**ONE MINUTE PRECEPTOR // what, why, and how to do it well...**

**What is it?**

A time-efficient 5-step teaching approach that leverages adult learning principles and targets clinical reasoning.

**Why use it?**

- Demonstrated benefits include improved learner and teacher confidence, enhanced self-directed post-encounter learning, improved feedback quality, and higher rates of accurate diagnosis (Parrot)
- Fosters ownership of clinical problems and allows both learners and teachers to identify and target learning gaps (Neher)
- Preceptors rate the OMP as more effective and more efficient than the traditional model (Aagaard)

**How to do it?**

<table>
<thead>
<tr>
<th>Step</th>
<th>Examples</th>
</tr>
</thead>
</table>
| 1. Get a commitment | “What do you think is going on with this patient?”  
“What would be your treatment plan?” |
| 2. Probe for understanding | “What factors make this diagnosis likely?”  
“Were there any other alternatives you considered?”  
“What made you rule out condition X?” |
| 3. Reinforce what was done well. | “Your diagnosis of “probably pneumonia” was well supported by your history and physical. You clearly integrated the patient’s history and your physical findings in making that assessment” |
| 4. Correct mistakes. | “When you ask the patient about the presence of symptoms and then provide a list of examples, you risk directing the patient in their response.” |
| 5. Teach a general rule. | “If you leave the question open, without suggestions, you avoid limiting the patient’s response and may end up with a broader differential to work from.” |

**References:**