IN THIS ISSUE OF PERSPECTIVE

Masic, Miokovic and Muhamedagic define evidence based medicine (EBM) as “the conscientious, explicit, judicious and reasonable use of modern, best evidence in making decisions about the care of individual patients.” They explain that “EBM integrates clinical experience and patient values with the best available research information.”

As faculty at BYU-Idaho, the relationship we have with students is similar to the doctor-patient relationship. The first of the three imperatives we have been given is to raise the quality of the student experience. That requires the “conscientious, explicit, judicious and reasonable use of modern, best evidence in making decisions,” not about the care of patients but of students. At the fall 2016 Faculty Conference, presenters shared ideas and evidence about how we as faculty can improve the student experience.

In teaching, as in medicine, there are different levels of evidence and at times we may be inclined to reject any intervention or practice that does not meet the most rigorous standards of scrutiny. The folly in this line of thinking is highlighted by a systematic review of randomized controlled trials (the gold standard in medicine) published in the British Medical Journal. Gordon and Pell conducted a systematic review with the stated objective, “To determine whether parachutes are effective in preventing major trauma related to gravitational challenge.” They stated that, “We were unable to identify any randomised controlled trials of parachute intervention.” Based on their study, they concluded, “As with many interventions intended to prevent ill health, the effectiveness of parachutes has not been subjected to rigorous evaluation by using randomised controlled trials.” After reflecting on the best available evidence, we are still left to determine whether we should recommend parachute usage to those jumping out of planes. If we are paralyzed by lack of high quality evidence, we might neglect to use the best available evidence combined with experience and common sense to make decisions.

We should search for “best practice” in implementing change to our teaching methods. “Best practice” includes making decisions using rigorous scientific research when available, combined with practical experience. This issue includes articles from the conference that we hope will be useful as you make decisions that will benefit our students and improve the quality of their BYU-Idaho experience.