



The Florida State University
College of Medicine

Doctoring 101

BMS 6015

**Summer
2013**

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Course Overview

Course Goals

Doctoring 101 is the first component of a longitudinal and integrated Doctoring continuum that highlights acquisition of clinical knowledge, skills and behaviors for the practice of safe and effective patient-centered care.

The desired learning outcome of Doctoring in year 1 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.”

Behavioral medicine, medical humanities, bioethics, information technology, and professionalism are incorporated throughout the curriculum.

COM Institutional Competencies and Course Milestones Addressed in Doctoring 101

- 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. (Patient Care A)
 - Course Milestone: Demonstrate knowledge of the biopsychosocial model of health and illness, and use that knowledge to provide patient-centered care.
 - Course Milestone: Explore the impact of culture on the patient's perception of health and illness.
- Organize and conduct a medical encounter, including the use of an appropriate greeting/opening, gathering information and providing closure. (Patient Care B)
- Demonstrate the ability to elicit an accurate and thorough medical history appropriate for the patient's reason for visit. (Patient Care C)
 - Course Milestone: Demonstrate the ability to elicit the patient's chief concern, gather a thorough history of present illness and assess the patient's perspectives re: impact, causation and illness concerns.
- Conduct accurate and thorough physical and mental status examinations appropriate for the patient's reason for visit. (Patient Care D)
 - Course Milestone: Demonstrate the ability to perform the basic maneuvers of the physical examination of: 1) the upper back and upper extremity; 2) the lower back and lower extremity; 3) the thorax and lung; 4) the heart, major arteries and neck veins; 5) the scalp and head, neck, including thyroid, the mouth and oral cavity, the nose and nasal cavity; 6) the eyes (not including posterior chamber) and the ears; and, 7) the abdomen, using recommended physical exam techniques.
- Demonstrate knowledge of learning styles, preferences or strategies to facilitate lifelong learning. (Practice-Based Learning and Improvement E)
- Demonstrate respect, empathy, compassion, responsiveness and concern regardless of the patient's problems, personal characteristics. (Interpersonal and Communication Skills A)
 - Course Milestone: Demonstrate verbal skills and non-verbal behaviors that promote the building of rapport and trust between student and patient.

- Display professionalism, high ethical standards, and integrity in relationships in all aspects of medical practice, especially with respect to confidentiality, informed consent, and justice. (Professionalism D)

Course Milestone: Define medical professionalism and discuss student issues during the transition from student to physician.

- Utilize basic ethical principles including autonomy, beneficence non-maleficence and justice in the care of each patient. (Professionalism E)
- 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. (Professionalism F)

Instructional Methods and Environments of Learning

Clinical Learning Center (CLC) (Located on lower level COM).

The CLC is a simulated medical facility that provides a realistic and technologically-advanced learning environment. During Doctoring 101, students are scheduled one morning each week in the CLC to learn and demonstrate physical examination skills.

Students will work in groups of 3 and have the opportunity to practice with each other and with standardized patients (SPs). The SPs in D101 are individuals who permit students to interview and/or examine them. COM faculty and Doctoring TA's will observe you and provide real-time feedback on your skills.

Following each CLC session, students will receive a "Student Practice Plan" identifying both general and specific skills that need particular attention during future practice sessions.

Continued practice is needed to maintain and to improve clinical skills—including physical exam skills. To accommodate the need for student practice, the CLC will be open for clinical skills practice each Monday and Friday 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) to practice with, as no SP's will be present. CLC faculty and/or Doctoring TA's will be available during these open practice times to assist student learning.

"Practice (alone) does not make perfect. Only perfect practice makes perfect." *Vince Lombardi*

Due to the logistics and expense involved in planning and providing clinical skills training in the CLC, students are required to attend and participate in all scheduled CLC sessions. Students with a legitimate reason to miss one of these sessions must request an approved absence through Student Affairs. Students with approved absences will be allowed to reschedule or participate in a make-up session. Unapproved absences may not be rescheduled or made up. Repeated unapproved absences may result in a failing grade for the course.

If you know you will be absent on a scheduled CLC session date, please complete the absence approval request at least two weeks in advance of the planned absence. For absences that are planned and approved at least two weeks in advance, CLC schedule changes will be arranged.

One method for addressing a planned and approved absence is to identify a willing classmate that can exchange scheduled CLC sessions with you. In this situation, both students (the student with the approved absence and the willing classmate) should send an electronic schedule change request via

email to the Michael Cravener in the CLC. You will be notified by Mr. Cravener re: approval of these requests. Please note: Sending a request is NOT equivalent to receiving approval.

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

Large group class presentations/discussions (Located in the COM Auditorium).

Attendance at all large group sessions is strongly encouraged, but not required unless indicated as mandatory in the schedule and calendar. Lectures not containing sensitive material will be recorded for viewing in the usual manner. Often, the content presented and/or the activities that occur in the large group sessions are preparation for participation in the small group sessions that follows. Your small group performance may be negatively affected by failing to attend large group.

Students are responsible for content presented in large group sessions and in associated assigned readings. Knowledge of this content will be tested in the three unit exams.

Small group exercises (Located in assigned study rooms in the Learning Communities).

Attendance and participation in all small group activities is required. Small group sessions are largely experiential and, thus, impossible to remediate. Small group composition, expectations, assignments, resources and locations will be posted on Blackboard.

Students with a legitimate reason to miss one of these small group sessions or any required large group session must request an approved absence through Student Affairs. Repeated unapproved absences may result in a failing grade for the course.

Medical Informatics (Location: TBA)

Attendance and participation in the 2 Informatics sessions is strongly encouraged, but not required. Students will be responsible for content and skills presented at these sessions which will be tested in both written exams and OSCEs. Students will also be 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.

Assessments by competency domain:

Competency Domains Addressed in D101	Competencies Addressed in D101	Methods of Student Assessment used in D101
Patient Care	Demonstrate knowledge of the biopsychosocial model of health and illness, and use that knowledge to provide patient-centered care Explore the impact of culture on the patient's perception of health and illness. Organize and conduct a medical encounter, including the use of an appropriate greeting/opening, gathering information and providing closure. Demonstrate the ability to elicit the patient's chief concern, gather a thorough history of present illness and	1) Written exams; 2) Observation by faculty, staff and/or standardized patients; 3) Performance on the OSCE; 4) Participation in small group exercises and simulation activities.

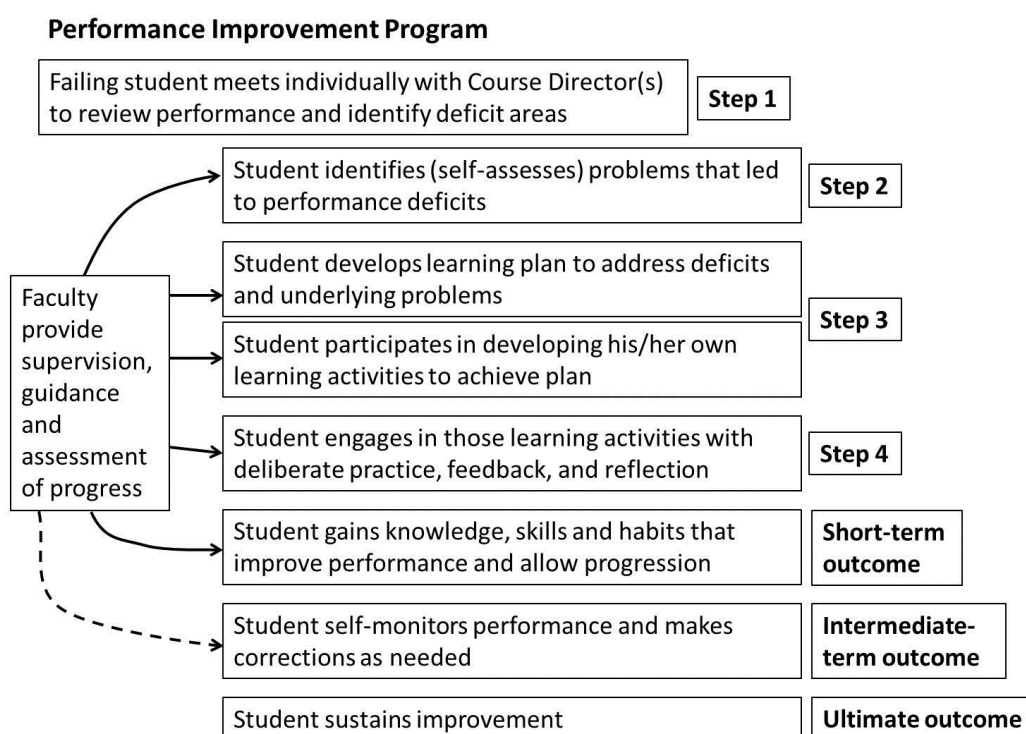
	<p>assess the patient's perspectives re: impact, causation and illness concerns.</p> <p>Demonstrate the ability to perform the basic maneuvers of the physical examination of: 1) the upper back and upper extremity; 2) the lower back and lower extremity; 3) the thorax and lung; 4) the heart, major arteries and neck veins; 5) the scalp and head, neck, including thyroid, the mouth and oral cavity, the nose and nasal cavity; 6) the eyes (not including posterior chamber) and the ears; and, 7) the abdomen, using recommended physical exam techniques.</p>	
Practice-based Learning	<p>Demonstrate knowledge of learning styles, preferences or strategies to facilitate lifelong learning.</p>	<ol style="list-style-type: none"> 1) Written exams; 2) Participation in small group exercises and simulation activities.
Communication Skills	<p>Demonstrate verbal skills and non-verbal behaviors that promote the building of rapport and trust between student and patient.</p>	<ol style="list-style-type: none"> 1) Written exams; 2) Observation by faculty, staff and/or standardized patients; 3) Performance on the OSCE; 4) Participation in small group exercises and simulation activities.
Professionalism	<p>Display professionalism, high ethical standards, and integrity in relationships in all aspects of medical practice, especially with respect to confidentiality, informed consent, and justice.</p> <p>Define medical professionalism and discuss student issues during the transition from student to physician.</p> <p>Utilize basic ethical principles including autonomy, beneficence non-maleficance and justice in the care of each patient.</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"> 1) Written exams; 2) Observation by faculty, staff and/or standardized patients; 3) Performance on the OSCE; 4) Participation in small group exercises and simulation activities.

Description of Student Assessment Methods and Grading

Unit examinations: Questions on presented material and readings in Doctoring 101 will be included in each unit exam. Multiple choice and other question formats are used to assess student content knowledge and skill (ability to solve problems, etc.). These exam questions may be drawn from material presented in the large group sessions (including the Medical Informatics sessions), small group sessions, assigned readings and CLC sessions.

Students must score a cumulative average of $\geq 70\%$ on the Doctoring questions to pass the examination component of the course. Students who do not answer 70% of the Doctoring questions correctly risk failing the Doctoring 101 Course, and being referred to the Student Evaluation and Promotions Committee.

A student whose performance is below passing during the semester ($<65\%$ on any one exam OR $<70\%$ average on two exams in the semester) is required to initiate and complete the Performance Improvement Program in consultation with the Course Director. The purpose of this program 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.



Objective Structured Clinical Examination (OSCE): OSCEs are skills-based examinations conducted in the CLC to assess the student's ability to demonstrate clinical skills and behaviors. OSCEs typically consist of several "stations." Each station will require the student to demonstrate one or more clinical skills/behaviors that will be assessed by a trained observer using established performance criteria for that assessment.

There is only one OSCE scheduled in Doctoring 101. Students must score $\geq 75\%$ on the D101 OSCE in order to pass the clinical skills portion of the course. Students who do not achieve a score of 75% or higher on the OSCE must remediate these clinical skills. This OSCE remediation will occur during the week of August 19, 2013 and must be coordinated with the Course Director and the CLC Director. Students scoring below 75% who are unable to successfully remediate these deficits will receive a grade of "Fail" for Doctoring 101, and be referred to the Student Evaluation and Promotions Committee.

Small group exercises and simulation activities: Students will be assessed weekly by small group facilitators. In order to pass this portion of the course, the terminal assessment by the small group facilitators must state that the student attended the small group sessions, was prepared for the weekly activities, participated in the 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 101.

Summary of Doctoring 101 Grading Criteria:

Student performance in Doctoring 101 is reported as either “Pass” or “Fail.”

To receive a “Pass” grade, the student must:

- 1) Prepare for, attend and participate in D101 small group sessions, and receive a small group grade of “Pass” by the small group facilitators; **AND**
- 2) Demonstrate the requisite clinical examination skills and informatics skills in the final OSCE, and receive a total OSCE score of $\geq 75\%$; **AND**
- 3) Answer correctly $\geq 70\%$ of all Doctoring 101 questions asked during the semester on the three unit exams; **AND**
- 4) Remediate any deficits as determined by the course director; **AND**
- 5) Complete and submit all assignments on time; **AND**
- 6) Consistently demonstrate the ethical and professional behaviors expected of medical students. These professional behaviors include, but are not limited to:
 - Attend, prepare for and participate in all required course activities;
 - Maintain patient confidentiality;
 - Maintain the confidentiality of personal information of classmates and faculty shared in small group activities;
 - Demonstrate respect for others—including faculty, staff, standardized patients and classmates.
 - Maintain the FSU honor code in all assignments or testing situations, including the OSCE.

Students who pass both the small group and exam portions of Doctoring 1, but fail the final OSCE, will be given one opportunity to remediate the OSCE failure during the week between summer and fall semesters. Failure to remediate the OSCE during that week will result in a course failure.

Students who fail either the small group or exam portion of Doctoring 1, will fail the Doctoring 101 course and be required to repeat the course and/or remediate to the course director’s satisfaction.

Other Administrative Items:

Clinical Examination Equipment: Each student must purchase clinical examination equipment. Opportunities to order/purchase this equipment will be provided during orientation. The equipment offered during orientation has been selected by course faculty and is available through an outside vendor. When you purchase the equipment “package” you will receive a significant discount over the purchase price of that equipment elsewhere.

Between the time when you order your clinical examination equipment and it arrives, you may use the equipment owned by the COM and located in the CLC when learning, practicing or being assessed in the CLC. This equipment should not be taken from the CLC without the permission of Ms. Danforth. When your clinical examination equipment arrives, you should plan to bring your examination equipment with you to each CLC session. In addition to clinical examination equipment, students should also bring the following to each CLC session: 1) a watch capable of measuring seconds; 2) a pen for writing (blue or black ink); and, 3) the student’s personal mobile device loaded with the appropriate medical software/applications.

Professional Dress: Medical students, faculty and staff are all ambassadors and representatives of the College of Medicine and the medical profession. Your appearance and behavior should at all times demonstrate respect for the profession and for your patients. Being a physician (or, a medical student)

has little to do with you expressing your individuality in appearance and/or dress; but, it has everything to do with focusing on the patient and his/her comfort and needs.

Professional attire should be worn in all settings where people from outside the COM, and especially patients, are seen including the Clinical Learning Center (CLC), a preceptor's office or clinic, a hospital or nursing facility, when interacting with a standardized patient during a small group activity, and in large group settings when guest lecturers, patients, or other visitors will be present.

Professional attire consists of clothes consistent with community norms for physicians. Examples of these norms in Tallahassee are: no jeans, no seductive or revealing clothes, no shorts, and no casual sandals.

For men, professional attire consists of slacks, a collared shirt and dress or casual shoes (no sport shoes or sandals). In some clinical situations, ties are required; in others, ties are forbidden. When working in the CLC this summer, **clean** scrub clothes may also be worn. (**Note: CLC scrubs must be kept separate from any scrub outfits worn in the anatomy lab.**) On those occasions when students are examining each other, you will be informed of the appropriate apparel for that session.

For women, professional attire consists of a dress or skirt or slacks with a blouse. The blouse should not be made of sheer or see-through fabric. When working in the CLC this summer, **clean** scrub clothes may also be worn. (**Note: CLC scrubs must be kept separate from any scrub outfits worn in the anatomy lab.**) On those occasions when students are examining each other, you will be informed of the appropriate apparel for that session.

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 ambiguous or new situations. In compliance with OSHA regulations, closed-toed shoes are required in all clinical settings—including CLC—for your safety and protection.

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.

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 discussions of 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 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

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

<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. (Florida State University [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 28-30 of [FSUCOM Student Handbook](#) for details of attendance policy, notice of absences and remediation.

Doctoring 101 Course Specific Absence Policy

CLC absences:

Unplanned, but excused, CLC absence: Unplanned but excused absences are student absences due to circumstances beyond the student's control. Examples of unplanned, but excused absences include student illness and/or family death. The student must submit an absence request to Student Affairs per the usual method. Student Affairs will classify the absence as excused or unexcused. In the case of any unplanned absence, the student should contact the CLC as soon as possible, inform both Michael

Cravener and Debra Danforth that he/she will not be in the CLC and give the reason for the unplanned absence.

Impact of excused absence on the student's grade: If the CLC absence qualifies as an “approved” or “excused” absence, a remediation plan will be developed by the student and Ms. Danforth. In most situations, remediation of the missed CLC session must occur within one week. These remediation sessions may require the presence of an SP and a Doctoring TA/CLC faculty. Any excused absence—whether planned or unplanned—will not impact the student's grade.

Unexcused CLC absence: Unexcused absences are any student absence that does not qualify as an excused absence. These generally involve circumstances within the student's control. Examples of unexcused absences include the student who forgets about a CLC session, the student who skips CLC to study for an exam, and/or any absence where an able student fails to contact Student Affairs, Michael Cravener and Debra Danforth to inform them that the student will not be in the CLC.

Impact of unexcused absence on the student's grade: *The first unexcused absence from a CLC session will result in a student receiving a warning letter from the course director. Any additional unexcused absences will result in the notification of Student Affairs and in a letter from the course director voicing professionalism concerns being forwarded to the Student Evaluation and Promotions Committee.* Students with unexcused absence(s) will still be responsible for the missed material in future OSCE's and written examinations.

OSCE

The OSCE is the only graded opportunity in Doctoring 101 for students to demonstrate their ability to perform clinical examination skills.

Excused OSCE absences require students to complete the proper forms with Student Affairs and obtain the required permissions prior to the absence. When an OSCE absence is both planned and approved, arrangements for a make-up OSCE are arranged at least two weeks in advance. Students arranging for a make-up OSCE will be scored using the same criteria as other students.

Students with an unplanned but excused absence that results in missing the OSCE will initially 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.

Unexcused OSCE absences: Any unplanned student 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 contact Student Affairs, Michael Cravener and Debra Danforth to inform them that the student will not be able to participate in the OSCE.

Impact of unexcused absence on the student's grade: If the absence does not qualify as an “excused” absence, the student will fail the OSCE, which will result in a course failure.

Required Resource Materials for D101

1) Seidel HM, Ball JW, Dains JE, Benedict GW. Mosby's Guide to Physical Examination. (7th Ed). St. Louis: Mosby, 2010.

2) [Lo Bernard. Resolving Ethical Dilemmas A Guide for Clinicians](#). Philadelphia: Lippincott Williams & Wilkins, 2009 (also available on Reserve in COM Library)

3) Dutton G, Gabriel J, eds. Basic Interviewing Skills Booklet (on Blackboard)

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.

Suggested Resource Materials for D101

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

Students are given the opportunity to provide constructive feedback to the course directors after each CLC session and are encouraged to provide instructive feedback at any time during the course. This feedback will assist the course directors in maintaining and enhancing the quality of these sessions.

Students will also be given the opportunity to complete a formal course evaluation at the end of the semester. 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.