Clinical Reasoning and Judgment

Methods and Learning Plans

1. At different points of the exam sequence, force the student to commit to findings (normal vs. abnormal, and rank of importance in supporting a diagnosis), tentative or differential diagnosis (narrowed to most likely 2-3), proposed testing and rationale.

2. At final case presentation and proposed diagnosis, ask the student if and why a given test was contributory to the diagnosis. Student must present a defensible diagnosis and treatment plan (probe for supporting evidence), along with alternatives, as appropriate.

3. Student should answer the questions:
   a. What other information would I like to acquire to guide my understanding of this patient’s condition? What other tests should have been performed?
   b. What is the anticipated course of the condition as treated (included potential unintended consequences) or if untreated?
   c. What is the degree of morbidity of the condition?

4. Teach a framework for drafting a differential diagnosis using anatomical relevance (structures and pathways), pathophysiological relevance (normal physiology and processes of disease, inflammation, etc), systemic relevance.

5. CAVEAT: Have the student propose (or preceptor may guide the student to acquire) generalizations that may help apply this knowledge to future cases.

6. Preceptor should positively reinforce correct behaviors and judgments, while constructively guiding the floundering student to correct his/her own mistakes. CAVEAT: Avoid spoon feeding and encourage self-learning and self-direction.

7. Force the student to ask questions. By not asking questions, the student may be demonstrating delusional mastery, fragile understanding, or even lack of interest. CAVEAT: Avoid threatening or belittling behaviors that may inhibit the process of student inquiry.

8. At final case presentation and discussion, continued evidence of poor understanding or judgment should be remedied by an assignment to review the literature and write or present a topic which encompasses this case, or write and then verbalize the salient learning points of the case and examination pathway chosen by the student. CAVEAT: Remind the student that each test element is intentional and have them write or verbalize the exam elements that were crucial in assessing this patient and those that were inconsequential.

9. Query the student about resources, and offer direction to appropriate resources.

10. Query the student about the case at a future point in time to probe the student’s retention and understanding. Was this case similar to any other cases encountered by the student?

11. In all interactions, encourage the student to commit to answers. CAVEAT: Learning how to commit to one’s beliefs is a crucial learning curve in patient care.