

Preparing the Student for Your Office **W. Fred Miser, M.D.**

Precepting students in the office can be divided into three main stages:

- 1) planning (orienting, scheduling, and priming students),
- 2) teaching (diagnosing the patient and student, using the one-minute preceptor method of teaching, role modeling, and providing feedback), and
- 3) reflecting on the teaching encounter.

This article focuses on the planning phase of precepting.

While in the Army, I was often reminded that "prior planning prevents poor performance." You may have all of the characteristics of an outstanding teacher, yet fail to provide the optimal learning opportunities for students if you do not put extra effort up front before they begin seeing patients in your office. Most students, especially those in their third year of training, have spent the majority of their office time in the inpatient setting, and may be unfamiliar with the nuances of ambulatory medicine. Preparing them for the transition to seeing patients in the office will make for an improved experience and more efficient use of your time.

The first step in preparing students for your office is to get to know them. Having a welcome breakfast on the first day, before the rigors of the office begins, is a good icebreaker, as well as a good recruitment tool. Explore their interests, why they chose medicine, and how they are doing in school. Share with them a bit about yourself (e.g., why you chose family medicine) and your practice (e.g., unique characteristics). The medical school should have sent you copies of the goals and objectives for the rotation (if not, get a copy). Review these with the students, identify their specific learning needs, discover what they want to work on and develop an educational contract with them. Review with them how they will be evaluated and how you will provide feedback to them.

After you have gotten to know the students, orient them to your office. You or someone in your office should introduce them to your key office personnel. Give them a tour of your office and exam rooms and review with them any pertinent standard operating procedures. Provide them with your own philosophy of patient care and define their specific role in the office.

Outline your own expectations. How many patients do you want them to see each day? How much time should they spend with each patient? What parts of the physical exam should they perform, and which should they wait for you to complete? Do you want them to write clinical notes? If so, what content and format do you want them to follow? Teach them how to review your medical records efficiently (i.e., where can they find the latest lab, consultations, etc).

This is also a good time to provide guidelines on how you want them to orally present patients to you. How much time do you want them to spend in presenting, what do you want them to include and in what order? An example of guidelines for the case presentation that you may want to provide to them is included at the end of this article.

One of the challenges in teaching students in the office is being able to provide them with an excellent hands-on experience while not adversely impacting on your productivity. Studies have shown that most clinicians see about the same number of patients each day while precepting; it just takes 30-60 minutes longer each day to accomplish this. How you schedule patients and students can minimize this impact.

At the beginning of the rotation, you may want to have the students shadow you from patient to patient as you demonstrate your approach to patient care. Role modeling is a vital part of your teaching. However, adult learners want to use what they learn soon after they learn it, this means they need to see patients by themselves. An example of one method for scheduling is as follows:

8 - 8:15 a.m.

Student sees patient #1; preceptor sees patient #2

8:15 - 8:30 a.m.

Patient #1 discussed and seen by student and preceptor

8:30 - 8:45 a.m.

Students charts on patient #1; preceptor sees patient #3

8:45 - 9 a.m.

Student sees patient #4; preceptor sees patient #5

9 - 9:15 a.m.

Patient #4 discussed and seen by student and preceptor

Review the schedule for the day and select those patients that will provide the best learning experience for the students. Provide a mixture of patients with acute and chronic problems.

If you grew up on a farm, you may remember the water pump and the effort it took to prime it before water gushed forth. Likewise, priming students prepares them for the patient encounters and provides background and direction for the visits. There are various techniques for priming. For patients presenting with a new problem, ask the students about potential causes for the complaint, and what signs, symptoms and risk factors they should look for. These questions allow you to ascertain the students' abilities while also equipping them with the information necessary to promptly recognize common conditions. For patients presenting for a follow-up visit (e.g., hypertension), ask the students about potential complications of the disease and what important preventive health measures they should address. These questions empower the student to recognize the complications of a chronic disease and to focus on health maintenance and prevention. Another useful method for priming students is to review you next day's schedule with them, identify patients that they may see and give them selected reading assignments.

Most of all, remember to have fun. Properly preparing students for the patient encounter maximizes your teaching experience.