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RESIDENTS AS TEACHERS

Teaching Toolbox: Microskills

LEARNING OBJECTIVES

- Understand the theory behind the "One Minute Preceptor OMP" infrastructure for teaching students
- Know the 5-7 microskills of the OMP
- Know how to use the microskills to diagnose and teach medical students
- Use this model to format teaching encounters in all clinical settings

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ONE MINUTE PRECEPTOR MODEL

- Get a commitment
- Probe for supporting evidence
- Teach the general rule
- Tell what was done right
- Tell what needed to be improved upon



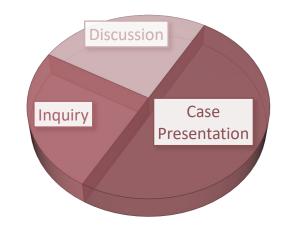
Neher JO et al. J. Am. Board Fam. Pract. 1992;5:419.424



TEACHER REASONING AND MICROSKILLS

- Case presentation = teacher diagnoses the patient
- Inquiry = microskills1 and 2 (*diagnosing the learner*)
- Discussion = microskills3, 4, and 5 (*teaching and giving feedback*)

CLINICAL ENCOUNTERS





ONE MINUTE PRECEPTOR PLUS

- Assess prior knowledge
 - 1. Get a commitment
 - 2. Probe for supporting evidence
 - 3. Teach the general rule
 - 4. Reinforce what was done right
 - 5. Identify problem areas and strategies for improvement
- Encourage Reflection
- Promote Self-Directed Learning



ASSESS PRIOR KNOWLEDGE AND SET GOALS

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- Assess learner's knowledge and prior experience
 - "Have you ever seen a patient like this before?"
 - "What have you learned about....?"
 - "What clinical rotations have you done in the past?"
- Establish the learner's goals for the encounter
 - "For this patient it is important to focus on"

If you don't have an objective, bad outcomes can happen.



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GET A COMMITMENT

- Why?
 - Encourages learner to process further and problem solve
- Examples:
 - What do you think is going on here?
 - What would you like to do next?
- Beware –learner commitment phobia
 - Students are often afraid to make a commitment because they don't want to be wrong

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• Encourage commitments won't affect their grade

PROBE FOR SUPPORTING EVIDENCE

- Why?
 - Helps you to assess the learners knowledge and thinking process

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- Examples:
 - Why is this your diagnosis?
 - Why did you choose that treatment?
- Encourage the learner to think out loud
- Push the envelope with "what if..."

TEACH THE GENERAL RULE

- Symptoms, treatment options, resources to look up information
- Why?
 - Allows learning to be more easily transferred to other situations
- Example:
 - Remember 10-15% people are carriers of strep, which can lead to false positive strep tests

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• Don't provide too much information, serves as appetizer for self directed learning

TELL WHAT WAS DONE RIGHT

- Describe specific behaviors and why they were good
- Why?
 - Behaviors that are reinforced will be more firmly established
- Example:
 - I liked that your differential took into account the patient's age, recent exposures, & symptoms

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TELL WHAT NEEDS IMPROVEMENT

- Describe what was wrong (be specific), what the consequence might be, and how to correct it for the future
- Why?
 - Corrects mistakes and forms foundation for improvement
- Example:
 - During the ear exam the patient seemed uncomfortable. Let's go over holding the otoscope

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ENCOURAGE REFLECTION

- Ask the student to consider how the outcome of their performance can be applied in the future.
- Why?
 - If reflection occurs, it is likely to be applied
- Example:
 - Next time I will ask the mother to help me when I examine the ear.



THE 7 "W" MICROSKILLS OF TEACHING

- 1. What do you know? → Assess Prior Knowledge
- 2. What is going on? \rightarrow Get a commitment
- 3. Why do you think that? \rightarrow Probe for Evidence/Facts
- 4. When I see a patient like this \rightarrow Teach the general rule

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- 5. Warm and Fuzzy \rightarrow Provide positive feedback
- 6. Whoops! \rightarrow Identify mistakes to correct
- 7. What will you do next time? \rightarrow Reflect

NEXT STEPS

- Thank you for studying this unit
- Now is time for you to complete the assessment which follows
- You are one step closer to becoming a KSOM certified resident teacher!

