

Clinical Teaching TIPS- The One Minute Preceptor

Get a commitment:

“What do you think is going on?”

“What do you want to do next?”

-sets the learning environment; engages the learner

Probe for supporting evidence:

“What else did you consider?”

“How did you rule those things out?”

-assesses the learner’s level of knowledge and thinking process

Teach a general principle:

Can be about symptoms, physical findings, differential diagnosis, evaluation, treatment, resources, etc.

-organizes knowledge and generalizes to future situations

Reinforce what was done well:

“Your presentation was well organized and concise”

-reinforces good behaviors

Give guidance about errors or omissions:

“It is important to include cardiac risk factors in your presentation when you are presenting a case of chest pain”

-corrects mistakes; forms foundation for improvement

SNAPPS

Students at CU SOM are asked to use the SNAPP Model for learning and presenting clinical information. Please help them by using it whenever possible. Students are expected to:

Summarize the history and physical examination including laboratory and diagnostic tests

Narrow the differential diagnosis to 2-3 possibilities

Aalyze the differential diagnosis by comparing & contrasting possibilities

Probe the preceptor/ resident/ intern by asking questions about uncertainties, difficulties, etc

Plan management for patient care

Select one or more issues for self-directed learning

REMEMBER:

- Set clear goals and expectations upfront
- Revisit goals and expectations intermittently throughout your time with the learner

TIPS for Providing Feedback

- Set clear expectations up front
- Make an appointment
- Choose the Setting:
 - Private
 - Without interruptions
- Choose the Timing:
 - Change must be possible in time left
 - Learner is not distraught or distracted
- Label it FEEDBACK

DO

- ASK for self-reflection
 - Provide positive and constructive feedback
 - Comment on observable, changeable behaviors
- NOT personalities
- Be specific
 - Limit constructive feedback to 2-4 items
 - Provide suggestions for improvement

Evaluating Medical Students

- Your job is to document what you saw the student doing
- **DO NOT** compare students relative to their peers or your preset expectations
- If you did not observe a behavior select: “Insufficient Contact to Judge”
- You are NOT responsible for grading
- Be specific and provide examples where you can
- Go to chief residents, attendings, course directors or program directors when you have concerns!

Online modules on learner feedback and assessment can be found in your CU GME onboarding [modules](#).

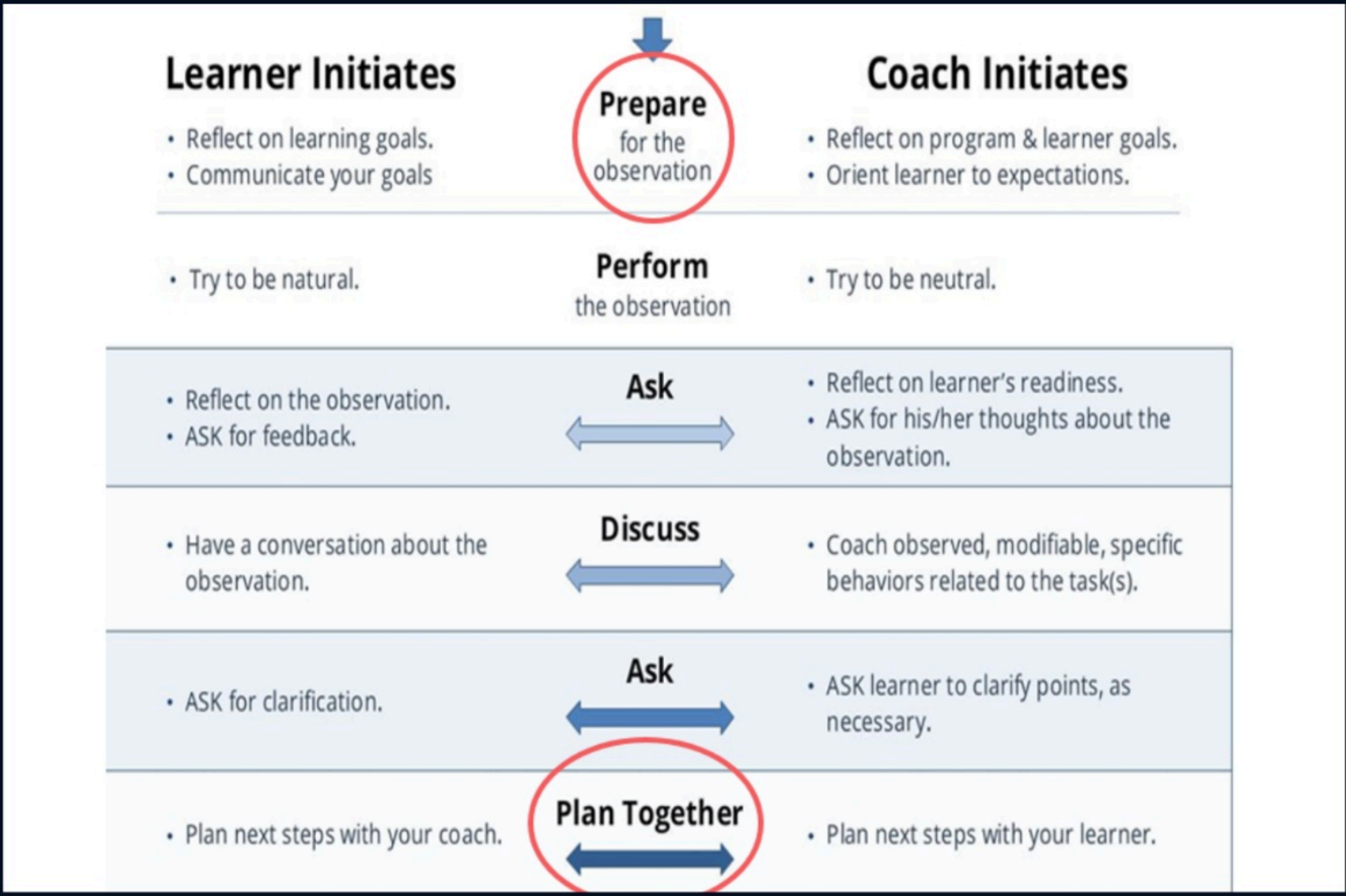
Or attend one of the Academy of Medical Educators Workshops [here](#).

Responsibilities of & resources for teaching can be found [here](#).

Including:

- Graduation competencies
- Goals and objectives for the clerkships you are teaching in
- Policies & rules about teaching, supervision and duty hours

Prepare to ADAPT Method



Debriefing in Medical Education

**“Three things
I did well...”**

**“Three things I
can work on...”**

Follow up with a plan of action