

# Introduction to the Clerkship Direct Observations of History Taking and Physical Examination Skills

*Academic Year 2024-2025*

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## Introduction

Direct Observations (DOs) in the clerkships are designed to provide you with opportunities to demonstrate your history taking and physical examination skills in an observed setting. You are also expected to demonstrate important interpersonal skills related to history taking and physical examination in any patient encounter. The ultimate goal of these exercises is to provide you with formative and summative feedback on these skills identified by the clerkship director as critical to their particular field/discipline. Feedback is critical in every stage of development for a physician and we encourage you to use this chance to hone your clinical skills and also your ability to receive feedback thoughtfully.

## General Information

- All encounters will occur at the Morchand Center on the 13th floor of Annenberg.
- All encounters are in-person with standardized patients (SPs) and/or part-task simulators.
  - You should treat all encounters with standardized patients (SPs) with the same respect, empathy, and concern that you would have with real patients.
- We expect professional behavior with the staff in the Morchand Center.
- Consumption of any candy, food, or gum in the Morchand Center is strictly prohibited.
- You will receive email notifications of the time and date of your DO from the Clerkship Coordinator.
  - Time slot assignments may change. Please check your email frequently.
  - There will be NO RESCHEDULING of late arrivals. You must arrive at your designated arrival time.
- Masking guidelines are aligned with [Mount Sinai Health System Guidelines](#) for the hospital/clinical setting.

## What to Expect at the Morchand Center

### *Prior to Arrival at the Morchand*

- You will receive access to an ORIENTATION VIDEO shortly before the program.
  - The orientation video should be watched, in full, prior to your assigned arrival time.
  - Linked for review, at the end of the video, is the ISMMS Academic Integrity Policy.
  - As this policy governs all assessments, a digital honor code attestation is no longer required.

### *Orientation*

- The Proctor will meet you for your ON-SITE orientation in the location indicated in the email.
- Please give the Proctor your full attention during orientation (no cell phone usage, etc.).
- The Proctor will also be providing you with a letter badge to be worn outside of your coat. Make sure your letter badge can be clearly seen at all times.
- Wear your white coat and bring a pen.

- The diagnostic tools you are required to bring depends on the clerkship DO as indicated below.
  - Ambulatory Care-Geriatrics: Stethoscope
  - Inpatient Medicine: Stethoscope
  - Neurology: None
  - Obstetrics and Gynecology: None
  - Pediatrics: None
  - Psychiatry: None
  - Surgery-Anesthesiology: None
- You will be provided clipboards and paper in case you want to take notes. Any other necessary equipment to complete any of the physical examination tasks (including Snellen card and access to a clock with seconds hand) will also be provided by the Morchand Center.

#### *Exam Room Set-Up*

- Upon arrival at the Morchand Center, your personal items, textbooks, study materials, phones, and smart watches with audio or video recording capabilities will be safely stored for you.
- When the encounters are over you will take all your belongings with you.
- Both of your DO encounters will be captured via the audio/visual equipment inside the exam room.
- DO NOT CLICK anything on the computers outside of your assigned exam room unless specifically told to do so by the Proctor. Doing otherwise will cause technical difficulties and significant delays.
- We are accommodating camera angles, so please sit on the stool provided and DO NOT MOVE it around.
- There is no write-up, so you do not have to take notes. If you do take notes you must leave them in the room at the end of your encounters (EXCEPTION: Medicine DO has write-up, please see instructions at end of Medicine Direct Observations Document)

#### *Format and Timing of Encounters*

- 10-minute encounter with SP (or part-task simulator if applicable).
  - You will receive a 5-minute warning prior to the end of the encounter.
- 15-minute waiting period while SP completes checklist.
- 10-minute in-person feedback with SP.
  - You will receive a 2-minute warning prior to the end of the feedback session.
- You will complete the cycle above for both the history taking and physical examination portions of your DO, with the exception of Pediatrics.

#### *Feedback Format*

- After each encounter, the SP will review your video and complete a paper checklist prior to delivering feedback.
- During feedback, the SP will meet with you to discuss concrete skills that were expected of you as well as their experience of empathy, concern, and respect from the perspective of a patient.
- For any discrepancy in the SP feedback and your recollection of your performance, please let the SP know and it will be noted for review.
- All encounters are recorded on video and available for the faculty to review.

#### *Required Video Review*

- The Clerkship Director (CD) alerts Aaron Yellin and Meghan Green ([aaron.yellin@mssm.edu](mailto:aaron.yellin@mssm.edu), [meghan.green@mssm.edu](mailto:meghan.green@mssm.edu)) to the need for remediation and confirms you have been notified.
  - If you require remediation, you must review your encounter video(s).

- Aaron schedules video review and remediation encounter(s) directly with you.
- Video review is scheduled for the soonest possible date.
- During video review, you complete the [DO Self-Assessment Form](#).
  - If video review is required, you *must* share your form with your CD.

#### *Elective Video Review*

- You should send an email to [themorchandcenter@mssm.edu](mailto:themorchandcenter@mssm.edu), addressed to Aaron Yellin.
- The [DO Self-Assessment Form](#) will be provided, but completing is optional.

NOTE: Video review is not to be used for score adjustments as these requests must be made immediately after the exam when you receive verbal feedback from your SP.

# Ambulatory Care - Geriatrics Direct Observation of History Taking Skills

## Learner Expectations

**Scenario:** You will be asked to interview a patient who presents to the geriatrics clinic with a gait/balance problem.

**The student is expected to demonstrate the following behaviors:**

- Setting the stage/preparation
  - Student reviews the presenting scenario and the patient information prior to the encounter
- Greeting the patient/Establishing initial rapport
  - Student introduces self using first and last name
  - Student states their current level of training as a medical student
  - Student states the primary purpose of the encounter
  - Student actively verifies the patient name and date of birth
- Initiating information gathering
  - Student asks the presenting problem or reason for the patient to present to the care site
  - Student asks the onset of the presenting problem
  - Student asks about the circumstances of the presenting problem
  - Student asks about impact of the presenting problem (e.g. pain or limitation)
  - Student asks about previous episodes of same problem
- Exploring biomedical perspective of disease including relevant background and content
  - Student asks the following **INTRINSIC** risk factors for gait/balance problem: muscle weakness, change in balance, paresthesia in feet, dizziness/lightheadedness, LOC, palpitations
  - Student asks the following **EXTRINSIC** risk factors for gait/balance problem: footwear, assistive device
  - Student asks at least 4 pertinent geriatrics review of systems questions (e.g. memory, vision, hearing, urinary incontinence, sleep disturbance)
  - Student asks about medications, including any recent changes
  - Student asks at least 2 pertinent social history questions (e.g. alcohol, fluid intake, smoking, substance use)
  - Student asks about need for assistance with at least 2 activities of daily living (ADLs)
  - Students asks about need for assistance with at least 2 instrumental activities of daily living (IADLs)
- Exploring patient's perspective of illness
  - Student demonstrates respect towards patient through behaviors, words and demeanor
  - Student demonstrates empathy towards patient through behaviors, words and demeanor
  - Student acknowledges feelings, concerns and anxieties of patient by verbally recognizing and legitimizing them
  - Student asks about support systems
  - Student summarizes information from the patient at least once before the end of the encounter
- Closing the encounter
  - Student directly asks for any additional questions or concerns the patient may have
  - Student verbalizes appropriate wrap-up and reference to next steps

# Ambulatory Care - Geriatrics Direct Observation of Physical Examination Skills

## Learner Expectations

**Scenario:** You will be asked to perform a physical examination on a patient in a geriatrics clinic with a gait/balance problem.

**Note:** *Do not examine the patient over the gown. Physical exam maneuvers performed over the gown will result in partial or no credit for the item.*

**The student is expected to demonstrate the following behaviors:**

- Greeting the patient/Establishing initial rapport
  - Student introduces self using first and last name
  - Student states the primary purpose of the encounter
  - Student actively verifies the patient name and date of birth
  - Student washes hands before the physical examination
- Mental Status
  - Student assess mental status by assessing orientation to person, place and time OR assesses delayed recall of 3 words
- Vital Signs
  - Student correctly describes method of checking orthostatic blood pressure after patient has been standing for >1 minute
- Cranial Nerves
  - Student assesses visual acuity of both eyes (one at a time) using Snellen card
  - Student assesses gross hearing in both ears (one ear at a time) using finger rub test
- Motor
  - Student assesses motor strength in at least two proximal muscle groups in both lower extremities against resistance OR functional motor strength by 30-second chair stand
- Sensory
  - Student checks of sensation using finger / cotton wisp / any sharp / dull object / tuning fork in two different areas of each lower extremity
- Cerebellar
  - Student demonstrates at least one cerebellar assessment (Rapid alternating movements OR Finger-to-nose test) in both upper extremities
- Station and Balance
  - Student performs test for Romberg appropriately OR assesses balance with the 4-stage balance test correctly (at least 3 stances for 10 seconds each)
- Gait & Coordination
  - Assesses gait and coordination with the Timed Up and Go (TUG) test appropriately (by asking patient to stand from a chair, *preferably* without the use of their arms to push up from sitting, walk 10 feet at a usual pace, turn around, walk back and sit back in their chair again, and recording time).
- Cardiac Exam
  - Student auscultates the heart appropriately in 4 areas either sitting or standing (aortic, pulmonic, tricuspid, mitral). Student auscultates carotid arteries bilaterally, one at a time.
- Draping
  - Student utilizes proper draping of the patient during the physical exam

- Closing the encounter
  - Student washes hands after the physical examination
  - Student shows consideration for patient comfort by active inquiry