Editor's Note: The following abstracts are the Top 3 abstracts selected by the JGME *and the International Conference on Residency Education (ICRE) for the 2013 ICRE meeting in Calgary, Canada. A full listing of submitted abstracts appears on the* JGME *website at www.jgme.org. Underlined author names indicate presenting author at the conference.*

Case Review and Supervision on the Clinical Teaching Unit: Time to Be More Explicit

Background/Objectives: On internal medicine clinical teaching units (CTUs), admission case reviews play an important role in both teaching and patient care. Prior studies have explored teaching strategies for case reviews, but none have considered how attending physicians shape their supervisory role to optimize teaching and patient care simultaneously. The purpose of this study was to explore how attending physicians approach admission case reviews and the supervision of residents in order to respond to the challenges of shifting team membership and patient complexity.

Methods: A constructivist grounded theory approach was used to iteratively collect and analyze the data. Data was collected through 4 focus groups and 18 individual interviews with 24 attending physicians at 2 academic hospitals.

Results: Analysis revealed that attending physicians have strategies for balancing teaching and patient care, but these vary widely from one attending to the next and are largely hidden from the rest of the team. Often strategies required a supervisory role that is omniscient and ever-present, an unrealistic expectation in the complex environment of CTUs. Attendings indicated that they rarely articulate their expectations about team roles during and following review, thus increasing the chances of residents not following up on patient care issues. Few attending physicians had strategies for supporting the team to formally document changes in thinking arising from review. Acknowledging the problem of follow-up, attending physicians described needing to keep personal notes in order to keep track of their patients; the content of these were rarely shared with the team.

Conclusions: This study is a first step in initiating a dialogue and a research agenda regarding how attending physicians can optimize teaching and patient care. Given the wide variation in assumptions associated with individual attending physicians' strategies for conducting admission case reviews and documentation, attending physicians may want to consider making these more explicit for their teams.

M. Goldszmidt[1], **T. Dornan**[2], **J. van Merrienboer**[2], **G. Bordage**[3], **L. Faden**[4], **L. Lingard**[1]
[1]University of Western Ontario, London, ON
[2]School of Health Professions Education, Maastricht University, Maastrict
[3]University of Illinois at Chicago, Chicago, IL
[4]Schulich School of Medicine & Dentistry, London, ON

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