

Facilitators: Place in Case Folder - Monday afternoon or first thing Tuesday AM:

## **For the rest of the DC exercise:**

**Please keep your medical record organized.**

**Remove all:**

- **Unused (blank) forms**
- **Extraneous paper**
- **Etc. etc.**

**This can really help us see how you are doing on the case AND prevents us from missing your requests for additional data.**

FYI, a POMR is usually organized from front to back as:

1. Master Problem List (updated daily & always on top)
2. History (completed VTH form)
3. Physical Exam (completed VTH form)
4. Daily Progress Reports (SOAP's)
5. Laboratory Data (results)
6. Miscellaneous - client communication form, client instruction forms/letters, etc.

Tuesday afternoon or Wednesday morning:

## **DC Checklist – for Thursday**

### **Things to do:**

<input type="checkbox"/>	<b>Literature Search - put a copy of the printout in your final Medical Record</b>
<input type="checkbox"/>	<b>Schedule De-briefing session with your Case Facilitator</b>
<input type="checkbox"/>	<b>Complete your Medical Record</b> <ul style="list-style-type: none"><li><input type="checkbox"/> Finalize your Master Problem List</li><li><input type="checkbox"/> Write a final SOAP</li><li><input type="checkbox"/> Write Discharge/Final Client Instructions</li><li><input type="checkbox"/> Organize the record</li></ul>
<input type="checkbox"/>	<b>Make sure a final bill is inserted in the record</b>
<input type="checkbox"/>	<b>Prepare for DC Grand Rounds</b> <ul style="list-style-type: none"><li><input type="checkbox"/> Prepare &amp; practice oral presentation (see instructions on DC web site) <a href="http://www.vetmed.wsu.edu/dcgeneral">http://www.vetmed.wsu.edu/dcgeneral</a></li><li><input type="checkbox"/> Prepare Presentation Handout (see instructions on DC web site)</li></ul>
<input type="checkbox"/>	<b>Place a copy of your Presentation Handout in the record</b>
<input type="checkbox"/>	<b>Complete and turn in DC Evaluation Form - Required (evaluation forms will be available at DC Grand Rounds)</b>
<input type="checkbox"/>	<b>Return all case materials to your Case Facilitator (radiographs, slides, photos, glass slides, etc.)</b>

## **EVALUATION CRITERIA    How do YOU think your clinic performed?**

### **[a] CASE MANAGEMENT, including the use of laboratory tests & diagnostic procedures**

- The clinic demonstrated a logical approach and used sound problem solving methods.
- The clinic demonstrated a strong existing knowledge base - i.e. they appropriately used their veterinary school education to this point.
- The clinic effectively identified the relevant gaps in their knowledge and filled those gaps by independent research. When given time and opportunity (especially the evening), the clinic came back better prepared with an improved knowledge base, a clearer understanding of the important questions, revised hypotheses, and new ideas regarding their approach to the case.
- The clinic was able to justify all laboratory tests & diagnostic procedures based on specific DfDx's or hypotheses that reflected suspected target organs or pathophysiologic mechanisms.
- The clinic was able to work and think independently.
- The clinic had a good idea of how results could or would be interpreted. In the case of new or unfamiliar tests, the clinic did appropriate research to understand the indications, contraindications, sensitivity, specificity, and availability. In the end, they were able to properly interpret results or to recognize how the test/procedure choice may not have been appropriate.
- The clinic's approach to the case was realistic for a "real life" setting and reasonably economic. The clinic adapted appropriately to limitations imposed by the client (e.g. financial or philosophical limitations).

### **[b] MEDICAL RECORD**

- The Medical Record was organized, legible, and accurate. The final version provides a complete record that would allow reconstruction of what happened in the case retrospectively.
- The Master Problem List was updated at each submission. New problems were added as they were recognized. Problems were combined or defined at a higher level of understanding when an explanation became apparent. The problem list was resolved appropriately at the end of the exercise.
- The Assessment component of the daily progress report (SOAP) consistently addressed the high yield problems, providing analyses and updated Differential

Diagnoses. The analyses reflected careful consideration of the problems, but were relatively succinct. The rationale for considering, ranking and ruling out DfDx's was clear.

- The Plan component of the SOAP clearly and concisely indicated the clinic's planned course of action. The rationale for each test or procedure was apparent. The plan was written so that it allowed the facilitator to know explicitly what the clinic wanted to do (e.g. drug dose & route).

**[c] CLIENT COMMUNICATION:** A separate evaluation is completed by the client.

OVERVIEW: The clinic acted in a professional manner. The clinic effectively kept the client informed and educated on the status of their DC animal. The clinic was able to provide justification for any course of action they proposed, was able to explain the meaning of test and procedure results, effectively answered the client's questions, and addressed the client's concerns & needs. Everyone in the clinic played an active role in the client interactions, including at least one student as primary speaker.

**[d] PERCEIVED EFFECTIVENESS AS A TEAM** (i.e. a group practice)

This is a difficult thing for the facilitator to assess and is primarily based on student peer reviews.

**[e] TEACHING EFFECTIVENESS: Oral Presentation & DC Handout**

- The presentation was well organized and effectively presented. The presenters spoke clearly and made effective use of audiovisual aids, especially those that were provided as part of the case. When presenting images (including cytology, radiographs, gross lesions, and microscopic lesions), the presenters effectively pointed to the key features. It was clear that the clinic associates understood the key issues and the images they were utilizing. The allotted time was used appropriately.
- The audience was able to follow what had transpired in the case from presentation of the animal on Day 1 until resolution. As part of presenting the case, the clinic emphasized key findings, key decisions made by the clinic, and diagnostic dilemmas. The DfDx's were clearly indicated and it was clear how the DfDx list changed as more information was obtained.
- The clinic effectively balanced presentation of the case with presentation of the final diagnosis, pathophysiology, critical DfDx's and Learning Issues. As a result, students in the audience came away from the presentation with a good understanding of the disease or diseases studied and relevant issues surrounding the disease, including any Public Health considerations. It is important that the clinic did not neglect basic science issues that are relevant to the courses which participate in the DC's (pathology, clinical pathology, bacteriology/mycology, toxicology, virology, and immunology).

- The clinic effectively and thoughtfully presented their "Learning Issues" for the case. From a teaching & learning standpoint, this is one of the more important aspects of the presentation.
- Members of the clinic effectively answered questions from colleagues and guests in the room.
- The use of humor or "theater" in the presentation was not excessive. Attempts to be "entertaining" did not detract from the effectiveness of the presentation as a vehicle to share with colleagues and visitors what the clinic had learned through their DC case.
- The clinic's HANDOUT met professional standards as the students might expect of a handout at a professional meeting or in class. It followed the basic guidelines, was well organized and well written.
- The clinic's handout was very effective in providing a review of the disease or diseases that were examined through this case.
- The clinic's Learning Issues were clearly listed and explained in the handout.
- The handout provided references that someone could locate and utilize if they wished to learn more. The references included more than the standard veterinary textbooks, thereby reflecting a significant effort by the clinic to delve into the current literature.

## **PRESENTATION EVALUATION (EXAMPLE)**

Evaluate each presentation using these criteria and the 5 point scale below:

- [a] Organization and clarity of presentation.
- [b] Knowledge of subject area. (including ability to answer questions)
- [c] Effectiveness of teaching materials. (e.g. overheads, PowerPoint, slides)
- [d] Overall effectiveness in conveying relevant learning issues from case.
- [e] Attempts at humor were appropriate (i.e. did not detract from teaching effectiveness).

1 = "Poor", 2 = "Needs improvement", 3 = "Satisfactory", 4 = "Very good", and 5 = "Outstanding".

Case #1:	Case #2:	Case #3:	Case #4:

You are welcome to write comments regarding the presentations on the back of this form.

## **EVALUATION OF MEMBERS OF YOUR OWN CLINIC (INCLUDING YOURSELF)**

List the members of your clinic below. Evaluate each member's {a} contribution to your group AND {b} ability to work as part of a team. Use the following letters. **S** = Satisfactory. **U** = Unsatisfactory. **N** = Needs improvement. Evaluate yourself as well. We encourage you to write comments on the back of this page. Please try to be constructive.