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Observation on the Application of Case-based Three-dimensional Teaching Method Guided by Evidence-Based Thought in the Teaching of Intern Nurses in the Rehabilitation Department

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Abstract: *Objective:* To explore the effect of implementing the case-based three-dimensional teaching method guided by evidence-based thinking in the teaching of trainee nurses in the rehabilitation department. Method: Eighty nursing practice nurses who were conducting clinical practice learning in the Rehabilitation Department of Deyang People's Hospital from June 2024 to May 2025 were selected as the research subjects. By using the controlled grouping method, the practice nurses from June 2024 to November 2024 were taken as the control group (n = 40). The period from December 2024 to May 2025 was taken as the experimental group (n = 40 students), the control group was taught by traditional teaching methods, and the experimental group was taught by evidence-based nursing combined with case teaching method. The clinical thinking ability, autonomous learning ability, exit assessment scores and teaching satisfaction of the two groups of intern nurses at the time of leaving the department were compared. *Results:* At the time of leaving the department, the scores of each dimension and the total score of clinical thinking ability of the intern nurses in the experimental group were higher than those in the control group (t = 9.268, 6.354, 6.199) 9.694, all $p < 0.05$). At the time of leaving the department the scores of each dimension and the total score of the autonomous learning ability of the intern nurses in the experimental group were higher than those in the control group (t = 6.998, 7.333, 5.503, 5.977, 22.244) all $p < 0.05$). At the time of leaving the department the theoretical assessment scores and operational assessment scores of the experimental group were both higher than those of the control group (t = 14.546, 11.676, all $p < 0.05$). At the time of graduation, the teaching satisfaction of the experimental group was higher than that of the control group ($\chi 2 = 7.314$, $p < 0.05$. *Conclusion:* The adoption of the case-based three-dimensional teaching. Rehabilitation method guided by the evidence-based ideology during the teaching process can effectively improve the clinical thinking ability, autonomous learning ability, departmental assessment results and teaching satisfaction of the intern nurses in the rehabilitation department, which is worthy of reference.

Keywords: Nursing intern; Evidence-based thinking; Case-based multidimensional teaching method; Clinical thinking ability; Self-learning ability

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1. Introduction

Rehabilitation, as an essential part of the modern medical system, has unique and complex nursing work. Rehabilitation care requires nurses to be proficient in basic nursing skills, as well as to have a keen ability to observe the patient's condition, a professional level of rehabilitation training guidance, and the ability to provide psychological support to patients throughout their long-term rehabilitation process [1]. The internship stage is a crucial transitional period for nursing students to transition to the role of clinical nurses, and the quality of internship nurse training is directly related to the overall level and professional quality of the future nursing team [2]. However, the traditional nursing teaching model currently adopted by rehabilitation departments is indoctrination-style one-way education, which is prone to causing nurses to feel tired during clinical practice and have low learning enthusiasm, which is not conducive to the cultivation of new types of nursing talents. Therefore, it is particularly important to explore innovative teaching methods [3]. Evidence-based thinking, as an emerging concept, combines research conclusions with clinical experience to provide a scientific basis for nursing practice [4]. The case teaching method, with its unique advantages, can stimulate students' interest and initiative in learning and improve learning efficiency through the discussion and analysis of real cases [5]. Based on this, this study will delve into the application effect of the case-based stereoscopic teaching method guided by evidence-based thinking in the teaching of rehabilitation practice nurses.

2. Data and methods

2.1. General information

Eighty nursing practice nurses who conducted clinical practice learning in the rehabilitation Department of Deyang People's Hospital from June 2024 to May 2025 were selected as the research subjects. The control group method was adopted, with intern nurses from June 2024 to November 2024 as the control group (n = 40) and those from December 2024 to May 2025 as the experimental group (n = 40). There was no statistically significant difference in the general data between the two groups ($p > 0.05$), and a comparative analysis could be conducted. See **Table 1**.

Table 1. Comparison of general data between two groups [$\bar{x} \pm s$ or n(%)]

Group	n	Age (years)	Gender		Education	
			Male	Female	Specialist	Bachelor's degree and above
Experimental group	40	20.37 ± 2.49	6 (15.00)	34 (85.00)	16 (40.00)	24 (60.00)
Control group	40	19.93 ± 2.18	5 (12.50)	35 (87.50)	18 (45.00)	22 (55.00)
t/χ^2		0.841	0.105		0.205	
p		0.403	0.745		0.651	

2.2. Inclusion and exclusion criteria

2.2.1. Inclusion criteria

(1) Completion of all on-campus courses before internship

(2) With informed consent and voluntary participation

2.2.2. Exclusion criteria

(1) Those who are unable to complete the rehabilitation internship for various reasons

(2) Unable to continue participating in the investigator for any reason during the trial period

2.3. Methods

The control group was taught using the traditional teaching method as follows: Based on the internship syllabus and the requirements of the hospital nursing department, the knowledge objectives of the trainee nurses were defined and the rehabilitation department internship teaching plan was formulated. After entering the department, the trainee nurses were guided one-on-one by clinical instructors and demonstrated the operation. Each week, teaching instructors and teaching group leaders give concentrated theoretical and practical lessons. Teaching ward rounds and small lectures are conducted in the fourth week. Theoretical and operational assessments will be conducted before the end of the internship.

The experimental group adopted the case-based three-dimensional teaching method guided by evidence-based thinking. The specific steps are as follows.

2.3.1. Teaching preparation

(1) Forming a teaching team

The teaching team was composed of the teaching instructors hired by the hospital, and the team members had clear divisions of labor. Among them, there was one head nurse of the rehabilitation department, who was mainly responsible for inspecting and supervising the teaching process to ensure the quality and standardization of teaching activities; 1 Head of teaching, responsible for the arrangement and implementation of the entire teaching plan, controlling the progress and direction of teaching; Four clinical instructors will be responsible for providing one-on-one teaching guidance to trainee nurses on the clinical front line. All instructors have received systematic training in evidence-based nursing knowledge and case-based teaching methods before taking up their posts, and have a solid theoretical foundation and rich practical experience.

(2) Student preparation

To facilitate teaching management and information exchange, teaching group leaders have established Wechat communication groups, including all trainee nurses, to facilitate the timely release of teaching notifications and learning materials. Divide the trainee nurses into four groups, each with one group leader, who is responsible for assisting the teacher in organizing group activities and coordinating group affairs. After entering the department, the trainee nurses will receive additional training on evidence-based nursing knowledge in addition to the regular department orientation.

(3) Preparation of teaching content

The teaching team, based on the internship teaching syllabus, extensively consulted a large number of literature materials on evidence-based nursing teaching and case teaching. Based on this, combined with the clinical practice of the rehabilitation department, the teaching plan was carefully formulated through the joint discussion of the teaching team. The main content of the teaching focuses on the key points of care for common diseases in the rehabilitation department, such as spinal cord injury, stroke, cervical spondylosis, etc., and provides corresponding typical cases for each disease.

2.3.2. Teaching implementation

(1) Case preview

The instructor selects the corresponding typical cases from the teaching case library based on the weekly

teaching theme and sends the cases and related theoretical learning materials to the trainee nurse Wechat group one week in advance. The teacher required the trainee nurses to read the cases carefully, study the learning materials carefully, and preview the relevant learning content in advance.

(2) Clinical practice and problem-based learning

The trainee nurse follows the clinical one-to-one teaching teacher into the ward and examines the case patients by the bedside. By communicating with patients, asking about their medical history, conducting physical examinations, and checking the results of auxiliary examinations, the trainee nurse initially understands the patient's condition and acquires first-hand information about the patient. During this process, the instructor instructs the trainee nurse to ask questions about evidence-based nursing and, guided by the questions, leads them to collect information. Intern nurses need to sift through evidence, professional literature, journals, books, etc., to select important literature and information. Based on the patient's characteristics and actual condition, and in combination with the collected evidence, the trainee nurse formulates the corresponding care plan and evaluates its effectiveness and feasibility. Group members summarize the data to ensure completeness and accuracy of the information.

(3) Classroom teaching and group presentation discussion

In the teaching class, the instructor gives a brief explanation of the relevant theoretical knowledge to help the trainee nurse sort out the knowledge framework. After the presentation, the trainee nurses presented the collected case-related materials, nursing plans and reference materials in the form of PPT or Word documents in groups. After the presentation, the teacher organized the trainee nurses to have a discussion, guiding them to inspire each other, think actively, and encourage them to analyze and evaluate the nursing plan from different perspectives. After the discussion, each trainee nurse was asked to express their own feelings and insights and share their learning experiences. Then there will be group reviews through the review process.

(4) Teacher evaluation and summary enhancement

The instructor evaluates the presentation and discussion results of each group. The teacher carefully analyzed the problems and deficiencies in the presentation and discussion of the trainee nurses, provided detailed explanations and demonstrations for the common problems, helped the trainee nurses sort out the relevant knowledge points, summarized the key contents, deepened their impression, and further strengthened the knowledge that needed to be mastered. At the same time, the teacher guided the trainee nurses to reflect on and summarize the application of evidence-based nursing thinking and methods, and encouraged them to apply the knowledge they had learned to their actual work. The group leader, in light of the characteristics of the case and the actual clinical situation, conducted an in-depth analysis and summary of the problems that emerged in the nursing process and practical operation, and further improved the nursing plan.

2.3.3. Post-class practice

Under the guidance of the clinical instructor, the trainee nurse applies the nursing plan refined in class to the corresponding case patient. During the practice, the instructor closely monitored the trainee nurse's operation process and provided timely guidance and correction.

The intervention period for both groups began on the day the trainee nurse entered the department and ended on the day she left the department.

2.4. Observation indicators

2.4.1. Clinical thinking ability

When entering and leaving the department, the clinical thinking ability of the two groups of trainee nurses was evaluated using Song Junyan's clinical thinking evaluation index system for optimization and organization. The evaluation system consists of three dimensions: critical thinking ability, systems thinking ability, and evidence-based thinking ability, with a total of 15 items and a score ranging from 15 to 75 points [6]. The higher the score, the stronger the clinical thinking ability of the trainee nurse. The scale has a Cronbach's α coefficient of 0.9.

2.4.2. Self-directed learning ability

The self-directed learning ability of the two groups of trainee nurses was evaluated at the time of admission and graduation using the self-directed learning ability assessment scale for nursing students developed by Zhang Xiyan et al. The scale consists of four first-level indicators and 30 items, namely learning motivation, self-management ability, cooperative ability, pheromone, with a total score of 30 to 150 points [7]. The higher the score, the stronger the self-learning ability. The Cronbach's α coefficient is 0.8223.

2.4.3. Exit assessment results

At the time of exit, two groups of trainee nurses were examined in both theoretical and practical parts. The theoretical examination uses a self-compiled unified examination paper on rehabilitation specialty knowledge, with a full score of 100 points. The operational assessment is also set at 100 points, with a focus on simulating typical cases. During the skills assessment, the instructor acts as a standardized patient, and the head nurse is responsible for conducting the operation assessment of the trainee nurse and giving the corresponding score.

2.4.4. Teaching satisfaction

At the end of the department, based on literature review and expert consultation, create a teaching model satisfaction evaluation form, including dimensions such as teaching content, teaching method, teaching process, and teaching effect. The total score of the form is 100 points, with 90 to 100 points corresponding to "very satisfied". The satisfaction score is 75 to 89 points; The average score is 60 to 74; Dissatisfaction corresponds to a score of less than 60. Satisfaction is the sum of the ten-point satisfaction rate and the satisfaction rate.

2.5. Statistical analysis

Data were analyzed using SPSS29.0 statistical software, with normality measures expressed as mean ± standard deviation ($\bar{x} \pm s$) and *t*-tests; Count data in n (%), chi-square test; $p < 0.05$ indicates a statistically significant difference.

3. Results

3.1. Comparison of clinical thinking ability between the two groups

At admission, there was no significant difference in the scores of each dimension and total score of clinical thinking ability between the two groups ($p > 0.05$); At the time of discharge, the scores of each dimension and the total score of clinical thinking ability of the trainee nurses in the experimental group were higher than those in the control group ($p < 0.05$), as shown in **Table 2**.

Table 2. Comparison of clinical thinking ability between the two groups ($\bar{x} \pm s$, points)

Group	n	Critical thinking skills		Systems thinking ability		Evidence-based thinking ability		Total score	
		When entering the department	When leaving the department	Admission	When leaving the department	Admission	When leaving the department	Admission	When leaving the department
Experimental Group	40	10.05 ± 1.56	14.25 ± 1.63[a]	16.53 ± 2.32	27.64 ± 3.56[a]	8.29 ± 1.08	11.38 ± 1.35[a]	34.45 ± 3.72	52.86 ± 4.64[a]
Control Group	40	9.97 ± 1.71	11.24 ± 1.25[a]	16.16 ± 2.67	22.95 ± 3.02[a]	8.15 ± 1.34	9.57 ± 1.26[a]	35.19 ± 3.56	43.52 ± 3.95[a]
t		0.215	9.268	0.662	6.354	0.514	6.199	0.897	9.694
p		0.828	< 0.001	0.510	< 0.001	0.608	< 0.001	0.373	< 0.001

Note: Compared[a] with the time of admission to the department of this group, $p < 0.05$.

3.2 Comparison of autonomous learning ability between the two groups

At the time of admission, there was no significant difference ($p > 0.05$) in the scores of each dimension of autonomous learning ability and the total score between the two groups; When leaving the department, the scores of each dimension and the total score of the autonomous learning ability of the trainee nurses in the experimental group were higher than those in the control group ($p < 0.05$), as shown in **Table 3**.

Table 3. Comparison of clinical thinking ability between the two groups ($\bar{x} \pm s$, points)

Group	n	Learning motivation		Self-management ability		Cooperative ability		Information literacy		Total score	
Experimental group	40	10.18 ± 2.72	21.61 ± 4.35[a]	17.31 ± 2.15	31.37 ± 3.62[a]	19.76 ± 3.39	30.52 ± 5.04[a]	31.54 ± 3.62	44.51 ± 4.85[a]	77.58 ± 4.38	126.75 ± 6.86[a]
Control group	40	10.25 ± 2.83	15.46 ± 3.46[a]	17.14 ± 2.32	25.54 ± 3.49[a]	19.01 ± 3.24	24.75 ± 4.31[a]	31.31 ± 3.27	38.49 ± 4.13[a]	76.92 ± 4.06	96.58 ± 5.15[a]
t		0.113	6.998	0.340	7.333	1.012	5.503	0.298	5.977	0.699	22.244
p		0.910	< 0.001	0.735	< 0.001	0.315	< 0.001	0.766	< 0.001	0.487	< 0.001

Note: $p < 0.05$ compared[a] with the admission of this group

3.3. Comparison of exit assessment results between the two groups

At the time of graduation, the theoretical assessment scores and operational assessment scores of the experimental group were both higher than those of the control group ($p < 0.05$), as shown in **Table 4**.

Table 4. Comparison of exit assessment scores between the two groups ($\bar{x} \pm s$, points)

Group	n	Theoretical assessment score	Operational assessment results
Experimental group	40	91.36 ± 3.17	90.38 ± 4.05
Control group	40	81.29 ± 3.02	80.14 ± 3.79
t		14.546	11.676
p		< 0.001	< 0.001

3.4. Comparison of teaching satisfaction between the two groups

At the end of the course, the teaching satisfaction of the experimental group was higher than that of the control group ($p < 0.05$), as shown in **Table 5**.

Table 5. Comparison of teaching satisfaction between groups [n(%)]

Group	n	Very satisfied	Satisfied	General	Dissatisfied	Teaching satisfaction
Experimental group	40	24 (60.00)	15 (37.50)	1 (2.50)	0 (0.00)	39 (97.50)
Control group	40	14 (35.00)	17 (42.50)	7 (17.50)	2 (5.00)	31 (77.50)
χ^2						7.314
p						0.007

4. Discussion

Rehabilitation nursing work is an essential part of rehabilitation treatment, and its quality is directly related to the rehabilitation outcome and quality of life of patients [8]. For patients in the recovery period, staged rehabilitation nursing intervention is necessary. For critically ill patients, due to their complex conditions, often accompanied by organ dysfunction, they are vulnerable to the risk of nosocomial infection, making effective nursing intervention more difficult [9]. As a new force in the future nursing team, the quality of training for trainee nurses during their internship in the rehabilitation department is of vital importance. However, traditional nursing teaching methods often have problems such as the disconnection between theory and practice and the lack of student initiative, which are difficult to meet the demand for high-quality nursing talents in rehabilitation nursing work [10]. Therefore, it is necessary to discover a more effective way of clinical teaching to address the above problems.

In recent years, the application of the concept of evidence-based medicine in the field of nursing education has gradually attracted attention. Evidence-based thinking emphasizes making scientific and reasonable decisions based on the best evidence, combined with clinical experience and patient needs. When applied to the teaching of trainee nurses in the rehabilitation department, it can guide students to actively explore knowledge and develop their ability to solve practical problems [11]. At the same time, the case-based stereoscopic teaching method, as a comprehensive teaching approach based on actual clinical cases and through multi-dimensional teaching means, can effectively stimulate students' interest in learning and enhance their clinical thinking and practical abilities [12]. The results of this study show that at the time of leaving the department, the scores of each dimension and the total score of clinical thinking ability of the trainee nurses in the experimental group were higher than those in the control group, indicating that the implementation of the case-based stereoscopic teaching method guided by evidence-based thinking in the teaching of trainee nurses in the rehabilitation department helps to improve their clinical thinking ability. The reason lies in: In clinical practice and problem-based learning sessions, trainee nurses obtain first-hand information through communication with patients, examinations, etc., and under the guidance of their instructors, raise questions, collect information, formulate nursing plans and evaluate around evidence-based nursing. This process exercises their ability to identify problems, collect evidence, analyze problems and solve problems, and helps their clinical thinking to be more systematic and scientific; In the stage of classroom teaching, group presentation and discussion, and teacher evaluation and summary improvement, intern nurses further deepen their understanding of knowledge through presentation, discussion, peer evaluation, teacher demonstration and explanation, reflect and summarize the application of evidence-based nursing ideas

and methods, which helps them build a complete clinical thinking framework and enhance their ability to comprehensively apply knowledge to solve practical problems. The research results of Guo Shichang et al. are similar to those of this study, confirming the conclusion of this study [13].

The results also showed that at the time of leaving the department, the scores of each dimension and the total score of the autonomous learning ability of the trainee nurses in the experimental group were higher than those in the control group, suggesting that the case-based stereoscopic teaching method guided by evidence-based thinking can improve the autonomous learning ability of the trainee nurses in the rehabilitation department. The reason for the analysis was that during the case preview session, the trainee nurses were required to read the cases in advance and study the learning materials, and were asked to actively search for and learn the relevant knowledge to cultivate the awareness and habit of autonomous learning. In the clinical practice and problem-based learning stage, trainee nurses are required to raise questions and collect information around patients' conditions, which helps them actively search professional literature, journals, books, etc., screen important information to solve practical problems, and further exercise their ability of self-study and information retrieval; In the group presentation and discussion, teacher evaluation and summary improvement sessions, the trainee nurses can more clearly recognize their own knowledge deficiencies through presentation, discussion, peer evaluation, teacher explanation and demonstration, thereby stimulating their active learning of more knowledge to make up for the deficiencies and enhancing their motivation for autonomous learning.

The results of this study also revealed that at the time of leaving the department, the theoretical assessment scores and operational assessment scores of the experimental group were both higher than those of the control group, indicating that the implementation of the case-based three-dimensional teaching method guided by evidence-based thinking in the teaching process can help the intern nurses in the rehabilitation department firmly master the relevant nursing knowledge and operational skills. The reason for this is that, in terms of theoretical learning, the evidence-based nursing knowledge training in the teaching preparation stage and the teacher's explanation of theoretical knowledge in the teaching implementation stage help the trainee nurses sort out the knowledge framework and enable them to have a deeper understanding and systematic mastery of theoretical knowledge such as the key points of nursing for common diseases in the rehabilitation department; In terms of operational skills improvement, in the clinical practice and problem-based learning session, trainee nurses follow their instructors on the front line of clinical practice for one-on-one practical operation guidance, which can combine theoretical knowledge with practical operation, accumulate rich practical experience, and improve the proficiency and standardization of operational skills; In addition, in the teacher evaluation and summary improvement session, the teacher provides detailed explanations and demonstrations of the problems that arise during the practice of the trainee nurse, further consolidating their theoretical knowledge and operational skills, which helps the nurse perform better in the assessment and thereby improves the theoretical assessment and operational assessment scores. This is similar to the results from Wang Xuehong et al.'s study [14]. The results also revealed that at the end of the study, the teaching satisfaction of the experimental group was higher than that of the control group, indicating that the trainee nurses in the rehabilitation department were more satisfied with the effect of the case-based stereoscopic teaching method guided by evidence-based thinking in the teaching process. The reason might be that the teaching model could help the trainee nurses quickly master the relevant knowledge and skills, and during the teaching process, they could communicate more with the instructors, the teaching quality was higher, and the trainee nurses were more receptive, so their nursing satisfaction increased accordingly. This is largely in line with the findings of Chen et al [15].

5. Conclusion

To sum up, the application of the case-based stereoscopic teaching method guided by evidence-based thinking in the teaching process of trainee nurses in the rehabilitation department can significantly improve their clinical thinking ability, autonomous learning ability, assessment results at the end of the department, and teaching satisfaction. However, this study was a single-center study with a relatively small sample size, lacking sufficient representativeness. A multi-center study with a larger sample size is needed in the future in order to obtain more representative research results.

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