

Tips for Great Bedside Teaching

Why it is important: learner, teacher and patient satisfaction; patient empowerment; opportunities to teach and assess clinical skills; greater emphasis on diagnostic reasoning when guided by the patient; increased opportunities for interdisciplinary management; potential to increase efficiency; and improve care transitions.

What to do at the bedside:

1. Have a plan prior to entering a patient room – Who is going to present? Who is going to lead if there is a need to ask additional questions or perform parts of physical exam? Who will close the visit with a reminder to patient of when they will return and offer to answer questions?
2. Let the bedside nurse know you are going to round on the patient so they can be present.
3. Have the presenter stand or sit near the patient's head (use a chair/stool when able).
4. Review medications (medication reconciliation on admission / discharge day, changes day-to-day)
5. Consider coordination / review of follow up visits at the bedside.
6. Allow time for "teach back" by the patient.
7. If there is a diagnostic or management dilemma consider reviewing this away from the bedside to allow time to discuss as a team.
8. Compliment the learner when appropriate, this can help build patient-resident/student rapport by increasing their trust in their decision making.

Potential Barriers and how to address:

1. Patient unavailable: have a backup plan for whom to see next; have a list of nurses with phone numbers and call to ensure patient availability prior to travel between units.
2. Patients too spread out through hospital: cohorting of patients reduces travel time between rooms
3. Reliance on technology: use of COW (computer on wheels) and computers in patient rooms; review of vital signs/labs prior to bedside rounds.
4. Concern for sensitive issues: set clear expectations of what to discuss at bedside prior to beginning rounds; check patient understanding of diagnosis prior to giving information; ensure patient is okay with sharing information/being examined with any visitors who may be present.
5. Other patient duties: set expectations for responding to pages/nursing requests during rounds (who to hand off to if presenting); discuss use of smart phones/tablets during rounds at beginning of rotation; let patient know why/how technology is being used when necessary.

References:

1. Gonzalo, Jed D., MD, et al. "Identifying and Overcoming the Barriers to Bedside Rounds: A Multicenter Qualitative Study." *Academic Medicine* 89.2 (February 2014): 326-334.
2. Reilly, James B., MD, et al. "Redesigning Rounds: Towards a More Purposeful Approach to Inpatient Teaching and Learning." *Academic Medicine* 90.4 (April 2015): 450-453.
3. Stickrath, Chad MD, Eva Aagaard, MD and Mel Anderson, MD. "MiPlan: A Learner-Centered Model for Bedside Teaching in Today's Academic Medical Centers." *Academic Medicine* 88.3 (March 2013): 322-327.