MEDICAL STUDENT FAMILY MEDICINE FIELD NOTE

Date: _____

Student: _____

Supervisor: _____

Setting:
- ☐ Outpatient
- ☐ Inpatient
- ☐ ER
- ☐ Patient's Home
- ☐ PCH

Direct Observation: ☐ YES ☐ NO

☐ History ☐ Physical Exam ☐ Both

Describe the interaction (Age, Gender, Problem): _____

What was your role:

☐ Discussed (on rounds with preceptor/resident)

☐ Observed (some direct patient contact)

☐ Manager (initial management or provide care under supervision)

Context (select any that apply):

☐ Aboriginal

☐ Family / relationship stressors

☐ Polypharmacy

☐ Poverty

☐ Recent Immigrant

☐ Same sex

☐ Work Status

Clinical Scenario*:

Comments: _____

What I did well: _____

What I would do differently: _____

Assessment Parameter:

☐ Medical Expert

    ☐ Patient Centered

    ☐ Selectivity

    ☐ Clinical Reasoning

☐ Communicator

☐ Collaborator

☐ Leader / Manager

☐ Health Advocate

☐ Scholar

☐ Professional

Overall Performance:

☐ Unable to do this (cannot practice this)

☐ Does not do this well (practice with full supervision)

☐ Is starting to do this well (practice with supervision on demand)

☐ Does this well (ready for "unsupervised" practice)

Action Plan:

Student Signature:

Supervisor Signature:

Supervisor Comments:

* Clinical Scenarios:

Abdominal Pain	Depression	Low back pain
Anxiety	Dizziness	Palliative care
Asthma	Fatigue	Prenatal care
Chest pain	Fever	Type 2 diabetes mellitus
Contraception	Headache	Well baby care
Cough-Dyspnea	Ischemic Heart Disease	

Assessment Parameters

The CFPC's Six Dimensions of evaluation and CanMEDS are integrated into field note assessment parameters.

FM Expert

Patient-centered: Focuses on the patient and his/her context and not on the disease alone
Explores illness - Understands whole person/context - Builds common ground - Builds relationship - Is realistic
Selectivity: Demonstrates a selective approach, adapting it to the patient and the context
Appropriately focused - Appropriately thorough - Establishes priorities - Distinguishes between urgent and non-urgent
Clinical reasoning: Gathers and interprets data in order arrive to diagnosis and management.
Generates hypothesis/ differential diagnosis - Gathers data (Hx & Px) - Makes decisions - Sets goals and objectives
Communicator: Utilizes effective verbal and non-verbal skills when interacting with patients.
Listening skills - Verbal & written language skills - Non-verbal skills - Culture & age appropriateness - Attitudinal

Collaborator: Communicates and works effectively with colleagues and other professionals.
Listening skills - Verbal & written language skills - Non-verbal skills - Teamwork - Handover

Leader/Manager: Takes responsibility for the delivery of excellent patient care.
Resource allocation - Cost appropriateness - Leadership - Practice Management - Quality improvement

Health Advocate: Seeks to understand needs, speak on behalf of others when required, and support the mobilization of resources to effect change
Determinants of health - Community resources - Barriers to care

Scholar: Committed to continuous learning and by teaching others, evaluating evidence, and contributing to scholarship
Identifies learning needs - Manages own learning - Integrates evidence - Teaches - Engages in scholarship

Professional: Committed to the well-being of individual patients and society through ethical practice, high personal standards of behaviour
Responsible/Reliable - Knows limits - Flexible - Evokes Confidence - Caring/Compassionate - Respect/Boundaries - Collegial - Ethical/Honest - Maintains good balance - Mindful approach
November 18, 2015