
SKILL DIMENSIONS *Summary*

Patient-Centered Method

- ▶ The physician **actively explores** a patients' experience by inquiring about patient feelings, ideas, impact on function, and expectations.
- ▶ The physician **attempts to gain** a greater knowledge and understanding of the patient as a whole person by asking about his or her context (i.e FIFE)
- ▶ The physician **integrates** a patient's context with his or her illness experience in a clear and empathetic way while moving toward developing a management plan.
- ▶ The physician **works** with the patient to come to a shared understanding of the problem and each person's role in addressing it by
 - **Encouraging** discussion
 - **Providing** the patient with opportunities to ask questions
 - **Inviting** feedback
 - **Seeking** clarification and consensus
 - **Addressing** disagreements
- ▶ The physician **incorporates** relevant health promotion and prevention in finding common ground around the management of a problem.
- ▶ The physician **approaches** a patient's problems with a realistic and longitudinal view, which respects and appropriately balances the priorities of the patient and physician and considers the resources of individuals and the community.

Clinical Reasoning Skills

- ▶ The physician efficiently **gathers and discriminates** appropriate data from relevant sources (ie. patient history and physical, patient chart, investigation results and the literature)
- ▶ The physician **integrates and interprets** data, including matching current situation to past situations with this patient or others, to make logical inferences and formulate an initial set of hypotheses about the patient's current condition
- ▶ The physician **uses** hypothetico-deductive reasoning to prioritize a differential diagnosis and identify a definitive diagnosis of a patient's problem (Diagnostic Reasoning)
- ▶ The physician **considers** the diagnosis, the therapeutic evidence as well as the individual patient context and values, and recommends a course of action; including the risks and benefits, to address the diagnosis (Therapeutic Reasoning)
- ▶ The physician **evaluates** the effectiveness of the selected treatment and revises diagnosis and treatment plan, as needed

Professionalism

- ▶ The physician's day-to-day behaviour **reassures** one that the physician is responsible, reliable, and trustworthy.
- ▶ The physician's day-to-day behaviour and discussion **reassures** one that the physician is ethical and honest.
- ▶ The physician **knows** his or her limits of clinical competence and seeks help appropriately.
- ▶ The physician **demonstrates** a flexible, open-minded approach that is resourceful and deals with uncertainty.
- ▶ The physician **evokes** confidence without arrogance, and does so even when needing to obtain further information or assistance.
- ▶ The physician **demonstrates** a caring and compassionate manner.
- ▶ The physician **demonstrates** respect for patients in all ways, maintains appropriate boundaries, and is committed to patient well-being. This includes time management, availability, and a willingness to assess performance.
- ▶ The physician **demonstrates** respect for colleagues and team members.
- ▶ The physician **practices** evidence-based medicine skillfully. This implies not only critical appraisal and information-management capabilities, but incorporates appropriate learning from colleagues and patients.
- ▶ The physician **displays** a commitment to societal and community well-being.
- ▶ The physician **displays** a commitment to personal health and seeks balance between personal life and professional responsibilities.
- ▶ The physician **demonstrates** a mindful approach to practice by maintaining composure/equanimity, even in difficult situations, and by engaging in thoughtful dialogue about values and motives.

Selectivity

- ▶ The physician **sets** priorities and focuses on the most important items
- ▶ The physician **knows** when to say something and when not to
- ▶ The physician **gathers** the most useful information without losing time on less contributory data
- ▶ The physician **distinguishes** the emergent from the elective and intervenes in a timely fashion
- ▶ The physician **acts** when necessary, even though information may be incomplete
- ▶ The physician **determines** the likelihoods, pertinence, and priorities in his or her differential diagnoses
- ▶ The physician **selects and modifies** a treatment to fit the particular needs of a patient and a situation
- ▶ The physician **distinguishes** the sick from the not sick
- ▶ The physician **does** something extra when it will likely be helpful
- ▶ The physician **uses** both general and active listening skills to facilitate effective communication with a patient or colleague.

Communication Skills

- ▶ The physician **demonstrates** adequate verbal skills to be understood by a patient or colleague, converses at an appropriate level for the patient or colleague's age and educational level, and employs the appropriate tone to ensure good communication and comfort
- ▶ The physician **demonstrates** adequate skills to communicate clearly with a patient or colleague in a written fashion (e.g., in a letter to a patient, educational materials for the patient, test requisition for colleague, follow-up orders)
- ▶ The physician **is conscious of** the impact of body language on communication with the patient or colleague and **adjusts** it appropriately when it inhibits communication
- ▶ The physician is **aware** of and **responsive** to a patient or colleague's body language, particularly feelings not well expressed in a verbal manner (e.g., dissatisfaction, anger, guilt)
- ▶ The physician **adapts** communication to the individual patient or colleague for reasons such as culture, age, and disability (e.g., a young child or teenage patient, a colleague from a different cultural background, or someone with speech deficits, hearing deficits, or language difficulties)
- ▶ The physician **demonstrates** the ability to hear, understand, and discuss an opinion, idea, or value that may be different from their own while maintaining respect for the patient's or colleague's right to decide for himself or herself.
- ▶ The physician **demonstrates** effective charting skills.

Procedural Skills

- ▶ The physician accurately **decides** whether or not to do a procedure after considering:
 - A. *The indications and contraindications to the procedure*
 - B. *Their own skills and readiness to do the procedure (e.g., level of fatigue and any personal distractions)*
 - C. *The context of the procedure, including the patient involved, the complexity of the task, the time needed, the need for assistance, and location*
- ▶ Before deciding to go ahead with a procedure, the physician:
 - A. **Discusses** the procedure with the patient, including a description of the procedure and possible outcomes, both positive and negative, as part of obtaining their consent.
 - B. **Prepares** for the procedure by ensuring the appropriate equipment is ready.
 - C. **Mentally rehearses** the following:
 - *The anatomic landmarks necessary for procedure performance.*
 - *The technical steps necessary in sequential fashion, including any preliminary examination.*
 - *The potential complications and their management.*
- ▶ During performance of the procedure, the physician **keeps** the patient informed to reduce anxiety and always **ensures** patient comfort and safety
- ▶ If a procedure is not going as expected, the physician **re-evaluates** the situation and stops or seeks assistance as required.
- ▶ After completion of a procedure, the physician **develops** a plan with the patient for after care and follow.

