

Student Orientation Check List

- ❑ 1. Be an active learner. See the patient as an important person in your life (a niece or nephew or friend perhaps). Remember, you are a supporting actor, not the star.
- ❑ 2. Be aware of natural barriers to keeping the patients' interests first.
Examples include:
 - a) "I'm paying a lot of tuition so my learning comes first."
 - b) "These kids are so vulnerable, I shouldn't really be their primary caretaker anyway."
 - c) "The team doesn't really need me to take care of this patient.'
- ❑ 3. Take advantage of the unique aspects of Pediatrics.
 - a) There is a large outpatient component. You will all learn how to differentiate seriously ill children from less ill children and you will learn a structured approach to differential diagnosis.
 - b) You will learn to work with families and emotionally upset/irrational family members.
- ❑ 4. Choose at least three personal objectives among the knowledge, skills and attitudes of being a physician. List them here.

- ❑ 5. Review the knowledge, clinical skills, and interpersonal skills that make up the objectives of the clerkship.
- ❑ 6. Elicit feedback on a regular basis (after each patient encounter).
- ❑ 7. Be aware of barriers to eliciting feedback. These include:
 - a) Confusing feedback with evaluation.
 - b) Feeling the need to be right or perfect.
 - c) Feeling that you are imposing by asking for feedback.
 - d) Allowing the person who gives you feedback to be vague. Don't accept 'good job' or "fine" as feedback. If you did well, ask for the specific behaviors that were good.
- ❑ 8. Remember the structure of: read first, see patient, read again, and present the patient.

- ❑ 9. Please list your comments on the value of the orientation.

- ❑ 10. What are the most important things you learned/got out of the orientation?

- ❑ 11. What do you expect from the clerkship?

Make a copy of this and return it to Dr. Miller's Office, BHN 5-517 (at the end of the first week)