



**BCC 7113**  
**Internal Medicine Sub-Internship**  
**2020-2021**

**Education Director**

**Jonathan Appelbaum, MD**

Florida State University College of Medicine

Department of Clinical Sciences

1115 West Call Street, Suite 3140-F

Tallahassee, FL 32306-4300

Phone: 850-645-1227

Email: [jonathan.appelbaum@med.fsu.edu](mailto:jonathan.appelbaum@med.fsu.edu)

<b>Campus</b>	<b>Clerkship Director</b>
Daytona	Vinayak Purandare, MD
Fort Pierce	William Hood, MD
Orlando	Ben Kaplan, MD
Pensacola	Robert Anderson, MD
Sarasota	Kathleen Kennedy, MD
Tallahassee	Gregory Todd, MD

# Contents

Overview .....	3
Course Description .....	3
Orientation and Syllabus Review.....	3
Scheduled Hours/On-Call.....	3
Required Assignments .....	3
Required Assignment 1: Clerkship Educational Objectives.....	3
Required Assignment 2: Interprofessional Activities.....	3
Required Assignment 3: Transitions Across the Continuum Project.....	4
Patient Care .....	4
Overview .....	4
Inpatient Care.....	4
Handoffs.....	5
Patient Log Requirements using the Encounter Tracking System (ETS) .....	5
Written Documentation of Patient Encounters .....	5
Patient Log (ETS) Monitoring Policy .....	5
Alternate Educational Experiences.....	6
Course Meetings and Lectures .....	6
End of Clerkship Exam.....	6
Learning Resources .....	6
Institutional Resources .....	6
Required Reading .....	6
Evaluation.....	6
Clerkship Specific Grading.....	6
Evaluation .....	7
Grade Assignment .....	7
Course Objectives .....	7
Policies .....	8
Absence and Attendance Policy .....	8
Academic Honor Policy .....	9
Americans with Disabilities Act .....	9
College of Medicine Student Disability Resources .....	9
Student Mistreatment Policy .....	9
Student Work Hours Policy .....	9

# Overview

## **Course Description**

The Internal Medicine Sub-Internship is a competency-based internal medicine acting internship, designed to allow students the opportunity to *actively* participate in the management of patients with common clinical presentations encountered in the practice of hospital-based internal medicine. Each student will have the experience a broad range of illness severity ranging from acute care upon presentation to the emergency department to life threatening processes in the intensive care unit. Many of these patients will not be previously worked up. Students will be able to improve their basic clinical skills, learn new inpatient procedures and examination techniques, and assess the effectiveness of their clinical interventions and work with an interdisciplinary team. The student will have increasing responsibility for the care of patients during this clerkship.

Based on the Alliance for Academic Internal Medicine's [AAIM Internal Medicine Sub-Internship Curriculum 2.0](#) the sub-internship will focus on 5 broad areas:

1. Time management
2. Communication
3. Patient evaluation
4. Knowing when to ask for assistance
5. Wellness

## **Orientation and Syllabus Review**

Students **MUST** view the current orientation video on Canvas **PRIOR** to the beginning of the clerkship. A site-specific orientation will occur at the assigned clinical site prior to initiation of clinical activities. Students are responsible for communicating with Clerkship Faculty prior to the start date of the Clerkship to coordinate their meetings.

## **Scheduled Hours/On-Call**

The clerkship is four weeks in duration and will consist of inpatient shifts, in-house call, lectures, conferences, and reading assignments. It is expected that the student will work **at least 10 hours per day for 6 days per week**. Student must have experience **providing extended coverage and patient care after hours through night call, "late" call or night float**. For the purposes of this sub-internship, "short call" is defined as remaining with your team or attending on call until about 5 pm, "long call" is defined as remaining with your team or attending until 10 pm and "night float" is defined as remaining in the hospital overnight. The student is expected to remain on call with their team/faculty, which may include weekend days. The call schedule will be determined by the faculty member, while the mix of call types will be determined by the clerkship director.

# Required Assignments

## **Required Assignment 1: Clerkship Educational Objectives**

At the start of the clerkship, students will identify at least **three specific educational objectives within internal medicine** that they hope to learn during this rotation, along with a *specific plan* to achieve these objectives, such as extra readings or following extra patients. Students **must list the EBM sources** they will use to achieve these goals and can also work with the Clerkship Director and faculty to gain knowledge about these topics.

- **Submission:** Students will submit this as a Microsoft Word document to be uploaded into Student Academics. The Education Director will for review and returned with feedback. Students will upload into Student Academics by 5 p.m. on Friday of the first week of the clerkship.

At the end of the clerkship, students will briefly report on the extent to which these educational objectives were achieved and by what means.

- **Submission:** Students will submit this as a Microsoft Word document to be uploaded into Student Academics for review by the Education Director. Students will upload into Student Academics by 5 pm on the last Friday of the clerkship.

## **Required Assignment 2: Interprofessional Activities**

Interprofessional relationships and working as an integral member of a team are important physician activities. Students should function collaboratively on health care teams that include health professionals from other disciplines as they provide coordinated services to patients. Students may do this as part of the healthcare team, when acting as or

requesting a consultation. Students can utilize and enhance their own expertise by understanding and engaging the unique and diverse knowledge, skills, and abilities of other professionals to enhance team performance and maximize the quality of patient care. Working with other professionals will enhance patient safety and improve the quality and value of care.

- **Submission:** Students MUST attend and document their participation in at **LEAST TWO** interdisciplinary or case management conferences in the ETS as an Educational Activity “[IMSI] Participation in Interdisciplinary or Case Management Conference”. The assessment of this requirement will be done by the Clerkship Director.

**Required Assignment 3: Transitions Across the Continuum Project**

The Transitions Across the Continuum (TAC) project highlights the importance of proper management of a patient transition at the time of discharge from the hospital or transfer to another healthcare facility, including interprofessional collaboration that must occur for a successful discharge. This assignment is based on a patient the student cares for during the required Sub-Internship but is graded as a component of the Residency Preparation Boot Camp. *Eligible patients are those admitted, followed throughout hospitalization and discharged/transferred by the student.* Occasional exceptions are made for those students who are unable to complete the assignment during their required Sub-Internship; *projects completed outside of FMSI or IMSI require advance permission.*

- **Submission:** Complete project instructions are located on the Internal Medicine Sub-Internship Canvas page.
- **Evaluation:** Residency Preparation Boot Camp course directors or their designee will complete evaluation of this assignment. If the assignment is returned for revision, the student will be assigned an incomplete until remediation has been completed. A passing performance is required for successful completion of the Residency Preparation Boot Camp.

Transitions Across the Continuum Project Evaluation Rubric		Does Not Meet Expectations	Meets Expectations	Exceeds Expectations	Feedback
Admission note	Organization				
	Pertinent details				
	Differential diagnosis				
	Treatment plan				
Discharge summary OR Transfer summary	Organization				
	Pertinent details				
	Follow up plan				
	Evidence of hand-off				
HIPAA	HIPAA compliant				
Medication Reconciliation at Discharge	Medication interactions				
	Potential errors				
	Safety concerns				
	Adherence challenges				
Discharge documents	Hospital summary				
	Patient education				
	Health literacy				
Reflection	Challenges				
	Lessons learned				
	Importance of care team at discharge				
	Systems insight				
Overall evaluation					

## Patient Care

**Overview**

The Internal Medicine Sub-Internship is primarily an **apprenticeship style experience** with an Internal Medicine Clerkship Faculty member. The clinical faculty will have primary responsibility for assessing the achievement of the clerkship competencies.

**Inpatient Care**

Students may work within a residency program. Students will also learn about many of the ancillary services that occur inside and outside the hospital setting through the interactions with other professionals. Students will learn and evaluate the basics of patient safety and the hazards of hospitalization as well as review ethical issues that arise with their patients. Faculty will observe at least one partial history and examination by the student. **It is the student’s**

**responsibility to make sure this observation occurs.** Students will be required to work up a **minimum of 3 new/undifferentiated patients each week** in the inpatient setting. During the 4-week block, students will see 6-10 follow-up/established patients each week. If at any point students carry less than 2 patients per day (follow-ups) they will pick up and assume care of a patient who is not a new admission to the hospital.

- **Submission:** Students will document at least 1 faculty observation of a partial H&P in ETS as and Educational Activity “[IMSI] Completion of Faculty Observation of Partial H & P”.

### Handoffs

To prepare the student for PGY1 responsibilities, the student is expected to learn and be evaluated on both giving and receiving handoffs by the clerkship faculty.

- **Submission:** Students will document at least 4 handoffs in ETS as and Educational Activity “[IMSI] Participation in Patient Care Handoff”. *Simulated handoffs with the Clerkship Director can be an alternate activity and the iPASS template should be used, see PDF template on Canvas.*

### Patient Log Requirements using the Encounter Tracking System (ETS)

Students should enter patient encounter data into the ETS on a *daily* basis. Students are expected to have seen and recorded **at least 55 patient encounters** during the 4-week clerkship. The number of patients each student has responsibility for will be determined by the complexity of cases and the student’s demonstrated ability to assume a role in the care of additional patients. Students are required see **ALL** the conditions listed, and record in patient log (ETS). Students should use chapter 3 of the [AAIM Internal Medicine Sub-Internship Curriculum 2.0](#) as an outline for the learning objectives for these conditions.

Minimum Required	Condition/Problem	Location of Care	Level of Participation		
			Observe	Assist	Perform
1	Hyperglycemia	Inpatient Hospital			x
1	Fever	Inpatient Hospital			x
1	Altered Mental State	Inpatient Hospital			x
1	Blood Pressure Derangement: Hypotension	Inpatient Hospital			x
1	Blood Pressure Derangement: Hypertensive Urgency <b>or</b> Emergency	Inpatient Hospital			x
1	Respiratory Disorder: Acute Respiratory Distress <b>or</b> Shortness of Breath Dyspnea	Inpatient Hospital			x
1	Respiratory Disorder: Hypoxemia	Inpatient Hospital			x
1	Chest Pain	Inpatient Hospital			x
1	Arrhythmia	Inpatient Hospital			x
1	Electrolyte Derangement: Hyponatremia, Hypokalemia, Hyperkalemia <b>or</b> Electrolyte Derangement general	Inpatient Hospital			x
1	Acute Kidney Injury	Inpatient Hospital			x
1	Acute Pain	Inpatient Hospital			x

### Written Documentation of Patient Encounters

Students will document patient encounters in the appropriate format (e.g. admission note, SOAP note, discharge summary) either in the EHR or in a Word document submitted to their faculty for review. Evaluation of student’s charting of admissions, daily progress notes and discharge summaries will be done by the Clerkship Faculty member during patient care activities. Students are expected to participate in, and be evaluated on, their interprofessional communication (including requesting consultations). Please review chapter 4 of the [AAIM Internal Medicine Sub-Internship Curriculum 2.0](#) for more details.

### Patient Log (ETS) Monitoring Policy

Encounter data are monitored by the Clerkship Directors to assure that students are meeting clerkship requirements. If it becomes apparent that students are not encountering the required patient conditions, efforts will be made to specifically select the needed patients for you to see. If these opportunities for specific patient encounters do not occur, the student will be exposed to the conditions/diseases secondarily through reading assignments, completion of Aquifer Cases, or discussions with the Clerkship Director.

Level of participation in patient care is determined by the student involvement during the history, physical exam, assessment and treatment plan. The complexity of these components will vary, but for the purposes of choosing a level

of participation, three categories have been created, *all of which include supervision of the medical student*. The student will select the level of participation that most closely describes their involvement in the patient encounter.

- **Observe** should be selected when the student observes a clinician conducting the patient encounter.
- **Assist** should be selected when the student assists a clinician in conducting the patient encounter.
- **Perform** should be selected when the student leads or conducts the patient encounter.

### ***Alternate Educational Experiences***

Should the student be unable to complete and record a required clinical encounter or other clerkship requirement due to circumstances beyond their control, the education director will determine an appropriate alternative educational experience. The student will record as instructed in ETS. Utilization of alternative educational activities is monitored by the curriculum committee on a regular basis.

## **Course Meetings and Lectures**

Students are required to attend lectures and conferences where available. In addition, students will meet with the Clerkship Director once per week during the clerkship for case presentations and discussions. The Clerkship Director will oversee student patient-log entries, assuring breadth of experience and avoiding duplication. Students will give a case presentation of a selected case at this weekly meeting that will be assessed by the Clerkship Director. In addition, students will discuss issues of biomedical ethics and futility that arise during their care of patients, using the curriculum and resources posted on Canvas. During the final week of the clerkship, students will present a case where the principals of patient safety are outlined and addressed in a patient-centered manner. Students will be expected to have completed the readings posted on Canvas in preparation for this presentation. The final meeting of the clerkship may include a debriefing about the student's experiences on the clerkship. Review of student workhours will be part of the weekly meetings with the Clerkship Director and the mid-clerkship evaluation.

## **End of Clerkship Exam**

On the last day of the clerkship, students will take the 100-question NBME Clinical Subject Examination for Advanced Internal Medicine. There are NBME self-assessment tools available by request to your Student Support Coordinator. Contact your student support coordination for the student voucher availability policy.

## **Learning Resources**

### ***Institutional Resources***

The [Maguire Medical Library](#) offers 24/7 remote access to online resources that support the **core clerkships**. They include [Mobile Resources](#), [Point of Care](#), and [Subject Guides](#).

### ***Required Reading***

Specific resources that are required for this clerkship include:

- [Cecil Essentials of Medicine, 9<sup>th</sup> edition](#) 2016 (Andreoli, Benjamin et al) Saunders Elsevier, Inc.
- [The Washington Manual of Medical Therapeutics, 36<sup>th</sup> edition](#) 2020 (Crees, Fritz, Heudebert, Noe, Rengarajan, Wand, editors) (Also available as a mobile resource through the UCentral app)
- [Harrison's Principles of Internal Medicine 20<sup>th</sup> edition](#) 2018 (Jameson, Fauci, Braunwald, Kasper, Hauser, Longo, Loscalzo) McGraw-Hill, Inc.

The following resources are available on the Canvas IMSI Resources page:

- [AAIM Internal Medicine Sub-Internship Curriculum 2.0](#)
- Additional readings on patient safety and the hazards of acute hospitalization
- Ethics curriculum regarding futility
- Internal medicine journal articles of interest

## **Evaluation**

### ***Clerkship Specific Grading***

The standardized clerkship policy can be found on the [Office of Medical Education website](#).

1. If any remediation is required, the student is no longer eligible for honors, and will be assigned an initial grade

- of IR (Incomplete Remediation) until remediation has been completed
2. **Any breach in professionalism renders a student ineligible for honors**
  3. Document a minimum 55 patient encounters (pass/fail)
  4. Attend and record at least 2 interdisciplinary or case management meetings (pass/fail)
  5. Timely submission of required assignment “Clerkship Educational Objectives” (pass/fail)
  6. Presentation of a patient safety/ethics case to Clerkship Director (pass/fail)
  7. Documentation of competence in at least 4 handoffs (pass/fail)
  8. Active participation in Clerkship Director meetings (pass/fail)
  9. Faculty evaluations and Clerkship Director evaluations documenting competency in all required domains
  10. Clinical performance must be exemplary to be considered for honors
  11. NBME must be at 75<sup>th</sup> percentile or higher to be eligible for honors consideration and must be at the 10<sup>th</sup> percentile to pass the clerkship

### **Evaluation**

1. **Formative** A mid-clerkship evaluation is completed at the mid-point of the Clerkship by the Clerkship Director and will provide feedback to the student on progress in the clerkship. This will include progress toward achievement of clerkship objectives, competencies, assignments and required encounters. See the Canvas M.D. Clerkships AY 2020-2021 site for student user workflow guide.
2. **Summative** An evaluation of student clinical performance will be completed by the assigned Clerkship Faculty at the end of the clerkship, as well as by the resident the student worked with during the sub-internship. A final summative report will be completed by the Clerkship Director at the end of the clerkship. The Education Director will review all components of the clerkship and include an assessment of each in the final grade summary.

### **Grade Assignment**

The final grade is assigned by the Education Director and is based on all aspects of the clerkship, including clinical performance, attitude and performance during the weekly meetings with the Clerkship Director, and the results of the NBME Clinical Subject Exam. There are no grade quotas, and it is possible for any student to earn the grade of honors.

## **Course Objectives**

The following table outlines the clerkship objectives and assessment method for each, intended to be used as a guide for student learning. Each clerkship objective is mapped to the [FSU COM Educational Program Objectives \(EPOs\)](#) and [ACGME Core Entrustable Professional Activities \(EPAs\)](#). To view the complete table and for an overview of the curricular map for the clerkship years at the Florida State University College of Medicine, please visit the syllabi page of the [Office of Medical Education](#) website.

Clerkship Objectives	Assessment						
Internal Medicine Sub-Internship	End of Clerkship Exam	Faculty Observation	Clerk Dir Observation	Oral Presentation	Patient Documentation	Assignments	Online Module
Patient centered approach in all communications with patients.		x					
Demonstrate the ability to evaluate and manage patients under supervision with commonly occurring inpatient internal medicine presentations: 1. Hyperglycemia 2. Fever 3. Altered Mental State 4. Blood Pressure Derangements 5. Respiratory Disorders 6. Chest Pain 7. Arrhythmia 8. Electrolyte Derangements 9. Acute Kidney Injury 10. Acute Pain	x	x	x	x	x		x
Convey thought processes behind clinical decisions and adapts presentations to setting.		x	x	X	x		
Apply the principles and methods of Evidence-Based Medicine to acquire, appraise, and assimilate new clinical information to improve patient care.						x	
Apply knowledge of current medical literature in making evidence-based diagnostic and management decisions, using appropriate evidence-based decision support resources.	x	x	x	x	x		
Effectively manage patient transitions between different care settings.	x	x	x	x	x		
Effectively communicates handoffs (both giving and receiving)		x	x	x			
Incorporate basic science information appropriately into clinical decision making.	x	x	x	x	x		
Understanding of ethical principles and their application to patient care.		x	x				
Effective communication with patients from diverse backgrounds and with all the members of the healthcare team.		x					
Explain the risks, indications, alternatives, and contraindications for physical and pharmacological.		x	x				x
Discuss complications for which hospitalized adults are at increased risk.		x	x				x
Application of the principles of end-of-life care with patients and their families.		x					
Displays and demonstrates professionalism in all interactions with patients, colleagues and staff.		x	x				
Demonstrate the ability to work effectively as a member of the health care team and interdisciplinary teams		x	x				

## Policies

### **Absence and Attendance Policy**

The College of Medicine has detailed attendance policies as they relate to each cohort and events that conflict with course schedules. See [FSUCOM Student Handbook](#) for details of attendance policy, notice of absences and remediation. Students must use the [absence request form](#) that is located on Student Academics.

Extended absences from the clerkship are not permitted. Any absence from the clerkship must be **pre-approved by the regional Campus Dean** prior to the beginning of the clerkship, using the [student absence request form](#). Even with an excused absence, the student will complete the scheduled work as outlined.

The Clerkship Faculty, Clerkship Director and Education Director must be notified of any absence in advance by the student. In the case of illness or other unavoidable absence, follow the same procedure outlined above, and notify everyone as soon as possible. **Unapproved absences during the clerkship will result in a grade of “incomplete” until remediated, and may result in a grade of “fail” for the clerkship.**



### **Academic Honor Policy**

The Florida State University Academic Honor Policy outlines the University's expectations for the integrity of students' academic work, the procedures for resolving alleged violations of those expectations, and the rights and responsibilities of students and faculty members throughout the process. Students are responsible for reading the Academic Honor Policy and for living up to their pledge to "...be honest and truthful and...[to] strive for personal and institutional integrity at Florida State University." (Florida State University Academic Honor Policy, found at <http://fda.fsu.edu/academic-resources/academic-integrity-and-grievances/academic-honor-policy>).

### **Americans with Disabilities Act**

Students with disabilities needing academic accommodation should: (1) register with and provide documentation to the Office of Accessibility Services; and (2) bring a letter to the instructor indicating the need for accommodation and what type. Please note that instructors are not allowed to provide classroom accommodation to a student until appropriate verification from the Office of Accessibility Services has been provided. This syllabus and other class materials are available in alternative format upon request. For more information about services available to FSU students with disabilities, contact the:

Office of Accessibility Services  
874 Traditions Way  
108 Student Services Building  
Tallahassee, FL 32306-4167  
(850) 644-9566 (voice)  
(850) 644-8504 (TDD)  
Email: [oas@fsu.edu](mailto:oas@fsu.edu)  
<https://dsst.fsu.edu/oas>

### **College of Medicine Student Disability Resources**

Candidates for the M.D. degree must be able to fully and promptly perform the essential functions in each of the following categories: Observation, Communication, Motor, Intellectual, and Behavioral/Social. However, it is recognized that degrees of ability vary widely between individuals. Individuals are encouraged to discuss their disabilities with the College of Medicine's Director of Student Counseling Services and the FSU Student Disability Resource Center to determine whether they might be eligible to receive accommodations needed in order to train and function effectively as a physician. The Florida State University College of Medicine is committed to enabling its students by any reasonable means or accommodations to complete the course of study leading to the medical degree.

### **Student Mistreatment Policy**

If you feel you are being mistreated, please refer to the Student Mistreatment Policy in the [FSUCOM Student Handbook](#) and report the incident as soon as possible.

### **Student Work Hours Policy**

The FSU College of Medicine adheres to the ACGME requirements regarding clinical work and education. This includes working no more than 80 hours per week and no more than 24 hours continuously, except an additional 4 hours may be added to the 24 to perform activities related to patient safety, such as transitions of care or education. Additional patient care responsibilities must not be assigned during this time. Students will have at least one out of every 7 days off, completely free from clinical and educational duties, when averaged over 4 weeks.

**Documentation of work hours** Students will use ETS to document by self-report their daily work hours. Students must enter daily work hours that includes both clinical experience and educational activities. Failure to report work hours is considered a breach of professionalism.

- Clinical care, including documentation in medical record
- Required educational meetings (i.e. Doctoring 3, clerkship meetings, educational meetings at residency programs)

Hours that should not be included in self-reported work hours include reading about patient conditions and procedures, self-directed study for clerkships/courses, work completed for assignments, learning modules and assigned reading.