Developing Clinical Reasoning in Your Student

We are now almost two-thirds of the way through the academic year; most of the COSMIC students have completed about half of their total time for the year with you. At this time of the year, students really benefit from deliberately developing their clinical reasoning. Clinical reasoning, or the “process of applying knowledge and expertise to a clinical situation to develop a solution” (Carr, S., 2004), is something most clinicians do without much overt thought. However, this skill is tough for students to learn from books or online resources, and is much better taught directly by their preceptors. How?

• Have students generate a differential diagnosis (typically 5-7 items) for the presenting complaint before they interview the patient. This can be guided by you, or developed independently by the student.

• Encourage students to direct their patient interview and physical exam toward distinguishing among the items on their preformed differential.

• Specifically tell students that when presenting their assessment and plan, they should concisely give you:
  * A prioritized differential for each presenting (or active, or new) complaint.
  * Nickel down on the most likely diagnosis, and describe their rationale.
  * Based on this prioritized differential, what are the next best workup and/or treatment steps.

Although it takes a little practice for students to be able to streamline this reasoning process and this part of the presentation, they will become more efficient and effective thinkers and presenters when they know what you are expecting of them. Telling the student that you: “care about what they think is going on and why” encourages them to be more like doctors and less like students.