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PRACTICE

# Teaching Medical Students Consulting Skills

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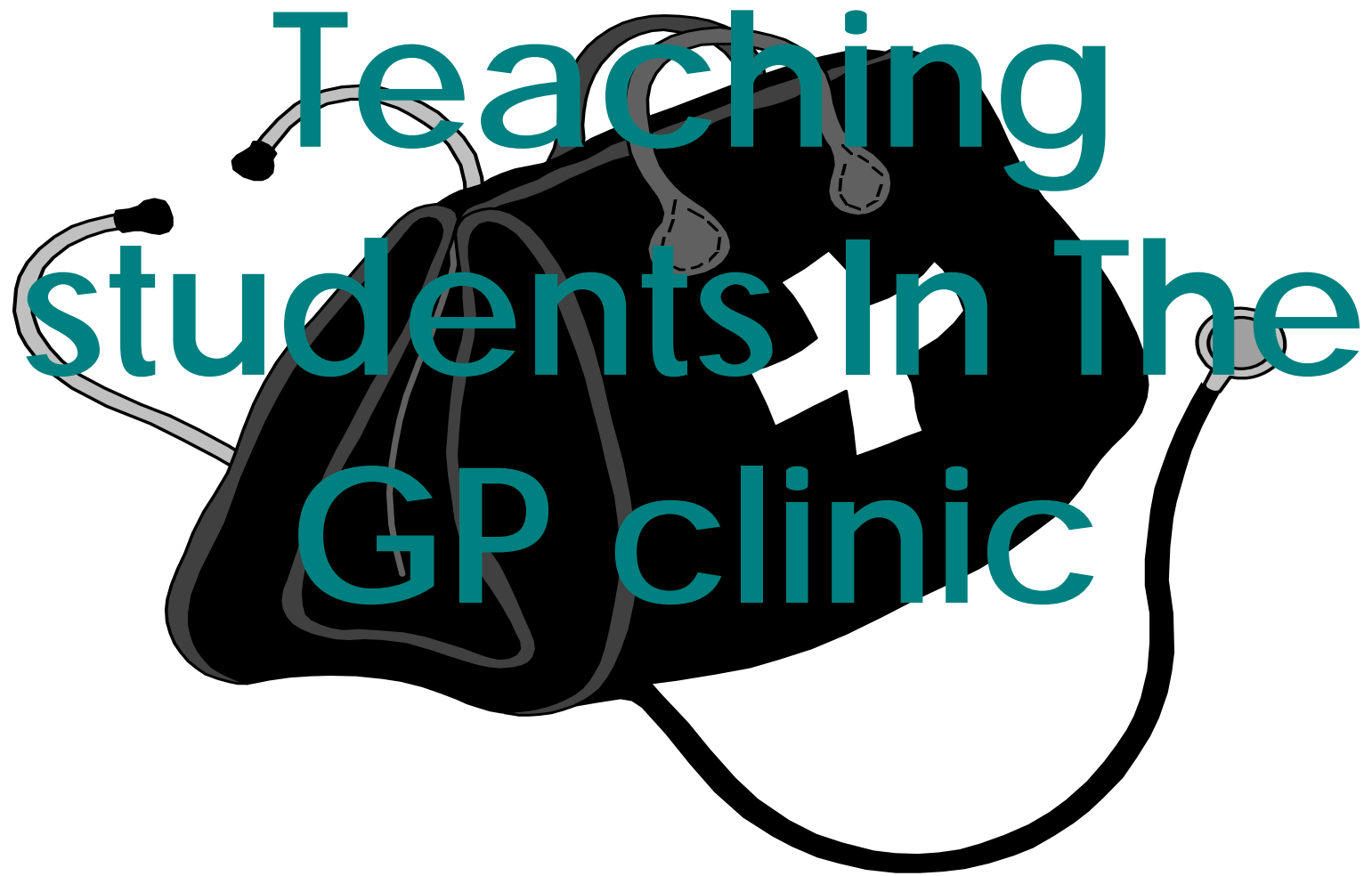












Teaching  
students in the  
GP clinic



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**The beginning of education lies in imitation, wherefore pick someone worth imitating.**

Martin H. Fischer, MD 1940

**Here I am not so much striving to teach, as I am encouraging you to learn.**

Peter Mere Latham, MD 1850



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*To teach is to touch a life  
forever.* John Chamberlin, MD, FAAP, FACP



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# It's all in a day's work! A GP's diary

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cuts, bruises, colds, check ups,  
births, deaths, contraception, hayfever,  
nerves, bedwetting, drug abuse,  
loneliness, sore throats, tiredness,  
immunisations, repeat  
prescriptions etc etc.....



# Common comments from GP teachers

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- 'we have to make a living, we are running a business'...
- 'having students slow me down'
- 'I don't know what to teach'
- 'Patients don't like to see a student.... Sitting in'...



- **You don't need to 'teach'**  
**Help them to learn**
- **All Students CAN do more**
- **All Students WILL do more**

# Effective clinical teacher

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- Communicating expectations
- Stimulating interest enthusiastically
- Interacting skillfully with patients
- Involve the learner in the teaching process
- Role modelling the desired behaviours

# Framing the Visit

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- Time limit
- How much to do (Hx and PE or just Hx)
- Goal for presentation
  - I want a 3 minute presentation vs. I want a 1 minute consult presentation



# Helping learners focus

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- Ask the learner before they go in the room what they will focus on
- Ask them a question to get them thinking about a unifying diagnosis
- If you let them “get it”
  - They’ll learn- “aha” moments are priceless
  - You’ll learn about their thought process
  - They will see you as a true teacher and role model

# One Minute Preceptor

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- Get a commitment
  - What do you think is going on? What do you want to do?
- Probe for supporting evidence
  - What led you to that conclusion? What else did you consider?
- Teach general rules
- Tell them what they did right and the effect it had
- Correct mistakes
  - Next time consider trying...

# Efficiency strategies used by GP teachers

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- Have the student write the note, provide health education
- Summarize the patient's history for the student
- Have the student present in front of the patient
- Tell the student how far to go with the PE
- Give the student specific feedback
- Set limited goals for the student prior to seeing the patient

# Priming the Learner: Uncomplicated Patients

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- **Uncomplicated patient for “routine visit”**
  - What screening or preventive issues are important?
- **Common problem like “fatigue”:**
  - Let’s generate some differential diagnoses
  - What symptoms and signs should we look for?
  - What tests might help us?
  - Here is a short resource.



# Priming the Learner: Complicated Patients

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- **Complicated patient with urgent issue**
  - Differential in setting of chronic issues
  - How will we decide if this patient needs to be hospitalized for this problem?
- **Complicated patient with multiple issues**
  - Please focus just on diabetes management. What complications/problems should we worry about?

# Make learning relevant and fun

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- Should always be learner-centered
  - Literature “review”
  - Reflection on what went well/wrong
  - Teach me something
  - record review
  - Goal of the day

# Do's and Don'ts

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- Do involve them
- Do encourage them
- Do keep them busy
- Do challenge them
- Do make their placement a positive experience

# Don'ts

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- Don't make them a wall flower
- Don't bore them
- Don't humiliate them
- Don't complain to them about family practice
- Don't expect them all to love family practice



# acknowledgement

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**Teaching in your office:  
a guide to instructing medical  
students and residents**

**Alguire, Dewitt, Pinsky, Ferenchick  
2001**



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***Thank you***  
***Come and visit us***