



The Florida State University  
College of Medicine

# Doctoring 102

**BMS 6016**

**Fall 2014**

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## Instructors

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## Course Overview

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### **Course Goals**

Doctoring 1 is part of the longitudinal Doctoring continuum that highlights acquisition of clinical knowledge, skills and behaviors for the practice of safe and effective patient-centered care.

**The primary learning outcome for Doctoring 102 is:** “Using effective interviewing skills and a patient-centered approach, the student will demonstrate the ability to gather and organize clinical information from patients using the history and physical examination.”

Elements of behavioral medicine, geriatrics, medical humanities, bioethics, information technology, and professionalism are incorporated throughout the curriculum.

### ***Instructional Methods and Environments for Learning***

#### **Clinical Learning Center (CLC)**

**Participation in all scheduled CLC sessions is required.** Students are scheduled one morning each week in the CLC to learn and demonstrate skills in patient interviewing, taking the patient’s history and performing the physical examination.

Students practice these skills with each other or with standardized patients (SP’s). The SPs are individuals who permit students to interview and/or examine them. Faculty members observe students and provide real-time performance feedback.

Following each CLC session, students will receive a “Student Practice Plan” identifying both general and specific skills that need additional focused practice and improvement.

Continued practice is needed to improve clinical skills—including interviewing and physical exam skills. To accommodate the need for student practice, the CLC will be open for clinical skills practice each Friday morning from 10:00 AM to 12:00 noon, and at other times during the week by arrangement with the CLC Director. Students should bring a partner(s), as no SP’s will be present. CLC faculty also can be available by appointment during these practice times.

“Practice (alone) does not make perfect. Only perfect practice makes perfect.” Vince Lombardi

Students with a legitimate reason to miss a scheduled CLC session must request an approved absence through Student Affairs. Students with approved absences will be allowed to reschedule or participate in a make-up session. Due to the logistics and expense involved in planning and providing clinical skills training in the CLC, unapproved absences may not be rescheduled or made up. Repeated unapproved absences may result in a failing grade for the course. Further details are provided in the section on CLC Specific Absence Policy.

Student CLC schedules, performance expectations and CLC resources will be posted on Blackboard.

### Large group presentations/discussions (Located in Auditorium)

Attendance at all large group sessions is strongly encouraged, but not required unless indicated on the schedule and/or calendar. Large group sessions not containing sensitive material will be recorded for later viewing.

Assigned readings prepare students for active participation in both large group sessions and small groups. Often, the content presented and/or the activities that occur in large group sessions prepare students to participate in the small group sessions that follow. Student small group performance may be negatively affected by failing to read the assigned materials and attend large group.

### Small group sessions (Located in study rooms in the Learning Communities)

**Attendance and participation in all small group activities is required.** Small group composition, expectations, assignments, resources and locations will be posted on Blackboard.

Students with a legitimate reason to miss a small group session (or a required large group session) must request an approved absence through Student Affairs. Small group sessions are largely experiential and, thus, impossible to remediate. Repeated unapproved absences from small group sessions may result in a failing grade for the course.

## Medical Informatics (Location: TBA)

**Attendance and participation in Informatics sessions is required.** During the first of these sessions, students will load point-of-care clinical applications onto their mobile devices. Students without suitable “smart phones” will load these digital applications onto an i-Pod loaned from the COM. At a subsequent session, students will be instructed on the use of these point-of-care applications.

Content and skills presented at these sessions will be tested via written exams and OSCEs. Students are also responsible for any assignments associated with these sessions. Failure to complete an Informatics assignment may result in a failing grade for the course.

The schedule and location of these sessions and all assignments will be posted on Blackboard.

## Senior Mentors Project (Location: Homes, apartments and public places in the community)

**Participation and completion of all Senior Mentors assignments is required.** The Senior Mentors Project pairs two (2) students with a free-living elderly person in the community. Working as a team, the students visit with the assigned Senior Mentor 3 times during the semester. Following each visit, both team members complete and submit the appropriate assignment form (located on the Doctoring Blackboard site). Completed Senior Mentors assignments will be discussed in D102 small groups.

Failure to participate in the Senior Mentors Project and and/or to complete all required assignments will result in a failure of the course.

# Competencies

## *Assessments by competency domain*

Competency Domains Addressed in D102		Methods of Student Assessment used in D102
<b>Patient Care</b>	<p>Demonstrate the ability to assess the "patient's unique context" (including family, community, cultural, spiritual, historical and legal factors) and incorporate that information into his/her care.</p> <p>Organize and conduct a medical encounter, including the use of an appropriate greeting/opening, gathering information and providing closure.</p> <p>Demonstrate the ability to elicit an accurate and thorough medical history appropriate for the patient's reason for visit.</p> <p>Conduct accurate and thorough physical and mental status examinations appropriate for the patient's reason for visit.</p> <p>Demonstrate the ability to assess a patient's functional capacity.</p> <p>Demonstrate the ability to clearly and accurately summarize patient findings in verbal presentations and common written formats.</p>	<ol style="list-style-type: none"> <li>1) Written exams;</li> <li>2) Observation by faculty, staff and/or standardized patients;</li> <li>3) Performance on the OSCE;</li> <li>4) Participation in small group exercises and simulation activities.</li> </ol>
<b>Practice-based Learning</b>	<p>Apply the principles and methods of Evidence-Based Medicine to acquire, appraise, and assimilate new clinical information to improve patient care.</p>	<ol style="list-style-type: none"> <li>1) Written exams;</li> <li>2) Participation in small group exercises and simulation activities.</li> </ol>

<p><b>Communication Skills</b></p>	<p>Demonstrate respect, empathy, compassion, responsiveness and concern regardless of the patient's problems, personal characteristics.</p> <p>Demonstrate verbal skills and non-verbal behaviors that promote the building of rapport and trust between student and patient.</p> <p>Communicate diagnostic information and reasoning, intervention options, and a suggested plan of care with truthfulness, sensitivity and empathy.</p> <p>Demonstrate effective oral communication skills with colleagues and other health professionals.</p>	<ol style="list-style-type: none"> <li>1) Written exams;</li> <li>2) Observation by faculty, staff and/or standardized patients;</li> <li>3) Performance on the OSCE;</li> <li>4) Participation in small group exercises and simulation activities.</li> </ol>
<p><b>Professionalism</b></p>	<p>Demonstrate professional values, attitudes and behaviors in all interactions with faculty, staff, peers and patients and in all activities.</p> <p>Define medical professionalism and discuss student issues during the transition from student to physician.</p> <p>Practice self-evaluation and reflection concerning cultural, moral and ethical issues encountered in the care of patients and the practice of medicine, identifying biases, perceived differences between practitioners and patients, and employing a nonjudgmental approach to patient care.</p>	<ol style="list-style-type: none"> <li>1) Written exams;</li> <li>2) Observation by faculty, staff and/or standardized patients;</li> <li>3) Performance on the OSCE;</li> <li>4) Participation in small group exercises and simulation activities.</li> </ol>

## ***Student Assessment Methods and Grading***

### **Unit Examinations**

Content presented in large group sessions or small group sessions, from the assigned readings and/or from CLC sessions is included in each of the 3 integrated unit examinations. Multiple choice and other question formats are used to assess student content knowledge and skill (ability to solve problems, etc.).



**Students must answer ≥70% of the Doctoring content questions correctly on the 3 unit exams to pass the course.** Students who do not answer 70% of the Doctoring content questions correctly risk failing Doctoring 102 and being referred to the Student Evaluation and Promotions Committee.

### **Objective Structured Clinical Examination (OSCE)**

In addition to the ongoing formative assessment of student clinical skills, the final OSCE will serve as the D102 final summative clinical skills assessment. The final OSCE will consist of one or more performance stations. At each station, students are asked to demonstrate clinical skills/behaviors. Each student demonstration will be assessed by a trained observer, using established performance criteria.

**Students must score ≥75% on the D102 OSCE in order to pass the course.** Students who do not achieve an initial score of 75% or higher on the OSCE must remediate these clinical skills. This skills remediation will occur prior to the end of the semester, and must be coordinated with the Course Director(s) and the CLC Director. Students unable to successfully remediate these skill deficits will receive a grade of “Fail” for the course, and be referred to the Student Evaluation and Promotions Committee.

### **Small group exercises and simulation activities**

Students are observed and assessed weekly by small group facilitators. **To pass the small group portion of the course, the small group facilitators must affirm in the terminal small group evaluation that the student attended small group sessions, was prepared for the group activities, participated in small group discussions and displayed professional demeanor.** Students who do not receive a satisfactory terminal assessment from the small group facilitators risk failing this portion of the course and failing Doctoring 102.

Repeated absences or tardiness from small group activities is considered a Professionalism concern and may result in a Report of Concern for Unprofessional Behavior (see Student Handbook) and/or referral of the student to the Student Evaluation and Promotions Committee.

## **Summary of Doctoring 102 Grading Criteria**

The FSU COM has adopted a pass/fail grading system for first and second year courses. To achieve a grade of “Pass” in BMS 6016 (Doctoring 102) a student must:

- 1) Attend and fully participate in all required sessions. Tardiness or unexcused absence from a required activity may require remediation as determined by the block directors. Multiple episodes of tardiness and/or unexcused absences from required activities will be considered a Professionalism concern and may result in a Report of Concern for Unprofessional Behavior (see Student Handbook) and/or referral of the student to the Student Evaluation and Promotions Committee.
- 2) Prepare for, attend and participate in D102 small group sessions, and receive a satisfactory terminal small group assessment by the small group facilitators; **AND**
- 3) Demonstrate the requisite clinical examination skills and informatics skills in the final OSCE, and receive a total OSCE score of  $\geq 75\%$ ; **AND**
- 4) Answer correctly  $\geq 70\%$  of all Doctoring 102 questions asked on the 3 integrated block exams; **AND**
- 5) Remediate any skills deficits as determined by the course director; **AND**
- 6) Complete satisfactorily and submit all Informatics assignments, Senior Mentor’s Project assignments and other course assignments on time; **AND**
- 7) Consistently demonstrate appropriate ethical and professional attitudes and behaviors in all aspects of the course, including:
  - Attend, prepare for and participate in all required course activities;
  - Maintain patient confidentiality;
  - Maintain the confidentiality of personal information shared by classmates and faculty in small group activities;
  - Demonstrate respect for others—including faculty, staff, standardized patients and classmates.
  - Maintain the FSU honor code when completing course assignments or during examinations, including the OSCE.

Professionalism concerns may generate a Report of Concern for Unprofessional Behavior (see Student Handbook) and/or require completion of a Performance Improvement Program.

A student whose performance is <70% (below passing) on any of the 3 unit exams is required to:

- a. Attend the exam review,
- b. Contact the Course Director(s) within 24 hours of that exam review, and
- c. Meet with the Course Director(s). Students may be asked to complete a Performance Improvement Program, the purpose of which is to assist the student in developing the skills and habits necessary to succeed in the curriculum as well as to address specific performance deficits.

Students who pass both the small group and written exam portions of Doctoring 102, but fail the final OSCE, will be given one opportunity to remediate the OSCE failure prior to the end of the semester. Failure to remediate the OSCE before the end of the semester will result in a course failure and referral of the student to the Student Evaluation and Promotions Committee.

**Students who fail the small group or written exam portions of Doctoring 102, will fail the Doctoring 102 course and be required to repeat the course and/or remediate to the course director's satisfaction.**

### **Professional Attire**

Medical students are ambassadors and representatives of the College of Medicine and the medical profession. Student appearance and behavior should demonstrate respect for the profession and for patients. Being a physician (or, a medical student) has little to do with expressing one's individuality in appearance and/or dress; but, it has everything to do with focusing on the patient and his/her comfort, needs and safety issues.

Professional attire is required to be worn in these settings:

- 1) Any setting where the student will interact with people from outside the COM, including those people working as SP's in the clinical learning center or in a small group activity;
- 2) A preceptor's office, a clinic, a hospital or a nursing facility;
- 3) In large group sessions when guest lecturers, patients, or other visitors will be present; and,
- 4) When visiting your Senior Mentor.

Professional attire consists of clothes consistent with community norms for physicians.

Examples of these norms in Tallahassee are: no jeans, no seductive, revealing or tight-fitting

clothes, no sheer or see-through fabric, no strapless, low-necked or midriff-baring clothing, no shorts, sweats, scrubs, hats or casual sandals. On those occasions when students are examining each other in the CLC, you will be informed of the appropriate apparel for that session.

**For men:** Professional attire consists of slacks, a collared shirt and dress or casual shoes (no sport shoes or sandals). Ties may be either required or forbidden in some clinical situations.

**For women:** Professional attire consists of slacks or a conservative length dress or skirt with a blouse or sweater. Skirt edge should rise no higher than 2” above the top of the knee during all clinical care and training maneuvers and may not be tight fitting. Heels more than 3” are NEVER appropriate in clinical settings.

**For both men and women:** A white lab coat is required after the FSUCOM white coat ceremony. Consult your supervisor to clarify expectations for student attire in any new or ambiguous situation. In compliance with OSHA regulations, closed-toed shoes are required in all clinical settings—including CLC--for your safety and protection.

**Professional appearance:** Long hair must be pulled back and secured. Facial hair must be neatly groomed or clean shaven. If possible, all tattoos should be covered by clothing. No visible body piercing except a single piercing in each ear should be visible. No large earrings or loose jewelry should be worn. Fingernails must be clean and trimmed. If nail polish is used, it should not be a distracting color. No strong perfume or other scented products should be worn.

The established "norms" of certain clinical settings may modify these standards for professional attire, but any variations in professional attire must be approved by the student's supervisor. Consult your supervisor to clarify expectations for student attire in any ambiguous or new situations.

## **Confidentiality**

Patients—including Standardized Patients—deserve to be treated with respect. Respect for patients includes keeping all patient information confidential. Patient information may be shared with other health care professionals that have a legitimate, professional “need to know,” or with

specific individuals (family members, friends, others) that have permission from the patient for access to the information.

Be especially conscious about discussing patients in public places. Even when patient names are not used, items in the discussion may reveal the patient's identity to others who overhear the discussion. Rather than risk a violation of patient confidentiality, please discuss patients only in a private setting and only with individuals who have a legitimate need to know.

Be careful to keep all patient notes, reports and materials with names or identifying data such that patient confidentiality is maintained. Patient records, even if for a simulated patient in class, should be returned to faculty, destroyed, or kept in a secure place.

Similarly, your classmates deserve to be treated with respect. Information learned about your classmates and their families while in class is considered confidential. You are not free to disclose this material to others without the specific consent of the person.

NOTE: Students who violate patient or classmate confidentiality may be referred to the Student Evaluation and Promotion Committee (SEPC) for a breach of professionalism. Egregious unprofessional behavior of any variety may result in suspension of the student from the course, giving the student a failing grade for the course, and/or referral to SEPC.

## Policies

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### ***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 [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.

[The Office of Student Counseling Services](#)  
Medical Science Research Building

G146

Phone: (850) 645-8256 Fax: (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  
97 Woodward Avenue, South  
Florida State University  
Tallahassee, FL 32306-4167  
Voice: (850) 644-9566  
TDD: (850) 644-8504  
[sdrc@admin.fsu.edu](mailto:sdrc@admin.fsu.edu)  
<http://www.fsu.edu/~staffair/dean/StudentDisability>

### **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/Academics/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 the [Student Handbook](#) for details of attendance policy, notice of absences and remediation.

*Unexcused absence from a scheduled examination or assessment may result in a score of zero (0 %) being assigned for that exam or assessment. Unexcused absence from an activity for which attendance is required (for example, Small Group session, CLC session) may be considered as an issue of Professionalism. Any unexcused absence may require completion of a Performance Improvement Program (see Grading section, above).*

### **Clinical Learning Center (CLC) Specific Absence Policy**

Students with a legitimate reason to miss a scheduled CLC session must request an approved absence through Student Affairs via the [online link](#). When the absence is a planned absence (your wedding, elective surgery date, etc.), the request should be completed at least 2 weeks

prior to the date of the absence. For absences that are approved two weeks in advance, a change in the CLC schedule will be arranged. Students with other approved absences will be allowed to reschedule or participate in a make-up session.

One acceptable method for addressing a planned and approved absence is to identify a classmate willing to exchange scheduled sessions with you. In this situation, both students (the student with the approved absence and the willing classmate) should send a request via email to [Mrs. Danforth](#) at least two weeks in advance. Students will be notified re: approval of these requests. Please note: Sending a request is NOT equivalent to receiving approval.

Unplanned but excused absences from CLC sessions are absences due to circumstances beyond the student's control. Examples include student illness and/or family death. When such a situation occurs, please contact Mrs. Danforth as soon as possible and submit an absence request to Student Affairs through the [online link](#). Student Affairs will classify the absence as excused or unexcused. Any excused absence will not impact the student's grade.

Unexcused absences generally involve circumstances *within the student's control*. Examples of unexcused absences include the student who forgets about a scheduled CLC session, the student who skips the session to study, and/or any absence where an able student fails to contact Student Affairs and Mrs. Danforth to inform them that the student will not be present for the session.

If the absence is unexcused, the Course Director will discuss the situation with the student. Any further unexcused absences will result in the notification of Student Affairs, a **Report of Concern for Unprofessional**, and referral of the student to the Student Evaluation and Promotions Committee.

**Unexcused absences may not be rescheduled or made up.** Repeated unexcused absences may result in a failing grade for the course. Students with unexcused absence(s) will still be responsible for the missed material in future OSCE's and written examinations.

### ***Objective Structured Clinical Examination (OSCE)***

If a student knows he/she will not be able to participate in the OSCE, he/she should complete and submit the appropriate forms to Student Affairs, and, if within 24 hours of the time he/she is scheduled for the OSCE, contact Mrs. Danforth. If the absence is excused by Student Affairs, the student will receive an "I" (incomplete) grade and be required to complete a make-up OSCE at a designated time after the course has ended.

Any excused absence—whether planned or unplanned—will not impact the student's grade.

Any absence that does not qualify as an excused absence per Student Affairs is an unexcused absence. These generally are due to circumstances within the student's control. Examples of unexcused absences include the student who forgets about an OSCE session, the student who skips an OSCE to study for an exam and/or any absence where an able student fails to follow the procedures above if they are not able to participate in the OSCE. An unexcused absence will result in failure of both the OSCE and the course.

## Required Materials

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- 1) Bickley, LS and Szilagyi, G. Bates' Guide to Physical Examination and History Taking, 11th e.
- 2) Dutton G, Gabriel J, eds. Basic Interviewing Skills Booklet (on Blackboard)
- 3) [Lo Bernard. Resolving Ethical Dilemmas A Guide for Clinicians](#). Philadelphia: Lippincott Williams & Wilkins, 5th edition, 2013 (also available on Reserve in COM Library)
- 4) Smith's Patient-Centered Interviewing: An Evidence-Based Method, is available on-line at: <http://accessmedicine.mhmedical.com/book.aspx?bookID=501>, and through the library course pages.
- 5) Additional required readings will be assigned from a variety of sources. These readings will be provided to you either as handouts or posted on Blackboard where possible.
- 6) Other materials required for clinical sessions
  - a. Clinical examination equipment: Each student must have available the following clinical examination equipment: stethoscope with diaphragm, bell and pediatric option, oto/ophthalmoscope, #128 and #512 tuning forks, penlight, reflex hammer, Rosenbaum eye chart and a sphygmomanometer with pediatric, adult, and large adult sized cuffs. Opportunities to purchase this equipment at a discount were provided in the summer semester. Students who wish to avail themselves of this opportunity should contact the CLC Director, Mrs. Danforth. Bring your examination equipment with you to each CLC session.  
  
If you have not purchased your own clinical examination equipment, you may use the equipment in the CLC during your CLC sessions. This equipment should not be taken from the CLC without the permission of Mrs. Danforth.



- b. Also bring the following to each session in the CLC:
- A watch capable of measuring seconds
  - A pen for writing (blue or black ink)
  - The student's personal mobile device loaded with the appropriate medical software/applications.

## Recommended Materials

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1) Fadem B. Behavioral Science in Medicine. Philadelphia; Lippincott, 2004 (also available on Reserve in the COM Library)

2) Steele DJ, Susman JL, McCurdy FA. Student Guide to Primary Care: Making the Most of Your Early Clinical Experience. Philadelphia; Hanley & Belfus, 2003. .

## Course Evaluation

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Students will have the opportunity to provide constructive feedback to the course directors after each CLC session and to faculty after each Small Group. Students are encouraged to provide constructive feedback at all times on all components of the course. This feedback will assist the course directors in maintaining and enhancing the quality of course activities.

Students will also be given the opportunity to complete a formal course evaluation at the end of the semester. Evaluations will include both content and facilitation/teaching. These data are used in the curriculum review process, in monitoring of the curriculum by deans, chairs and other administrators, and in evaluating the quality of teaching provided by faculty members.