The M2 Focused OSCEs are both a formative and summative assessment of several of the key graduation competencies, including data gathering and interpretation, communication, interpersonal skills, and physical exam skills. Focused OSCEs 1 and 2 are both formative, with a faculty observer, and a simulated patient (SP) in the room, OSCE 3 is a graded summative assessment by the faculty observer, and the simulated patient.

Focused OSCE #1 will run as follows: 2 Simulated Patient Stations

- Pre-encounter – Students read patient information and tasks for the encounter at the station door. You must take notes in order to complete your assignment.
- Five minutes – Simulated patient/student interaction re: chief complaint
- Three minutes – Interaction with Faculty Observer. *Here the faculty observer will seek to help you fine tune your skills by asking key questions, and providing you with feedback about your progress in the interview.*
- Seven minutes - Encounter with simulated patient resumes
- Ten minutes – Physical exam portion of the exercise
- Five minutes- debriefing with faculty observer

Focused OSCE #2 will run as follows: 2 Simulated Patient Stations

- Pre-encounter - Students read patient information and tasks for the encounter at the station door. You are encouraged to take notes to complete your patient write up at the end of the encounter.
- Ten minutes - Simulated patient/student interaction re: chief complaint
- Ten minutes – Physical exam
- Five minutes – Patient SOAP note to be completed during encounter
- Five minutes- Feedback from Faculty Observer

Students who faculty observers feel need to remediate any portion of the above encounters will do so prior to the 3rd graded focused OSCE.

Graded Focused OSCE #3 will run as follows: 4 Stations - 3 History Only, 1 Physical Exam

History Only Stations

- Ten minutes - Simulated patient/student interaction re: chief complaint
- Five minutes – Patient SOAP note to be completed during encounter
- Five minutes - Feedback from faculty observers

Physical Exam Station

- Fifteen minutes – Students read patient history at the door, Physical Exam using Mini CEX form
I. Simulated Patient Encounters:
The simulated patient encounters in the M2 OSCEs include several types of situations or stations. In most of the stations you will be asked to perform a focused history to determine the most likely cause of the patient’s complaint. These stations may include a communication/interpersonal skill challenge; in other stations the primary focus may be a physical exam task. The simulated patients are trained to portray a specific patient realistically and consistently, based on scripts written by faculty. The patients are also trained to record student performance on faculty-developed checklists and to rate student communication and interpersonal skills. Please treat the simulated patients with the respect they deserve.

- Checklists are case-specific, and include essential data-gathering (Hx and PE) items, explanations to the patient, or other activities essential to the case. Items are scored as done/not done. PE maneuvers done incorrectly (e.g., auscultation performed through the gown instead of on skin) will be marked as "not done correctly". The materials as described in Bates will be followed for the OSCEs in Clinical Tutorials.

- Communication and Interpersonal Skills (CIS) items are the same across all the SP encounters. See the list attached for some examples of CIS items.

- Post encounter challenges: After the patient encounter, you will have a post-encounter task. In most cases this will consist of composing the patient SOAP note. These would be formatively evaluated and as such not factored into your grade. Examples of SOAP formats for this course will be given to you during instruction, and orientation.

A pdf sample patient note worksheet can be found at the following link:

You can practice writing computer patient notes on the USMLE website:

That site also has samples of completed notes.

Patient notes:
**History**: Include a brief description of the patient (38 y/o male in NAD), include and label all the usual parts of a chart note (CC, HPI, PMH, ROS, etc.) with pertinent positives and negatives.

**PE**: Always write down the vitals – don’t just write “see nurses note” or “see chart”. Always include the cardiac and lung exam even if you don’t think it’s particularly relevant to the case.

**DDx**: Don’t include diagnoses that don’t fit the presentation of this specific patient. Any Dx you list must be supported/suggested by the findings you documented.
**Labs:** Include labs that will help you rule in or out your DDx possibilities.

- Feedback: After the post-encounter interval, faculty will provide brief feedback and discussion of your CIS and PE skills. This is a good opportunity for them to comment on your data-gathering or clinical reasoning skills. There may be time for the SP to give you feedback on how they responded to specific statements on your part, in order to help you identify effective and ineffective interpersonal behaviors.

Here are some faculty suggestions based on previous exams.

**Data gathering (H&P):** Before going into the room to see the patient ask yourself:

- What are the two or three most likely diagnoses based on the information in the door chart?
- What signs/symptoms would help distinguish between these hypotheses?

**Physical exam:** *always* wash your hands before the exam. *Always* auscultate on skin, *not* through the gown.

**Closing:** Keep in mind that you are expected to bring the interview to a close; don't just walk out of the room at the end. Try to do some form of the following, and have this as a developmental goal to work up to all of it: Ask the patient if they have any questions; tell them what you think is going on; negotiate a plan; and address any concerns the patient may have.

***If you don’t know, it is alright to tell them you will check on it for them and get back to them.***

Communication and Interpersonal Skills items are designed to assess your ability to maintain a patient-centered approach. All items are rated on a 4-point scale.

**Sample Communication items:**

<table>
<thead>
<tr>
<th>Friendly communication</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
<tbody>
<tr>
<td>You did not greet me or greeted me perfunctorily, or communicated with me rudely during the encounter.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Your greeting and/or behavior during the encounter was generally polite but impersonal or distant</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>You greeted me warmly and communicated with me in a friendly, personal manner throughout the encounter</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Your greeting and overall communication were friendly and compassionate. Overall, you created an exceptionally warm and friendly environment that made me feel comfortable to tell you all of my problems.</td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

Comments:
### Respectful treatment

<table>
<thead>
<tr>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
<tbody>
<tr>
<td>You showed an obvious sign of disrespect during the encounter. <em>(i.e. you treated me as inferior)</em></td>
<td>You did not show disrespect to me. However, I observed some signs of condescending behavior. Although I believe it was unintentional it made me feel that I was not at the same level with you.</td>
<td>You gave several indications of respecting me. If there was a physical exam, this includes draping me appropriately.</td>
<td>You were exceptionally respectful throughout the encounter. Your verbal and nonverbal communication showed respect for my privacy, my opinions, my rights, and/or my socioeconomic status, etc.</td>
</tr>
</tbody>
</table>

**Comments:**

### Listening to my story

<table>
<thead>
<tr>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
<tbody>
<tr>
<td>You rarely gave me any opportunity to tell my story and/or frequently interrupted me while I was talking, not allowing me to finish what I said. Sometimes I felt you were not paying attention (for example, you asked for information I already provided).</td>
<td>You let me tell my story without interruption, or only interrupted appropriately and respectfully. You seemed to pay attention to my story and responded to what I said appropriately.</td>
<td>You allowed me to tell my story without inappropriate interruption, responded appropriately to what I said, and asked thoughtful questions to encourage me to tell more of my story.</td>
<td>You were an exceptional listener. You encouraged me to tell my story and checked your understanding by restating important points.</td>
</tr>
</tbody>
</table>

**Comments:**

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