**3) Student PBL:**

**Role 1: Preceptor (Announce you are the PBL preceptor to the group):** *Read this to yourself and act accordingly:* **Start off the scenario asking the students to come up with a differential diagnosis.** You realize this is the 1st time student one has spoken up during one of your small group sessions, but you give student 2 and 3 attention for their diagnoses without acknowledging Student 1’s contribution, as you are intrigued why student 2 would think this is about the lungs at all, and you enjoy the lively discussions, so continue to banter with students 2 and 3.

**Role 2: Student 1 (Announce you are a student who doesn’t usually talk during these small group activities and this is the first time you have talked during this PBL group):** *Read this to yourself and act accordingly:* You don’t typically speak up during these groups, but you are pretty sure you have some good ideas about the diagnoses. **As soon as the preceptor asks for differential diagnoses, say** that you think this is a cardiac issue, could be heart failure, cardiomyopathy, cardiac arrhythmia, etc. Feel free to ad lib. After student 2 and the preceptor start talking, shut down, look sad, and don’t contribute any more.

**Role 3: Student 2 (Announce you are a student):** *Read this to yourself and act accordingly:* You are a bit of a jokester, and typically talk during PBL’s. After Student 1 relays some diagnoses, give a retort such as the following: “That’s so typical, just because you want to work with cardiac patients does not mean that every patient has something wrong with their heart. I don’t think this patient has any cardiac problems at all. I think it is a pulmonary embolism or some other lung issue.” Enjoy bantering with the preceptor and student 3

**Role 4: Student 3 (announce you are a student):** *Read this to yourself and act accordingly:* To the second student, after they share their diagnostic thoughts, you banter with them, saying, “Maybe it isn’t even the lungs either. I was thinking a systemic infection or some sort of autoimmune illness.” Enjoy bantering with student 2 and the preceptor.

**At the end, ask the group what about this scenario was not psychologically safe.**

**Redo the session demonstrating psychological safety…**

**Unsafe aspects:** Humor at the student. Preceptor did not validate student 1’s participation or contribution to the scenario, did not create space for everyone’s input. Student 2 interrupted and also quickly rejected the idea. Dismissive of student 1’s input