

TURK TALK:

A HYBRID APPROACH TO TEACHING THERAPEUTIC COMMUNICATION

Presented by Michelle Cullen, RN & David Topps, MD

There is no conflict of interest to declare

Incorporated language into
simulation to develop
contextually relevant
therapeutic communication
skills





creating change

creating change



Turk Talk:

A means of incorporating
human interaction within a
computer based simulation



C: I am not able to pay my phone bill on line

O: Please enter your 11 digit phone number



C: 403-675-8888

O: I am retrieving your account. Please wait.

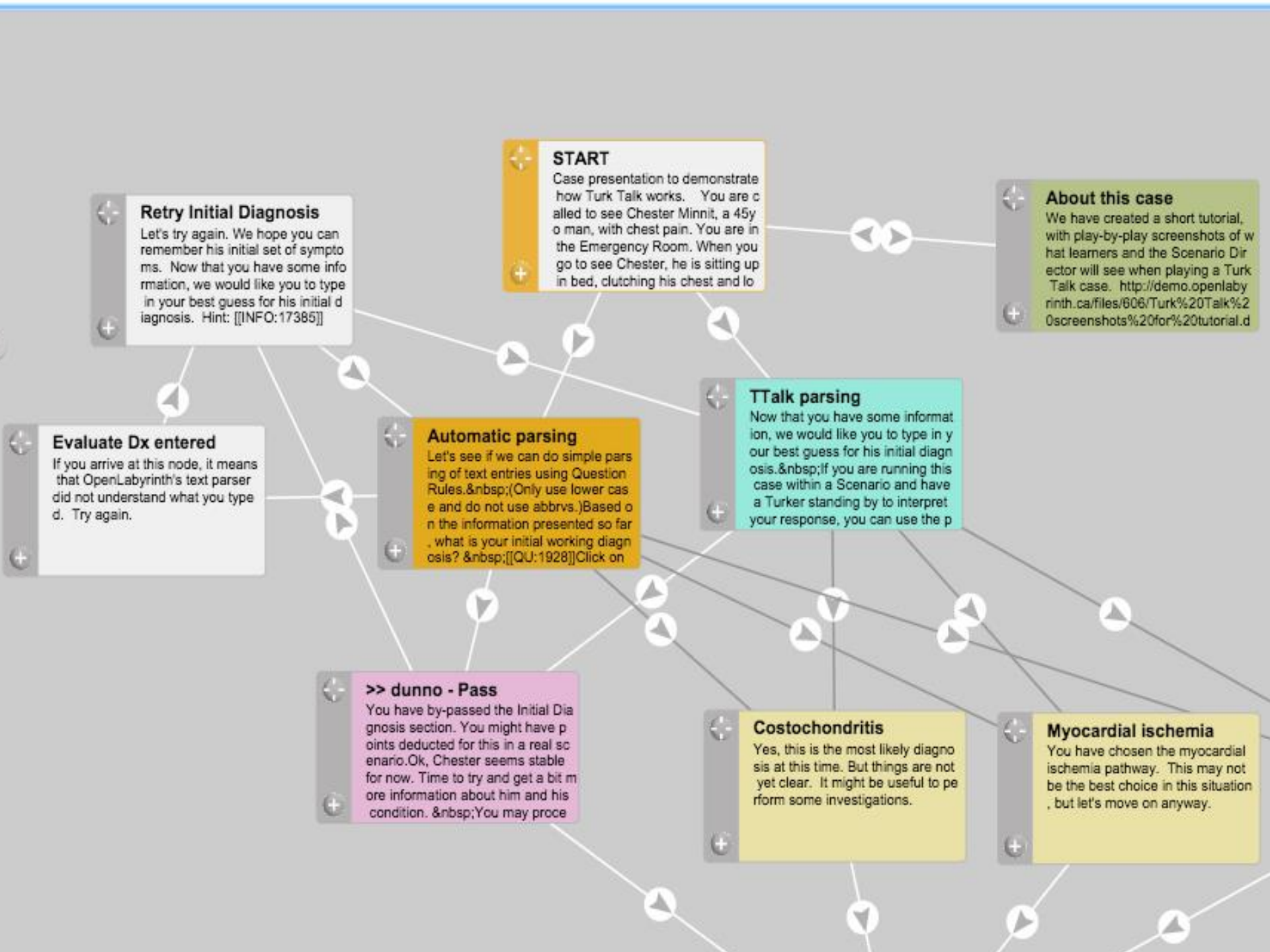


C: I made a payment of \$45 yesterday.

O: I don't have a record of that transaction.

C: Caller

O: Operator



Retry Initial Diagnosis

Let's try again. We hope you can remember his initial set of symptoms. Now that you have some information, we would like you to type in your best guess for his initial diagnosis. Hint: `[[INFO:17385]]`

Evaluate Dx entered

If you arrive at this node, it means that OpenLabyrinth's text parser did not understand what you typed. Try again.

START

Case presentation to demonstrate how Turk Talk works. You are called to see Chester Minnit, a 45yo man, with chest pain. You are in the Emergency Room. When you go to see Chester, he is sitting up in bed, clutching his chest and lo

About this case

We have created a short tutorial, with play-by-play screenshots of what learners and the Scenario Director will see when playing a Turk Talk case. <http://demo.openlabyrinth.ca/files/606/Turk%20Talk%20screenshots%20for%20tutorial.d>

Automatic parsing

Let's see if we can do simple parsing of text entries using Question Rules. (Only use lower case and do not use abbrvs.) Based on the information presented so far, what is your initial working diagnosis? `[[QU:1928]]` Click on

TTalk parsing

Now that you have some information, we would like you to type in your best guess for his initial diagnosis. If you are running this case within a Scenario and have a Turker standing by to interpret your response, you can use the p

>> dunno - Pass

You have by-passed the Initial Diagnosis section. You might have points deducted for this in a real scenario. Ok, Chester seems stable for now. Time to try and get a bit more information about him and his condition. You may proce

Costochondritis

Yes, this is the most likely diagnosis at this time. But things are not yet clear. It might be useful to perform some investigations.

Myocardial ischemia

You have chosen the myocardial ischemia pathway. This may not be the best choice in this situation, but let's move on anyway.

Case presentation

Over the past 6 months, you have been visiting **Hattie** at home regularly, along with the Home Care team. She has been going downhill, is increasingly withdrawn, with a decreasing appetite.



She is less mobile than she used to be and goes out rarely. She no longer participates in group activities. She is more forgetful about little things, which is odd because she used to be so sharp a few months ago.



You are now entering a '**Turk Talk zone**' below. Type your responses into the lower section.

>>done with Suicide Risk Factors

While the risk factors for depression and the risk factors for suicide are similar, they are not the same. It is important to be able to distinguish when a patient is an active suicide risk, for obvious reasons... but it is not always easy to do.



Let's go and have a chat with Hattie the next day...

Chatting to Hattie

Review your pathway


Chatting to Hattie



You are now entering a 'Turk Talk zone' below. Type your responses into the lower section.



Hattie mentions one day that she thinks that things have gone on long enough, and that she would just like to go see her husband. How would you approach this?

Phrase your questions as if you are chatting directly to Hattie.  Your job is to decide whether Hattie is safe or whether she needs to be referred to psychiatry.

Type in short phrases showing how you would raise some questions and issues:

You:
I'm sorry to hear that you feel that way. How can I help?

Turker:
I just want to be with my husband

You:
Do you want to die?

Turker:
Yes, I am tired of living

You:
Have you been thinking of suicide?

Submit

If a Turker is available, you will be directed onwards in the case, once they are satisfied with your answer.

If no Turker is available, enter your main points and then click on [Continue without Turker] button at bottom of page.

Learner level - help
DepFactors
SuicFactors

Map: TTalk test case 2 (621)
Node: 17883
Score:



bookmark

turn editing on









reset

powered by
OpenLabyrinth 

OpenLabyrinth is an open source
educational pathway system

Turk Talk Test ▾ Chat ▾  Forum
 Delete

- 1
- 2
- 5
- 6
- 7
- 3
- 4

 D Topps (gr) ▾	 Michelle Cu ▾	 Rachel Ella ▾	 Nishan Sha ▾
<p>User: what do I do now?</p> <hr/> <p>You: enter your Dx as a short note</p>			
<input type="text" value="Type your response..."/>	<input type="text" value="Type your response..."/>	<input type="text" value="Type your response..."/>	<input type="text" value="Type your response..."/>
<input type="button" value="Submit"/>	<input type="button" value="Submit"/>	<input type="button" value="Submit"/>	<input type="button" value="Submit"/>
<input type="text" value="- Redirect to... ▾"/>	<input type="text" value="- Redirect to... ▾"/>	<input type="text" value="- Redirect to... ▾"/>	<input type="text" value="- Redirect to... ▾"/>
			

⋮

Supportive Feedback

- Immediate or delayed
- Individual or group
- Include reflective practice



Managing Complexity

Accessible

- Avoid space constraints
- Staggered start times
- Individual or group



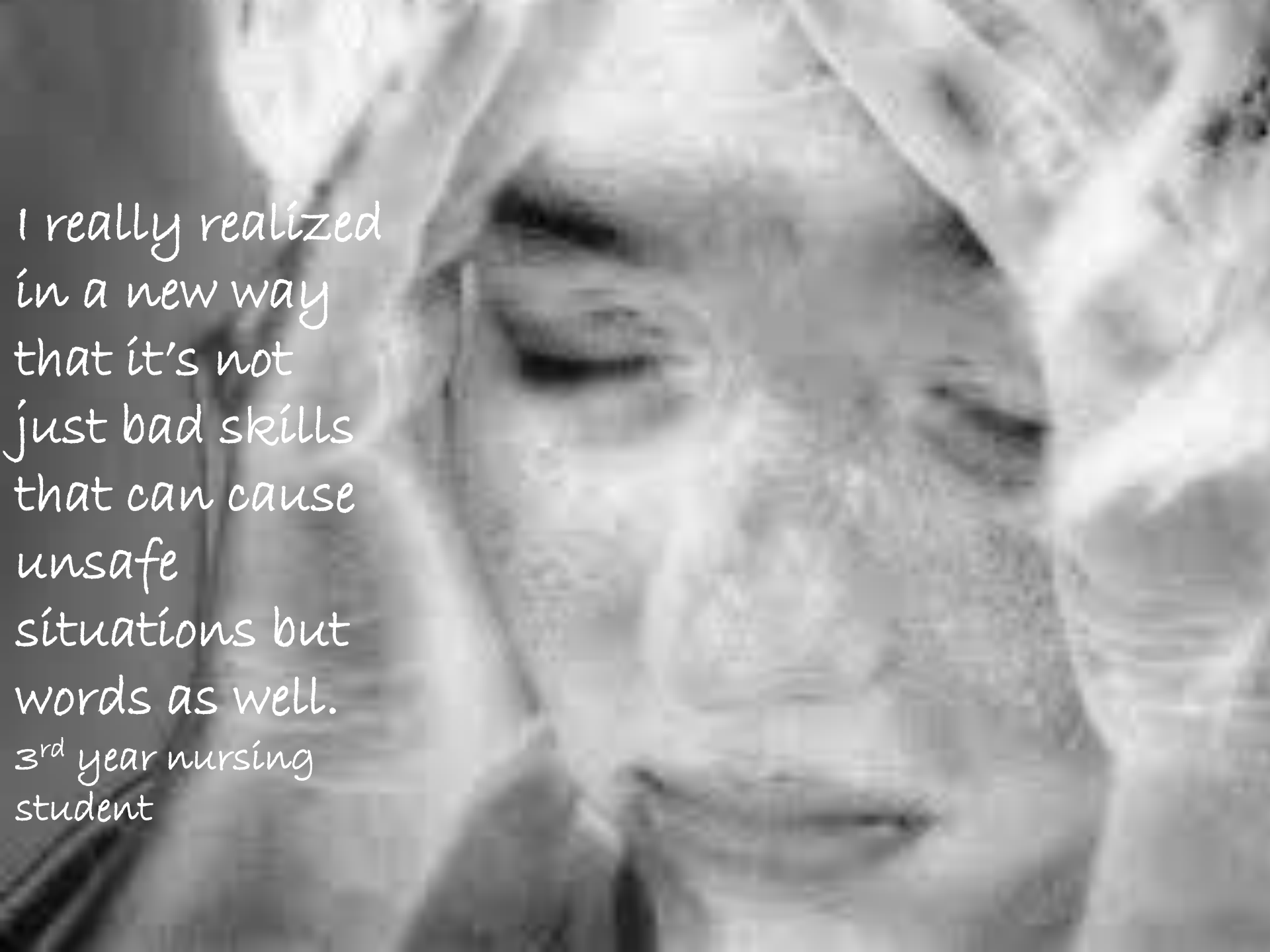
Location

Cost Effective

- OpenLabyrinth
- Faculty expertise
- Personal computer
- Minimal training

What we have learned

- Response types
- Terminology
- Complexity
- Facilitator Training

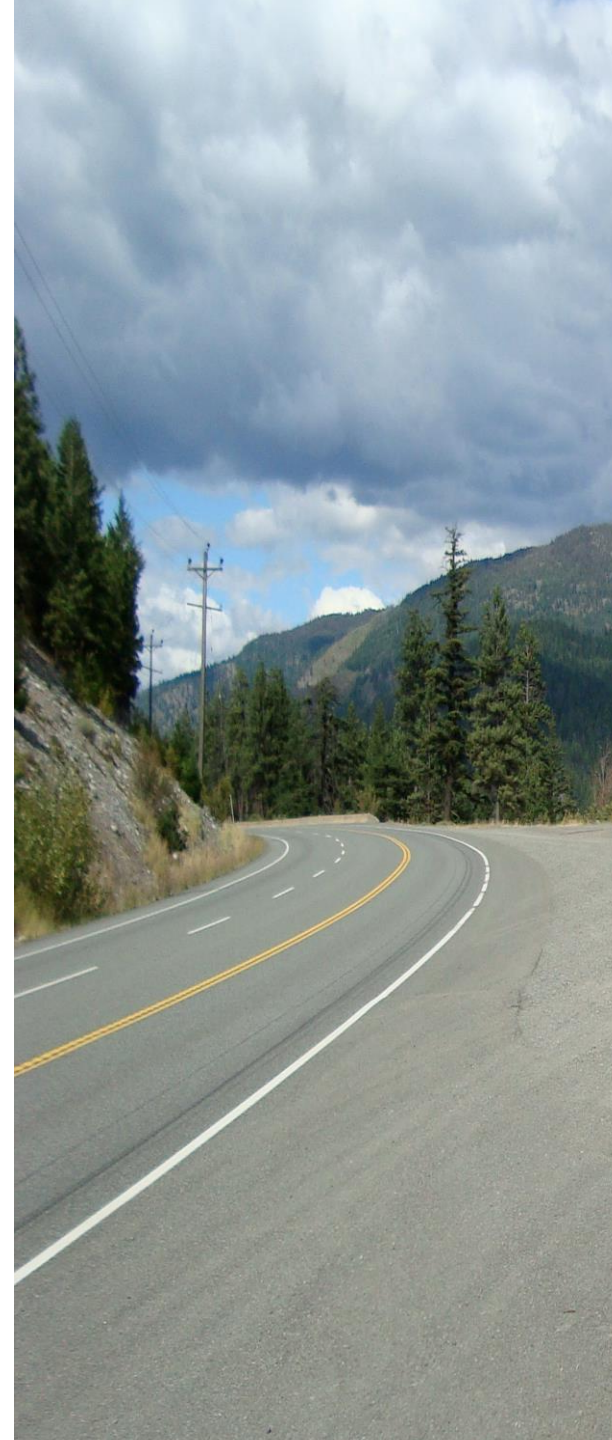


I really realized
in a new way
that it's not
just bad skills
that can cause
unsafe
situations but
words as well.

3rd year nursing
student

Looking Ahead

- Fine tune the process
- Develop scripts
- Explore the parameters



Thank you/Acknowledgements

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- OpenLabyrinth is free open-source, open-standard, web-based software. Its development is guided by the OpenLabyrinth Development Consortium, including the University of Calgary, St George's University London, Karolinska Institut, Aristotle University Thessaloniki, Queens University Ontario, the University of Alberta and the Alberta International Medical Graduate program.

Want to know more?

- Contact Michelle Cullen at mcullen@ucalgary.ca
- <http://tiny.cc/TTalkMC>