


Clinical (Bedside) Teaching

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William Osler




- “Medicine is learned by the bedside and not in the classroom. Let not your conceptions of disease come from words heard in the lecture room or read from the book. See, and then reason and compare and control. But see first.”

Why at the Bedside?

- Establishes the central role of the patient
- Patients prefer to be involved
- Shortens presentations
- Allows real time clarification of history
- Improves our ability to learn physical exam
- Allows us to observe each others interactions with the patients
- Allows the teacher to demonstrate “the art of medicine”

Video
How not to Bedside Teach

- Discuss Patient and Learner involvement
- What went wrong?



What can be taught at the bedside?

- How to obtain a medical history
- How to perform a physical exam
- Differential diagnosis
- How to communicate a management plan
- Clinical reasoning
- Communication
- Professional bedside demeanor
- Procedures
- Consent
- Breaking Bad News

Adapted One-minute Preceptor:
Bedside Microskills

- Act I:
 - Outside Room
- Act II:
 - Inside Room
- Act III:
 - Outside Room

Act 1: Outside the room

- Prepare!
- Consider the patient and the teaching objective
- Prepare your learners
- Prepare your patients

Act 2: Inside the room

Teaching at the bedside

- Begin with history presentation (pertinent only)
- Team ask clarifying questions
- Demonstration of pertinent PE
- Reporting of pertinent labs
- Discussion of impression/plan

Act III: Outside the room –

Reflection

- Discuss the findings/observations of the team
- Ask questions about what we have learned
- Give feedback on history taking and physical exam skills
- Reflect on interactions with patients - what works, what doesn't
- Assign further information gathering tasks

Tips for teaching at the bedside

- Preparation (what is the teaching goal?)
- Involve everyone
- Open ended questions (What?)
- Think out loud
- Acknowledge your own gaps in knowledge
- Correct mistakes, complement the successes
- Observation is as important as teaching
- Best professional behavior
- Time control
- Debrief and follow up

Final Osler Thoughts

- “The good physician treats the disease; the great physician treats the patient who has the disease”
