

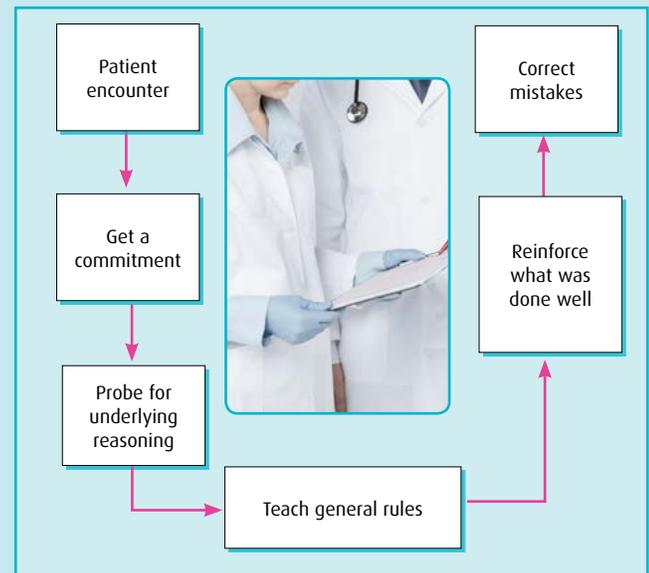
Models of Office-based and Bedside Teaching

The teaching of clerks and residents that occurs within the ambulatory setting and at the bedside is some of the most valuable that a trainee will receive. While it often seems spontaneous, this teaching can be planned and well-structured in order to facilitate the best learning outcomes for students.

One-Minute Preceptor

The most common model of teaching in the context of a patient interaction is the “One-Minute Preceptor” or “Microskills” model. This is well-suited for bedside and clinic teaching where interactions with patients are frequent. The One-Minute Preceptor is outlined as:

1. Get a commitment. Encourage the learner to commit to his/her own opinions regarding the differential diagnosis, management and treatment options, etc.
2. Probe for underlying reasoning. Encourage the learner to provide rationale for the commitment he/she has made.
3. Teach general rules. Teach so that learners can understand how learning from the current patient can be applied to future patients and other situations.
4. Reinforce what was done well. Positive feedback should be specific and based on the behavior of the learner.
5. Correct mistakes. Constructive negative feedback is necessary to correct learner errors. The feedback should be specific and based on the behavior of the learner.

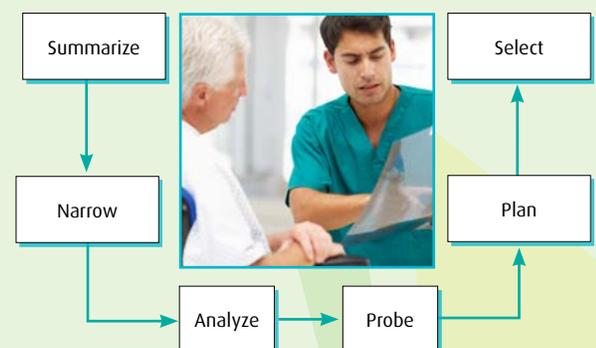


This model can be summarized by a mnemonic CPPPC (Commitment, Probe, teach a Pearl, Praise, Correct).

SNAPPS

A model of clinical teaching encounter known by the mnemonic SNAPPS has been developed especially for the ambulatory care setting. During each clinical teaching encounter the learner will:

1. Summarize briefly the history and exam findings.
2. Narrow the differential to two or three relevant possibilities.
3. Analyze the differential by comparing and contrasting the possibilities.
4. Probe the preceptor by asking questions about uncertainties, difficulties or alternative approaches.
5. Plan management for the patient’s medical issues
6. Select a case-related issue for self-directed learning.



This puts the onus on the learner to decide on the diagnosis and management of the patient while also determining their own learning needs. The preceptor acts more as a guide in the learning process.