

PDQ Preceptor Development Quarterly

An E-Newsletter from the OSU College of Medicine

What's New at OSU?

Match Day 2010

On a beautiful sunny day in March, 200 of our medical students discovered where they will spend the next years of their lives. March 18, 2010 was Match Day, and the envelopes were eagerly opened at the sound of the horn at noon. All 200 students received first year positions starting in July of this year, with 41 of them matching into advanced programs beginning in 2011. The specialty with the greatest number of matches was Pediatrics, with Internal Medicine and Family Medicine following at 2nd and 3rd. Of the first year programs, 82 positions are in Ohio, and a number of positions will be in Michigan, California, Pennsylvania, and Illinois. Congratulations to our talented and dedicated students, who will soon venture out to spread that Buckeye spirit across the continent!

Preceptors Cheer on the Basketball Buckeyes

Some small credit for the successes of the Buckeyes Men's and Women's basketball teams goes to the preceptors and their guests who joined staff from the College of Medicine for games recently at the Value City Arena.

In attendance for the men's game with Purdue were:

Doug Fosselman
Mike Perry
Paul Ruff
Chris Saunders
Ellen Tamburello
Jim Wittig
Glen Williams
Pat Ecklar



Pat Ecklar, Mike Perry and Diana Bahner in the Suite for the OSU vs. Purdue basketball game. The 'only time' Mike Perry cheers against OSU!



Jim Wittig brings his son to his first OSU basketball game. He's setting the bar high in the Suite!

Fans at the women's game with Michigan State included:

Brian Bachelder
Lee Budin
Barbara Rayo
Joe Lutz
Betty Mitchell
Sarah Sams



Joe Lutz and his son enjoy the view from the Suite at the exciting Women's game vs. MSU.

We hope to extend invitations to more preceptors for sporting events this summer. As these physicians found out, all it takes is to be among those to respond to our email drawings. We do our best to give as many preceptors as possible an opportunity to be our guests at a variety of events.

It's another way for the College of Medicine to say thanks for your contributions to our community-based educational programs.

Follow the Buckeyes in the NCAA Tournaments
Go Bucks!

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Preceptor to Preceptor – Cynthia Ledford, MD The “Problem Student”

Most students are eager to learn, adaptable, and a delight to teach. However, some students are more of a challenge because of knowledge deficits, lack of certain skills or emotional or interpersonal issues.

The following is a compilation of suggestions we hope will improve your teaching experiences.

Remember that the course director and educational team are always there to help you. Trust your instincts. If you are concerned, frustrated or uncomfortable, there is a problem.

GENERAL APPROACH

First, **define the problem:**

- Is it knowledge, skills, or an emotional/interpersonal issue?
- Is it limited or broad in scope?

Next, **confirm** initial suspicions:

- Know your strengths and weaknesses
- Ask others who have worked with this student for input
- Determine the student’s perspective (what is he thinking; why would a reasonable person do this?)
- Assess the student’s strengths and weaknesses
- Consider the student’s relevant life history

Then, meet with the student at a convenient time to **address the issue:**

- Address the behavior, not the person
- Communicate expectations clearly
- Give feedback in a timely manner

EXAMPLES:

“THE BORED STUDENT”

This student may look sleepy, is not engaging well with patients and doesn’t seem to care.

- Ask the student what he wants to learn on the rotation
- Ask about the student’s future interests, goals and needs
- Brainstorm with the student about how to accomplish the learning objectives

“ARROGANT”

This student may convey an attitude of entitlement or superiority.

- Address the specific behaviors and the comments that the student makes
- State what inferences may be made by staff, patients or colleagues in response to these behaviors or comments
- Acknowledge that certain behaviors may interfere with optimal patient care by making patients, staff and/or colleagues feel uncomfortable or devalued

Those favored souls [who have found a path of service] must also be humble so as not to get irritated by the resistance they encounter, but to accept it as inevitable. Anyone who proposes to do good must not expect people to roll any stones out of his way, and must calmly accept his lot even if they roll a few more into it ...

-Albert Schweitzer MD

“LAZY”

This student does not show up on time, leaves early, and is generally not available or possibly hiding in the break room or back office.

- Give feedback on her behavior
- Let her know specifically how you want her behavior to improve

“TROUBLED”

This student may appear to be distressed, angry, or depressed and/or is not performing well. Many times outside factors (e.g. family expectations, illness, finances, etc.) unknown to you or the college are impacting on the student’s ability to perform.

- In private, acknowledge your concern and what behavior you note
- Let the student know you want to facilitate a good learning environment for her
- Let her know that support is available
- Refer any ongoing concerns to the clerkship director who can then make proper referrals as

necessary

- While it may be tempting to assume the role of physician to the student, remain in your role as a teacher, and permit the college to facilitate care for the student as needed

“OFF-BEAT”

This student may express herself through unique dress, hairstyle, body art/piercing, or choice of language. If personal expression interferes with her ability to function as a physician, then it needs to be addressed.

- Address any dress code policies that apply to your office at the start of the rotation
- Remind the student that as a guest/representative of your office, the dress code applies to her
- Remind her that as a professional, part of her job is to make the patient comfortable and develop a trusting therapeutic relationship.