#### **OBJECTIVES – SMALL GROUPS**

# **Role Playing Exercises: Focusing on Objectives**

#### **Large Group Demonstration**

**SCENARIO: Inpatient wards** 

**RESIDENT:** You are a senior resident on the inpatient service; it is 7:00am. You are getting your team organized for rounds and have asked the new 3<sup>rd</sup> year medical student to "get the vitals" on your patients so that you can present these patients to the attending. You hand the student a list of 20 patients and ask them to meet back up by 7:30am. At 7:30am, the student hands you a list of vital signs for only two patients.

**STUDENT:** You are a 3<sup>rd</sup> year medical student or early clinical NP student starting on an inpatient service; it's your first clinical rotation. You have been taught how to take a blood pressure, temperature, pulse, respiratory rate, but have only done this a handful of times. You go to each patient's room to take these measurements, but it is taking a long time to get this done. You do not get all the vitals in time.

- 1. Preceptor should do a needs assessment with the student.
- 2. Break from the role-play. Discuss with the entire group the learner's needs.
- 3. Write some objectives based on those needs.
- 4. Prioritize: Which objectives will you address in the next 5 minutes?
- 5. Ask the group how they would get collaboration with the learner.

#### **Case Summary:**

- Case 1: A student needs to get a sexual history from a 17-year-old patient whose parents are in the room.
- Case 2: A disorganized and overwhelmed intern presents a patient on rounds.
- Case 3: An inexperienced learner wants to talk about a patient with a history of substance abuse who now has thrush, night sweats, and weight loss.
- Case 4: A rambunctious 3-year-old disrupts a visit with student and mother.
- Case 5: Learner has trouble narrowing down diagnostic possibilities.

### **Cases for Small Group Role Play Focusing on Objectives**

# <u>Case 1: A student needs to get a sexual history from a 17-year-old patient whose parents are in the room</u>

**Preceptor**: You have a student working with you. S/he has been interviewing a 17- year-old young woman who came in with abdominal pain, fever and a vaginal discharge. The patient was brought in by her parents, both of whom are in the room with the student.

**Learner**: You are interviewing a 17-year-old patient with abdominal pain and fever. Her parents are both in the room. You want to ask her about her sexual history, but you don't know how to ask the parents to leave the room. You find your preceptor for advice.

#### **Questions for Discussion:**

What were the learner's needs?

Develop some SMART learning objectives.

Prioritize: Which objectives will be addressed in the next 5-15 minutes? Over the next week?

Collaborate: Try to get buy in with the learner.

### Case 2: A disorganized and overwhelmed intern presents a patient on rounds.

**Preceptor**: This is your first day as an attending physician rounding with the resident team. Your predecessor told you that the team has been swamped and, while the supervising resident seems to be doing a good job, s/he has had little time to observe the interns due to the volume. One of the interns has just presented a patient to you. The presentation was long and very disorganized. It is clear to you that the intern is worried about the patient but based on his/her presentation, you have no idea why! You have a few minutes to explore this further.

Learner: You are a medical intern who has just presented one of your patients to the new attending physician. In your one week on the service, you have had a hard time organizing your time and staying in control. It has been so very busy, the team is full, and there has been pressure to get patients discharged as quickly as possible. Your supervising resident is working harder than anyone else and has had little time to spend with you). You really want help with this patient, but the attending doesn't look like he/she is following your presentation.

#### **Questions for Discussion:**

What were the learner's needs?

Develop some learning objectives.

Prioritize: Which objectives will be addressed in the next 5-15 minutes? Over the next week? Collaborate: Try to get buy in with the learner.

# Case 3: An inexperienced learner wants to talk about a patient with a history of substance abuse who now has thrush, night sweats, and weight loss.

**Preceptor**: You were observing an inexperienced learner take a history from a patient that suggested possible HIV infection. The student skipped over the risk factor history, and after a brief exam, indicated that s/he would like to step out into the hall with you. S/he looks rather anxious.

**Learner**: You are early in your training. You are with your preceptor, seeing a 20-year-old male with weight loss, thrush, anxiety, and needle tracks on both arms. You're not certain where to start. You've never talked to a patient about risk factors for HIV, and you don't want to do or say anything that might unnecessarily upset him. Maybe this could all be explained by something much simpler than HIV. You ask your preceptor to step outside into the hall.

#### **Questions for Discussion:**

What were the learner's needs?

Develop some learning objectives.

Prioritize: Which objectives will be addressed in the next 5-15 minutes? Over the next week?

Collaborate: Try to get buy in with the intern.

## Case 4: A rambunctious 3-year-old disrupts a visit with student and mother

**Preceptor**: You are observing an inexperienced learner interacting with the mother of a very rambunctious 3-year-old. It is utter chaos in the room. You suggest that the two of you should step out of the room for a few minutes to discuss your observations.

Learner: You are an inexperienced learner. You don't have much experience with young children. Your preceptor watched you trying to get a history from the mother. You are very frustrated and couldn't get anything done because the child wouldn't sit still. He ran around the room, climbing on the mother and the exam table and grabbing things including the ophthalmoscope and blood pressure cuff. At one point he pumped up the cuff so much you thought it would break. You feel that this child probably doesn't get much discipline at home; otherwise he would behave better. The mother is just sitting there and not telling the child to sit still.

#### **Questions for Discussion:**

What were the learner's needs?

Develop some learning objectives.

Prioritize: Which objectives will be addressed in the next 5-15 minutes? Over the next week?

Collaborate: Try to get buy in with the student.

#### Case 5: Learner has trouble narrowing down diagnostic possibilities

**Preceptor**: You have been working with an inexperienced learner for the past month who is nice, hard working, but generates inappropriate differential diagnoses. They're not logically ordered, contain rare diseases, and diseases not commonly presenting in a way consistent with the patient's symptoms. The learner just gave you a well-organized presentation with all the pertinent facts of the case. It strongly suggests that the patient has acute cholecystitis. You are astounded at the breadth of his/her differential diagnosis.

After the learner suggested a very broad list of possible diagnoses and tests to rule them out, you ask for a few minutes to discuss what you have observed.

Learner: You are a hard-working learner who is a bit anxious because no matter how hard you try, and no matter how long a differential diagnosis you generate, your preceptors are always critical. You have examined a 40-year-old mother of four with right upper quadrant abdominal pain that has been present for the last 2 hours. She has a fever and is nauseous but has not vomited. She was previously in good health except that over the last few months, she would get occasional RUQ pain that would radiate to her right scapula. The episodes were often triggered by eating fried calamari. Your differential includes but is not limited to: appendicitis, volvulus, SMA syndrome, gall bladder disease, hepatitis, right lower lobe pneumonia, heart attack, and acute intermittent porphyria.

When asked to prioritize your differential diagnosis you really are unable to do it. Everything is possible. In fact, you saw a patient once who turned out to have a heart attack when the only symptom she had was abdominal discomfort. You would like to test for all of these conditions.

#### **Questions for Discussion:**

What were the learner's needs?

Develop some learning objectives.

Prioritize: Which objectives will be addressed in the next 5-15 minutes? Over the next week?

Collaborate: Try to get buy in with the student.