

SUMMARY POINTS – CLINICAL OBSERVATIONS 3/21

Range of specialties – Peds, Surgery, EM, FM, Geriatrics and Primary care, Pain Management, PM&R, ICU, Family Meeting, Oncology

What students most appreciated: 1) shared decision-making (8); 2) structural factors such as control over scheduling (5) and skillful use of residents/med students; 3) treating the whole person – placing patient in the context of their lived experience and social circumstances (5); 4) balance between efficiency and connection/caring (3); 5) patient-centered – doing what was needed in every clinical situation (compassion-in-action); showing interest in person of the patient

Qualities most appreciated: being unhurried (13) and calm/relaxed (12); caring, compassionate, empathic (13); also reassuring (5); confident, firm (5); respectful (5)

Skills most appreciated: redirect without interrupting; clear explanations/education (5), summarizing, asking about pt goals/pt opinions, asking personal questions, ; answer all questions; set priorities; communicating honestly/not sugarcoating (9); nonverbals (tone of voice, touch)

Student strengths: Attentive to specific details – behaviors and speech that conveyed these qualities; paid attention to clinic flow and how that affected physician behavior

No major surprises, but it's nice to see that attitudes and skills emphasized in CF and AoD actually manifest in the real world and have real-world positive outcomes for patients and physicians

Some specialty stereotype busting – interventional radiologists, surgeons can be humanistic too!

Students didn't always choose role models from their own intended specialties, which I really respected because it meant they were eager to learn from excellent doctoring, regardless of specialty