VARK LEARNING STYLE: READ/WRITE

PEER MENTORING ACADEMIC PROGRAM

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READ/WRITE LEARNING STYLE

Visit [http://www.vark-learn.com/](http://www.vark-learn.com/) to learn more about the VARK Read/Write Learning Style

Disclaimer
This presentation is composed of suggestions compiled by UFCOM students

These are only recommendations which may need to be modified to best meet your academic needs and preferences

Please note that students often need to utilize multiple study strategies to appropriately learn the material. It is recommended that you review all 4 presentations to create a study routine that best suit your needs
**VISUAL STUDY METHODS**

- Take *detailed* lecture notes: write *specific* examples and explanations
- Create a *study guide* (typed or written)
  - Condensed version of Notes
  - reduce notes to a 3:1 ratio
- Read your notes *frequently*
  - Review the weeks notes *prior to taking* the quiz
- Write high yield info *repeatedly*
  - Use a white board
- Rewrite concepts *in your own words*
- Summarize graphs/diagrams into *words*
- Make *lists* or *charts* identifying similarities/differences and correlations between concepts
**WRITTEN STUDY GUIDE**

- Create one notebook per subject
  - Spiral Notebook/Binder
- Condense lectures notes to fit on approximately 1-2 pages
  - This may not always be possible for all types of learners
  - Use your discretion
- Highlight, underline, use a colored pen for important words
- Use flow charts
- Link associated concepts

(created by Jaimee Castillo, MS2)
**Typed Study Guide**

- Condense lecture notes
  - Only include high yield information
  - Try to fit the notes for each lecture on 1-2 pages
  - This is a skill that may take time for some students to develop
- Use tables to highlight commonalities and differences
- Visually divide information into discrete blocks
- Create charts to compare similarities/differences

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### Variants of Schizophrenia Disorders

<table>
<thead>
<tr>
<th>SCHIZOPHRENIC DISORDER</th>
<th>SCHIZO-AFFECTIVE DISORDER</th>
</tr>
</thead>
<tbody>
<tr>
<td>Duration: 1.5 months of SS, then resolves; Gt recovers = Schiz., but shorter</td>
<td>Duration: mood disorder for a substantial part of the illness; as some Gt (at least 2 weeks), the psychotic ss persist in the absence of mood symptom</td>
</tr>
<tr>
<td>Types: 1. Bipolar: illness includes manic and often major depressive episodes 2. Depressive: only type of mood episodes are major depressive episodes</td>
<td></td>
</tr>
</tbody>
</table>

### Brief Psychotic Disorder

- Onset of at least one positive characteristic symptom of schizo in 1-1 month, with eventual return to pre-morbid functioning

### Delusional Disorder

- An isolated, non-bizarre delusion; otherwise Gt functions fine (Unlike schizoid, where the negative ss result in cognitive impairment/higher functioning)

### Shared Psychotic Disorder (Eulogia, a delusion of 2)

- Simultaneous occurrence of psychotic symptoms in 2 or more individuals, but there is one primary psychotic person whose delusions are so strong they are able to convince the others

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### DSM of Psychosis

- Psychotic ss caused by an underlying medical condition, the effects of a substance, or a primary mental disorder

#### Neurological

1. Parkinson’s (since deficit is DA; if mark for drug is over-shot, then psychosis can be induced); in this case, we treat with serum oxtressin and levodopa.
2. Stroke (herniation, encephalitis, HIV, meningitis)
3. Tumors
4. CNS infections
5. Autoimmune
6. ICP due to a multitude of factors like opiates, etc.

#### Substances of Abuse

1. Dopamine agonists
2. PCP
3. Stimulants

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(created by Nayelah Sultan, MS2)
### CHARTS

#### Bugs

<table>
<thead>
<tr>
<th>Bacteria</th>
<th>B. anthracis</th>
<th>B. diphtheriae</th>
<th>B. pertussis</th>
<th>Staphylococcus aureus</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Morphology</strong></td>
<td>Gram-positive</td>
<td>Gram-positive</td>
<td>Gram-negative</td>
<td>Gram-positive</td>
</tr>
<tr>
<td><strong>Metabolism</strong></td>
<td>Insect-eating</td>
<td>Insect-eating</td>
<td>Insect-eating</td>
<td>Insect-eating</td>
</tr>
<tr>
<td><strong>Virulence</strong></td>
<td>Insect-eating</td>
<td>Insect-eating</td>
<td>Insect-eating</td>
<td>Insect-eating</td>
</tr>
</tbody>
</table>

#### Drugs

<table>
<thead>
<tr>
<th>Site of Action</th>
<th>Mechanism</th>
<th>Effect</th>
<th>Use</th>
<th>Adverse Effects</th>
</tr>
</thead>
<tbody>
<tr>
<td>OATP</td>
<td>Transporter, ATPase</td>
<td>Increased absorption</td>
<td>Anti-platelet</td>
<td>Hypersensitivity, liver toxicity</td>
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</table>

((created by Tené Sablo, MS2)
MICROSOFT WORD (NOTEBOOK LAYOUT)

• One notebook per course
  • Textbook notes
  • Supplemental book notes
  • Lectures
  • Lab

• Collapsible sub-headings
  • Self-quiz

• Notes
  • Question Format
  • Outline Format

(created by Tené Sablo, MS2)
ITHOUGHTS HD (IPHONE, IPAD, MAC)

- Create on your mindmaps
- Mindmapping enables you to visually organize your thoughts, ideas and information
- Collapse map to study concepts

http://www.ithoughts.co.uk/

(by Tené Sablo, MS2)
**ANKI** (MAC, PC, IPHONE, ANDROID)

- Anki is a (free) open-source, highly customizable **flashcard** software - great for visual or read/write learners
- Review of learned cards based off the **forgetting curve** - designed to help you retain the material as efficiently as possible
- You can **share** Anki decks and **download decks** others have made online
- Especially helpful for learning anatomy lab terms!

(Created by Lauren Pearson, MS2)
POWERPOINT LECTURES

• Format lecture PowerPoint with animation
  Use this function as a method to self-quiz for quizzes/exams

1p36.3 Microdeletion Syndrome

• Features
  – Intellectual deficiency, seizures, hearing loss

• Missed by routine chromosome study
  – detectable by FISH (if specific probe ordered)

• Easily detectable by
  – microarray in all cases
RESOURCES

• **FLASHCARDS (DIGITAL):** Mental Case, Quizzlet, Anki
• **APPS:** Anatomy Atlas, Virtual Human Body, iThoughtsHD, Netter Atlas, iAnnotate, Notability, Goodreader, Dictamus
• **TEXTBOOKS:** Paper, PDF, Inkling
• **VIDEOS:** Pathoma, Kaplan USMLE Step 1 Prep, Dr. Najeeb, Acland
• **AUDIO:** Goljan Audio (pathology), Blaufuss Sound builder (heartsounds)
• **NOTE-TAKING SOFTWARES:** Preview (Mac), Adobe, OneNote (PC), PowerPoint, Word (Notebook Layout)
• **WHITEBOARD:** small size/portable
• **PRACTICE QUESTIONS:** BRS, PRE-TEST, Q_BANKS
• **STUDY GROUP:** Studying with a friend or a group might be a good idea
• **NOTES:** Use lots of colors! You will remember it better
ADVICE FROM STUDENTS

LECTURE

“Take very detailed notes during lecture. Mark areas of the lecture that you feel you missed something so you can go back and look it up on the lecture videos” (MS2)

“Read through the lecture once without taking notes before attending the lecture. Review lecture after class with additional notes taken. When you have a basis for the material you are more likely to retain” (Amy Driebe, MS4)

GENERAL RECOMMENDATION

“Get a Step review book and start adding notes throughout first year. The review books are not as detailed and by having your own notes along with it, it makes studying more efficient :) UF prepares you well!” (MS4)
“Out of the **135 students** in their class, there will be **135 ways to study**...There will be more material than they know what to deal with. They shouldn't be afraid to try different styles but they should also be comfortable sticking to what works for them :)

Katie Dietrich, MS2