# **Teaching Students in the Busy Clinic**

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## Tradition

Many practices use the time-honored method of teaching students that consists of:

Student + Patient → Student + Doctor → Student + Doctor + Patient → Follow up discussion

This method has a lot of merits, but can cost time. How can the student receive similar educational value while maintaining a more timely schedule?

## **During the Actual Visit**

There are clearly a variety of ways to conduct a patient visit in a way that is both meaningful to the student and time effective. Here are some possible techniques:

- $\checkmark$  Allow the student to choose which patients to see
- ✓ Have the student do the physical exam
- ✓ If the preceptor knows the patient, focus the visit by selecting a topic for the student to talk to the patient about
- ✓ Have the student present treatment options in front of the patient
- ✓ Have the student work up a longer patient while the doctor sees two shorter ones
- ✓ Student observe the doctor carrying out PCC techniques
- \* Give student feedback immediately so that he or she can apply it to the next patient

## **Extension of Visit**

By giving students an opportunity to follow up with patients after a visit, the provider is able to catch up in the clinic and the student is able to get more of a perspective on the full care of a patient. Some suggestions for extending the visit:

- ✓ Write a consult letter
- ✓ Put together an information page for the patient
- ✓ Interpret incoming labs
- ✓ Follow up via phone with patient or consulting physician
- \* Follow up with patients after being on call or after deliveries

## Outside of the standard visit

Students can gain a wealth of knowledge outside of the office. Depending on the clinic's location and accessibility to other providers, a variety of learning experiences can take place away from the primary preceptor:

- ✓ Nursing home rounds
- ✓ Home visits
- ✓ Procedure clinics

- ✓ Triage
- ✓ Front desk check in to learn the procedures of the clinic
- ✓ Entire process of hospital admission with a patient
- ✓ Riding with an EMT
- ✓ Specific other visits reservation or special clinic
- \* Spend time with a lab technician
- \* Have students go on home visits early on to familiarize them with population and divide the home visits into half days

#### Various other time saving devices

There are those times when a clinic has come to fall so far behind that it is simply a matter of catch up. Here are some techniques for those times:

- $\checkmark$  Learn about coding at the end of the day, look at what gets notes for coding
- ✓ Research a problem seen in clinic
- ✓ Explain something (if the preceptor is confident in the student's ability) to the patient about health maintenance
- ✓ Dictate and transcribe a patient the student has seen during the day to learn how a dictation would sound to a transcriptionist
- \* Utilize the variety of healthcare providers available (social workers, nurses, public health workers) to give the student a more in-depth understanding of healthcare
- \* Rather than seeing patients all day every day, students might benefit from time for focused reading on a topic/disease that they have seen and then present an informal summary of the reading to one of the docs to be followed with discussion

#### **Final Comments**

The most successful strategy involves being transparent with the student. "This is stressful for me, I need to get the work done, we need to do something different, but I want it to have some value for you." Or, "I'm really behind. Will you help me by…" Many students are sensitive to feeling like a burden in the clinic. In addition to feeling the importance of learning what you have to teach, some students have ideas of time-saving strategies, which may further incorporate their interests.

\* Comments from students via the online clerkship evaluation