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6 Fifteen-minutes: Shifting the Paradigm of the Traditional Lecture for Adult Learners

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Background: Traditional didactic lectures constitute a significant portion of Emergency Medicine curricula and conferences. When reviewing the 2013 conference curricula of three large national Emergency Medicine conferences: ACEP, AAEM, and SAEM, 30 minute to 1 hour lectures predominate. These 30 minute or 1 hour increments appear to be set arbitrarily, without input directly from participants. Studies indicate that maximal concentration for adult students peaks between 10 to 30 minutes.^{1,2}

Objective: This study seeks to determine the optimal lecture length preferred by Emergency Medicine conference participants.

Methods: A survey was administered and collected in November 2013, during a large international conference (Essentials of Emergency Medicine) asking the following question: "What is the optimal length of a lecture?"

Results: Of 242 responses, 66% of participants selected 15 minutes, while 17% selected 30 minutes, 10% selected 5 minutes, 5% selected 45 minutes, and 1% selected 60 minutes (Table 1).

Conclusion: Traditional didactic lectures constitute a major modality through which Emergency Medicine physicians receive education. A review of the conference curricula of three major national Emergency Medicine conferences demonstrates that this modality still predominates, with lectures ranging from 30 minutes to 1 hour. However, our survey of Emergency Medicine conference participants demonstrates a preference towards even shorter 15 minute lectures, commensurate to studies indicating that maximal concentration is achieved between 10 and 30 minutes. This suggests yet another paradigm shift in how we as educators need to adapt in order to deliver effective didactic lectures to adult learners.



Figure 1. What is the optimal length of a lecture? (n=242).