Diving Into Diagnostic Uncertainty: Strategies to Mitigate Cognitive Load: In Reference to: "Focused Ethnography of Diagnosis in Academic Medical Centers"

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We read the article by Chopra et al. "Focused Ethnography of Diagnosis in Academic Medical Centers" with great interest.[1] This ethnographic study provided valuable insights into possible interventions to encourage diagnostic thinking.

Duty hour regulations and the resulting increase in handoffs have shifted the social experience of diagnosis from one that occurs *within* teams to one that often occurs *between* teams during handoffs between providers.[2] While the article highlighted barriers to diagnosis, including distractions and time pressure, it did not explicitly discuss cognitive load theory. Cognitive load theory is an educational framework that has been described by Young et al.[3] to improve instructions in the handoff process. These investigators showed how progressively experienced learners retain more information when using a structured scaffold or framework for information, such as the IPASS mnemonic,[4] for example.

To mitigate the effects of distraction on the transfer of information, especially in cases with high diagnostic uncertainty, cognitive load must be explicitly considered. A structured framework for communication about diagnostic uncertainty informed by cognitive load theory would be a novel innovation that would help not only graduate medical education but could also improve diagnostic accuracy.

References
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