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Exploring the transitional learning experiences of early pathology trainees through the lens of realist inquiry: Insights from one Canadian pathology residency training institution

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ABSTRACT

Background: The generalist structure of undergraduate medical education contributes to a knowledge gap for residents entering certain specialties like pathology.

Introduction: The transitional learning needs of trainees in specialties whose foundational skillsets are underrepresented in undergraduate medical education have not been well studied and best practices therefore remain unclear. This study sought to address this gap by exploring transitional issues that early pathology trainees face. This was done by comparing the experiences of learners who did not receive a structured transitional program with those of learners who did, as a way of identifying what works in addressing resident under-preparedness in particular contexts.

Methods: A sequential exploratory realist mixed-methods study was conducted to identify the mechanisms underlying challenges in the transition to pathology residency training, as well as mechanisms that may mitigate these challenges. Data were collected from pathology residents at a single Canadian institution through an anonymous survey (n=14) and follow-up semi-structured interviews (n=8). Data were analyzed to identify context-mechanism-outcome configurations from which middle range theories were developed.

Results: Transitioning residents struggle with the volume of novel information and skill acquisition required in early training. With minimal structured transitional supports, trainees experienced significant overwhelm, a perceived sense of incompetence, and a fear of potentiating medical error. While more pronounced structured transitional supports did not eliminate transitional challenges, they did mitigate feelings of stress and contributed to increased morale and perceived competence.

Conclusions: Resident under-preparedness in early pathology training can be addressed through a range of transitional initiatives with implications for many other underrepresented residency specialties.