Faculty to resident/medical student feedback scenarios - Webinar

**Scenario 1**: You know it is difficult for some residents to attend all of the scheduled Tuesday afternoon meetings and teaching sessions, but one individual is almost always late or absent. When present, he is primarily engaged with his computer and/or phone, only “half listening”.  You see other residents starting to engage in similar behavior during meetings, and you are concerned. You are meeting with them to give them feedback.

**Scenario 2a**: You are a busy, stressed senior resident supervising the inpatient adult medicine team, and it is April. You are working with a first year resident for the 2nd time this year. Despite lots of coaching and encouragement during the first medicine rotation, one of the first years on your team remains inefficient and works at a slow, methodical pace. The attending “speaks to you” about progress notes not being completed in a timely manner, expecting this to be corrected. You don’t have time to “hold the first year’s hand”! You find the first year, and out of frustration, let out an audible sigh, and say, “Can’t you get your work done faster so I don’t have to hear about it? I have enough going on without having to micromanage you! Figure out how to get your notes done by 9 am, plain and simple!” After the first year walks away, you realize that you didn’t handle this well. Now what do you do?

**Scenario 2b**: You are the attending who overhears the frustrated conversation between the senior resident you just spoke with about the progress notes and the PGY1 who “works slowly”. What do you do?

**Scenario 3**: You are observing a 1st yr resident taking a patient’s history. As she answers questions about her chest pain, she becomes visibly emotionally upset. Though the resident pauses to look at her, he continues to ask rote ROS questions. You leave the exam room to discuss assessment and plan. Practice how you might give feedback to the resident.

**Scenario 4**: You are one of two preceptors for an afternoon session of clinic. You precept a medical student regarding a complex patient, and in your mind, collaboratively generate a clear plan. When you step out of the precepting room to ask a nurse a question, you hear the medical student asking the other preceptor about the same patient, and arriving at a different plan, to which the medical student agrees. How do you respond to the situation?

**Scenario 5***:* A clearly busy and stressed 2nd year resident tells you, the attending, on rounds that an inpatient’s lab values are stable. You later find out that in fact, the patient’s hematocrit has been dropping since last night. You find the 2nd year to discuss the discrepancy between his report and what you discovered.

**Scenario 6:** You are a new attending (graduated 3 months ago) on a busy hospital service. Your resident team includes 2 new interns and a 3rd yr supervising resident who are all visibly stressed by the number and complexity of patients in their care. You arrive for morning rounds and observe a specialist berating a resident -“why don’t you know his K? Do you know any of his lab values? Do you understand how sick this patient is?” The resident is visibly shaken and near tears as the specialist storms off. What do you say to the resident? To the specialist?

**Scenario 7:** You are precepting inthe office. A confident 2nd yr resident presents a complex patient with multiple medical problems to you, gives you a cursory history and physical and pronounces a high risk cardiac/diabetic patient as ‘simple URI’. There are enough risks involved in the brief scenario that you are concerned you don’t have enough information and begin to ask detailed and specific questions. The resident starts looking impatient, absently tapping his foot. He becomes increasingly annoyed and tells you “it’s an acute visit for a cough, the patient is fine and I’m running behind so I have to go”.

**Scenario 8**: You are working in your office, near where the program’s administrative staff works. A 2nd year resident comes to speak with one of the admin staff, and you can hear the conversation. “Once again, my electronic schedule is incorrect, and I’m supposed to be in two places at the same time! How hard is it for you people to coordinate your work so it doesn’t keep happening? I have enough to do without coming up here to straighten out these details, and it isn’t even my job! Please just get it right so I can be where I am supposed to be? That’s what you are being paid to do! Now, if you’ll excuse me, I have to go try to learn something!” What do you do?

**Scenario 10:** Your colleague has difficulty with you holding residents accountable for completing office notes within 48 hours. She thinks you are not being flexible enough to accommodate resident circumstances (e.g. on inpatient rotations) and goes to the Medical Director to discuss it *without* talking with you. The Med Director asks to speak with you about this, letting you know “concerns have been raised by others” about your behavior related to this issue. You later learn it was your colleague. How would you approach this with the Med Director? With your colleague who went around you?

**Scenario 11:** Your colleague goes on vacation, and asks you to manage his clinical desktop while he is away. When you open the desktop on the first day, you are shocked at how many important items have not been addressed for the last month. You do your best to process what you can, and manage to get through the week. When your colleague returns, he thanks you for covering for him. Practice how you might approach giving him feedback about your experience managing his tasks

**Scenario 12**: You are precepting in the clinic, and observing a resident on camera without videotaping. This resident is post-call, and seeing his/her last patient of the day. During the visit, you note that the resident becomes visibly frustrated, and uses a sharp tone with the patient. Attitude has intermittently been an issue for this resident, and for you, his approach with the patient is inappropriate. This resident is tired and anxious to go home. How do you approach this situation?