

Example #2 – Learning Lab

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Presentation Title: "What Hurts?" to "How Can We Help?": Transforming Your Patient Interviewing

Abstract Body: The effectiveness of any clinical intervention begins with a high-quality patient interview. Within athletic training, the ability to elicit the most vital information and foster a strong therapeutic alliance is critical for guiding clinical decisions and achieving optimal patient outcomes. This presentation will underscore the value of motivational interviewing as a powerful framework for enhancing the patient interview and subsequent clinical examination. We will explore how motivational interviewing techniques can enhance patient adherence, foster trust, and ultimately lead to improved health outcomes. To foster tangible skill development, attendees will participate in an immersive simulation-based assessment. Through standardized patient encounters, they'll have the opportunity to objectively evaluate their current interviewing techniques, refine their practice through reflection, and significantly enhance their overall competence, leading to immediate improvements in patient communication.

Presentation Structure: Practice-based.

Level of Difficulty: Advanced

Domain(s): Domain 2: Assessment Evaluation and Diagnosis

Learning Objectives:

1. Athletic Trainers will be able to identify key components of an effective patient interview
2. Athletic Trainers will demonstrate patient-centered interviewing techniques
3. Athletic Trainers will identify common barriers to effective patient interviewing and discuss strategies for mitigating those barriers in their own practice.

Clinical Bottom Line: Effective patient interviewing using motivational Interviewing principles, shifts the focus from gathering facts to appreciating the patient's perspective, values, and readiness for change. Best practices include active listening, expressing empathy, using language that is affirming and elicits change, and empowering patients to take ownership of their recovery and rehabilitation. Common barriers such as time constraints, high patient volume, and practitioners' own implicit biases or communication habits can hinder the depth and effectiveness of these interactions.

Identify the professional practice gap and/or educational need the content addresses: Despite the BOC's emphasis on "Promoting healthy lifestyle behaviors with effective education and communication" within the Risk Reduction, Wellness, and Health Literacy domain, a significant professional practice gap exists in athletic training regarding patient interviewing. While athletic trainers generally utilize some primary prevention strategies, recent research indicates that a large majority (84.3%) are not employing motivational interviewing techniques. This limited integration of motivational interviewing, coupled with existing struggles around perceived time constraints and high patient volumes, prevents athletic trainers from fully understanding patient perspectives.

3 Peer-Reviewed References:

1. West MC, Young JP, Rivera MJ, Games KE. Primary Prevention and Motivational Interviewing: Patterns in Athletic Training. *The Internet Journal of Allied Health Sciences and Practice*. 2024 Oct 04;22(4), Article 13.
2. Frost H, Campbell P, Maxwell M, et al. Effectiveness of Motivational Interviewing on adult behaviour change in health and social care settings: a systematic review of reviews. Moitra E, ed. *PLOS ONE*. 2018;13(10):1-39. [PMID 30335780]
3. Zomahoun HTV, Guénette L, Grégoire JP, et al. Effectiveness of motivational interviewing interventions on medication adherence in adults with chronic diseases: a systematic review and meta-analysis. *Int J Epidemiol*. Published online November 17, 2016. [PMID 27864410]

Special Requests: This learning lab will include pre- and post-standardized patients. The seats for the lab should not exceed 20, unless there is flexibility to expand the time period. We can accommodate up to 5 SPs at the same time and should be able to achieve our outcomes within a 2-hour block; however, we would be better positioned if we had 2.5 hours.