



## ONE MINUTE PRECEPTOR

### SMALL GROUP PRACTICE

#### INSTRUCTIONS

1. *Participants volunteer to play the role of the learner and preceptor.*
2. *Preceptor picks the case.*
3. *The facilitator gives the script for that case to the learner.*
4. *Learner reads case presentation.*
5. *Participant in preceptor role teaches using One Minute Preceptor model. You will have no more than 5 minutes to finish teaching.*
6. *Preceptor can call for "time out" for help at any time.*
7. *Group will debrief the role play.*
  - a. *Did the teacher cover the steps in the one minute preceptor model?*
  - b. *What were the learner needs?*
  - c. *What seemed to work well?*
  - d. *What could have been improved?*

#### CASE 1:

*A 2 year old child with a bad cough, seen by a 4<sup>th</sup> year Medical Student*

##### **Learner Role:**

You are a 4<sup>th</sup> year Medical student in family medicine. You are very nervous about your role and have a history of disorganization in your problem solving. Your medical knowledge is excellent.

##### **Preceptor Role:**

Your learner is new and obviously nervous.

#### CASE 2:

*A 42 year old man with chest pain, seen by a 2nd year Resident*

##### **Learner Role:**

You are mid-way through your training and have a great deal of confidence. You have been told that you are prone to premature closure with respect to diagnosis, but you are sometimes quite sure of the diagnosis.

##### **Preceptor Role:**

You have worked with this Resident before and while the learner is very confident, you know that s/he is prone to premature closure when generating a differential diagnosis.

**CASE 3:**

***A 62 year old woman with abdominal pain and nausea 2 days after admission for diverticulitis, seen by an Intern***

**Learner Role:**

You are half way through your first year. You have been up all night with admissions. You saw a patient at 4am who has been in the hospital for 2 days with diverticulitis. The patient was uncomfortable, so you ordered morphine and Zofran. Later that night you were approached by the patient's nurse who stated that she "... doesn't like how the patient looks". You interrupt her and state that you have already evaluated her and have written some orders. You've got two more patients to admit and will come as soon as you can.

**Preceptor Role:**

It is 6am. You are a Hospitalist in-house. You have worked with this Intern before; s/he seems knowledgeable, but you have noticed that s/he has a hard time on night shifts. You have also just received a call from the charge nurse who is not comfortable with the Intern's assessment of this patient. She tells you the patient is tachycardic, appears pale and diaphoretic. Temp is 102 degrees F. You come to see the patient and page the Intern to meet you on the floor and ask him/her to present the patient.

**CASE 4:**

***An 18 year old boy with low energy and insomnia seen in an office setting by an Intern***

**Learner Role:**

You are an Intern doing an elective in an office setting. You are pretty confident in your biomedical skills and also pride yourself on your knack for talking to teens. However, you do lack some skill at systematic assessment for substance abuse and depression.

**Preceptor Role:**

You have a learner new to your clinic that has just seen an adolescent for insomnia. You suspect that s/he may not have a good grasp of the types of problems typical of this patient population.