

A reflection on my progression toward entrustment on clinical placement

I attended my first clinical placement of DVM3 at Gungahlin Veterinary Hospital (GVH) in Canberra, before the university year commenced. This is a reflection on my progression towards entrustment for EPA1: **Gather a history, perform an examination, and create a prioritised differential diagnosis list.**

The vets at GVH were very supportive and inclusive, which made me feel comfortable and eased my nerves of being on my first clinical placement. They allowed me to sit in on consultations to observe history taking, try my hand at clinical examinations, and be involved in creating differential diagnosis lists. After a few days of shadowing the vets Dr. Nat asked me, "If I stick you in a consult room tomorrow, would you be ready to perform one on your own?". I suddenly felt very nervous and unprepared. I remember thinking, "Does she not remember that I only just finished second year?". I responded, "Probably not on my own; I don't think I have the confidence in my knowledge and communication skills yet". Dr. Nat expressed she was surprised by my response, and I remember thinking "Does she have *too much* confidence in me?". I was quickly embarrassed by my response and wished I had been more self-assured.

After this interaction I was hypervigilant in all subsequent consults. As I listened to the vets take histories, I realised I was asking all the right questions in my head as the vet asked the clients out loud. I started questioning why I panicked when asked if I would be able to do it on my own; because I then knew I could. I now realise that for the first few days of observing consults, I had mostly been a fly on the wall; observing, listening, learning and occasionally contributing; however, I had not been visualising myself in the vet's position. I reflected on this realisation. I actually *could* picture myself taking an adequate history. I felt good about my performance of a physical exam, although not completely confident in my assessment of what is normal versus abnormal in every case. I still felt I was lacking in the area of differential lists but got a boost of confidence whenever I was able to come up with differential diagnoses that matched what the vet was thinking. I regretted the answer I had given to Dr. Nat.

Upon returning to uni, I was able to compare my experience at GVH with performance benchmarks gathered from the communication seminar and clinical exam practicals. My confidence in my ability to complete EPA1 was restored, as I felt I was up to par with what is expected of me at this level in my degree. I think, for me, a large step toward entrustment is being able to visualise myself actually doing it and having confidence in the knowledge and experience I have, so I plan to practice presenting myself in a more confident way. This year I hope to get a better understanding of what feels right and wrong on a physical exam, and to increase my knowledge to create differential diagnosis lists.

I feel I am at the following levels of entrustment:

- History taking: 4
- Clinical examination: 3 (for most species), ~2 (horses)
- DDX list creating: 2