A Patient-Centered Approach to the One-minute Preceptor

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DIAGNOSE PATIENT AND LEARNER						
Step	**Task**	**Purpose**	**Cue**	**Action**	**Do**	**Don't**
1	Get a commitment	Gives **learner** responsibility for patient care. Encourages information processing within learner's database.	Learner presents case, then stops.	Ask what the learner thinks: "What do you think is going on?" "What would you like to do next?"	Do determine how the learner sees the case. (Allows learner to create his/her own formulation of the problem.)	Don't ask for more data about the patient. Don't provide an answer to the problem.
2	Probe for supporting evidence	Allows preceptor to diagnose learner.	Learner commits to stance; looks to preceptor for confirmation.	Probe learner's thinking: "What led you to that conclusion?" "What else may be happening here?" "What would you like to do next?"	Do diagnose learner's understanding of the case--gaps and misconceptions, poor reasoning or attitudes.	Don't ask for textbook knowledge.
TEACH						
Step	**Task**	**Purpose**	**Cue**	**Action**	**Do**	**Don't**
3	Choose a single, relevant teaching point	Focus on specific competencies relevant to this learner working with this patient.	Case decision-making complete or consultation with patient needed.	Provide instruction. The learner (under direction or observation) or preceptor (acting as role model) collects additional information as needed.	Do check for learner agreement with the teaching point.	Don't choose too much to cover.
4	Teach (or reinforce) a general rule	Remediate any gaps or mistakes in data, knowledge, or missed connections.	Apparent gaps or mistakes in learner thinking.	Draw or elicit generalizations. "Let's list the key features of this problem." "A way of dealing with this problem is . . ."	Do help the learner generalize from this case to other cases.	Don't slip into anecdotes, idiosyncratic preferences.
5	Reinforce what was done right	Firmly establish and reinforce knowledge. Reinforce behaviors beneficial to patient, colleague, or clinic.	Teaching point has been delivered.	Provide reinforcement. "Specifically, you did a good job of . . ., and here's why it is important . . ."	Do state specifically what was done well and why that is important.	Do not give general praise, "That was good," because the key to effective feedback is specificity.
6	Correct errors	Teach learner how to correct the learning problem and avoid making the mistake in the future.	Teaching point has been delivered.	Ensure correct knowledge has been gained. "What would you do differently to improve your encounter next time?"	Do make recommendations for improving future performance.	Do not avoid confrontation--errors uncorrected will be repeated.
ONE-MINUTE REFLECTION						
Ask: "What did I learn about this learner?" "What did I learn about my teaching?" "How would I perform differently in the future?"						

References: Neher, J.O, Gordon, K.C., Meyer, B., and Stevens, N. A five-step 'microskills' model of clinical teaching. J Am Board Fam Pract 1992; 5:419-24;
DaRosa, et.al. Strategies for making ambulatory teaching lite: less time and more fulfilling. Acad Med 1997; 72(5): 358-61.

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