

FACULTY GUIDE **For Teaching**

Bringing Education & Service Together (BEST) Clinical Teaching Skills Curricula

Residency Conference: Outpatient Precepting

Learning objective: At the end of this session, participants will be able to:

1. List the five “microskills” of clinical teaching.
2. Teach a colleague using the microskills.
3. Give detailed and useful feedback about teaching.

Agenda:

12:30	Introduction to outpatient precepting
12:50	Practice teaching, with feedback
12:50	First resident teaches first outpatient precepting case
1:00	Resident observer fills out checklist Detailed feedback using checklist
1:05	Second resident teaches second outpatient precepting case
1:15	Resident observer fills out checklist Detailed feedback using checklist
1:20	Debriefing

CASE 1: An adult with chest pain

Information for the resident teacher

Ms. Cañadas is a 32-year-old woman who is new to your practice. She presents with chest pain but is currently pain free. You have not yet seen her. You are precepting a third-year medical student in your clinic today. You have sent the student to go see Mrs. Cañadas and report back to you. The student went to see the patient, and now has come back to present the patient to you.



CASE 1: An adult with chest pain

Information for the standardized student

Ms. Cañadas is in for an evaluation of her chest pain over the past three weeks.

- You (the student) are to begin the interaction with the preceptor by saying, “I have a patient who has severe chest pain. Do you want me to present her?”
- Case presentation will include: the patient is a 32-year-old female who is complaining of new onset chest pain. She has had five episodes of sharp midchest discomfort lasting anywhere from 10 minutes to 2 hours over the past three weeks.
- Precipitating or exacerbating events will include the information that the episodes typically occur between 7:00 and 10:00 p.m. when the patient is at home with her husband and family.
- Associated symptoms will include some shortness of breath and nausea but no radiation of the pain or palpitations.
- Family life will include the information that the family is having considerable stress at home but she seemed reluctant to discuss this further.
- PMH will include the information that her father had an MI and you forgot to ask about past medical history.
- You didn’t ask her about her sexuality or contraceptive history.
- If the resident asks what you think is going on with the patient, you say she has been having severe chest pain and you think it might be coronary artery disease.
- If the resident asks what you want to do for the patient, you say you are not sure but you wonder if you should order a treadmill study.

CASE 2: A toddler with an upper respiratory infection

Information for the resident teacher

Billy Scott is a 2-year-old boy you've seen once before in your clinic with his mom for a well baby check. His mom brings him in today with symptoms of an upper respiratory infection. You have not seen the child yet. You are precepting a third-year medical student in your clinic today. You have sent the student to go see Billy and report back to you. The student went to see the patient, and now has come back to present the patient to you.



CASE 2: A toddler with an upper respiratory infection

Information for the standardized student

Billy Scott is in for an evaluation of upper respiratory infection symptoms for the past three days.

- You (the student) are to begin the interaction with the preceptor by saying, "I just saw a toddler who has an upper respiratory infection. His mom wants us to prescribe antibiotics."
- You do not know whether the baby should get antibiotics or not.
- Case presentation will include: the patient is a 2-year-old boy who was well until three days ago, when he started to have a cough, nasal congestion, and subjective fevers.
- He no longer has fevers but mom is worried about the continuing cough.
- He is feeding well and has no diarrhea or vomiting.
- He is a little cranky but is otherwise behaving normally.
- An older sibling had similar symptoms last week.
- You forgot to ask about birth history, past medical history and family history.
- On exam, the baby is afebrile with normal vital signs. He is smiling and squealing and pulling the paper off the exam table. He has clear rhinorrhea. The rest of the exam (ears, mouth/throat, chest, heart, abdomen) is normal.
- After presenting the patient, you stop and do not volunteer an assessment or plan.
- If the resident asks what you think is going on with the patient, you are not sure but you think he has an upper respiratory infection.
- If the resident asks what you want to do for the patient, you don't know. You don't really think he needs antibiotics but the mom seems adamant about getting a prescription. You wonder what could be done instead.

Checklist for Giving Feedback on Teaching Cases: Microskills I

The Five Microskills of Clinical Teaching

1. Did your resident teacher ask you what you thought was going on with the patient, or what you'd like to do?
(**"Get a commitment"**...)

_____No _____Somewhat _____Yes

2. Did s/he then ask why you thought that?
(**"Probe for supporting evidence"**...)

_____No _____Somewhat _____Yes

3. Was the teaching material well organized?
(**"Teach general rules"**...)

_____No _____Somewhat _____Yes

4. Did s/he provide positive feedback that specified what you did right?
(**"Reinforce what was done right"**...)

_____No _____Somewhat _____Yes

5. Did s/he correct your mistakes thoroughly and accurately?
(**"Correct mistakes"**...)

_____No _____Somewhat _____Yes

Other Teaching Skills

6. Did s/he listen to you and look at you without interrupting your case presentation or dominating the discussion?

_____No _____Somewhat _____Yes

7. Did s/he ask you good "learning" questions, and solicit your questions?

_____No _____Somewhat _____Yes

8. Did s/he encourage you to bring up gaps in your knowledge base?

_____No _____Somewhat _____Yes

9. Was the session paced well without dragging out or seeming rushed?

No Somewhat Yes

10. Did the resident teacher state the goals of the teaching interaction?

No Somewhat Yes

11. Did s/he mention that the clinical topic of this case is an important learning issue for you?

No Somewhat Yes

12. Did the teacher give examples or analogies to show how this case relates to other clinical situations?

No Somewhat Yes

13. Did s/he ask helpful questions that probed your knowledge base?

No Somewhat Yes

14. Did s/he explicitly encourage further learning?

No Somewhat Yes

15. Did s/he encourage outside reading and discuss texts, articles, computer aids, consultants, or other learning resources?

No Somewhat Yes

16. Did s/he ask you to define your own learning needs and ways you would like to address them?

No Somewhat Yes