**Appendix: OSCE Assessment Checklist: Modified Kalamazoo for Telemedicine Encounters\***

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|  **Opening Visit (9 items)** |
| * Introduces self, role as medical student
 |
| * Greets and shows interest in patient as person, uses patient’s name
 |
| * Assists patient with technology as needed: camera/audio/lighting
 |
| * Confirms confidentiality: location/participants
 |
| * Allows patient to complete opening statement w/o interruption
 |
| * Asks to elicit full set of concerns
 |
| * Establishes mutual goals/agenda for visit
 |
| * Reviews limitations of visit, obtains consent
 |
| * Appears professional: attire/background
 |
| **Building the Relationship (7 items)** |
| * Establishes initial rapport
 |
| * Eye contact: looking at camera, enough to build connection, verbalizes activities (chart review, taking notes)
 |
| * Uses tone/pace, and posture showing care and concern
 |
| * Pays attention to verbal and non-verbal cues
 |
| * Elicits and addresses emotional content
 |
| * Avoids technical jargon
 |
| * Demonstrates confidence/appears competent
 |
| **Information Gathering (5 items)**  |
| * Begins with open-ended questions, i.e., “Tell me more about…”
 |
| * Collects information in an organized manner
 |
| * Clarifies details as necessary w/more specific “yes/no” questions
 |
| * Summarizes and checks accuracy with patient
 |
| * Transitions effectively to additional questions
 |
| **Shared Decision-Making/Closing the Encounter (9 items)**  |
| * Elicits patient’s chief concern, explored patient’s belief/expectations about illness
 |
| * Asks about events/circumstances, other people that may affect health
 |
| * Responds explicitly to patient statements about ideas, feelings, values
 |
| * Includes patient in choices and decisions to the extent s/he desires
 |
| * Checks for mutual understanding of diagnostic and/or treatment plans (i.e., uses teach-back method)
 |
| * Asks if patient has questions or concerns
 |
| * Summarizes/reviews red flags for urgent symptoms
 |
| * Clarifies follow-up or contact arrangements, i.e., where to locate patient education materials/after visit notes
 |
| * Acknowledges patient and provides closure to interview
 |
| **Physical Examination for Low Back Pain case (4 items)** |
| * Determined location of pain: spinal vs paraspinal
 |
| * Evaluated range of motion (flexion/extension/lateral bending/rotation)
 |
| * Assessed strength testing: toe/heel walk, rising out of chair
 |
| * Provided clarity of instruction in guiding patient through the physical examination
 |
| **Open ended comments**  |
| *\* Faculty ratings for each item are “done” or “not done/needs improvement” with an open comments column.  Students receive a PDF copy of the faculty assessment and comments.* |