



5 SKILLS EVERY PRECEPTOR NEEDS

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This is a clinical teaching model with **five imperatives designed to keep an encounter to 5 minutes or less.** Encounters will vary with variations in topic and complexity of cases. The skills are sequenced in a particular order to increase the benefit of the encounter, even if it ends abruptly or unexpectedly.

2 PROBE FOR SUPPORTING EVIDENCE

"What are the major findings that led to your diagnosis?"

"Why did you choose that particular medication given the availability of many others?"

"What factors did you take into account when making your exercise prescription for this patient?"

"What else did you consider? Why didn't you choose it?"

4 REINFORCE WHAT WAS DONE RIGHT

"I noticed that you kept an open mind until the patient revealed her true agenda for the appointment. It was important to get to the heart of her concerns."

"When prescribing medication, you appropriately considered the age of the patient and the prolonged half-life of its active metabolites in the elderly. This will decrease the risk for falls for this patient due to oversedation."

1 GET A COMMITMENT

"What do you think is going on with this patient?"

"What laboratory tests are indicated?"

"What would you like to accomplish on this visit?"

"Why do you think this patient has been noncompliant?"

3 TEACH GENERAL RULES

Refer to solid medical references.

"I haven't encountered this condition before either.

The best dermatology references are _____ and _____. In this clinic, the best resource is (name). Our specialist consultant is (name)."

5 CORRECT MISTAKES

"When you suspect an upper respiratory infection, it is important to always assess the ears. Overlooking an otitis media may result in a needless visit to the emergency room or more extensive involvement such as infection of the mastoid bone or meningitis."

"In spite of a normal pap smear two months ago, it is important to biopsy any lesion of the cervix. Pap smears are not 100% sensitive and can sometimes be normal in cases of high grade malignancy."

REFERENCES:

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