

# Education Element (E<sup>2</sup>)

## Tips for promoting Clinical Diagnostic Reasoning

- **Scenario:** You are in clinic evaluating a new patient with the fourth-year medical student on your team. After seeing the patient, you are ready to hear the student's clinical impression of the case. How might you use this opportunity to promote their clinical diagnostic reasoning?
- **Perspectives from the literature:**
  - Clinical teachers observe learners gather patient information from the medical record, imaging, test results, and patient interviews. These observations should lead to clinical discussions which can advance each learner's clinical reasoning
  - A learner's clinical reasoning level for a specific case is sometimes more closely related to their previous exposure to the problem in questions rather than their level of training
  - Open-ended questions such as 'What do you think is causing these symptoms?' or 'What puzzled you about this case?' are useful in assessing the learner's clinical reasoning level
  - A disorganized presentation or discussion should prompt teachers to elicit a one or two sentence summary of the case. This 'problem representation' can serve as the starting point for cognitive feedback on the diagnostically meaningful information in the case, the irrelevant findings, and those discriminating features that point to the correct diagnosis
  - When the learner suggests a possible, but not plausible diagnostic impression, clinical teachers can ask the learner to describe the key features of a typical case for that diagnosis. This description can be contrasted to the case at hand.
  - Medical students who are early in their training should ideally be assigned to patients with common problems for which there are prototypical presentations. After these features have been solidified in their memory, further clinical exposure can offer appreciation for atypical or subtle findings in identifying the correct diagnosis