Communication Skills Guidelines

Student:                                     Preceptor:                                   Date:

Patient Age:       Sex:         CC:

Portion of Interview Observed:

Opening/Closing Interview
Introduces self
Calls patient by name
Shakes hands entering/leaving
Negotiates agenda for encounter

Personal Manner
Good eye contact
Appropriate, open body language, sits down
Appropriate facial expressions and tone of voice
Uses silence appropriately

Relationship Skills
Listens carefully (nods, “mm-hm”)
Reflects patients feelings or concerns
Legitimizes patients feelings or concerns
Offers partnership, support, or praise

Data Collection
Starts with open ended questions
Progresses with specific questions
Does not ask multiple questions
Does not ask presumptive/leading questions
Does not interrupt patient
Asks for clarification if necessary
Appropriately includes family members/child in interview
Logical sequencing of questions
Summarizes information gathered

Adapted from Lindsey Lane's Structured Clinical Observation, Jefferson Medical College, Pennsylvania, PA
Information Giving
Avoids using jargon/explains medical terms used
Solicits questions
Explains reasons for recommendations
Checks understanding of patient/family
Assesses patient’s willingness to follow recommendations

Management
Explains management plan
Uses visual and written materials for explanation
Arranges for follow-up
Outlines reasons for recontact/visit
(Appropriately includes child in explanation)

Physical Exam
Washes hands
Minimizes patient’s discomfort
Preserves modesty
Explains what doing
Builds rapport
Uses correct technique
(Uses developmentally appropriate technique)

Key feedback points:

1.

2.

3.

Content Feedback: