

Bridging the Theory and the Practice Gap: Improving Clinical Application of Anatomy and Physiology through Active Learning Strategies in Nursing Education

Jaypee Landingin, RN, MN*

Hospital Coordinator, Melbourne, Australia
Graduate School, Holy Angel University, Angeles City, Philippines
Corresponding Author Email Id: Jaypeemiranda.Landingin@outlook.com

Abstract

This is a conceptual paper, not an empirical study. Anatomy and Physiology (A&P) forms the cornerstone of nursing education, underpinning clinical reasoning, decision-making, and patient safety. Yet, a persistent gap exists between theoretical knowledge and its application in clinical practice [1]. This conceptual paper argues that traditional lecture and heavy pedagogies contribute to the disconnect, while active, clinically contextualized learning strategies including case-based learning, simulation, and concept mapping offer a pathway to bridge this gap. Drawing upon Kolb's Experiential Learning Theory, Constructivist Learning Theory, and Boyer's Scholarship of Teaching and Learning (SoTL), the paper presents a framework for transforming A&P instruction [2]. Implications for curriculum reform, faculty development, and patient-centered outcomes are discussed. [3] [4].

Keywords

Anatomy and Physiology, nursing education, theory and practice gap, active learning, SoTL, clinical reasoning.

INTRODUCTION

Anatomy and Physiology (A&P) is one of the most critical foundation courses in nursing education, equipping students with knowledge essential for safe and effective care. Despite its centrality, students often find A&P challenging, abstract, and disconnected from practice, leading to difficulties in applying concepts during clinical placements[5]. The persistence of this theory and practice gap undermines both student confidence and patient safety.

This paper repositions the issue as not only a curricular challenge but also a professional responsibility. It explores how active learning strategies, grounded in educational theory and informed by SoTL principles, can enhance the transfer of A&P knowledge into clinical practice.

LITERATURE REVIEW

The Theory and Practice Gap

Nursing education continues to grapple with the misalignment between classroom instruction and clinical application [6]. Graduates may excel academically yet struggle to translate theory into patient care decisions [7]. In A&P, this manifests when nursing students can recite physiological mechanisms but fail to apply them in patient assessments or interventions.

Active Learning in Nursing Education

Active learning engages students in problem-solving, reflection, and application. Evidence shows that strategies

such as:

- Case-Based Learning (CBL): situates A&P within authentic patient scenarios.
- Simulation: provides experiential opportunities for clinical reasoning in a safe environment [2].
- Concept Mapping: supports integration and visualization of complex relationships [8].

These approaches foster higher-order thinking and contextual understanding, yet their integration into A&P teaching remains inconsistent [9].

SoTL as a Lens for Innovation

Boyer's SoTL framework emphasizes systematic inquiry into teaching, dissemination of findings, and continuous pedagogical improvement [3]. Applying SoTL to A&P instruction enables nursing educators to move beyond tradition, critically evaluate outcomes, and share innovations to strengthen the profession.

FRAMEWORK THEORETICAL

1. Kolb's Experiential Learning Theory: Supports the cyclical process of learning through experience, reflection, and application. Simulations and case studies enable students to progress beyond memorization to practical reasoning [10].
2. Constructivist Learning Theory: Positions students as active constructors of knowledge, with scaffolding and guided practice supporting deeper understanding [11].
3. Boyer's SoTL: Provides a scholarly foundation for examining, evaluating, and disseminating new teaching

approaches in nursing education[12].

Together, these frameworks highlight how active, contextualized learning transforms A&P from rote memorization to applied clinical reasoning[8].

Conceptual Model for Bridging the Gap

This paper proposes a Conceptual Model of Applied A&P Learning, integrating:

- Clinical Contextualization: Embedding A&P topics in case scenarios.
- Experiential Application: Using simulation as a bridge between classroom and practice.
- Cognitive Integration: Employing concept maps to connect physiology with interventions[4].

The model situates these strategies within Kolb's learning cycle and constructivist pedagogy, reinforcing the dynamic relationship between theory and practice.

Results / Expected Outcomes

The proposed conceptual model is expected to:

- Improve nursing students' ability to apply Anatomy and Physiology knowledge during clinical placements.
- Enhance student confidence and critical thinking through contextualized learning.
- Reduce the theory–practice gap by integrating active learning strategies such as simulation, case-based learning, and concept mapping[13].
- Strengthen faculty development by encouraging SoTL-driven pedagogical practices.
- Contribute to improved patient safety through better-prepared graduates.

IMPLICATIONS

For Nursing Education: Embedding active learning in A&P courses can reduce failure rates, improve retention, and enhance graduate readiness for clinical practice.

For Faculty Development: Educators must be supported to transition from lecture based delivery to active, student-centered pedagogy[3].

For Patient Safety: Improved clinical reasoning derived from applied A&P instruction contributes to safer, evidence-based nursing care[4].

For SoTL Advancement: Conceptualizing A&P pedagogy through a scholarly lens generates transferrable insights for the wider health professions. Nursing faculty can implement these approaches by converting lectures into case-based discussions, embedding simulations in laboratory or skills sessions, and integrating concept maps both as a teaching scaffold and as an assessment strategy.

CONCLUSION

Bridging the gap between A&P theory and practice is critical for producing competent, reflective, and safe nursing graduates. Through a SoTL-informed conceptual framework, this paper advocates the systematic integration of case-based

learning, simulation, and concept mapping into A&P teaching. Future empirical studies can validate and refine the framework, but its immediate value lies in guiding curriculum innovation and pedagogical reform. Future empirical research may validate this framework through quasi-experimental classroom interventions, longitudinal tracking of clinical reasoning skills, or multi-institutional comparative studies [1].

Figure

Conceptual Framework for Bridging the Theory-Practice Gap in A&P

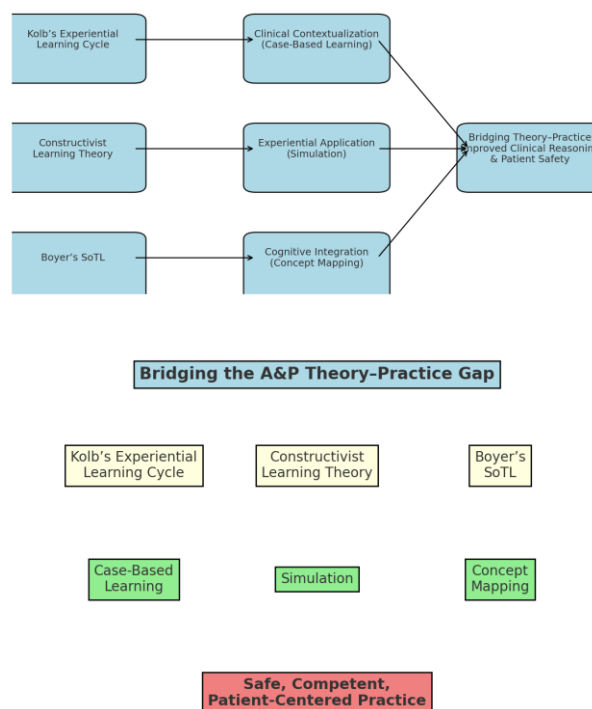


Figure 1. Conceptual Framework for Bridging the Theory–Practice Gap in A&P

Acknowledgement

The author acknowledges the valuable contributions of colleagues and mentors who provided insights and guidance throughout the conceptualization of this paper. Special thanks are extended to the support staff for their assistance in document preparation and to the institution for providing an enabling environment.

Funding Statement

The author did not receive financing for the development of this research.

Data Availability

No new data were created or analyzed in this study. Data sharing is not applicable to this article.

Conflict of Interest

The author declares that there is no conflict of interest.

REFERENCES

- [1] Benner P, Sutphen M, Leonard V, Day L. (2010). Educating nurses: A call for radical transformation. San Francisco: Jossey-Bass.
- [2] Cant R, Cooper S. (2017). Use of simulation-based learning in undergraduate nurse education: An umbrella systematic review. *Nurse Education Today*, 49, 63–71. <https://doi.org/10.1016/j.nedt.2016.11.015>
- [3] Johnston ANB, Massa H, Burnett P. (2022). Innovations in bioscience education: Digital platforms in nursing anatomy and physiology. *Nurse Education in Practice*, 62, 103401. <https://doi.org/10.1016/j.nepr.2022.103401>
- [4] Alharbi S, Topping A. (2021). The effectiveness of blended learning in teaching anatomy and physiology to nursing students: A systematic review. *Nurse Education Today*, 97, 104706. <https://doi.org/10.1016/j.nedt.2020.104706>
- [5] McVicar A, Andrew S, Kemble R. (2015). Biosciences within the pre-registration nursing curriculum: An integrative literature review. *Nurse Education Today*, 35(3), 360–377. <https://doi.org/10.1016/j.nedt.2014.10.021>
- [6] McLean SF. (2016). Case-based learning and its application in medical and health-care fields: A review of worldwide literature. *Journal of Medical Education and Curricular Development*, 3, 39–49. <https://doi.org/10.4137/JMECD.S20377>
- [7] Walker S, Dwyer T, Broadbent M, Moxham L, Sander T, Edwards K. (2016). Constructing a nursing identity within the clinical environment: The student nurse experience. *Contemporary Nurse*, 52(2–3), 160–170. <https://doi.org/10.1080/10376178.2016.1192956>
- [8] Hsu LL, Hsieh SI. (2005). Concept maps as an assessment tool in a nursing course. *Journal of Professional Nursing*, 21(3), 141–149. <https://doi.org/10.1016/j.profnurs.2005.04.011>
- [9] Morton DA, Colbert-Getz JM, St. Clair ST. (2016). Integrating active learning into large anatomy classes: Student perceptions and learning outcomes. *Anatomical Sciences Education*, 9(2), 106–114. <https://doi.org/10.1002/ase.1566>
- [10] Kolb DA. (1984). *Experiential learning: Experience as the source of learning and development*. Englewood Cliffs, NJ: Prentice Hall.
- [11] Vygotsky LS. (1978). *Mind in society: The development of higher psychological processes*. Cambridge, MA: Harvard University Press.
- [12] Boyer EL. (1990). *Scholarship reconsidered: Priorities of the professoriate*. Princeton, NJ: Princeton University Press.
- [13] O'Connor S, Jolliffe S. (2021). Virtual learning during COVID-19: Nursing students' experiences of online anatomy and physiology education. *BMC Nursing*, 20(1), 156. <https://doi.org/10.1186/s12912-021-00677-4>.