University of Massachusetts
UMASS Graduate School of Nursing

Teaching & Assessing Clinical Reasoning

February 8, 2021

Completion of this session and submission of an evaluation form will be recognized as 1 contact hour.

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Presenters:

- Karen Dick, PhD, GNP-BC, FAANP
- Ken Peterson, PhD, FNP-BC

- Neither has anything to disclose

A Message from our Organizers:

- *This session will be **recorded**.*
- *Please include your **email in the chat** to document your attendance.*
- ***Successful Completion Requirements:***
  - *Participants are expected stay throughout the duration of the session.*
  - *Attendance will be monitored by a coordinator; attendance will be tracked in the ZOOM chat.*
  - *Participants are required to complete an evaluation at the end of the session.*
  - *Certificates will be distributed via email within 6 to 8 weeks following the program.*
- *You will be emailed a link to the evaluation following the session. To receive **CEUs,** you must complete the evaluation.*

Check-In:

In our first 3 sessions we talked about:

- Practical tips for engaging learners
- The importance of assessing learners' needs
- Setting objectives
- One Minute Preceptor
- Giving Feedback

- Any success stories or questions?

Learning Objectives:

- Describe the steps in the Clinical Reasoning Process
- Discuss ways to lead learners through the steps
- Develop an Action Plan to use the Clinical Reasoning Process

Can we teach providers how to think?

4 Step Process:

1. Generate a Database
2. Compose a Summary Statement
3. Choose a likely diagnosis and generate an Illness Script (typical presentation)
4. Compare/contrast the patient's presentation to the Illness Script to generate a Differential Diagnosis

Addressing Patient Concerns:

Apply a scientific or problem solving process that includes:

- Clinical Reasoning
- Differential Diagnosis
- Symptom Analysis

Dains, J. E., Baumann, L. C., & Scheibel, P. (2016). *Advanced health assessment and clinical diagnosis in primary care* (5th ed.). St. Louis, Mo.: Elsevier Mosby.

Hypothesis - oriented Inquiry: Evidence Phase

- Looking for *clues*
- Start with HPI
- Consider:
  - Environmental
  - Physiologic
  - Pathophysiologic
- Choose key features

Determine Acuity

- The importance of the ability to determine Sick / Not Sick

Summary Statement

- Consolidates thinking
- Include
  - Time course & acuity
  - Epidemiology
  - Key features

Differential Diagnoses

Learner generates list based on initial information

How do we do this? Additional data

- Co-morbid conditions
- Past Medical Hx
- Family Hx
- Social Hx
- Medications
- ……

Diagnostic Reasoning Approaches

Less experienced learners:

- Think about each symptom in isolation
- Deductive reasoning

More experienced learners:

- Cognitive short cuts
- Rapid pattern matching

Categories

- Simple, common, less urgent
- Complex, serious
- Acute or chronic

Prioritize Differentials

Keep in mind:

- Acuity
- Probability / Likelihood

Consider further data

- ROS
- Functional health
- Key PE findings

Determine KEY differentials for this patient

Working Differential ⟶

- Use to determine targeted physical exam
- Decide on appropriate diagnostic testing
- Decide on appropriate treatment / management

Summary: Teaching providers how to think

1. Generate a Database
2. Compose a Summary Statement
3. Choose a likely diagnosis and generate an Illness Script (typical presentation)
4. Compare/contrast the patient's presentation to the Illness Script
5. Differential Diagnosis

References

1. Dains, J. E., Baumann, L. C., & Scheibel, P. (2016). *Advanced health assessment and clinical diagnosis in primary care* (5th ed.). St. Louis, Mo.: Elsevier Mosby.