

# CONSULTATION CHECKLIST - THE KEY SKILLS

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|--|---|
| <input type="checkbox"/> Salutation                          | <input type="checkbox"/> Establishes usual health state   |
| <input type="checkbox"/> Identifies self                     | <input type="checkbox"/> Tele-examination   |
| <input type="checkbox"/> Identifies patient inc. DOB         | <input type="checkbox"/> Gives diagnosis/opinion  |
| <input type="checkbox"/> Confirms patient can talk freely    | <input type="checkbox"/> Pauses for (or elicits) response                                       |
| <input type="checkbox"/> Invites patient narrative           | <input type="checkbox"/> Answers patient questions  |
| <input type="checkbox"/> Listens to end of patient narrative | <input type="checkbox"/> Educates patient re diagnosis  |
| <input type="checkbox"/> Recaps initial story                | <input type="checkbox"/> Promotes self-care   |
| <input type="checkbox"/> Brief empathic statement            | <input type="checkbox"/> Action and plan  |
| <input type="checkbox"/> Birth the Lambs (something else?)   | <input type="checkbox"/> Predicts course  |
| <input type="checkbox"/> Clinician tone of voice             | <input type="checkbox"/> Safety net   |
| <input type="checkbox"/> Signposts first triaging moment     | <input type="checkbox"/> Ensures plan and instructions are understood especially re. medication |
| <input type="checkbox"/> Open to closed questions            | <input type="checkbox"/> Safety-netting instructions  |
| <input type="checkbox"/> Problem specific questions          | <input type="checkbox"/> Asks patient to repeat back  |
| <input type="checkbox"/> Red Flags                           | <input type="checkbox"/> Asks patient to write down vital information                           |
| <input type="checkbox"/> PMH                                 | <input type="checkbox"/> Happy patient puts phone down first                                    |
| <input type="checkbox"/> Social History                      |   |
| <input type="checkbox"/> Current medications                 |   |