# Aspects to consider during case-based discussion - General

### Communication Skills and Rapport

* Patient centred, adapts style to patient needs, explores patient perceptions & expectations.
* Understands different cultural beliefs, priorities, and values.

### History

* Uses relevant and focussed questions to appropriately explore patient issue/s, thoroughly elicits the sequence of events, symptoms analysis, undertakes systems review, considers PMHx, Rx, Allergies, FHx and social history.
* Achieves comprehensive detailed and focused history of presenting problem, impact on patient function and patient perception of or feelings about the problem.

### Examination Skills

* Relevant, organised, logical, thorough, efficient, respectful, and mindful of patient safety, comfort, and dignity.
* Steered by likely Dx and key differentials and related to patient functional capacity.

### Clinical Reasoning

* Accurate diagnosis or formulates plausible differential diagnoses list by appropriately weighting history and examination findings.
* Considers red flags, masquerades, and important diagnoses to rule in or out. Considers associated clinical conditions. Identifies the severity of the condition.
* Relevant justifiable investigations clearly explained.

### Management Plan

* Appropriate explanation to the patient of diagnosis, plan
* Safe, timely, reduces risk, supportive
* Patient-centred
* Evidence-based
* Best practice guidelines
* Rational safe prescribing
* Negotiated with the patient, individualised, considering patient perspectives and priorities
* Includes preventive screening and health promotion where appropriate
* Includes management of other continuing or acute problems where appropriate
* Adheres to relevant legislation
* Motivational, e.g., lifestyle change, where appropriate
* Risks of non-compliance explained
* Side effects and costs explained
* Short- and long-term goals outlined
* Includes partner, family, parents, and carers with consent where appropriate
* Provides relevant information

### Follow-up

* Safety nets
* Negotiates appropriate follow-up
* Explained FU regarding investigations, referrals, and next appt here
* Use of recalls

### Professionalism

* Boundaries
* Communication with the team
* Working with team members, and other healthcare providers
* Adhering to relevant protocols, legislation,
* Medical records adequacy
* Referral letter adequacy
* Medicare billing
* Understanding of the cost of different aspects of health care
* Confidentiality
* Liaising with colleagues
* Networks with local resources and supports

### Overall Performance

* Overall comprehensive approach and competent across all categories and cases seen
* Patient comfort and safety prioritised,
* Uncompromising re asserting the need to reduce the patient’s risk of harm to self/others and assuring non-judgemental respectful support
* Patient-centred
* Sound clinical reasoning and comprehensive medical management
* Has a positive impact on patient well-being, understanding of their condition and how to help themselves and what to do and when to return,
* Understands the role of a therapeutic relationship, continuity of care, and confidentiality, especially in small/rural communities
* Understands the implications of referral e.g., rural context of distance, travel time and expense