





ONLINE MEDICINE WORK EXPERIENCE

VIRTUAL WARD ROUND - SELF-REFLECTION

Cellulitis and Medical Student History Taking



Conversations between healthcare staff and patients are confidential. So why does the student tell the whole team about what they have discussed with the patient?





Is the student only interested in the patient's "medical" problems?





Is the patient only interested in his "medical" problems?





Do you think the patient would rather just speak to a doctor?





What kind of teaching and learning do you see in this video?





Do you think the student would be nervous speaking to the patient?





Do you think the student is nervous presenting to the whole team and having to answer questions in front of them?





Conversations between healthcare staff and patients are confidential. So why does the student tell the whole team about what they have discussed with the patient?

- Although a conversation is confidential it is essentially between the patient and the "team" rather than an individual.
- Confidentiality is a key topic and comes up at interview. There
 are certain circumstances when it can be broken without a
 patient's consent but they are few and far between.
- Information can be shared however between team members as long as it is relevant to patient care.





Is the student only interested in the patient's "medical" problems?

 No. We should be looking at the Bio-psycho-social model of care (or another model like that). How does the medical problem interact with the patient's own mental state and their way of life? For example this patient doesn't just have cellulitis – he also has MS and his wife is his carer so we have to think about more than just the infection in his leg.





Is the patient only interested in his "medical" problems?

 No. As above. Often the "medical" pathology is the least of the patient's concerns. What are his own "Ideas, Concerns and Expectations" about what is wrong with him?





Do you think the patient would rather just speak to a doctor?

- Not necessarily. They may want to speak to the doctor but sometimes patients are glad to be able to have a chat and often feel freer to chat to a student as they are less worried about "taking up the doctor's time".
- Patients are often very glad to be helping medical students to learn also, as they see it as "playing their part" in teaching the next generation of doctors.





What kind of teaching and learning do you see in this video?

- Impromptu teaching
- Direct questioning
- Experience of history taking and speaking with patients independently
- Learning to "present" to the ward round





Do you think the student would be nervous speaking to the patient?

 Maybe. Often students are nervous at first – generally they get more and more comfortable as they go through medical school.





Do you think the student is nervous presenting to the whole team and having to answer questions in front of them?

 Maybe. We aim to do this sensitively and non-threateningly but ultimately it is good to get used to doing this as you need to do this throughout your career.





Associated Student Interview Videos

- Speaking with Patients for the First Time
 - Bedside Teaching



