Learning objective: At the end of this session, participating residents will be able to give a medical student helpful, constructive feedback about charting.

Agenda:

12:00 Welcome
12:10 Introduction to teaching charting - slides
12:20 Practice teaching cases, with feedback
   12:20 First resident teaches case
   12:30 Resident observer fills out checklist
          Feedback using checklist
   12:35 Second resident teaches case
   12:45 Resident observer fills out checklist
          Feedback using checklist
12:50 Introduction to work rounds/group teaching - slides
       Evaluation of session
Residents’ Self-Reported Learning Needs For This Session

Issues in Teaching Charting

“Trying to correct mistakes I do myself occasionally”

“What is expected in 3rd year H&P”

“Review an H&P, give positive and negative feedback”

“How to teach a student about organization, being neat and detailed”

“Prioritizing areas of feedback, what to be specific or general about”

“Topical approach to reviewing history and physical with student”

“Can’t critique an H&P in 10 minutes”

“I feel I need to go over my H&Ps on every disease process before going over a case like pseudotumor cerebri....”

“What area of charting is important? How to give constructive critique”

“Knowing structured H&P”

“What exactly students should be focusing on in H&Ps”

“Perhaps a stellar H&P to compare the student’s to”

“One idea is to give a copy of a nicely written H&P at the beginning of the rotation so students have an idea of extent of details and content/format to go by. Ask for feedback/questions at end.”

General Issues in Giving Feedback

“How to criticize”

“Giving constructive criticism”

“Allowing student to give comment on feedback given to them”

“Patience”
Case 1: A student needing feedback on a pediatric progress note

Information for the resident teacher

You are one of the supervising residents in your outpatient clinic this month. Part of your responsibility is to go over your third-year medical student’s notes and provide feedback. Your student this month has been with you in clinic for three weeks now and is a good student in most ways, but needs some work on improving the level of detail in charting, you have noticed. You selected one of the student’s notes to review as an example: a well child note for a five-year-old boy with autism. You do not know this patient. You have the next ten minutes to read the note (alone, before the student comes in) and then give the student feedback designed to improve charting skills.

Case 1: A student needing feedback on a pediatric progress note

Information for the “student”

You are a third-year medical student on an outpatient primary care rotation. As a requirement of this rotation, you are supposed to have one of the residents go over one of your progress notes and give you feedback. The resident has apparently selected one of your progress notes as an example to go over with you. You don’t feel particularly confident about writing progress notes because you have just started your clinical rotations and you aren’t yet familiar with what is expected from your notes.

- If the resident asks what you know about writing a progress note, you say you know “SOAP” stands for “subjective, objective, assessment and plan” and that you try to include each of these components.
- If the resident asks what your goal is for this session (or what you want to get out of the session), you say you believe you need to learn how to chart more efficiently. You see the attending physicians and residents writing their notes very quickly and you’re worried that you’re too slow.
- You worked as a paramedic before starting medical school and you are used to writing concise notes.
- If asked about your learning style, you are a “hands on” kind of learner who learns best by actively doing something (e.g., answering questions or writing rather than listening to a lecture).
- If the resident asks what you thought of this particular progress note, you say you thought it was okay. You are not sure if you included enough detail in your assessment and plan.
- If the resident asks if you have any questions, you ask (if the resident did not already bring up this subject) whether it would have been better to write a separate progress note in addition to the well child sheet so that you could discuss the child’s autism in more detail.
Case 2: A student needing feedback on an adult urgent care note

Information for the resident teacher

You are one of the supervising residents in urgent care clinic today. You are working with a third-year medical student whom you know slightly. The student saw an urgent care patient yesterday, and was told by the attending physician that the note was not detailed enough. The attending apparently did not have time to discuss the note any further than that. So today, the student has brought you this note to ask your advice on how it could be rewritten. You do not know the patient. You have the next ten minutes to read the note (alone, before the student comes in) and then give the student feedback designed to improve charting skills.

Case 2: A student needing feedback on an adult urgent care note

Information for the “student”

You are a third-year medical student working in urgent care clinic this week. You are waiting to talk to one of the residents about one of the notes you wrote yesterday. The attending physician yesterday said the note wasn’t detailed enough, but he did not appear to have time to discuss it any further. You chose this resident (who you think has good skills and is non-threatening) to ask for some feedback on your note.

• How you respond to the resident’s feedback depends on how the resident approaches you:
  • If s/he asks your opinions and needs first, you respond positively.
  • You are especially appreciative if the resident gets you involved “hands on” in rewriting part of your note rather than just telling you what you did right or wrong.
  • If s/he criticizes your note right away, you become defensive and say that no one has given you very much teaching about charting and that the clinic supervisors expect students to see too many patients in a half-day anyway.
  • If the resident asks how things are going in general, you are enjoying your primary care rotation. You like urgent care because there are many interesting patients. You are doing fairly well academically.
  • If s/he asks what you know about charting, you say you feel fairly comfortable writing inpatient progress notes but have not gotten to write many outpatient notes yet.
  • If the resident asks if there’s anything particular about charting you’d like to go over, you say that you would like to know more about the structure that different types of outpatient notes should follow.
  • If the resident asks what you thought of this particular progress note, you say you guess it was not very good. You had thought urgent care notes should be fairly brief but the attending seemed to think the note should include more information.
Checklist for Giving Feedback on Teaching Cases: Teaching Charting

The “CHART” approach to teaching charting

Comments:

1. Did the resident write useful comments on your progress note for you to keep?
   _____No    _____Somewhat    _____Yes

Help:

2. Did your resident clarify mutual goals (first yours, then the resident’s) for this feedback session, explaining why it’s important to learn charting skills?
   _____No    _____Somewhat    _____Yes

3. Did s/he ask you to explain any special learning needs about charting and encourage you to admit your limitations?
   _____No    _____Somewhat    _____Yes

Assessment:

4. Did the resident ask what you already knew about writing progress notes?
   _____No    _____Somewhat    _____Yes

5. Did s/he ask for your self-assessment of your note before commenting?
   _____No    _____Somewhat    _____Yes

6. Was the resident’s teaching material well organized to facilitate learning?
   _____No    _____Somewhat    _____Yes

7. Did s/he provide positive feedback that specified exactly what you did right?
   _____No    _____Somewhat    _____Yes

8. Did s/he correct your writing problems thoroughly and accurately?
   _____No    _____Somewhat    _____Yes

9. Did the resident offer suggestions for improvement?
   _____No    _____Somewhat    _____Yes
10. Did the resident get you actively involved in rewriting any of your note?
   _____No  _____Somewhat  _____Yes

11. Did s/he generalize what you could learn from this type of charting?
   _____No  _____Somewhat  _____Yes

**Resources:**

12. Did the resident explicitly encourage further learning?
   _____No  _____Somewhat  _____Yes

13. Did s/he encourage you to read and explore specific learning resources (e.g., looking at examples of good notes, reviewing a basic textbook section on writing chart notes, getting a “consultation” with anyone else)?
   _____No  _____Somewhat  _____Yes

**Timing of follow-up:**

14. Did the resident arrange for a follow-up session with you?
   _____No  _____Somewhat  _____Yes

**Other teaching skills**

15. Did the resident treat you with respect, introduce him/herself, use your name?
   _____No  _____Somewhat  _____Yes

16. Was the session paced well without dragging out or seeming rushed?
   _____No  _____Somewhat  _____Yes

17. Did the teacher call attention to time and have you help refocus the session as needed?
   _____No  _____Yes  _____Not applicable
**Evaluation: Teaching Charting Module**

Please rate the quality of your learning experience for each part of this module, using the key below. A score of 4 indicates an average learning experience compared with the rest of your residency training.

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1. Mini-lecture on teaching charting  1 2 3 4 5 6 7

2. Practicing teaching cases  1 2 3 4 5 6 7

3. The sample chart notes themselves  1 2 3 4 5 6 7

4. Charting module as a whole  1 2 3 4 5 6 7

What did you like best about this module?

What could be improved about it?

What will you do differently after having participated?

Thanks!