THE ONE-MINUTE LEARNER HUDDLE
Discuss with your student before the session starts

1. GOALS: Remember to be specific!
   (1) Student’s current level of training/experience
   (2) Student’s specific goals
      ▪ Encourage student’s self assessment
   (3) Your goals for the student
      ▪ Use your observation of their performance

2. GETTING GOING: When, how and who should the student see?
   ▪ Should the student see any patient that is available? See (or not see) specific patients?
   ▪ Should the student room patients themselves? Talk with your MA or nurse?

3. HOW MUCH and HOW LONG
   ▪ How much of the visit should the student do on his/her own?
   ▪ How long should the student spend with each patient?

4. PRESENTING: Where and how?
   ▪ Where should the student present to you?
   ▪ What presentation format should be used? How detailed a presentation do you want?

5. CHARTING: When and how?
   ▪ What format should the student use for notes?
   ▪ When should the student write notes?

6. QUESTIONS:
   ▪ When is a good time to discuss questions the student has?

ADAPTED FROM THE DEPARTMENT OF FAMILY & PREVENTIVE MEDICINE
BOSTON UNIVERSITY SCHOOL OF MEDICINE 2012

THE ONE-MINUTE PRECEPTOR
A prototypical set of teacher’s actions that can be adapted to almost any case presentation

1. GET A COMMITMENT
   • “What do you think is happening here?”
   • “What is your plan for treating him?”

2. PROBE FOR SUPPORTING EVIDENCE
   • “Were there any other alternatives you considered?”
   • “What made you rule out pulmonary embolism in this case?”
   • “If the patient were 65 instead of 20, would this change your plan?”

3. TEACH GENERAL RULES. Try to find a teaching point that applies to other situations
   • “We often find a patient’s BP is higher in the office than at home; it is helpful to have a patient bring in a BP log”

4. REINFORCE WHAT WAS DONE WELL
   • “You were right to assess this patient for depression and your interview for depression symptoms was complete and accurate”

5. CORRECT MISTAKES
   • “I agree that ideally we would like her BP to be as close to normal as possible, but the new JNC 8 guidelines suggest that treating diabetic patients to goals of < 130/80, especially with multiple medicines may increase the risk of side effects”

ADAPTED FROM NEHER, GORDON, MYER & STEVENS. A FIVE-STEP “MICROSKILLS” MODEL OF TEACHING. J. AMERICAN BOARD OF FAMILY PRACTICE 1992;5:419-24
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