The LIC is built to include a developmentally progressive curriculum, so students take on greater responsibility over the course of the year. Initially, they are learning how the nuts and bolts of managing multiple specialties at the same time. After the first couple months, students accelerate in their ability to take more ownership of patients. Effective teaching strategies optimize students' autonomy throughout the year.

Building Blocks:

- Start with history and PE skills. Move on to differential diagnoses and creation of plans throughout the year.
  - Directly observe the PE for brief periods early in the year. Later in the year can observe more difficult patient conversations, etc.
  - You do not need to observe the whole encounter, can observe a few minutes at a time.
  - See <u>What to Expect from My LIC Student</u>.

Identifying Clinical Gaps and Intersession Teaching:

- Keep 3-4 core topics handy to review with the student (or have them review independently) during the first couple of months.
- Ask probing questions.
  - Ask students what to do with lab or imaging results to assess necessity and their understanding of next steps.
- Periodically review student's clinical condition logger to help direct patient experiences and/or teaching.
- Direct student reading towards gaps in knowledge identified during the session. <u>Creation of an Active Role:</u>
- Shadowing is not an effective teaching strategy and should be limited to a brief period early in the year.
  - $\circ$   $\;$  One method is to let the student see patient independently first.
  - Another is to scribe for the student and complete the note as you observe the student interview new patients.
    - Do not take over for student while you are in the room.
- Encourage MA to communicate directly with student.
- See one do one: Can model difficult things (e.g. procedures, history taking for sensitive topics, etc.) and then observe students doing this. Provide immediate feedback.
- Students can present in the room when appropriate. Encourage patient-centered language and teaching.

## Encourage Self-Directed Learning:

- Assign foundational reading topics at end of session and make time to discuss this information in clinic next session.
  - $\circ$   $\;$  Student can provide short synopsis of material at beginning of the session.
  - Focus on the foundation, not the zebras!
- If possible, assign patients for student to see in the next session so they can pre-chart. <u>Themed Repetition:</u>
- Students can benefit from seeing the same clinical condition in different patients to learn different presentation and aspects of management.
- Focus on specific core skills throughout the year.
  - $\circ$   $\;$  For example: reading EKGs, specific exam maneuvers, etc.



## TESTIMONIALS

"I think the key fundamental thing...is to give your student clinical responsibility, provide them with a range of autonomy that you're comfortable with. I think my favorite preceptors, my best teachers, let me take care of patients on my own and they also observed me doing it." (Student)

"At the end of every time I'm with a student, [I] give them a couple articles to read that are not the like weird, esoteric stuff but the foundational stuff that's really important." (Preceptor)

"This is your patient, you need to see them, you need to understand their chart. You need to see him before the surgery, you need to see him after the surgery." (Preceptor)