

BCC 7150 Psychiatry Clerkship 2025-2026

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Overview

Course Description

Students will participate in this clerkship as either a 6-week block or through the Longitudinal Integrated Curriculum (LIC). The Psychiatry Clerkship is a required clinical experience that provides third-year students with a solid foundation in the fundamentals of the evaluation, diagnosis, treatment, and appropriate referral of patients with mental health disorders. The student will be assigned to one or more Clerkship Faculty. A variety of learning opportunities are offered in community-based settings and include inpatient and outpatient psychiatry treatment programs, emergency departments, consultations/liaison services, residential treatment programs, correctional facilities, and others. The goal of the required six-week Psychiatry Clerkship is to provide the student with an experience that emphasizes patient evaluation and treatment in multiple settings. Diverse opportunities provide an extensive array of complementary and enriching experiences. For example, students may be exposed to the treatment of coexisting psychiatric and medical illnesses through consultations done in a general hospital. They may likewise gain the skills necessary to intervene and treat the most acutely ill patients in urgent care settings, such as the emergency room. The use of electroconvulsive therapy (ECT) may be an additional treatment modality offered on some campuses. All major psychiatric diagnostic categories will be addressed. Though the focus is primarily on adults, there will be exposure to the care of adolescents and children when possible. When appropriate, basic science correlations are also addressed.

Orientation and Syllabus Review

Students are required to read the syllabus located on the Office of Medical Education site to become familiar with expectations before beginning the clerkship. Students will also use the Canvas M.D. Clerkships AY2025-2026 site Psychiatry Clerkship homepage to access course material. A site-specific orientation will occur at the assigned clinical site before the initiation of clinical activities. Students are responsible for communicating with Clerkship Faculty before the start date of the clerkship to coordinate meetings.

Longitudinal Integrated Curriculum (LIC)

General information and policy regarding the Longitudinal Integrated Curriculum (LIC) in Marianna can be found on the syllabi page of the Office of Medical Education website.

Scheduled Hours/On-Call

Students in the Psychiatry Clerkship will be assigned to one or more psychiatry faculty and will follow the same work schedule as their faculty physicians. Students enrolled in the clerkship will work at least 4 full days per week with assigned Clerkship Faculty, as one day per week is allotted for participation in Doctoring 3 and Longitudinal Clerkship. During off-cycle rotations during which Doctoring 3 is not scheduled, students will work 5 days per week with the Clerkship Faculty. Students enrolled in the LIC will participate on the schedule provided by the Clerkship Administrator at the Marianna rural training site. Students are not required to be on-call overnight during the Psychiatry Clerkship, although many may have the opportunity to work in the urgent care or emergency setting. Possibilities include general hospital emergency rooms, direct admission centers for inpatient behavioral medicine centers, and triage in outpatient facilities. Work hours must be documented in the Encounter Tracking System (ETS) daily.

Required Assignments

Completion of all assignments with a satisfactory and timely submission is a clerkship requirement. If Student Academics is unavailable students will email their documents to their Clerkship and Education Director.

Required Assignment 1: Ethics Module

The Ethics Module is a required self-study that addresses some of the more common professionalism, ethical and boundary issues encountered in psychiatry. Students will be given common questions and use an interactive (AI PLATFORM) to discuss the topics and find the answers. Content linked in the <u>Canvas M.D. Clerkships AY2025-2026</u> Psychiatry page. Students should be prepared to discuss it with their Clerkship Director and peers at one of the weekly educational meetings.

Submission

• Document completion of this assignment as an Educational Activity in ETS by selecting "[PSY] Completion of Ethics Module Self-Study" in the drop-down menu.

Required Assignment 2: Psychiatry Project

Students are required to complete a project during the Psychiatry Clerkship and may choose from one of the following

four options. Project selections must be **approved** by the Clerkship Director **in advance** and be appropriately edited to reflect that the student is a candidate for a doctoral-level degree (e.g., correct grammar, spelling, logical syntax).

- 1. Create a 15-slide PowerPoint on any psychiatric topic to be presented to peers at Clerkship Rounds; the presentation should be approximately 20 minutes.
- 2. Present and lead a thorough and detailed discussion of a relevant journal article to peers at Clerkship Rounds; the presentation should be approximately 20 minutes.
- 3. Write an essay on a unique experience during the clerkship such as attendance at a legislative session or court hearing; the paper should be 1000-1500 words.
- 4. Assist preceptor in a special project such as presentation of grand rounds or D3 session, participate in writing healthcare policy, creating patient education or other resources, or involvement in research. Confirmation of participation must be provided by the supervising faculty to the Clerkship Director and the Education Director. The student is responsible for a brief write-up or other documentation of the content of this project option.
- 5. During the year, there are two D3 sessions *Anxiety and Depression: Can a Patient Have Both?* and *Substance Abuse* which are given by students in a grand rounds format. If either of these occurs during your clerkship, these will count as your project. Your Clerkship Director will assist with organizing this presentation.

Submission

Upload the Psychiatry Project into the "Project Documents" tab for the course in Student Academics by 5:00 PM on the LAST day of the clerkship.

Evaluation

• The Education Director will review this project.

Required Assignment 3: Comprehensive Psychiatric Examination Write-up

Students must demonstrate proficiency in performing, writing, and presenting at least one Comprehensive Psychiatric Examination Write-up to include a thorough risk assessment for suicidal and violent potential as well as assessing for cognitive impairment and substance abuse. **Students MUST use the write-up template available on** <u>Canvas M.D.</u> Clerkships AY2025-2026 Psychiatry page.

Submission

• Upload the Comprehensive Psychiatric Write-up as a Word document to the "Project Documents" tab for the course in Student Academics by **5:00 PM on the LAST day of the clerkship**.

AND

 Document the completion of the assignment as an Educational Activity in ETS by selecting "[PSY] Completion of Comp. Psychiatric Exam Write-up" in the drop-down menu.

Evaluation

• The Education Director will review this write-up.

Patient Care

Overview and Participation

Students will participate in the care of patients with psychiatric illnesses. Though primarily there are two settings for patients to be examined and treated, inpatient and outpatient, students will usually have the chance to examine patients on general medical wards doing consults, in emergency/urgent care centers, substance abuse treatment facilities, and residential facilities, correctional facilities, etc. Students are expected to perform psychiatric evaluations and complete procedure requirements no matter the location. Students will be provided opportunities to both observe and participate directly in supervised patient care by their Clerkship Faculty. Ethical issues will be discussed on a case-by-case basis as they present themselves during patient care.

Following a hospitalized psychiatric patient helps gain an appreciation for the full range of psychiatric illnesses and the variety of treatment options that are available to those patients with severe illnesses. Learning the skills needed for interventions and treatments done in the most acutely ill patients will be achieved from time spent in emergency rooms and other urgent care areas. In outpatient clinics, students are more likely to develop an appreciation for the ongoing maintenance of a stable patient. Delivery of care to all populations is discussed (children, adolescents, adults, elderly, culturally diverse groups, developmentally disabled, etc.). Students will be exposed to the diagnosis and treatment of substance use disorders and alcohol abuse and addiction.

Students will demonstrate an understanding of how patients from diverse cultures, practicing a variety of religions, and holding different belief systems perceive symptoms, diseases, and health care, particularly, mental health care. Due to

our distributed model, students will see demographic influences on health care. Students must have self-awareness of any personal biases they may have regarding the delivery of health care regarding gender, culture, race, sexual preference, and beliefs or creeds that differ from their own.

Patient Log Requirements using the Encounters Tracking System (ETS)

Students should enter patient encounter data into the Encounters Tracking System (ETS) daily. Students are required to record a minimum of 25 patient encounters during the Psychiatry Clerkship. Students will record all clinical problems and procedures that were part of patient encounters. The table below lists the required procedures and problems, including the location of service and the expected level of participation.

- Students who have difficulty seeing a patient within a problem or procedure category should notify their Clerkship Director with sufficient time to **enable remedial action**.
- The problems and/or procedures marked with an asterisk* must be completed in the clinical setting and require direct patient contact. The remaining conditions should be seen in the clinical setting but may be fulfilled by alternate educational activities as determined by the Education Director.

Category Min. Req.		Problems/Conditions	Location of Service	Min. Level of Participation
ADHD (adult or child)	1	Attention deficit/hyperactivity disorder	Inpatient or Outpatient	Observe
Personality disorder	1	Personality disorder	Inpatient or Outpatient	Observe
PSTD	1	Posttraumatic stress disorder (PTSD)	Inpatient or Outpatient	Observe
Bipolar disorder*	1	Bipolar disorder*	Inpatient or Outpatient	Assist
		Dementia, Alzheimer's	Inpatient or Outpatient	Assist
Dementia	1	Dementia, multi-infarct	Inpatient or Outpatient	Assist
(any type)	1	Dementia, other	Inpatient or Outpatient	Assist
		Dementia, Parkinson's	Inpatient or Outpatient	Assist
Anxiety disorder*	1	Generalized anxiety disorder (GAD)*	Inpatient or Outpatient	Perform
(any type)	1	Social anxiety disorder (social phobia)*	Inpatient or Outpatient	Perform
Depressive disorder*	1	Major depressive disorder	Inpatient or Outpatient	Perform
(any type)		Persistent depressive disorder (dysthymia)	Inpatient or Outpatient	Perform
	1	Brief psychotic disorder*	Inpatient or Outpatient	Perform
		Delusional disorder*	Inpatient or Outpatient	Perform
Cahizanhrania /		Psychosis*	Inpatient or Outpatient	Perform
Schizophrenia/ psychotic disorder*		Psychotic disorder*	Inpatient or Outpatient	Perform
(any type)		Schizoaffective disorder*	Inpatient or Outpatient	Perform
(arry type)		Schizophrenia or Schizophrenic spectrum disorder*	Inpatient or Outpatient	Perform
		Schizophreniform disorder*	Inpatient or Outpatient	Perform
		Unspecified schizophrenia or other psychotic disorder*	Inpatient or Outpatient	Perform
Substance disorder	1	Alcoholism	Inpatient or Outpatient	Perform
(any type)		Intravenous (IV) drug use	Inpatient or Outpatient	Perform
(any type)		Substance abuse	Inpatient or Outpatient	Perform

Category Min. Req.		Procedures/Screenings	Location of Service	Min. Level of Participation
		Cognitive assessment, Mini-COG*	Inpatient or Outpatient	Perform
Dementia		Cognitive assessment, MoCA*	Inpatient or Outpatient	Perform
assessment/	1	Cognitive assessment, other*	Inpatient or Outpatient	Perform
cognitive		Mental status evaluation, full*	Inpatient or Outpatient	Perform
impairment*		Mini-mental status exam (MMSE)*	Inpatient or Outpatient	Perform
Depression		Depression screening tool, Beck*	Inpatient or Outpatient	Perform
assessment*	1	Depression screening tool, PHQ9*	Inpatient or Outpatient	Perform
(any type)		Depression screening tool, Zung*	Inpatient or Outpatient	Perform
Anxiety screen*	1	Generalized Anxiety Disorder Screening (GAD-7) *	Inpatient or Outpatient	Perform
		Substance abuse screening tool, AUDIT*	Inpatient or Outpatient	Perform
Substance abuse screen* (any type)	1	Substance abuse screening tool, CAGE*	Inpatient or Outpatient	Perform
	1	Substance abuse screening tool, DAST-10*	Inpatient or Outpatient	Perform
		Substance abuse screening tool, Opioid Risk Tool (ORT)*	Inpatient or Outpatient	Perform
Suicide risk	1	Suicide assessment (C-SSRS)	Inpatient or Outpatient	Perform

Optional Encounters

There are several conditions and procedures (not required) that provide an excellent learning experience but are not always possible to see and document in a 6-week clerkship.

OPTIONAL ETS Problem List:				
Behavioral change plan Domestic violence screening Sexual abuse screening				
Confusion Assessment Method (CAM)	Medication counseling	Substance abuse counseling		
Confusion assessment tool Opioid misuse counseling Suicide counseling				

Alternate Educational Experiences

At the end of the 4th week, students who are unable to examine a patient with one of the required diagnoses or perform one of the required screens are required to do two things: (1) ask their preceptor for assistance in finding a patient to satisfy the requirement, and (2) inform their Clerkship Director who will also assist them in this requirement. By the end of the 5th weeks, students who are unable to complete and record a required clinical encounter or other clerkship requirement due to circumstances beyond their control must arrange a time with their Clerkship Director who will determine an appropriate alternative educational experience. Additional clinical encounters are the preferred method to complete the requirements of this clerkship. Students may be exposed to the required conditions or diseases secondarily through reading assignments, completion of an example in the Case Files text, or by discussion with the Clerkship Director; they must record these as instructed in the ETS. The utilization of alternative educational activities is monitored by the FSU COM Curriculum Committee regularly.

Online Curriculum

Students are encouraged to view the following list of video clips on psychiatric symptoms available in the <u>Psychiatry and Behavioral Sciences Subject Guide</u> on the "Podcasts and Videos" tab.

- 1. Catatonia
- 2. Clang associations
- 3. Command hallucinations
- 4. Derailment
- 5. Flat affect
- 6. Grandiose delusions 1, 2 and 3
- 7. Mania
- 8. Pressured speech

Clerkship Director Meeting

Students will participate in the required weekly educational meetings conducted by the Clerkship Director or Clerkship Administrator. These weekly meetings will include case presentations, discussion of required readings, and provide feedback on student performance. These small groups also emphasize the course goals and objectives, demonstrate an understanding of the DSM-5, and emphasize psychopharmacology, mandatory procedures, and diagnosis. This meeting will include a discussion of clinical experiences, progress on documentation of patient encounters in ETS, and any challenges or concerns. A mid-clerkship evaluation will be completed by the Clerkship Director and will include feedback from the Clerkship Faculty. A review of student work hours will be part of the Clerkship Director's weekly meetings and documented in the mid-clerkship evaluation.

Clerkship Examinations

Summative Examination

At the end of the clerkship, students will take the 110-question NBME Clinical Science Subject Examination in Psychiatry. LIC students will take the exam according to the LIC policies document and are encouraged to delay until near the end of the academic year.

Optional Formative Self-Assessment

The <u>NBME's Self-Assessment Services (NSAS)</u> Clinical Science Mastery Series offers a \$20 clerkship-specific exam preparation that includes in-depth answer explanations. Students may purchase an NSAS examination for any clerkship.

Learning Resources

Institutional Resources

The <u>Maguire Medical Library</u> offers 24/7 remote access to online resources such as <u>Mobile Resources</u>, <u>Point of Care</u>, and <u>Subject Guides</u> to support the **core clerkships**.

Required Reading

The required textbook readings for this clerkship are in the <u>Psychiatry and Behavioral Sciences Subject Guide</u>.

- Diagnostic and Statistical Manual of Mental Disorders 5th Edition (DSM-5) by the APA
- Introductory Textbook of Psychiatry 7th edition by Black and Andreasen
- Case Files: Psychiatry 6th edition by Toy and Klamen

Students are required to follow a 3-week, structured schedule of required readings, case studies, and videos that address essential content designed to maximize understanding of the clerkship content. In addition to specifically assigned cases, students should review these screening instruments and videos which demonstrate important psychiatric symptoms designed to master clerkship content and understand the essentials of psychiatric practice. The complete reading list is located on the Clerkships AY2025-2026 Psychiatry page and summarized in the following table.

Weeks 1- 3 Self-Study Guide

Week 1	Monday	Tuesday	Wednesday	Thursday	Friday
Introductory <u>Textbook of</u> <u>Psychiatry</u>	Chapter 1 Diagnosis and Classification Chapter 2 Interviewing and Assessment	Chapter 3 Neurobiology and Genetics of Mental Illness Chapter 4 Neurodevelopmental (Child) Disorders	Chapter 11 Feeding and Eating Disorders Chapter 14 Disruptive, Impulse- Control, and Conduct Disorders	Chapter 5 Schizophrenia Spectrum and Other Psychotic Disorders	Chapter 6 <u>Mood</u> <u>Disorders</u>
Case Files Psychiatry		 Tourette Disorder Enuresis, Nocturnal Type 	Attention- Deficit/Hyperactivity Disorder	SchizophreniaSchizoaffective Disorder	 Bipolar Disorder (Child) Major Depressive Disorder with Psychotic Features Cyclothymic Disorder Major Depressive Disorder
Videos on Psychiatry Subject Guide				 Catatonia Clang Associations Command Hallucinations Derailment Flat Affect Grandiose Delusions 1, 2,3 	 Derailment Mania Pressured Speech
Material to Review on MD Canvas site	Comprehensive Psychiatry Exam Write-up template		PHQZungGAD-7HAM-DBeck		
Week 2	Monday	Tuesday	Wednesday	Thursday	Friday
Introductory <u>Textbook of</u> <u>Psychiatry</u>	Chapter 7 Anxiety Disorders Chapter 8 Obsessive- Compulsive and Related Disorders	Chapter 9 <u>Trauma-</u> <u>and Stressor-Related</u> <u>Disorders</u> Chapter 10 <u>Somatic</u> <u>Symptom Disorders</u> <u>and Dissociative</u>	Chapter 15 Substance-Related and Addictive Disorders	Chapter 17 Personality Disorders	Chapter 20 Psychotherapy Chapter 21 Somatic Treatments

		<u>Disorders</u>			
Case Files Psychiatry	Generalized Anxiety DisorderOCD in a Child	Posttraumatic Stress Disorder	Alcohol Withdrawal Opioid withdrawal Cocaine Disorder with Intoxication	 Schizotypal Personality Disorder Antisocial Personality Disorder OCPD 	
Material to Review on MD Canvas site			• AUDIT • CAGE • DAST • DAST-10 • ORT	• C-SSRS	
Week 3	Monday	Tuesday	Wednesday	Thursday	Friday
Introductory <u>Textbook of</u> <u>Psychiatry</u>	Chapter 12 Sleep-Wake Disorders	Chapter 13 Sexual Dysfunction, Gender Dysphoria, and Paraphilic Disorders	Chapter 16 Neurocognitive Disorders	Chapter 18 Psychiatric Emergencies	Chapter 19 Legal Issues
Case Files Psychiatry		Fetish Disorder Gender Dysphoria	Vascular Dementia Delirium		Malingering
Material to Review on MD Canvas site			Mini-Cog MoCA MMSE		

Recommended Reading

All additional readings are located on the <u>Psychiatry and Behavioral Sciences Subject Guide</u> and are provided for students to identify gaps in knowledge and supplement their learning. The DSM-5 Made Easy is highly recommended in addition to the multiple question and answer books on the topic of psychiatry. These are valuable for testing knowledge of psychiatry but are inadequate as the primary method of learning psychiatry.

Evaluation

Formative Evaluation

A mid-clerkship evaluation is completed by the Clerkship Director to provide feedback to students on their progress in the clerkship. This will include progress toward the achievement of clerkship objectives, competencies, assignments, and required encounters. A student workflow guide is available on the <u>Canvas M.D. Clerkships AY2025-2026</u>.

Summative Evaluation

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 clerkship. 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.

Grading

Year 3 and 4 Grading Policy

The standardized Years 3 and 4 Grading Policy for clerkships and courses is located on the Office of Medical Education site. The final grade is assigned by the Education Director and is based on all aspects of the clerkship, including clinical performance, attitude, performance during weekly Clerkship Director meetings, and the results of the NBME Clinical Subject Exam. There are no grade quotas, and any student can earn a grade of honors.

Clerkship-Specific Grading Criteria

- 1. Any breach in professionalism renders a student ineligible for honors
- 2. Any assignment submitted late (without permission) or which requires remediation renders the student ineligible for honors and will result in the assignment of an initial grade of IR (Incomplete Remediation) until remediation has been completed
- 3. Failure to document timely and accurate work hours renders a student ineligible for honors
- 4. Clinical performance and content knowledge must be exemplary to be considered for honors or high pass

- 5. End of clerkship NBME examination must be at the
 - a. 75th percentile or higher to be eligible for Honors consideration
 - b. 60th percentile or higher to be eligible for High Pass consideration
 - c. 10th percentile or higher to Pass
- 6. Active participation in weekly Clerkship Director meetings (pass/fail)
- 7. Satisfactory Clerkship Faculty and Clerkship Director evaluations documenting competency in all required domains
- 1. Satisfactory documentation of **at least 25 inpatient or outpatient** (location of service) encounters in the ETS (pass/fail)
- 2. Satisfactory documentation of all required **problems/conditions** at the indicated level of participation and location of service in the ETS (pass/fail)
- 3. Satisfactory documentation of all required **procedures/diagnoses** at the indicated level of participation and location of service in the ETS (pass/fail)
- 4. Satisfactory completion of required assignment #1 **ethics module** by recording as an Educational Activity in the ETS (pass/fail)
- 5. Satisfactory completion and timely submission/upload of required assignment #2 psychiatry project into Student Academics "Project Documents" (pass/fail)
- 6. Satisfactory completion and timely submission/upload of required assignment #3 comprehensive psychiatric write-up into Student Academics "Project Documents" AND by recording as an Educational Activity in the ETS (pass/fail)

Course Objectives

The following tables outline clerkship objectives and assessment methods for each and are intended to be used as a guide for student learning. Each clerkship objective is mapped to the <u>FSU COM Educational Program Objectives (EPOs)</u> and the ACGME Core Entrustable Professional Activities (EPAs).

PSYCHI <i>A</i>	ATRY COURSE OBJECTIVES	EPO
PSY-1	Demonstrate proficiency in information gathering, focused physical exam, evaluation, differential diagnosis, and documentation of patients with mental disorders.	1, 4
PSY-2	Justify a diagnosis using the DSM 5 and propose a comprehensive treatment plan incorporating evidence-based treatment for that specific illness, appropriate referral of patients, and transfer to another provider.	1, 2, 6
PSY-3	Evaluate suicidality and behaviors that may lead to self-harm or harm to others resulting from psychiatric illness, and identify the need for hospitalization versus outpatient, reporting, and duty to warn others.	2, 5, 6
PSY-4	Recognize signs, symptoms, and risk factors for substance intoxication and withdrawal.	1, 2
PSY-5	Recognize the impact of age and development on the presentation of mental illnesses and abuse across the lifespan.	5
PSY-6	Discuss the appropriate use and interpretation of laboratory, radiographic, and electro-physiologic studies indicated in psychiatric presentations.	1, 2
PSY-7	Discuss ethical issues in psychiatry and recognize boundary violations, transference and countertransference, biases against the mentally ill, barriers to care, and the unique challenges related to maintaining confidentiality of psychiatric information and informed consent in the psychiatric setting.	2, 5, 7
PSY-8	Identify the contributions of non-physician providers in the care of patients with mental illness and demonstrate effective and appropriate communication with members of the care team.	4
PSY-9	Demonstrate research and presentation skills on psychiatric topics, including oral case presentations and the ability to self-assess and address learning needs.	3, 4

Component	Learning Objective	Assessment
Patient care	 Perform a complete psychiatric examination and document in a form satisfactory for the medical record. Perform assessments and screens for cognitive impairment/ dementia; depression; 	Performance rating/checklists Utilize electronic resources to
MAPS TO:	safety and suicide risk; substance abuse	identify and incorporate
PSY-1, PSY-2,	3. Demonstrate understanding of co-morbid mental, neurological, and mental illness.	evidence-based data
PSY-3, PSY-4,	4. Demonstrate appropriate referrals and transfer of a patient to another provider.	 Recognition/implementation
PSY-5	5. Recognize the patient requiring hospitalization.	of duty to warn others about
	6. Demonstrate sensitivity and compassion in interactions with patients and families when communicating difficult information.	safety concerns

Required Patient encounters and procedures MAPS TO: PSY-1, PSY-3, PSY-4	 Document a minimum of 25 patient encounters Document the following procedure categories at the specified minimum number, level of participation, and setting of service: cognitive impairment/dementia, depression, anxiety, substance abuse, and suicide risk, Document the following problem categories at the specified minimum number, level of participation, and setting of service: Attention deficit/hyperactivity disorder, Personality disorder, Posttraumatic stress disorder, Bipolar disorder, Dementia, Anxiety disorder, Depressive disorder, Schizophrenia/psychotic disorder, Substance disorder 	Weekly review of patients logs in ETS
Comprehensive Psychiatric write-up MAPS TO: PSY- 1, PSY-2, PSY-5, PSY-6	 Demonstrate proficiency in performing a comprehensive psychiatric examination, and documenting and presenting the results. Demonstrate knowledge of psychopharmacology, psychotherapeutic interventions, and other modalities of therapy (i.e., ECT, TMS, Vagus Nerve Stimulation, etc.) 	Faculty review of write up that includes safety and risk assessment for suicide, violence, and self-harm; assessment for cognitive impairment and substance abuse; DSM-V diagnosis and illness-specific, evidence-based treatment plan
Interprofessional collaborative skills MAPS TO: PSY-8	Demonstrate effective communication (both verbal and written) with treatment teams and staff in a manner helpful and appropriate to the setting.	Performance rating/checklists of ICS competencies
Ethics module MAPS TO PSY-7	 Demonstrate an understanding of the most common types of ethical issues that arise in psychiatry. Recognize such events in clinical scenarios and explain the ethical and legal concepts in each. Reflect on how to respond to such situations. 	Review by ED
Weekly meeting with Clerkship Director MAPS TO PSY-2, PSY-5, PSY-7, PSY-9	 Participate in analysis of performance on assignments and incorporation of feedback Discuss case-related ethical issues Demonstrate oral presentation skills Review patient encounter progress and identify learning needs 	Mid-rotation feedback summary Clerkship Director evaluation
Psychiatry project MAPS TO PSY-9	Research and present on a psychiatric topic from one of the stated topics that includes adequate research, organization, clear citations	Faculty assessment
NBME Psychiatry clinical science subject exam MAPS TO PSY-, PSY-3, PSY-4	Demonstrate knowledge and clinical reasoning to interpret clinical scenarios and answer basic, clinical, behavioral and social science questions related to psychiatry and mental health.	Minimum score of 10th percentile

Professionalism and Professional Identity Formation

Medical professionalism is a cornerstone of the practice of medicine, embodying the values, behaviors, and responsibilities that are essential to building and maintaining trust between physicians, patients, and society. As a medical student and future physician, understanding and demonstrating professionalism is vital to your personal development.

The expectation is for all students to demonstrate a commitment to personal and professional growth and to carry out professional responsibilities with integrity, adhere to ethical principles and codes of conduct, and respect differences in values, beliefs, and experiences in all interactions.

Professional identity formation involves integrating one's personal identity with the professional standards and expectations of the medical field. This ongoing process enables medical professionals to remain true to themselves while providing exceptional care to patients and becoming well-rounded physicians.

Across the 4-year curriculum you will be continuously evaluated according to these core attributes of Medical

Professionalism:

Commitment to Professional Behavior and Ethical Practice

Adherence to ethical principles, such as beneficence, nonmaleficence, justice, and respect for autonomy. **Examples**: Maintaining confidentiality by avoiding discussing patient cases in public areas, even in CLC. Taking responsibility for personal lapses in Professionalism, and taking steps to address them, incorporating feedback.

Accountability

Medical professionals are accountable to their patients, peers, society, and the profession itself.

Examples: Engaging responsibly with the FSUCOM curriculum, including demonstrating effort when preparing for required learning sessions or completing assignments. Arriving on time to required sessions, completing assignments by deadlines, and seeking feedback to improve your performance.

Honesty and Integrity

Acting with honesty, transparency, and moral courage, even in challenging situations.

Examples: Acknowledging when you do not understand instead of pretending you do, seeking help when needed, crediting the contributions of others, and reporting lapses when appropriate.

Compassion and Respect for Others

Treating patients, colleagues, and team members with dignity, empathy, and cultural sensitivity.

Examples: Actively listening during team discussions, valuing diverse perspectives, values and beliefs, being aware of bias in self and others, and avoiding disruptive behaviors like silencing your phone during classes and meetings.

Excellence, Self-discovery, and Personal Well-Being

A commitment to lifelong learning and the pursuit of the highest standards in medical knowledge, clinical skills, and patient care.

Examples: Taking the initiative to go beyond required readings by exploring additional resources to deepen your understanding of challenging topics, applying metacognitive approaches to self-evaluate learning.

Why Professionalism Matters

Professionalism fosters trust, ensures accountability, and enhances the quality of care delivered to patients. It also strengthens the medical profession's role in society.

Violations of professionalism may result in a report of concern for unprofessional behavior and could lead to referral to the Student Evaluation and Promotion Committee (SEPC). Serious breaches of professionalism may result in suspension, a failing grade for the clerkship/course, and/or referral to SEPC.

College of Medicine 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 the <u>FSU COM Student Handbook</u> for details of the attendance policy, a notice of absences, and remediation. Students must use the student absence request form located on Student Academics.

Extended absences from the clerkships are not permitted. Any absence from the clerkships must be **pre-approved by the Regional Campus Dean** before the beginning of the clerkship, using the student absence request form. The clerkship faculty, Clerkship Director, and Education Director must be notified of any absence in advance by the student, once approved by the campus dean. Under no circumstances should a student arrange with the clerkship faculty or elective faculty to be away from the rotation without first getting the campus dean's approval. Any approved absence from a required clerkship may result in the student receiving a grade of "incomplete" and the student is expected to make up missed time and/or complete alternative/additional assignments before a final grade will be assigned. **Unapproved absences during the clerkship are considered unprofessional behavior, will result in a grade of "incomplete" until remediated, and may result in a grade of "fail" for the clerkship.** In the case of illness or other unavoidable absence, follow the same procedure outlined above, and notify everyone as soon as possible.

Clinical Experience and Education Policy

The FSU COM uses the ACGME requirements regarding clinical experience and education as a guideline for our policy.

Our goal is to provide a structure that supports patient safety and student education and facilitates personal-professional balance and well-being.

- Clinical experience and scheduled educational activities must be limited to no more than 80 hours per week when averaged over the number of weeks of the clerkship.
- Students must have at least one day out of every 7 completely free from clinical duties and required educational activities when averaged over the number of weeks of the clerkship.
- Clinical experience must not exceed 24 hours of continuously scheduled assignments, except up to 4 hours of
 additional time for effective transitions of care or student education. No additional patient care responsibilities
 may be undertaken during these 4 hours. After 24 hours continuously on call, students must have at least 14
 hours free of clinical work and scheduled educational activities.
- Students should have 8 hours off between scheduled clinical experience and education periods.

Documentation of time spent on clinical experience and education:

Students will use ETS to document by self-report their daily work hours on required clerkships and courses. Students must enter daily hours to include both clinical experience and required educational activities. Failure to report work hours is considered a breach of professionalism.

Students will report the following:

- Clinical experience, including documentation in the medical record
- Required educational meetings (i.e., Doctoring 3, clerkship meetings, meetings with clerkship faculty, 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.

Office of Student Counseling Services

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 the Office of Student Counseling Services and the FSU Office of Accessibility Services (OAS) to determine whether they might be eligible to receive the accommodations needed 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 a medical degree.

Patient Log (ETS) Monitoring Policy

Encounter data are monitored by the Clerkship Directors to ensure 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 patients with the required conditions. The level of participation in the care of patients is determined by the student's involvement during the history, physical exam, assessment, and treatment plan. The complexity of these components will vary, but to choose 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 and will receive credit for documented participation at the required level or higher.

- **Observe** should be selected when the student observes a clinician conducting a 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.

Student Mistreatment Policy

"Mistreatment" arises when behavior shows disrespect for the dignity of others and unreasonably interferes with the learning process. It can take the form of physical punishment, sexual harassment, psychological cruelty, and discrimination based on race, religion, ethnicity, sex, age, or sexual orientation. If a student feels they are being mistreated, the student should report this concern to the Division of Student Affairs (Student Support Coordinator, Assistant or Associate Dean for Student Affairs, or the Regional Campus Dean). We treat all such reports as confidential and do not tolerate reprisals or retaliations of any kind. Please refer to the Student mistreatment policy section in the FSU COM Student Handbook and report incidents of mistreatment as soon as possible.

University Policies

University Attendance Policy

Excused absences include documented illness, deaths in the family, and other documented crises, call to active military duty or jury duty, religious holy days, and official University activities. These absences will be accommodated in a way that does not arbitrarily penalize students who have a valid written excuse. Consideration will also be given to students whose dependent children experience serious illness.

Academic Honor Policy

The Florida State University Academic Honor Policy outlines the University's expectations for the integrity of student's 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

Florida State University (FSU) values diversity and inclusion; we are committed to a climate of mutual respect and full participation. Our goal is to create learning environments that are usable, equitable, inclusive, and welcoming. FSU is committed to providing reasonable accommodation for all persons with disabilities in a manner that is consistent with the academic standards of the course while empowering the student to meet the integral requirements of the course. Students with disabilities needing academic accommodation should: (1) register with and provide documentation to the Office of Accessibility Services; and (2) request a letter from the Office of Accessibility Services to be sent to the instructor indicating the need for accommodation and what type; and (3) meet (in person, via phone, email, skype, zoom, etc...) with each instructor to whom a letter of accommodation was sent to review approved accommodations. Please note that instructors are not allowed to provide classroom accommodations to a student until appropriate verification from the Office of Accessibility Services has been provided. This syllabus and other class materials are available in an alternative format upon request. For the latest version of this statement and more information about services available to FSU students with disabilities, contact the:

Office of Accessibility Services 874 Traditions Way 108 Student Services Building Florida State University Tallahassee, FL 32306-4167 (850) 644-9566 (voice) (850) 644-8504 (TDD) oas@fsu.edu

https://dsst.fsu.edu/oas

Academic Success

Your academic success is a top priority for Florida State University. University resources to help you succeed include tutoring centers, computer labs, counseling and health services, and services for designated groups, such as veterans and students with disabilities. The following information is not exhaustive, so please check with your advisor or the Department of Student Support and Transitions to learn more.

Confidential campus resources:

Various centers and programs are available to assist students with navigating stressors that might impact academic success. These include the following:

<u>Victim Advocate Program</u> University Center A, Rm. 4100 (850) 644-7161

Available 24/7/365 Office Hours: M-F 8-5 https://dsst.fsu.edu/vap

Counseling and Psychological Services (CAPS)

Florida State University's Counseling and Psychological Services (CAPS) primary mission is to address psychological needs and personal concerns, which may interfere with students' academic progress, social development, and emotional well-being. The following in-person and virtual (tele-mental health) services are available to all enrolled students residing in the state of Florida:

- 1. Individual therapy
- 2. Group therapy
- 3. Crisis Intervention
- 4. Psychoeducational and outreach programming
- 5. After hours crisis-hotline
- 6. Access to community providers for specialized treatment

Call 850-644-TALK (8255) for more information on how to initiate services.

Counseling and Psychological Services

250 Askew Student Life Center 942 Learning Way (850) 644-TALK (8255) Walk-in and Appointment Hours: M-F 8 am – 4 pm https://counseling.fsu.edu/

Services at UHS are available to all enrolled students residing in Florida:

The mission of University Health Services (UHS) is to promote and improve the overall health and well-being of FSU students. UHS provides a coordinated continuum of care through prevention, intervention, and treatment. Services include general medical care, priority care, gynecological services, physicals, allergy injection clinic, immunizations, diagnostic imaging, physical therapy, and a medical response unit. The Center for Health Advocacy and Wellness (CHAW) assists students in their academic success through individual, group, and population-based health and wellness initiatives. Topics include wellness, alcohol and other drugs, hazing prevention, nutrition and body image, sexual health, and power based personal violence prevention. For more information, go to uhs.fsu.edu.

University Health Services Health and Wellness Center 960 Learning Way Tallahassee, FL 32306 Hours: M-F, 8 am – 4 pm (850) 644-6230

https://uhs.fsu.edu/ Syllabus Change Policy

Except for changes that substantially affect implementation of the evaluation (grading) statement, this syllabus is a guide for the course and is subject to change with advance notice.