

CONTEXTUAL FACTORS AND CLINICAL REASONING

Additional File 1: Post Encounter Form

1. What else do you want to **ask** this patient? (*List one to five questions*)

2. What else would you want to **look for** on this patient's physical exam? (*List one to five items*)

3. Write a complete problem list.

4. What is your **differential diagnosis**? (Please list in order of likelihood and list at least 3 responses)

- a.
- b.
- c.
- d.
- e.
- f.

5. What is your **leading diagnosis** and what data supports this diagnosis? (*List one to five pieces of evidence*).

Diagnosis

Data that supports this diagnosis

6. What is your **treatment plan** for this patient? (Diagnostic and/or therapeutic).

Work up

Therapy