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Green Means Knock!

Farzana Nuruzzaman

The light turned green. I knocked on the grey door with a number 5 on it. I heard a female voice say, "Come in." I entered what seemed to be an ordinary exam room with a counter and sink at the back and an examining table and chair in the middle of the room. Her name was Ms. S. A brunette in her mid-thirties, wearing only a hospital gown, sat on the examining table. Her hands were folded in her lap and she looked at me expectantly as I walked into the room. She was my "patient." And this was the Morchand exam.

The "Morchand exam" is a component of the Clinical Skills course at New York Medical College. It is designed to test your skills to perform a comprehensive medical interview and nearly a complete physical exam on a standardized patient, all in one hour. It takes place at The Morchand Center, which started in 1991 as a consortium of three schools: Mount Sinai School of Medicine, Albert Einstein College of Medicine, and New York Medical College. Several other schools joined the consortium in 1995, which was named the New York City Consortium for Clinical Competence. The Morchand Center operates on the principle of teaching and assessment. Their mission is to teach medical students "to communicate with patients in the thoughtful and sensitive manner necessary for a successful doctor-patient relationship"(Morchand Center website).

The "Morchand exam" is a source of great anxiety for many second year medical students, including myself. I remember when I learned at the introductory lecture of the Clinical Skills course that I would have to be able to take a complete medical history and perform a full physical in 60 minutes while being "observed" and videotaped, I did not really know what to expect. I did not worry so much, but I did wonder whether I would actually be ready. Weeks passed and Pathology and Microbiology studying was interrupted by mandatory sessions for the clinical skills course. We began with small class sessions about communication skills. It basically functioned as a review of the first year course with some role-plays and discussion about building a doctor-patient relationship. The take-home messages for me were: actively listen to the patient and allow her to tell her story; ask open-ended questions; and above all, respond empathically. I also learned that some of my peers are really good at acting as "smokers who just don't want to quit" and as "angry patients."

Then, we were introduced to the major components of a physical exam in each of five sessions scattered throughout the semester. For example, we covered the neuromuscular exam one day and the eye exam on another day. The techniques that we learned were based on the physical exam that is outlined in the Schwartz textbook (Textbook of Physical Diagnosis by Mark H. Schwartz) and DVD. These sessions were my opportunity to finally to use all the fancy equipment that I bought from the medical equipment company that most people from the class bulk-orders from. Even though I fumbled on many parts of the exam, it was only between my peer and I, and we were both far too occupied with our basic science classes to really concentrate on remembering to switch hands with holding the ophthalmoscope to exam different eyes of the patient until nearly poking each other in the face.

Finally, we had eight preceptor sessions, where we were supposed to practice the skills that we learned on real patients. Everyone has a different preceptor experience, but for me, I finally felt like a "student-doctor" just because I was actually in the wards. On Wednesday afternoons, I would dress up in my white coat, walk into the hospital with my stethoscope in hand, and look forward to actually seeing real patients. Sure, I didn't always really know what I

was supposed to be seeing/hearing/feeling. Sure, I still relied heavily on the "purple card" (provided by the Clinical Skills course where the details of the medical history and physical exam are listed). But, it was definitely a major departure from the sessions in the modules. These were hospitalized patients, all with different stories to tell and experiences to learn from. Some were too ill/old/fragile to do all the listed bullet points in the purple card. Some welcomed having someone to talk to. Others were tired of answering the same questions that they told the doctor earlier that morning and just wanted to continue watching their favorite soap. I always felt slightly closer to being a doctor after those sessions, but still felt slightly overwhelmed with all that I needed to learn, organize, and internalize about history-taking and performing all the aspects of physical exam in a time pressure situation.

March finally came. The month of the Morchand. It was finally time for me to really perfect phrasing all the right questions and practice all the techniques in a timely fashion. This year, we had an incredibly helpful information session about real medical student perspectives of the actual exam day. For instance, you wait in front of a door that has a small light next to it. It starts out being red. When it turns green, it means that the time for your session has begun. In the past, some people wait and wait in front of the room, and become so anxious about not wasting their precious sixty minutes and become so ready to introduce themselves and to ask about the chief complaint that they barge into the room without knocking. After the information session, along with watching the Schwartz DVD and practicing with friends, I finally felt "ready." I had my list of questions in my head. I decided on an order of the physical exam components that allowed me to do the exam in the allotted time and that made sense to me. So, while I didn't quite know when it happened, all the pieces fell together at the right moment. My Morchand exam went as smoothly as could be given all the circumstances that Ms. S threw at me, and despite all my normal "test-day jitters", during my feedback session, she said that she appreciated my "professional manner."

For all the future Morchand exam test takers, you too may feel slightly overwhelmed at the thought of it like I was nearly eight months ago. But if you give it some effort, you will feel as ready as you can ever be in front of that grey door soon enough. It will be a long journey to get there, but in the end it's just another exam to help you become a better physician. So make the most of it and remember, green means "Knock!"

References

The Morchand Center for Clinical Competence
<http://www.mssm.edu/medschool/morchand/overview.shtml>