Priorities in medical education have increasingly emphasized teaching skills and fostering attitudes related to patient-centered care (Beckman & Frankel, 2003; Haidet & Paterniti, 2003). The challenge for academic medical centers is to implement these competencies into their curriculum and assess the outcomes.

Using a qualitative single case study design, I sought: 1) to examine the validity of the Patient-Centered Care (PCC) Objective Structured Clinical Examination (OSCE) used as a tool to determine whether or not third-year medical students are treating chronically ill patients in a patient-centered manner based on patient feedback and critical analysis; and 2) to compare the descriptors identified by the current research respondents with the descriptors developed and implemented through an earlier project that served as a foundation for this current research.

Comparison of the respondent data with the descriptors obtained through the previous project supports the validity of the PCC OSCE and revealed consistency within five global areas: a) communication, b) answers questions adequately and listens intently, c) compassionate and non-judgmental, d) focus is on the whole patient and not just the illness, and e) individualized care. Additional concepts were also identified that would enhance the descriptors and were important elements of patient-centered care. Additional concepts were also identified that would enhance the descriptors and were important elements of patient-centered care: a) patient advocacy, b) use of visual aids, c) confidentiality, and d) religious and cultural considerations.