

We would like to know

- if they made you feel at ease?
- were they professional in their approach?
- were you confident in the way they took a history from you, or performed an examination?

In this way you can help us to shape the attitudes and skills of doctors of the future.

### **Undergraduate Education Team**

The staff responsible for teaching the medical students at Wythenshawe are known as the Undergraduate Medical Education Department. We are based on the first floor of the ERC building. As you come out of the lift, our offices are on the left. You will have to use the intercom by the door to get in (dial 5933). There is a reception desk there. Our teaching area is just around the corner.

We have different coordinators and clinical skills tutors for each student year group. Usually the individual who contacted you by phone or letter will be on stand-by to welcome you and show you where to go and what to do.

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## **Patient volunteers helping medical students**



## **Undergraduate Medical Education**

## How you can help

There are some things that you can teach medical students which they will never learn from a text book. This approach is often referred to as 'Patients as Educators' and we are grateful that you are able to help us in this way. We may also ask you to help as a volunteer patient in the exams that the students have to pass each year

Our medical students come from Manchester Medical School during their 3rd, 4th and 5th years. Their 3rd year is their first real experience of working on the wards and in the community with real patients. Their 5th year is their final year.

You have first hand experiences of your own illness or condition that they can learn from. You may have clinical signs for them to find on a physical examination which they need to see in 'real life' rather than on a computer screen or in a lecture. You may also have examples of good practice or of bad experiences with doctors which you can pass on to them as lessons to be learned. This leaflet explains what your role might be, as we work together to teach our students.

## What kind of teaching can you do?

### History taking.

Allowing a medical student to take your medical history and explore the impact that your illness has had on you is an important starting point. Sometimes we may do this with a group of students together in a lecture room, and sometimes we will ask you to talk one-to-one with a medical student. Some students may just let you talk, other students may follow a pattern of questioning.

The students will require information in the following areas:

- **Presenting complaint.** What is the current problem or what was the first thing you noticed when you became ill?
- **History of presenting complaint.** The story of your illness over time and any changes that have happened during that time.
- **Past medical history.** Any long standing conditions, illnesses, operations or investigations you may have had.
- **Family history.** Has anyone in your family had anything similar? They will also ask you about the health of your parents, brothers, sisters and children too.
- **Social history.** These will be questions about smoking, drinking alcohol, your job, where you live, who you live with, hobbies, if you have any pets. This gives them a broader picture of who you are and may give clues to some illnesses.
- **Drug history and allergies.** They will ask if you are taking any medicines from your doctor or whether you are taking any medicines from the chemist, herbalist or other source.

## Physical examination

This is a necessary part of most interactions between a doctor and their patient. So if you are happy to allow a student to examine you, there are a few things that may help you to help them.

Only expose the part of your body that needs to be examined. If a student asks to examine another part of your body not usually examined then ask them why they want to do that. If you are happy to proceed, then they can extend the examination. If you do not want to be examined any further then please say so.

You will have had a lot of examinations to the area of the body that is causing the problems, so you will have a good idea how the examination should be performed. If the student misses anything out or examines the wrong area, tell them. It will be helpful to hear it from you.

If you have any concerns about the examination whatsoever and want the student to stop you **MUST** say so. The student has no right to continue unless you are absolutely happy and have agreed.

## Communication skills

Communication skills are one of the most important aspects of any patient-doctor consultation. The students have learned a particular way called the Calgary-Cambridge model. They are taught to introduce themselves clearly, to reassure you about confidentiality, to treat you with respect and to build a caring relationship. This encourages them to listen carefully and to check that you understand fully what is being said. Your willingness to help as a volunteer 'patient educator' is so helpful to them in practising these skills.

## Feedback

One of our clinical tutors will usually be working alongside you, and sometimes they may ask you for your feedback about the student's performance. You should start by saying what you thought they did well. Then you can say what they could do better next time. In particular, you are in the best place to say how well their communication skills worked for you.