Being in your first clinical teaching role as a resident or fellow is a big responsibility. Teaching is not always easy, but it is very rewarding. Apply these evidence-based tips in your work with students and take time to reflect upon your teaching.

**Recognize Your Role in the Clinical Learning Environment:** The clinical learning environment is the intersection between the clinical work setting and the many forms of training that occur in that setting. Threats include rotational nature, time-limitations, work allocation, work duration, task-switching, and adequate preparation for the rigors of practice.

**Orient New Students:** Introduce your students to their clinical site, make them aware of any policies and procedures, and provide them with an opportunity to ask questions. Let them know when and how they should contact you.

**Set Clear Expectations for Engagement:** Let students know the expectations you have for your time together, including clinical workday start and stop times. Set one learning objective with each student, or with a group of students, and then debrief at the end of the day. If you formally assess any students, let them know how and when that will take place.

**Develop a Clear Learning Objective:** Learning objectives clarify purpose and intended outcome, support students in understanding what is important, and facilitate objective and effective assessment. When you work with students, set one learning objective with each student, or with a group of learners, and then debrief what your students learned at the end of the day.

**Be Transparent with Learners:** Let your students know why the topic matters to their current training or future practice. This helps inspire their internal motivation and supports professional identity.

**Pre-brief for Complex Patients:** Consider engaging in a pre-brief for complex patients with students in clinical settings, especially if those students are novice in their clinical training.

**Employ a Clinical Teaching Model:** The One Minute Preceptor is a simple model you can use with any clinical trainee. Ask the student an open-ended clinical question. Then, move the student through the following 5 steps: 1) Get a commitment regarding the clinical diagnosis; 2) Probe for underlying reasoning and knowledge; 3) Teach general rules or take home points; 4) Offer feedback; and 5) Collect and address errors.

**Ask Questions:** Arouse interest and curiosity, assess knowledge, encourage critical thought, scaffold learning, and initiate, sustain, or direct a conversation. Redirect as needed to check for understanding, correct misinformation, paraphrase what learners say, and model good clinical reasoning.

**Give and Receive Feedback:** Build a psychologically safe learning environment which normalizes formative feedback. Offer balanced feedback rather than the “feedback sandwich.” Solicit feedback from learners, integrate it, and apply it in future clinical practice with trainees.

**Model Uncertainty and Curiosity:** Recognize and express your own uncertainty and be willing to “figure it out” with the student. Solicit and implement feedback from students. Embrace your educator identity and seek out opportunities for continued growth as an educator.

**Encourage Psychological Safety:** Support the belief that students will not be punished or humiliated for speaking up with ideas, questions, concerns, or mistakes by cultivating a predictably respectful learning environment.

**Practice Reflection:** Look back in order to process teaching experiences. Set aside time to reflect, and ask “why” or “how” questions about thought processes. Challenge your assumptions and discuss them with colleagues.

Want to discuss these concepts in more detail? Talk to your program director or chief resident and ask them to invite CEDAR to deliver an educator development session to residents or fellows in your program. Want to stay connected with CEDAR? Email us at CEDAR@health.slu.edu and request to join our mailing list.