

SHORT COMMUNICATION

Time to revive Grand round once again! A meticulously planned Grand round in cardiac surgery involving multiple institutions.

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HIGHLIGHTS

- Grand rounds in cardiac surgery prove to be an effective means for residents to glean insights from each other's experiences.
- A panel of consultants can assess residents during their presentations.
- Consultants from different institutions can share their perspectives on managing rare and interesting cases presented.
- It should be conducted at least every three months.

Key words: Cardiac Training, Cardiac Surgery, Cardiac Residents, Grand Round.

INTRODUCTION

A grand round is an ongoing activity that consists of formally presenting clinical cases along with facts from basic research to support them.¹ Grand Rounds (GR) are a traditionally integrated part of medical education, particularly in large teaching hospitals. Ward rounds have long been recognized as a reliable, adaptable, and efficient method of instruction and knowledge transfer dating back several centuries. Put another way, interacting and having direct touch with patients and attending academics is a crucial component of physician education. Ward rounds aimed at analyzing the patient medical history, identifying the diagnostic problems, eventual therapy and prognostics of a given disease.² Its importance as a tool for medical education cannot be overstated.

Grand Rounds changed depending on the specialization and goals, evolving from bedside ward rounds to a more consistent, structured approach for learning clinical skills.³ Additional conversations concerning GR have even touched on its efficacy and use as a tool for continuing medical education (CME).¹ Grand Rounds have

always been held in person as a teaching tool. Getting the audience to learn from engaging case discussions was the goal. Through GR, competency-based skills can also be created and have an effect on quality.⁴ The clinical case, the students, the teacher—that is, the residents, clinicians, and faculty—are the same fundamental elements of grand rounds as they are of ward rounds. The physical separation from the ward is the main distinction.

Cardiac surgery grand rounds have been consistently organized reaions in various worldwide, demonstrating their effectiveness and value.⁵ In Pakistan, based on our current understanding, there has been no instance where residents from different institutes have presented their cases in a well-organized grand round. The Pakistan Association of Cardiovascular and Thoracic Surgeons, in collaboration with the Peshawar Institute of Cardiology, has taken a significant stride forward by introducing regular PACVTS Grand Rounds, scheduled to occur every third month. This initiative preserves the core philosophy of Grand Rounds, featuring the

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presentation of complex and intriguing clinical cases by residents under the guidance of seasoned staff surgeons.

PACVTS Grand Round

Following the announcement of the Grand Round to be conducted at the Peshawar Institute of Cardiology, all cardiac institutes in the region were notified to submit their compelling cases to the committee at PIC. This committee comprises experienced consultants who will be overseeing the selection and presentation of the submitted cases. Residents from various institutes showcased their cases in front of a panel of judges, comprising representatives from different institutes (Figure-1). Each presentation was allocated a 10-minute slot, at the end of which consultants and other participants posed guestions to the residents (Figure-2). Additionally, participants shared their experiences in managing similar cases, fostering a collaborative and knowledge-sharing environment. Each resident underwent evaluation by the panel, receiving scores based on the quality of their presentation, presentation skills, and their knowledge of the particular case. At the conclusion of the event. shields and prizes were distributed among the participants who secured top positions.



Figure-1. Panel of judges

CONCLUSION

A systematically arranged grand round, where residents from different institutes present their intriguing cases before consultants and participants from various backgrounds, serves as an excellent avenue for mutual learning. This approach allows residents to glean insights from one another's experiences. The success of such grand rounds in cardiac surgery highlights the potential for this format to be implemented regularly, not only in cardiac surgery but also in other departments, fostering a collaborative and enriching learning environment.



Figure-2. Resident is providing responses to the questions posed.

CONFLICT OF INTEREST

The authors declare no conflict of interest.

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AUTHORSHIP AND CONTRIBUTION DECLARATION

No.	Author(s) Full Name	Contribution to the paper	Author(s) Signature
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2	Aamir Iqbal	Drafting of work or revising it critically for important.	
3	Zeeshan Afzal	Drafting the work or revising it critically for important intellectual content.	- F
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