

# Patient Centered Medicine (PCM)

## Loyola University Chicago Interview Feedback Form (LUCIFF)

|                                  |                                |
|----------------------------------|--------------------------------|
| Source:                          | Mode:                          |
| <input type="checkbox"/> Faculty | <input type="checkbox"/> Video |
| <input type="checkbox"/> Peer    | <input type="checkbox"/> Live  |
| <input type="checkbox"/> Self    |                                |

|  |  |  |
|--|--|--|
| <b>Student Name:</b>   |  | <b>SP Case Name:</b>   |
| <b>ITEM</b>  | <b>DEFINITION</b>  | <b>ASSESSMENT<br/>Comment on<br/>Strengths/Recommendations for<br/>Improvement</b> |
| <b>Opening</b>   |  |  |
| <ul style="list-style-type: none"> <li>• Initial Greeting:                             <ul style="list-style-type: none"> <li>○ verbal introduction</li> <li>○ shake hands</li> <li>○ address patient as: Mr., Mrs., Ms.</li> </ul> </li> <li>• Puts patient at ease</li> <li>• States purpose of interview</li> </ul>   | <p>States name and role on team<br/>Greets warmly</p> <p>Minimizes distractions Attends to patient’s comfort and privacy<br/>Teaching exercise, consult, etc. Corrects misunderstanding</p>  | <b>COMMENTS</b>  |
| <b>Information Gathering</b>   |  |  |
| <ul style="list-style-type: none"> <li>• Questioning: Uses open-to-closed cone</li> <li>• Negotiates priorities for problems to be discussed.</li> <li>• Establishes a narrative thread</li> <li>• Re-directs and /or interrupts (if necessary)</li> <li>• Problem Survey</li> <li>• Segment Summary/Clarification</li> <li>• Transitions smoothly between interview sections</li> </ul> | <p>Starting with multiple open-ended questions followed by closed-ended questions. Avoids multiple and leading questions Avoids the use of jargon/technical language</p> <p>Sets agenda and verifies it with patient, if appropriate.</p> <p>Eliciting a chronological account. Lets patient tell story without unnecessary interruptions and listens carefully. Follows significant leads</p> <p>Recognizes when patient is rambling, circumstantial, tangential, or irrelevant</p> <p>Asks, “What else?” until all major concerns are expressed</p> <p>Paraphrases patient’s story and clarifies as needed</p> <p>Avoids abrupt changes in content areas</p> | <b>COMMENTS</b>  |

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|--|---|----------------------|--|--|--|-----|----|
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| <b>Closing</b>   |   |                      |  |  |  |     |    |
| <ul style="list-style-type: none"> <li>Encourages patient's questions or invites comments</li> <li>States appreciation for patient's efforts.</li> <li>Specifies next step</li> </ul>                  | Answers questions clearly and appropriately   |                      | <b>COMMENTS</b>  |  |  |     |    |
| <b>Facilitation Skills</b>   |   |                      |  |  |  |     |    |
| <ul style="list-style-type: none"> <li>Eye contact</li> <li>Open posture</li> <li>Reinforces patient's responses.</li> <li>Uses silences when appropriate.</li> </ul>                                  | Conveys interest and attentiveness.<br>Positive body language and appropriate blocking  |                      | <b>COMMENTS</b>  |  |  |     |    |
| <b>Relationship Skills</b>   |   |                      |  |  |  |     |    |
| <ul style="list-style-type: none"> <li>Reflection/legitimatization</li> <li>Respect</li> <li>Support/partnership</li> </ul>  | Expresses understandability of patient's emotions<br>Being appropriately deferential<br>Willingness to be helpful, to work together |                      | <b>COMMENTS</b>  |  |  |     |    |
| <b>Patient Education</b>   |   |                      |  |  |  |     |    |
| <ul style="list-style-type: none"> <li>Delivers diagnostic and instructional statements in simple language</li> <li>Verifies that patient understands.</li> <li>Involves patient in process</li> </ul> | Explains what patient needs to know without using jargon  |                      | <b>COMMENTS</b>  |  |  |     |    |
| <b>Flow</b>  |   |                      |  |  |  |     |    |
| <ul style="list-style-type: none"> <li>Smooth transition from one component to the next, with key points summarized and ending with an appropriate closure.</li> </ul>                                 |   |                      | <b>COMMENTS</b>  |  |  |     |    |
| <b>History Data Base</b> (Content Area Form, page 4)   |   | YES                  | NO   | <b>Professional Appearance &amp; Conduct</b> |  | YES | NO |
| Completed Satisfactory ✓   |   |                      |  | Satisfactory? ✓                              |  |     |    |

**OVERALL INTERVIEW ASSESSMENT**

|   |   |  |   |
|---|---|--|---|
| <p><b>Please Check only ONE Box in this Row</b></p> | <p style="text-align: center;"><input type="checkbox"/><br/><b>Does Not Meet Expectations *</b></p> | <p style="text-align: center;"><input type="checkbox"/><br/><b>Meets Expectations, but with Concerns *</b></p> | <p style="text-align: center;"><input type="checkbox"/><br/><b>Meets Expectations</b></p> |
|---|---|--|---|

**Does Not Meet Expectations**

Unprepared for interview, or demonstrates unprofessional behavior, or leaves out multiple major sections of the history, or is inappropriate. **MUST DESCRIBE IN COMMENTS SECTION**

**Meets Expectations, but with Concerns**

**MUST DESCRIBE IN COMMENTS SECTION**

**Meets Expectations**

Is well prepared for the interview, established rapport, puts the patient at ease, and obtains the important information with logical flow. Approaches the patient in a kind, empathic, respectful manner. **DOES NOT REQUIRE COMMENTS**

**COMMENTS ( \* These areas, if checked, require comments.)**

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|--------------------------|---------------------|
| <p><b>Evaluator:</b></p> | <p><b>Date:</b></p> |
|--------------------------|---------------------|

**HISTORY DATA BASE OUTLINE: Key Content Areas – check if discussed****A. Chief Complaint** \_\_\_\_\_**B. History of the Present Illness**

1. Characteristics of Symptoms
  - a.  Location
  - b.  Radiation
  - c.  Quality
  - d.  Severity/Intensity
  - e.  Timing (onset, duration)
    - i. Sudden, gradual
    - ii. Acute, chronic
  - f.  Frequency/Pattern (intermittent, continuous, progressive)
  - g.  Setting
  - h.  Aggravating/Exacerbating factors
  - i.  Alleviating factors
  - j.  Associated manifestations
2.  Associated **active medical, surgical or psychiatric problems** which may impact the Chief Complaint
3.  **Past experience** with symptom(s)
  - a.  Prior Treatment? Response? Data from past charts?
  - b.  What has patient done about the symptom(s)
4.  Significant positives and negatives
5.  What was the psychosocial **context** of the onset of the symptoms?
6.  Patient's Perspective of the Illness
  - a.  Patient's **understanding** of the disease? Especially causes/implications/fears
  - b.  **Impact** of the disease and/or its treatment on the patient's life, work, relationships
  - c.  Patient **expectations**
  - d.  Patient's **reason** for visit

**C. Medical History**

1.  Childhood illnesses
2.  Health Screening (prior exams, cholesterol, etc.)
3.  Immunizations
4.  Adult illnesses/hospitalizations (including psychiatric)
5.  Injuries/Accidents
6.  Obstetric/Gynecological History

**D. Surgical History**

1.  Operations
2.  Surgical Procedures

**E. Therapies**

1.  Medications
2.  Complementary/Alternative Medicine

**F. Allergies**

1.  Allergies and Drug Reactions

**G. Psychosocial History**

1.  Marital status and relationship satisfaction
2.  Living arrangements/Family structure
3.  Personal safety at home
4.  Tobacco, Alcohol, Drugs
5.  Support/Secondary Gains
6.  Employment history/job satisfaction/military service
7.  Sexual history/function
8.  Significant life events and stressors: deaths, divorce, finances
9.  Diet, Sleep, Exercise

**H. Family History**

1.  Current health of parents, siblings, children
2.  History of significant illnesses (branching diagram if appropriate)
3.  Deaths: dates and ages at death

**I. Review of Systems**

- Constitutional;  Integumentary (Skin &/or Breasts);  
 Head;  Eyes;  Ears/Nose/Mouth/Throat;  Neck;  
 Respiratory;  Cardiovascular;  
 Gastrointestinal;  Genitourinary;  
 Musculoskeletal;  Neurologic;  
 Psychiatric;  Endocrine;  
 Hematologic;  Allergy/Immunologic