

DIRECT OBSERVATION SELF ASSESSMENT FORM

The purpose of this self-assessment by video review is to help identify areas of potential personal growth and to develop personalized learning goals for further honing your clinical skills. Reminder – the video review is NOT intended to review or appeal your score; requests to review your score should be made immediately after the exam when you receive verbal feedback from your standardized patient.

Before your review: You must [book a time](#) to review your video in the Morchand Center. It may be helpful to bring the materials that your clerkship director provided to prepare for the Direct Observation (e.g. student expectations, orientation materials) with you to your video review session.

During your review: Use the prompts below to help in your self-assessment as you review your video. In the blank spaces below, make note of what you did well and what you could improve upon. The more specific and detailed you can be, the better!

After your review: If your clerkship director has required that you review your video (e.g. if you did not meet competency standards), please email a copy of this form to your clerkship director. If you have chosen to review your video, you may still wish to send a copy of this form to your clerkship director so that they may help you debrief and provide tips for further honing your clinical skills.

Important: The domains below represent some best practices for history-taking and physical exam. They are meant to guide you in your video review and to help advance your clinical skills. They are NOT items from the Direct Observation checklist used to calculate your score.

DIRECT OBSERVATION – HISTORY TAKING SKILLS	
INFORMATION GATHERING	
<ul style="list-style-type: none"> • Clustered or multiple, linked questions <i>Asks one question at a time.</i> 	
<ul style="list-style-type: none"> • Leading questions <i>Avoids questions that suggest “the right answer.” Leading questions make an assumption about something you did not say.</i> 	
<ul style="list-style-type: none"> • Open/Closed balance <i>Commences inquiry about a new domain with an open ended question: e.g. “What is your diet like?” which can be followed by closed ended questions to clarify an issue: e.g. “Do you eat lots of whole grains?”</i> 	
<ul style="list-style-type: none"> • Jargon <i>Avoid medical jargon or complicated words or immediately clarify what is meant. Explanations offer appropriate amount of helpful information.</i> 	

HYPOTHESIS DRIVEN INTERVIEWING

- Organized approach
- Asked questions around a specific differential
- If applicable: Did not “close early” (i.e. decide upon a diagnosis and ignore other possibilities)
- If applicable: Asked relevant family history, social history questions
- If applicable: Did you get the top item in differential? Why/why not?

COMMUNICATION

- Respectful?
- Empathy statements (with authentic affect)
- Interruptions?
- Rushing?
- Use of “OK” or “good” or other filler word after eliciting each piece of info?
- Body Language
- Eye contact
- Listened to patient

DIRECT OBSERVATION – PHYSICAL EXAM (PE) SKILLS

Performed appropriate PE maneuvers based on objectives of specific DO and/or based on differential diagnosis (if applicable)

Pay particular attention to:

- Efficiency of exam
- Flow/order of exam
- Facility and ease of performing maneuvers
- Critical missed items
- Problems with technique for specific maneuver
- If bilateral maneuver, did you do both sides?
- Did you examine over the gown?
- Maneuver(s) performed in correct anatomic location?
- Patient comfort
- Use of draping
- Hand washing

COMMENTS: