



MCG MEDICAL EDUCATOR MINUTE

#2

Selecting Patients and Preparing Learners

BACKGROUND

Patients of all backgrounds and conditions have the potential to teach learners. Selecting patients intentionally and preparing learners accordingly will maximize learning and reduce disruption to clinical work flow.

SUGGESTIONS

- Inform patients that you have learners working with you and ensure patient is willing to work with learner.
 - Patients may express preference for a learner being present or not.
 - In circumstances where patients have less autonomy in deciding on learner presence, then working toward a workable solution is recommended.
- Consider the complexity of a patient's history or problem when selecting for a learner.
- For learners relatively new to a rotation, procedure, or condition, consider patients with
 - Typical or common presentation to assist learners in recognizing common patterns, and/or
 - Less complex presentation to minimize overloading learner
- If patient's problem or background is complicated,
 - Focus learner to attend to 1-2 of orient patient's problems or symptoms.
 - E.g., Instead of taking a full history, learner could be instructed to focus on one of them - diabetes
 - E.g., Focus on a different aspect of a condition across an outpatient day - "diabetes day"
 - 1st encounter focus on medications and compliance, 2nd patient may help learner focus on education,
 - 3rd may delve into diet. By the afternoon, the learner may have diabetes down and can tackle some other associated disease processes.
 - Prepare learner with a quick summary of the disease and discuss symptoms they should look for and pertinent physical findings they might see. This will start helping the student make connections.
- If a patient is likely to talk at length or provide details extraneous to the present problem, prompt your learner to practice redirecting patient and to gather needed information within a certain amount of time.
- If you encounter a difficult situation (angry patient, death, medicine prescription error), it can be helpful to have a debriefing after the encounter. Ask the student how they think

the encounter went. Ask for feedback on how you did. What would the student have done differently?

- At times, patients may be disrespectful of learners (harassment, biases, sexism), teachers should intervene early and quickly in these situations. “Student X is a member of my treatment team and I appreciate you treating them respectfully.)

WANT MORE?

[Fostering a Positive Academic Environment](#)
[Orienting Learners to Your Practice](#)

REFERENCES

- Alguire, P. et al, Teaching in Your Office (ACP Teaching Medicine Series) 2nd Ed., chapter 4

