#### The problems

- Comparability, objectivity,
- Preparation by (macroscopic) slide aspect and knowledge of test algorithms
- Limited slide pool; quality of test slides
- Effort (supervision, evaluation, slide preparation)

#### The solutions

- Centralised PC-based test
- VM case pool
- Random selection of test cases
- Direct VM by student and examination
- Direct automatic evaluation, result compilation and archiving



#### Clinical-Pathological Conference (KPK)

- 9. ÄAppO: Medical Students should:
  - Have sufficient knowledge in Pathology
  - Be able to recognize interdisciplinary relations.
- The Clinical-Pathological Conference (KPK) is an ideal instrument to provide this mandatory experience/knowledge

#### **KPK**



#### **KPK**



Presentation Discussion Evaluation

#### **Preparation**



Clinical Data (Chart)
Microscopy
Photography



Organisation
Supervision
Abilities

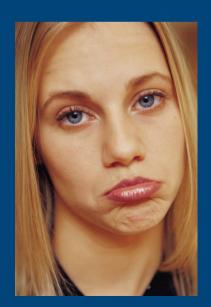
**Personel! Time! Flexibility!** 

## Problems with real microscopy/ microphotography



#### **Students**

- Fixed time
- Microscope needed
- Training needed
- Lack of independence

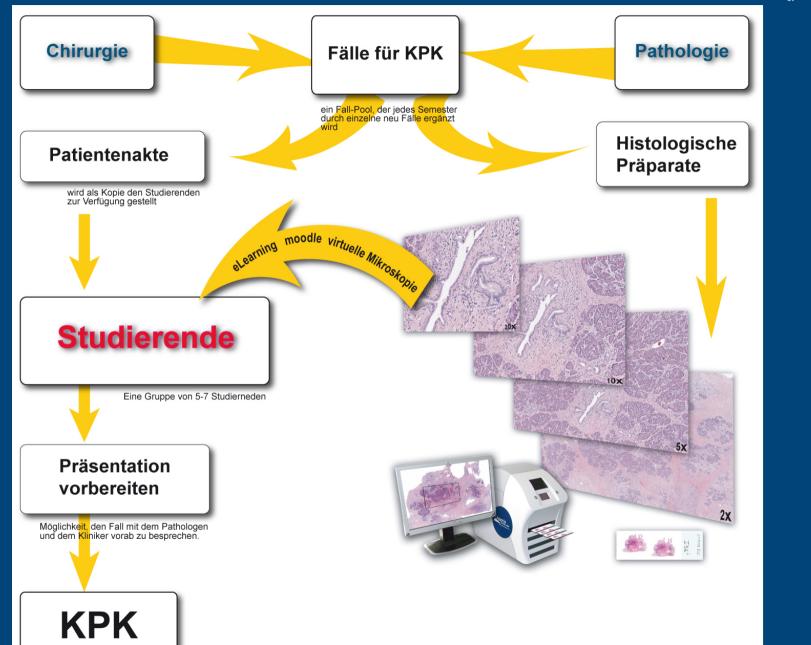


#### **Professors**

- Organisation
- Logistics
- Time effort
- Repetitiveness







#### VM for KPK



#### RUPRECHT-KARLS-UNIVERSITÄT

Startseite ► KPK ► Arbeitsmaterialien ► Lebermetastase CRC FAP

#### Virtuelle Mikroskopie









#### Befund E-07/03911

Material: 1. PE Schleimhauterhabenheit Pouchcorpus 2. PE Schleimhautunregelmäßigkeit Pouchcorpus

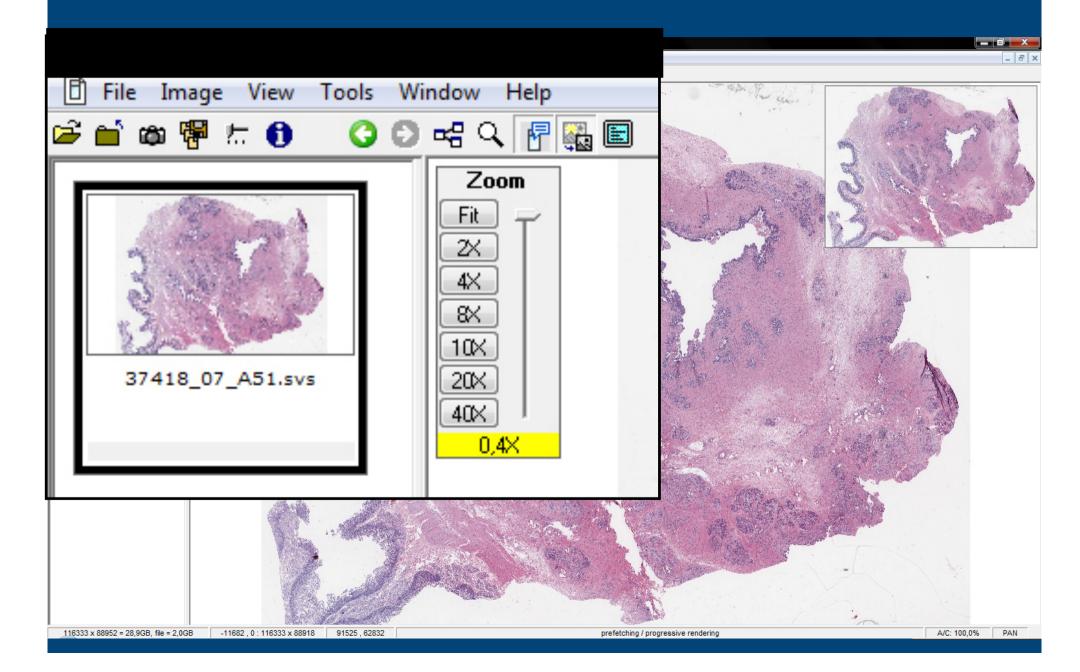
Klinische Angaben: Kontrolle bei Z.n. Proktocolektomie und EAP bei FAP 10/98.

Makroskopie: 1. 1 stecknadelkopfgr. PE 2. 2 stecknadelspitzgr. PEs

Diagnose: Die makroskopische und histologische Begutachtung ergibt: 1. Dünndarmschleimhaut mit Äquivalenten einer gering Dünndarm- schleimhaut mit Äquivalenten einer geringen chronischen, nicht-floriden Pouchitis. Im vorliegenden Material kein Na

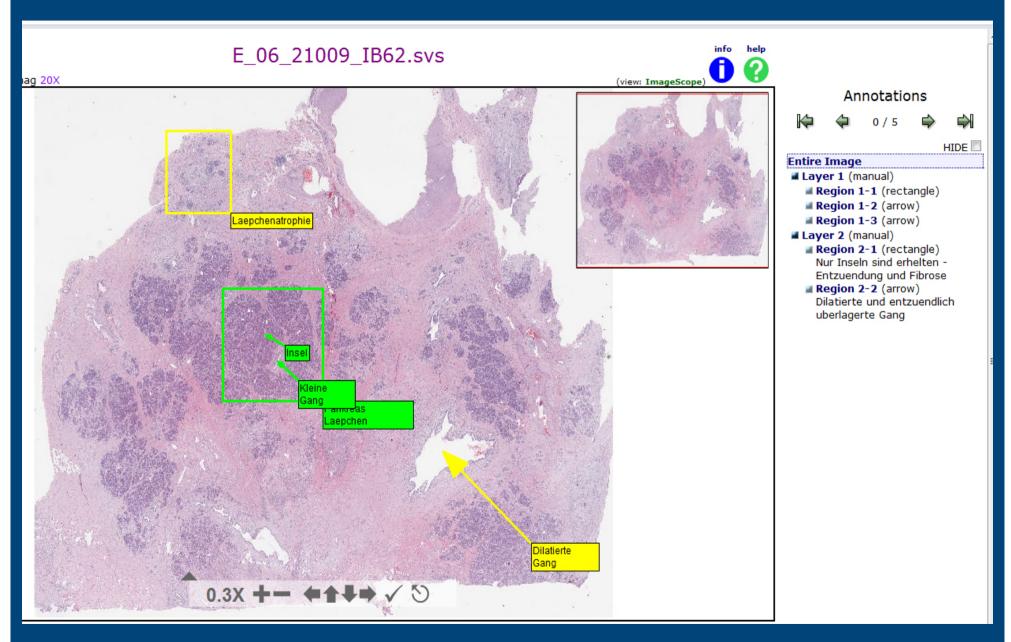
## Virtual Photography





### **Annotation**











- Ideal tool to integrate histology into interactive teaching programs
- Less supervision time for skilled pathology personel, more flexibility (location, time, access to microscope) for students in preparation; increases quality of presentation
- Others (less experience in microphotography required; no slide handout (loss), preselection of optimal slides etc.)



# Interdisciplinary Program Course Program

Block I	Block II
Mārz	bis August
Blockdauer: Je 14 Wochen	Durchführung 2x jährlich im Wechsel
Innere Medizin, Allgemeinmedizin,	Chirurgie, Orthopädie, Urologie, Anästhesiologie,
Klinische Chemie, Laboratoriumsdiagnostik	Notfallmedizin
Woche 1: Einführung	Woche 1: Einführung
Wochen 2 - 3: Klinische Chemie	Wochen 2 - 11: 5 Module zu je 2 Wochen im Rotationsverfahren
Wochen 4 - 13: 5 Module zu je 2 Wochen im Rotationsverfahren	1. Herz-Thoraxchirurgie, Plastische Chirurgie
1. Kardiologie, Angiologie, Pulmologie	2. Viszeralchirurgie
2. Gastroenterologie	3. Gefäßchirurgie, Urologie
3. Nephrologie, Allgemeine Innere Medizin	4. Orthopädie, Unfallchirurgie
4. Hämatologie, Onkologie, Rheumatologie	5. Anästhesiologie, Notfallmedizin
5. Endokrinologie, Sportmedizin, Geriatrie	Woche 12: Prüfungen
Woche 14: Prüfungen	Wochen 13 - 14: Rehabilitation, Physikalische Medizin,
durchlaufend: Allgemeinmedizin	Naturheilverfahren
integriert: Klinische Pharmakologie/Pharmakotherapie	durchlaufend: Klinisch-Pathologische Konferenz
integriert: Medizin des Alterns und des alten Menschen	and the same of th

Blockpraktikum Aligemeinmedizin (1-wöchig, nach Vereinbarung)

Block II	Block I
Oktober	bis Februar

Block III	Block IV	
März bis Juli		
Blockdauer: je 16 Wochen	Durchführung 2x jährlich im Wechsel	
4 Module zu je 4 Wochen im Rotationsverfahren	4 Module zu je 4 Wochen im Rotationsverfahren	
1. Neurologie (4 Wochen) 2. Psychiatrie, Psychosomatik, Psychotherapie (4 Wochen) 2. u. + 2. separate Prüfung am Modulende 2. Zusammenfassung zu fächerübergreifendem LN 3.1 Hals-Nasen-Ohrenheilkunde (2 Wochen) 3.2 Augenheilkunde (2 Wochen)	<ol> <li>Gynäkologie, Geburtshilfe (mit Blockpraktikum) (4 Wochen)</li> <li>Pädiatrie (mit Blockpraktikum) (4 Wochen)</li> <li>Epidemiologie, Medizinische Biometrie, Medizinische Informatik, Humangenetik (4 Wochen)</li> <li>Arbeitsmedizin, Rechtsmedizin, Sozialmedizin, Klinische Umweitmedizin (4 Wochen)</li> </ol>	
4.1 Dermatologie, Venerologie (2 Wochen) 4.2 Infektiologie, Immunologie (2 Wochen)	durchlaufend: Humangenetik durchlaufend: Geschichte, Theorie und Ethik der Medizin	

Block III		
August bis Dezember		

Wissenschaftliche Arbeit, Wahlfach (8 Monate, frei wählbar)



#### **Deficiencies**

- No exposure to histology after 1st clinical semester (no more surgical histopathology course)
- Pathology does not control the organisation
  - Requires compromise on topics, formats, testing
  - Marginates pathologist (less time, less prominent spots, tendency to eliminate)
  - Decreases recognition of specialty by students

Deleterious long term effects regarding Pathology on students knowledge, clinical recognition, and choice of specialty



## The Heidelberg solution!?

- Separate virtual histology course for most interactive modules (mandatory)
- Virtual microscopy testing
- Integration of Tutor system (combining talent selection, reducing effort, and improved information)



## Interdisciplinary Program Course Program

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Innere Medizin, Aligemeinmedizin, Klinische Chemie, Laboratoriumsdiagnostik	Chirurgie, Orthopädie, Urologie, Anästhesiologie, Notfallmedizin
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durchlaufend: Allgemeinmedizin integriert: Klinische Pharmakologie/Pharmakotherapie integriert: Medizin des Alterns und des alten Menschen	Naturheilverfahren durchlaufend: Klinisch-Pathologische Konferenz

Blockpraktikum Allgemeinmedizin (1-wöchig, nach Vereinbarung)

Block II	Block I
Oktober bis Februar	

Г	Block III	Block IV	
Г	März bis Juli		
Г	Blockdauer: je 16 Wochen	Durchführung zx jährlich im Wechsel	
г	4 Module zu je 4 Wochen im Rotationsverfahren	4 Module zu je 4 Wochen im Rotationsverfahren	
2.	Neurologie (4 Wochen) Psychiatrie, Psychosomatik, Psychotherapie (4 Wochen) zu 1. + 2. separate Prüfung am Modulende Zusammenfassung zu fächerübergreifendem LN	<ol> <li>Gynäkologie, Geburtshilfe (mit Blockpraktikum) (4 Wochen)</li> <li>Pädiatrie (mit Blockpraktikum) (4 Wochen)</li> <li>Epidemiologie, Medizinische Biometrie, Medizinische Informatik, Humangenetik (4 Wochen)</li> </ol>	
3.2	1 Hals-Nasen-Ohrenheilkunde (2 Wochen) 2 Augenheilkunde (2 Wochen) 1 Dermatologie, Venerologie (2 Wochen)	Arbeitsmedizin, Rechtsmedizin, Sozialmedizin,     Klinische Umweltmedizin (4 Wochen)  durchlaufend: Humangenetik	
	2 Infektiologie, Immunologie (2 Wochen)	durchlaufend: Geschichte, Theorie und Ethik der Medizin	

Block IV	Block III	
August bis Dezember		

Wissenschaftliche Arbeit, Wahlfach (8 Monate, frei wählbar)



## **Tutor system**

- General program of Heidelberg Medical Faculty
- Voluntary participation of skilled students in specialties of choice (2-4
- Extra time, (moderate) financial support, central training
- May guide excellent students to Pathology
- Integrates students expertise, motivation, and ideas



#### **Tutors and VM**

- 7 Tutors
- Topic: case preparation under guidance
- Case preparation by students themselves
- Selection of interested students without risk;
   ,starting a pathology track'



#### Conclusion

- Improves quality of course material
- Lowers unnecessary effort by institute and teachers
- Improves flexibility
- May support examination
- Allows to integrate students
  - Excellent reception by students
  - Improves attitude towards Pathology



#### **Future**

- VM and examination
- Improved macro-/micro integration (screencast)
- Virtual autopsy course (preparation, surrogate)