What Patients Remember: The OSCE Checklist They Wish You Used

A clinical communication guide with both sides — what gets scored, and what your patient actually experiences

By Dr. Denise Kay · OSCE.ai.

The **five-star reviews** are the goal. The **one-star** reviews are the warning signs.

Patients rarely complain that you missed a checklist item. They complain that they felt rushed, ignored, judged, confused, or dismissed. The OSCE checklist is not a script to memorize. It's a blueprint for building trust.

1. Initiating the Session — Dr. K

Calgary-Cambridge (what gets scored)	★★★★★	★
Greets patient	*"Dr. K made me feel welcome right away. He seemed genuinely glad to see me."*	*"When Dr. K finally came into the office, I got the impression he didn't really want to be there."*
Introduces self and role	*"He clearly introduced himself and his role. I knew exactly who I was talking to."*	*"Never said his name. Not sure if he was even a doctor."*
Demonstrates respect	*"Dr. K really listened to me."*	*"I felt like just another patient to Dr. K."*
Identifies and confirms problems list	*"He asked me why I was there today and what I wanted to accomplish."*	*"He told me what was wrong before I finished telling him everything that was going on."*
Negotiates agenda	*"We discussed my goals for the visit together."*	*"I think he wanted to be helpful but he didn't seem interested in what would actually be helpful to me."*

2. Gathering Information — Dr. P

Calgary-Cambridge (what gets scored)	★★★★★	★
Encourages patient to tell story	*"She let me tell my story without interrupting."*	*"She interrupted before I could finish my first sentence."*
Moves from open to closed questions	*"She let me talk first, then asked focused follow-ups."*	*"She cut me off with rapid yes/no questions. I felt like we were just going through a checklist."*
Listens attentively	*"She really listened. I know she is probably busy but I never felt rushed."*	*"She nodded a lot but I'm not sure she was tracking what I said."*
Facilitates patient's responses	*"She helped me express what I was struggling to say."*	*"I'd share something important and she'd just move on like she didn't hear it."*
Uses easily understood questions	*"Her questions made sense. No jargon, no fancy words I had to ask about."*	*"She used a lot of words I didn't know. I didn't want to look stupid by asking."*
Clarifies patient's statements	*"She wasn't sure what I meant, so she asked me to explain a bit more."*	*"I'm not sure she really understood what I was saying. She'd ask a question, I would answer and then she'd move on."*
Establishes dates	*"She took the time to truly understand how my health issue was affecting me since it began."*	*"The appointment felt rushed; she cared about today's issues but completely ignored how long this has been draining me."*

3. Understanding Patient's Perspective

Calgary-Cambridge (what gets scored)	★★★★★	★
Determines and acknowledges patient's ideas	*"He asked what I thought was going on."*	*"He never asked what I thought was going on. He just told me what he thought."."*
Explores patient's concerns	*"He asked what worried me most and took it seriously."*	*"My biggest concern was never really addressed."*
Encourages expression of emotions	*"I started to tear up answering some of his questions, it was embarrassing but he gave me space and listened."*	*"When I started to tear up in response to one of his questions, he handed me a tissue and kept going."*
Picks up verbal and non-verbal clues	*"When he saw that his questions were making me uncomfortable, he told me not to worry and said he was just trying to get the facts in order to help me."*	*"He didn't seem to notice or care how uncomfortable I was answering some of the questions."*

4. Providing Structure — Dr. S

Calgary-Cambridge (what gets scored)	★★★★★	★
Summarises at end of inquiry	*"She summarized what I'd said perfectly. I knew she understood."*	*"I am not sure she really understood what I was trying to say."*
Progresses using transitional statements	*"She summarized what we'd just discussed and told me what she wanted to talk about next."*	*"She jumped from one question to another. By the end I wasn't sure what we were talking about."*
Structures logical sequence	*"Dr. S is efficient and caring. I knew exactly what she was trying to accomplish during the visit."*	*"The whole visit seemed disjointed, I couldn't really tell what Dr. S was trying to accomplish."*
Attends to timing	*"Dr. S was efficient and thorough, but I never felt rushed."*	*"The whole visit stressed me out. It felt rushed to me, like I was on a time clock"*

5. Building Relationship — Dr. R

Calgary-Cambridge (what gets scored)	★★★★★	★
Demonstrates appropriate non-verbal behavior	*"Dr. R paid attention to me, not his notes. He actually listened to me."*	*"He was clicking away at his screen the whole visit."*
Reads/writes doesn't interfere with dialogue	*"He took notes when he needed to, but it never felt like the screen mattered more than I did."*	*"He stared at the screen the whole time. Barely looked at me."*
Is not judgemental	*"I told him some things I was embarrassed about. He didn't blink."*	*"I didn't tell Dr. R everything because I felt like he was judging me with what I did share."*
Empathises and supports patient	*"He validated my feelings and didn't just rush to fix them."*	*"Dr. R was detached and indifferent to how difficult this experience has been for me."*
Appears confident	*"Dr. R really got what I was going through and knew exactly how to fix it, which instantly calmed my nerves."*	*"I wondered if he actually knew his stuff because he seemed a bit lost sometimes."*

6. Closing the Session — Dr. L (she/her)

Calgary-Cambridge (what gets scored)	★★★★★	★
Encourages patient to discuss additional points	*"Dr. L asked if I had any more questions before she wrapped up."*	*"Our time was up so fast, I still had questions when Dr. L. ended the visit. I left with more questions than answers."*
Closes interview by summarizing	*"I left knowing exactly what we decided and what needed to happen next."*	*"I left the office unsure of what the plan was, who was doing what or what my next step was."*
Contracts with patient re next steps	*"I knew what would happen next, when it would happen, and what to do if things changed."*	*"The after plans were vague and unclear. I'm still not sure what happens next."*

And by the way — read my chart before you ask me everything I already filled in three times.

Citations

Simmenroth-Nayda A, Heinemann S, Nolte C, Fischer T, Himmel W. *Psychometric properties of the Calgary Cambridge guides to assess communication skills of undergraduate medical students.* Int J Med Educ. 2014;5:212–218.

Hurley KF, Giffin NA, Stewart SA, Bullock GB. *Probing the effect of OSCE checklist length on inter-observer reliability and observer accuracy.* Med Educ Online. 2015;20:29242.

A product of AI-Human harmony — developed by Dr. Denise Kay with Claude.

Adapted from the Calgary-Cambridge communication framework.

Patient-experience callouts represent illustrative review-style language, not direct patient quotes.