MEDICINE

Human **Preparation** Core **Advanced Foundations** Systems in **Preparation** Clerkships Clerkships for of Medicine **Health and** for Residency and Electives Clerkships and Electives Disease

Summer Clinical Practicum BMS 6940



Florida State University College of Medicine

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Faculty and Staff

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Overview

Course Overview

The Summer Clinical Practicum [BMS 6940] is an immersive, experiential learning activity providing opportunities for students to practice and improve basic clinical skills. Students are assigned to a primary care physician to participate in patient care activities under the direct supervision of the primary care physician. This course also provides students opportunities to participate in patient care activities at locations throughout the state of Florida and into southern Georgia.

Course Goals

- Provide clinical learning experience
- Increase awareness of the impact of wellness and illness on the patient.
- Increase awareness of the impact a physician may have in the lives of his/her patients.
- Increase awareness of the responsibilities of a physician in a community
- Develop life-long learning skills of reflection and self-evaluation

Learning Objectives

By the end of this experience a student will:

- Demonstrate the ability to obtain a focused history and perform a physical exam appropriate to the patient history.
- Demonstrate the ability to identify personal, social and spiritual factors important to an individual patient's health care.
- Document subjective and objective information in a SOAP format.
- Develop a set of goals and objectives for his/her own continued growth and development

- Use reflection to enhance experiential learning.
- Be able to use clinical practice experience in implementing the U.S. Preventive Services Task Force (USPSTF) recommendation regarding tobacco cessation treatment, an 'A' rated preventive service
- · Recognize tobacco cessation as a modifiable risk factor for morbidity and mortality
- Apply guidelines and evidence based clinical interventions to motivate patients to make quit attempts and improve cessation outcomes.
- Utilize motivational interviewing skills to facilitate referrals to Tobacco Free Florida
- Know how to make referrals to Tobacco Free Florida for treatment (free counseling and medications).
- Identify the roles and responsibilities of members of the health care team in which you are working.
- Evaluate Teamwork using a framework of collaborative skills.

Course Dates

- Session 1: May 6 through May 24, 2019
- Session 2: May 28 through June 14, 2019

Competencies

	Education Program Objectives	Course Objectives	Means of Assessment		
1	PATIENT CARE: Provide patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health				
1.2	Gather essential and accurate information about patients and their condition through history-taking, physical examination, and the use of laboratory data, imaging and other tests	Demonstrate the ability to obtain a focused history and perform a physical exam appropriate to the patient history. Administer screening instruments appropriate to the primary care setting (e.g., tobacco, alcohol, depression)	Direct observation by Clinical Faculty		
1.7	Counsel and educate patients and their families to empower them to participate in their care, showing consideration for their perspective throughout treatment	Demonstrate the ability to identify personal, social and spiritual factors important to an individual patient's health care.	Direct observation by Clinical Faculty; Narrative Competency reflection reviewed by Course Director or designated Clinical Faculty		
2	KNOWLEDGE FOR PRACTICE: Demonstrate knowledge of established and evolving biomedical, clinical, epidemiological and social-behavioral sciences, as well as the application of this knowledge to patient care				
2.4	Apply principles of epidemiological sciences to the identification of health problems, risk factors, treatment strategies, resources, and disease prevention/health promotion efforts for patients and populations	Administer screening instruments appropriate to the primary care setting (e.g., tobacco, alcohol, depression)	Direct observation by Clinical Faculty; Narrative Competency reflection reviewed by Course Director or designated Clinical Faculty		
2.5	Apply principles of social-behavioral sciences to provision of patient care,	Demonstrate the ability to identify personal, social and spiritual factors	Direct observation by Clinical Faculty; Narrative		

	including assessment of the impact of psychosocial-cultural influences on health, disease, care-seeking, care-compliance, barriers to and attitudes toward care	important to an individual patient's health care.	Competency reflection reviewed by Course Director or designated Clinical Faculty		
3	PRACTICE-BASED LEARNING AND IMPROVEMENT: Demonstrate the ability to investigate and evaluate their care of patients, to appraise and assimilate scientific evidence, and to continuously improve patient care based on constant self-evaluation and life-long learning				
3.2	Set learning and improvement goals	Develop a set of goals and objectives for continued growth and professional	Direct observation by		
3.5	Incorporate feedback into daily practice	development	Clinical Faculty		
4	Interpersonal and Communication Skills: Demonstrate interpersonal and communication skills that result in the effective exchange of information and collaboration with patients, their families, and health professionals				
4.5	Maintain comprehensive, timely, and legible medical records	Document subjective and objective information in a SOAP format.	Direct observation by Clinical Faculty and SOAP note reviewed by Course Director or designated Clinical Faculty.		
5	PROFESSIONALISM: Demonstrate a com adherence to ethical principles	mitment to carrying out professional re	sponsibilities and an		
5.3	Demonstrate respect for patient privacy and autonomy Demonstrate a commitment to ethical				
5.6	principles pertaining to provision or withholding of care, confidentiality, informed consent, and business practices, including compliance with relevant laws, policies, and regulations	Maintain patient confidentiality	Direct observation by Clinical Faculty and Course Director		
6	SYSTEMS-BASED PRACTICE: Demonstrated and system of health care, as well as the				
	provide optimal health care	admity to can endeavely en emer recea	-		
6.1	Work effectively in various health care delivery settings and systems relevant to their clinical specialty	Function effectively as part of a health care team	Direct observation by Clinical Faculty and Office Staff		
7	INTERPROFESSIONAL COLLABORATION team in a manner that optimizes safe, effe				
7.1	Work in cooperation with other professionals to establish and maintain a climate of respect, dignity, diversity, ethical integrity, and trust in order to enhance team functioning and serve the needs of patients, families, and populations	Identify roles and responsibilities of members of a health care team Function effectively as part of a health care team	Team roles assignment; Teamwork questionnaire Direct observation by Clinical Faculty and Office Staff		
8	PERSONAL AND PROFESSIONAL DEVELOPMENT: Demonstrate the qualities required to sustain lifelong personal and professional growth				
8.1	Develop the ability to use self-awareness of knowledge, skills and emotional limitations to engage in appropriate helpseeking behaviors	Use reflection to enhance experiential learning.	Direct observation by Clinical Faculty; Narrative Competency reflection reviewed by Course Director		
9	FSU COM MISSION: Demonstrate responsand underserved populations	siveness to community needs – especia	ally elder, rural, minority		
9.1	Describe the social determinants of health, and identify how they create opportunities for and barriers to wellness for underserved populations.	Demonstrate the ability to identify personal, social and spiritual factors important to an individual patient's health care.	Direct observation by Clinical Faculty; Narrative Competency reflection reviewed by Course Director or designated Clinical Faculty		

Grading System

Assignments and Grading

The basic responsibility for achieving course objectives rests with the student. The Clinical Faculty role is to act as a resource and provide feedback and appropriate patient care experience within the clinical faculty's practice. The student is responsible for accomplishing the objectives and completing the assignments.

FSU COM has adopted a pass/fail grading system which is used in the curriculum for the first and second years (See page 31 of <u>Student Handbook</u>). To achieve a grade of Pass in the Summer Clinical Practicum [BMS 6490] a student must meet all of the following requirements:

- 1. Receive a satisfactory evaluation from the Clinical Faculty Preceptor.
- 2. Define personal objectives for the course. Discuss these objectives with Clinical Faculty at the beginning and at the conclusion of the clinical experience.
- Submit a de-identified and HIPAA-compliant progress note on one patient encounter using the appropriate SOAP format. (SOAP template and rubric are available on Canvas in the Interviewing and Patient Encounters module and SOAP Note Assignment and at the end of this document)
 - a. This assignment should be submitted through Canvas as a word document NO LATER THAN **5 PM EST on Sunday** of the second week of the course. For Session 1, that would be 12 May 2019. For Session 2, that would be 2 June 2019.
 - b. All aspects of the SOAP-Subjective/Objective/Assessment/Plan should be addressed in the SOAP note.
 - c. While the Assessment and Plan portion of the SOAP note are areas that might not have been covered in the curriculum prior to this course, students need to get into the habit of thinking about an assessment and plan for every patient they see.
- 4. Record in a minimum of 10 **total** patient encounters in the encounter tracking system for the three weeks of the course during which they perform either a history and/or a physical exam. While most students will record many more encounters for the three weeks of this course, 10 is the MINIMUM a student must record for the three weeks of the course and would reflect minimal effort on the part of the student.
- 5. Complete the narrative competency module:
 - a. Watch an 18 minute TED talk "<u>Honoring the Stories of Illness</u>" by Rita Charon (embedded on Canvas in the *Narrative Competency* module and *Narrative Competency Assignment*; (or available directly at either of the following links)
 - http://tedxatlanta.com/videos/09132011-balance/rita-charon/http://www.youtube.com/watch?v=24kHX2HtU3o
 - Read the story Chocolate Cake a good example the importance of narrative competency in a patient interview (available on Canvas in the *Narrative* Competency module and *Narrative Competency Assignment*).
 - c. Complete a "no-agenda" interview of one patient or patient family dealing with a chronic health issue. IMPORTANT: After introducing yourself and asking for permission to talk with the patient, begin the interview with the <u>exact phrase</u>: "Please tell me what you think I should know about your situation." Do not add words about specific health problems or diseases. "Situation" is meant to be open to the patient's interpretation.
 - d. Write a reflection (no more than 1 page) on this experience, focusing on differences you perceive between this patient encounter and others you had in the summer and how narrative competence supports patient centered care. You may consider differences in the kind of information offered by patients in this interview compared to their answers to

- questions in the medical interview. A few **examples** along with the feedback they received are available on Canvas in the *Narrative Competency* module and *Narrative Competency Assignment*.
- e. Submit your reflection as a Word document to the *Narrative Competency Assignment* on Canvas **NOT LATER THAN 5 PM EST on Sunday** of the last week of the course. For Session 1, that would be 19 May 2019. For Session 2, that would be 9 June 2019.
- 6. Complete the Interprofessional Skills module
 - a. Before arriving at your SCP assignment (time commitment 10 minutes)
 - · Review the Team Structure PPt (2 slides) and
 - View the video <u>Good Teamwork in the Medical Office</u> (3 ½ min) http://www.ahrq.gov/teamstepps/officebasedcare
 - b. At the end of Week 1 Complete and submit the Primary Care Office-based Team template (Interprofessional Skills assignment 1 on Canvas). This assignment should be done and submitted NO LATER THAN 5 PM EST on Sunday of the first week of the course. For Session 1, that would be 12 May 2019. For Session 2, that would be 2 June 2019.
 - a. At the end of Week 3 Complete and submit the TeamSTEPPS® Teamwork Perceptions Questionnaire (Interprofessional Skills assignment 2 on Canvas). This assignment should be done and submitted NO LATER THAN 5 PM EST on Thursday of the third week of the course. For Session 1, that would be 23 May 2019. For Session 2, that would be 13 June 2019.

Suggested Reading Materials

- Seidel HM, Ball JW, Dains JE, Benedict GW. Mosby's Guide to Physical Examination. (7th Ed).
 St. Louis: Mosby, 2010.
- Seidel HM, Ball JW, Dains JE, Benedict GW. Mosby's Physical Examination Handbook. (7th Ed). St. Louis: Mosby, 2010.
- Lo Bernard. Resolving Ethical Dilemmas A Guide for Clinicians. Philadelphia: Lippincott Williams & Wilkins, 2009 (also available on Reserve in COM Library)
- Dutton G, Gabriel J, eds. Basic Interviewing Skills Booklet (on Blackboard under Tool Belt)
- Fitzgerald, FT "The Emperor's New Clothes", Ann Intern Med. 6 March 2012; 156(5): 396-397
- Facioli AM, Amorim FF, Almelda JQ A Model for Humanization in Critical Care, 2012;
 Permanente Journal 16: 75-77

Policies

Americans with Disabilities Act

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 <u>Director of Student Counseling Services</u> 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.

The Office of Student Counseling Services

Medical Science Research Building, G146

Phone: (850) 645-8256Fax: (850) 645-9452

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:

Student Disability Resource Center

874 Traditions Way 108 Student Services Building Florida State University Tallahassee, FL 32306-4167 Voice: (850) 644-9566

TDD: (850) 644-8504

sdrc@admin.fsu.edu

Academic Honor Code

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-Honor-Policy)

Attendance Policy

The College of Medicine has detailed attendance policies as they relate to each cohort and events that conflict with course schedules. See pages 28-29 of <u>FSUCOM Student Handbook</u> for details of attendance policy, notice of absences and remediation.

Students are expected to be present with their Preceptor whenever the Clinical Faculty is seeing patients.

Summer Clinical Practicum BMS 6940 -- SOAP NOTE RUBRIC

dent Name: Date:			
	SOAP NOTE COMPONENTS	YES	NC
	Mark NA for components that may not be applicable f	or the se	ssior
S=Subj	ective (What the patient/family tells you and/or information received from other professionals.)		
1.	Note includes only elements of the history (subjective elements); does not include elements of the physical exam.		
2.	Note contains chief concern in patient's own words in quotation marks and includes all agenda items.		
3.	Note includes at least 5 elements of the history of present illness ("sacred seven": location, quality, quantity, timing, context, modifying factors, and associated symptoms).		
4.	Note includes impact on daily functioning (e.g. BADLs, IADLs, and/or AADLs) and at least (1) other indicator of "patient-centeredness," e.g. comment re:		
•	ideas/ hypotheses about causation		
•	worries/fears about symptoms or condition		
•	impact on relationships/ self-concept		
5.	Note includes at least (4) indicators of an expanded history with <u>pertinent</u> review of systems, and relevant components of past medical history, social history, and family history.		
0=	Objective (What you observed and the findings of the physical exam maneuvers you performed.)		
1.	Note includes only elements that are truly from the physical exam (objective elements); does not include elements of the history.		
2.	Note includes ALL vital signs ($P/BP/RR/Temp/Ht/Wt/BMI$) with correct units of measurement and other relevant descriptors (e.g. B.P. = 120/70mmHg in the left arm while sitting).		
3.	Note includes a general assessment of the patient with at least (2) items from each category listed below:		
•	Category 1: age comparison, apparent gender, body habitus, consciousness level	4	
•		_	
4.			
5.	and examination of the corresponding area on the opposite side. Note describes an examination of the affected area and an adjacent area (i.e. adjacent organ system or		
	joint).		
6.	Note includes at least (4) pertinent (positive and negative) findings including:	\dashv	
•	Reference to degree of discomfort, if applicable (e.g. comment re: absence or presence of tenderness or discomfort during physical exam maneuvers).		

Comments (e.g. organization of note, demonstration of clinical reasoning, etc.):

Assessment: How the student/author interprets the information obtained in the history and exam, includes all diagnoses/conditions that impact the treatment decision.

Plan: Actions to be taken based on the assessment including:

Tests ordered Medications/prescriptions given Patient instructions Follow-up instructions

Student signature including title

NOTE: Make sure the date of visit is included in the note, preferably at the beginning of the note.