

## Field Note Use Easy to Follow Instructions

### What the process should deliver:

- During daily clinical work, encourage the gathering and documentation of case-specific comments and feedback with reflection and coaching from preceptors to residents.
- Consistency across the program, with properly documented feedback to stimulate improvement in assessing competence:
  - based on performance through a wide spectrum of skills
  - linked to the CFPC Evaluation Objectives (key features and observable behaviours)
- A guide to teachers and learners, and evidence that competence is developing by:
  - helping inform ITARs, periodic reports, performance reviews, and resident's portfolio
  - acting as an aide-mémoire for periodic discussions on resident progress

### On the selected clinical sessions

- Observe an encounter, part of an encounter or simply discuss the case with the resident as close to the time of the encounter as possible (preferably the same day).
- It is very important that both the preceptor and the resident are engaged in the discussion reflecting on the clinical situation. This requires face to face dialogue with input from both partners during completion. Often it is helpful to have the resident do some or all of the writing, noting the demographic information, the problem/situation discussed, and the feedback given.
- Indicate on the note if a direct observation has been involved.
- Use the "Guide to the CFPC Evaluation Objectives" found on the duplicate field note pad to choose **one** phase of the encounter, **one** competency of **one** skill and appropriate domains of clinical care to be discussed. This encourages specific feedback to reinforce the take home message.
- The responsibility to initiate the discussion should be shared between faculty and resident

### Important Background Information

Click here to go to the CFPC's Evaluation Objectives: <http://cfpc.ca/EvaluationObjectives/>.  
Or go to [www.cfpc.ca](http://www.cfpc.ca) and look under "For Teachers and Researchers" for the Evaluation Objectives and other tools.

### Feedback: To Be Shared, Specific and Focused

- Ensure the resident starts the discussion with their impressions.
- Together develop positive statements "**continue**" with shared "**suggestions for improvement**".
- Common reflection is an important part of the process.
- On selected occasions explore with the resident the pertinent Key Feature or Observable Behavior from the CFPC Evaluation Objectives.
- Reinforce the take home message/**coaching point**.

## Mid and End of Rotation

- Ensure direct observations/discussions have covered a variety of phases, skills, topics and domains
- Review your carbon copies of the field notes prior to or during assessment discussions and ITAR completion with the resident. Then return them to the site administrator for storage in the resident file.
- The resident keeps the other copy for their file/portfolio to be used in discussion with their primary preceptor and/or site director for the ongoing demonstration of their progress towards competency.

### Examples:

- ✚ **Procedure:** IUD Insertion; **Skill Dimension:** Procedural Skills; **Competency:** Informed Consent and Preparation; **Domains:** Office/Women's Health Care
- ✚ **Continue:** Preceptor: "What do you think went well there? Resident: "I think the patient appreciated that I explained what was going to happen during the whole procedure."
- ✚ **Suggestions for improvement:** Preceptor: "I usually try to plan for what I will need during the procedure and have it ready prior to starting."
- ✚ **Follow up:** Preceptor: "Please always review our check list for IUD insertion while preparing for the procedure."
  
- ✚ **Phase:** History; **Skill Dimension:** Communication; **Competency:** Non-Verbal; **Domain:** Office/Care of Adults
- ✚ **Continue:** Resident: "As we discussed the last time I maintained good eye contact."
- ✚ **Suggestions for improvement:** Preceptor: "I noticed you appeared to invade her personal space. If you try to stand back a little further it may improve your patient's comfort."
- ✚ **Follow up:** Preceptor: "Perhaps we could video you this afternoon so you could see for yourself."
  
- ✚ **Problem:** Ectopic Pregnancy; **Phase:** Investigation; **Skill Dimension:** Selectivity; **Competency:** Establishes Priorities; **Domain:** Emergency/Women's Health Care
- ✚ **Continue:** Resident: "I identified the GYN/OBS history and the possibility of an ectopic pregnancy." Preceptor: "Well done! It was great you used the key features for abdominal pain to help with this."
- ✚ **Suggestions for improvement:** Preceptor: "Perhaps the next step is to understand the urgency for immediate further investigation and treatment and how to arrange for that in our community."
- ✚ **Follow up:** Preceptor: "Tomorrow morning after rounds let's discuss how to best use the ER and Xray in urgent situations."
  
- ✚ **Problem:** Multiple Medical Problems; **Phase:** Management and Treatment; **Skill Dimension:** Clinical Reasoning; **Competency:** Set Goals/ Objectives; **Domain:** Office/Care of the Elderly
- ✚ **Continue:** Resident: "I dealt with most of the problems she presented to me getting her flow sheets for diabetes and hypertension done."
- ✚ **Suggestions for improvement:** Preceptor: "Thanks for going back when I noticed your description about her frequent falls was more limited than some of the notes on other less critical problems. With a patient like this I try to identify all the presenting problems early then put aside the less important today to deal properly with the more critical."
- ✚ **Follow up:** Preceptor: "I think the Key Features on Multiple Medical Problems may help, please review them for discussion with me tomorrow morning."

To view Dalhousie Family Medicine's Completing Field Notes – Video Tutorials, please go to <http://www.medicine.dal.ca/departments/departments-sites/family/for-current-learners/resident-resources.html>