Example Field Note and Review:

Date of encounter 2016-02-02	Experience KTI/Core Family Medicine/	QFHT	Promoted reflection			
Resident: Joe Residento		Completed By: Dr. Jane Griffiths				
Type of encounter/ situation: 62 yo M Diabetes review		Phase Observed: Follow-up				
Direct Observation - Yes		level of performance chosen by preceptor Requires minimal supervision	level of performance chosen by resident			
Skills Dimensions / CanMEDs Roles Patient-centered Approach Clinical Reasoning Skills Selectivity		Domains of Clinical Care Care of Adults	Linked EPA Care of the Adult with a Chronic Condition			
Feedback						
Continue (strengths):	discussing the option of increasing his medication was a good idea and very patient-centered in this case					
Change (or do less):	You may want to consider not being very rigid about guidelines interpretation, but apply them with the individual in mind. In this case I am happy with his HbgA1C 7.1, especially since he has worked so hard to get there. Insisting it be <7 may have undermined his feeling of success today.					
Consider (next steps):	we talked about a 6/12 f/u in this case would not be best since you just increased his BP medication and todays BP was too high. In addition the Diabetes guidelines would recommend having him back at 3/12 for DM review. He should have his BP and his response to his med increase checked sooner. perhaps 3-4 weeks.					
This field note is: Not Fl	agged					
Comments						
Date Submit	ted By Status/F	lag Comment				
2016-02-02 Dr. Jane	Griffiths Not Flagge	ed				
	note in one your personal Field Note	folders.				

Is the feedback timely?	Yes. This Field Note was written on the day of the encounter.				
Are there narrative comments?	Yes.				
Is the tone positive and/ or	Yes.				
supportive?					
Does the narrative describe	Yes.				
behaviour in clear language?					
Does the narrative reinforce	Yes. Under the 'strengths' section.				
what has been done well?					
Does the narrative identify	This Field Note highlights a difference in approach with a reminder not to apply				
areas to improve?	guidelines in a rigid way, but to consider the application of those guidelines on				
	an individual level				
Does the narrative include	This Field Note clearly states that a shorter follow up than the resident was				
specific strategies for	suggesting is necessary and why that is so.				
improvement?					
Does the feedback relate to	Yes. When viewing this on-line, a short description specific to the EPA (Care of				
specific standards?	Adults with a Chronic Condition), the phase of the clinical encounter (follow up)				
	and the level of performance chosen (requires minimal supervision) is available				
	when mousing over the 'level of performance' section. This is not visible in this				
	static view in this example.				
Is there congruence between	This is difficult to tell unless you are the learner or the preceptor. Ultimately,				
the learner level and the	this documentation of feedback often represents a nuanced and tailored verbal				
sophistication of feedback?	feedback. Joe Residento is a PGY1 resident and this feedback is about some				
	fairly basic issues and he was considered by the preceptor to be requiring				
	minimal supervision. Hopefully this feedback will support him functioning at an				
	even higher level on the next similar occasion				