



SESSION 200A - Plenary

Teaching the Scarecrow: Improving Thinking to Improve Clinical Decision Making

Reasoning and decision making are the most important of our skills in all areas of human activity. Good reasoning and decision making in healthcare creates a better chance that the diagnosis will be correct and that appropriate treatment will follow. Yet, the overall estimate of diagnostic failure across the board in medicine is put at about 10-15% and it is estimated that 4000-8000 preventable deaths occur annually in Canadian hospitalized patients alone due to diagnostic failure. Educators in all fields of healthcare should ensure that training programs address clinical reasoning and decision making. Like the scarecrow in the Wizard of Oz, we all have brains but we need to train them better.

Cognitive scientists argue that any kind of reasoning and decision making can be improved by improving individual rationality. So, there is a need to focus on the constituent parts of rationality and on those that can be improved. The first step is to establish how decision making actually occurs. The dominant approach for all human decision making is the dual process model (DPM). It is deemed an essential part of understanding clinical decision making and will be described here. The Dalhousie model of clinical reasoning will also be described. It illustrates the essential components of rationality, using the DPM as a platform. The influence of cognitive and affective biases, logical failures, elements of critical thinking, mindware, and cognitive bias mitigation will be described.

1. To gain an appreciation of the dominant model of decision making – dual process theory.
2. To understand how cognitive biases may distort our decision making.
3. To appreciate how critical thinking and bias mitigation may improve clinical reasoning and decision making.