What's Happening at OSU?

Dr. Sanfilippo, Medical Center CEO Accepts New Position

Fred Sanfilippo, MD, PhD, who during the past seven years guided OSU Medical Center into the top tier of academic medical centers including national recognition of its research, education and clinical programs, has accepted the leadership of health sciences at Emory University, starting Oct. 1. As executive vice president for Health Affairs at Emory University, CEO of the Robert W. Woodruff Health Sciences Center and chairman of the board for Emory Healthcare, Sanfilippo will have responsibility for more than 18,000 faculty and staff, and a budget that exceeds $2.1 billion. College of Medicine Dean Wiley "Chip" Souba will serve as interim senior vice president and executive dean for Health Sciences and CEO of the Medical Center. A search committee will be formed to help identify Sanfilippo's permanent successor.

Dr. Lucey succeeds Paul Weber as Vice Dean

Catherine Lucey, MD, FACP, has been named Vice Dean for Education in the College of Medicine and Associate Vice President for Health Sciences Education for the Office of Health Sciences, effective July 1. Lucey has served as vice chair for education and director of the OSU Internal Medicine residency program.

Fourth-year Students Assigned to Internists

The first rotations involving fourth-year OSU medical students started last month. Our readers will recall that the curriculum committee approved the change that resulted in moving the Ambulatory Internal Medicine rotation from the third year to the fourth year.

In the fall edition of PDQ we will contrast precepting third-year and fourth-year students and offer suggestions for making the Ambulatory Internal Medicine rotation a great sub-internship experience for the seniors.

It’s a Branding Thing

PDQ readers may have had to do a double-take to make sure that the link actually took them to the summer edition of the preceptor newsletter. Last Spring, the OSU Medical Center unveiled its new corporate brand and look which includes the logo shown on the bottom right corner.

Is There Anyone Out There?

Being a newsletter editor can be a lonely business. With an electronic newsletter like PDQ, one hopes that readers actually open, read, and get something from the brief articles. At some point in the early life of a newsletter, feedback from the readers becomes essential. We know physicians are bombarded with junk mail, electronic and otherwise, and are reluctant to add even more.

Later this year, we will collect reader feedback by providing an incentive to physicians who follow a hyperlink to a very short evaluation form. The Community Preceptor Advisory Committee recommended that we distribute event tickets or gift cards as a way of showing appreciation for those who complete the online evaluation. That’s the plan. Look for your opportunity to help us make PDQ an even more useful tool for our preceptors.

Did You Know?

The College of Medicine uses email as a primary source of communication to community preceptors. Please provide us with email address updates. Send changes to Diana.bahner@osumc.edu

In everyone's life, at some time, our inner fire goes out. It is then burst into flame by an encounter with another human being. We should all be thankful for those people who rekindle the inner spirit.

- Albert Schweitzer
How to Give Effective Feedback

Giving feedback to your students is always a challenge, and always worthwhile. The purpose of feedback is to help the student better achieve her or your goals.

### CHARACTERISTICS OF EFFECTIVE FEEDBACK

**Specificity** – explain why the student’s performance is correct or incorrect. Include specific examples of things you observe.

**Frequency** – Give feedback daily

**Timing** – give feedback as close in time to the observations as possible. Consider delaying feedback if it is an emotionally charged situation.

**Positive and Negative** – it is important to both reinforce good behavior and correct errors. Make it a point of reinforcing behaviors and attitudes that you would like the student to continue.

Try correcting errors by helping the student to the next step. Example: You were able to obtain all of the relevant information about Mr. N’s back pain. The next step for you is to try to use or two open-ended questions first, to allow the patient to more efficiently tell his story.

**Learner Reaction** – Pause and ask the student what she thinks about the feedback and be prepared that she may not agree and acknowledge the variances if she has received different advice in the past.

Example: I realize notes written on a surgery ward are not the same as in my office. They are different because they serve very different purposes.

Obtain a reaction from the student to demonstrate that you respect her opinion and can open a dialog for better understanding.

Example: It must be difficult as a student to always know why expectations change from one clinical setting to another.

### Action plan

- Develop a plan for improvement and think of experiences that will allow the student to practice a desired skill.
- Involve the student in developing the skill.

**Giving feedback about attitudes** – This is just as important as feedback about knowledge and skills.

Remember that you infer attitude from behaviors that you see. Give specific examples about behaviors and identify the attitude implied. In many cases, students are completely unaware of the results of their actions.

Example: I noticed that you arrived late this morning, and then spent time reading in the break room and did not see patients. You may not be aware of this but I interpret this as a lack of respect for my time and patients and a lack of responsibility.

### Four Physicians Added to Preceptor All Stars

The Outreach and Engagement staff regularly reviews evaluations submitted online from students about their preceptor experiences. Those who receive top ratings across all categories from two or more students are added to the All Stars list.

Newly added to the All Stars list are Columbus preceptors Scott Holliday, MD, Med/Peds, Joseph Dusseau, MD, Family Med, Victoria Rentel, MD, Family Med, and Jesse Frank, DO, Family Med, of Marengo.

A trophy befitting this recognition will be presented to the physicians at their practice locations.

Congratulations!

### Student Voices

Working with a preceptor far away from the academic world in Columbus provided me with a different perspective of medicine, especially regarding the relationship that forms between a physician and her patients when they live in a smaller community and associate with each other outside the doctor’s office.

She was always understanding of my needs and well informed of my schedule. She always took an active role in making sure I was taken care of and on track, even when I was working with other physicians. She respected me and my input, making me feel like a wanted and needed part of their team.

I enjoyed the daily review sessions prior to the start of the day.

This was one of the best experiences of my medical career. The knowledge possessed by the family docs is amazing. I appreciated the time I got to spend with them.

Dr. [   ] does a good job pointing out the key aspects of each patient that are important for the student to learn. She also does a good job of modeling a good doctor-patient relationship and still practicing in a timely fashion.

Dr.[   ] was very thorough in his explanations and was never condescending. He encouraged me to read articles in preparation for discussion.