

## Enhancing Depth of Reflection of Family Medicine Residents: Results of an Intervention

Marie Andrades<sup>1\*</sup> and Sheilla Pinjani<sup>2</sup> (Late)

### Questionnaire to determine baseline reflective abilities of residents for clinical reasoning

**Demographic Data:**

1. Resident level: R2 R3 R4 (please circle)
2. Age: \_\_\_\_\_
3. Gender: Male Female (please circle)
4. MBBS from: \_\_\_\_\_ College
5. Year of graduation from MBBS: \_\_\_\_\_
6. Years of clinical experience after graduation before joining residency: \_\_\_\_\_

**Specific Questions to assess baseline Reflective ability:** Please tick the most appropriate option that is indicative of your actions and thinking during clinical practice from the statements given below

		100% Always	90%	70%	50% of the time	30%	10%	Not at all
		6	5	4	3	2	1	0
	<b>Habitual Action</b>							
1.	When I see patients with common problems, I can deal with them intuitively							
2.	In my clinical practice I have so much to do that I have started doing them instinctively							
3	As long as I can remember my basic medical knowledge I do not have to think too much							
4	If I follow what my seniors do I do not have to think too much							
	<b>Understanding</b>							
5	In my clinical practice I need to think through to apply principles of medicine in majority of cases.							
6	to be a competent clinician, I need to understand the content and application of it in medicine							
8	I need to understand the material taught by my seniors to perform practical skills							
9	During residency, I need to constantly think about the clinical content, I am being taught							
	<b>Reflection</b>							
10	I think about what I am doing in my clinical practice and think of alternative ways of doing it							
11	I reflect and contemplate on my actions to see whether I could have improved on what I did							
12	I reappraise my clinical practice experience, so I can learn from it and improve for my next clinical encounter							
	<b>Critical Reflection</b>							
13	As a result of my academic experience in the residency I have positively changed the way I do clinical practice							
14	The residency program has challenged some of my firm beliefs of clinical practice							
15	As a result of the residency I have changed my normal way of practicing medicine							
16	During the residency I have found errors in my clinical practice in what I had previously believed to be right							

17	For good clinical care it is essential to consider facts, principles and rules							
18	Sometimes I wonder why do I make the same mistakes again and again							
19	I document my clinical dilemmas because I am required to							
20	I document my clinical dilemmas in order to resolve those							
21	I document my clinical dilemmas in order to do better in future							