

BCC 7112

Internal Medicine Clerkship

2016-2017

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Instructors

Education Director

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Clerkship Directors

Campus	Director
Daytona	Dr. Vinayak Purandare
Fort Pierce	Dr. William Hood
Orlando	Dr. Benjamin Kaplan
Pensacola	Dr. Robert Anderson
Sarasota	Dr. Kathleen Kennedy
Tallahassee	Dr. Michael Forsthoefel

Site Directors

Site	Director
Marianna	Dr. Steven Spence
Thomasville	Dr. Calvin Reams

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Course Overview

Description and Expectations

The third year Internal Medicine Clerkship is a six-week clinical rotation. The objective of the clerkship is to acquaint the student with the varied aspects of medical care for adults. Emphasis will be placed on enhancing the skills of taking a history, performing a physical examination, presenting these findings, developing a differential diagnosis for common clinical presentations and problems and finally, developing evidence-based high-value care plans. The skills of data analysis and critical thinking about diseases in patients will be highlighted.

Students will participate in the evaluation and care of outpatients and inpatients primarily under the supervision of the College of Medicine internal medicine faculty physicians. Formal and informal daily teaching sessions and rounds with the clerkship faculty physician (and residents at some sites) are a major part of the six-week experience. Clerkship directors at the regional campuses will meet with students once per week for teaching, evaluation and feedback. Each student will record and present appropriate clinical data daily to their clerkship faculty member. Students will be observed in clinical settings by the clerkship director or designee during the clerkship.

Students will be assigned to work with one or more clerkship faculty members during the 6-week rotation to accomplish the following goals:

- 1. Each student will evaluate at least 80 internal medicine patients over the course of the clerkship.
- 2. At least 40 of these encounters will be hospital inpatients

It is anticipated that the students will spend at least 50% of clerkship time in inpatient settings.

There are TWO ASSIGNMENTS for students to complete <u>prior</u> to their first clerkship day and first meeting with their Clerkship Director:

- Students MUST view the "Internal Medicine Clerkship Orientation Video" found under the Syllabus and Orientation Content Area of Blackboard and also <u>AT THIS LINK.</u> (Chrome, Firefox, and Safari are preferred browsers.)
- Students MUST be prepared to present an internal medicine case at the first Clerkship Director meeting.

Note: The Doctoring 3 and Chronic Care Clerkship courses, run concurrently with clerkships throughout the entire third year.

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Course Components

Teaching and Learning Methods

Students have access to personal computers and mobile devices and will be expected to access course materials through Blackboard. When working in Blackboard, Firefox seems to be the best browser, but others, including Internet Explorer, can be used. Students should enter patients into E*value on a daily basis; these entries will be reviewed and monitored frequently in Student Academics. This data will be reviewed weekly with the Clerkship Director to insure that appropriate numbers of patients are being seen, and that the patient mix reflects common internal medical problems without undue duplication. Students are expected to demonstrate involvement at the moderate to full level of participation in at least 2/3 of their patient encounters.

This is primarily an apprenticeship-style experience with an internal medicine clerkship faculty member allowing for experiential learning that each student will have with his/her clerkship faculty. Students will also have the opportunity to learn about many of the ancillary services and medical specialties that occur inside and outside of the hospital setting, and are encouraged to follow their patients for consultations and procedures.

Clerkship directors will meet with students once per week. General medicine topics will be discussed at this weekly meeting. The discussion may include the following: review of the assigned internal medicine *Case Files*, discussion of interesting cases seen during the week, review of materials read prior to the meeting, discussion of ethics topics based on cases presented by the students(see curriculum on Blackboard), and practice oral case presentation skills. Patient log entries will be reviewed and suggestions for learning any uncovered topics/diagnoses will be made by augmenting clinical experiences, completing internal medicine *Case Files* or paper cases and/or completing reading assignments.

Didactic sessions may be available through grand rounds, morning report, noon lectures, and/or sessions with the clerkship faculty member or clerkship director, depending on location and the clerkship faculty's schedule. Each student will be informed of their local learning opportunities and are encouraged to participate. Some clinical faculty may assign readings to students. Students are *encouraged* to practice lifelong learning skills and to *read* about the patients they are seeing by using the resources recommended in this syllabus. In addition, clinical faculty will be posting journal articles of interest on Blackboard.

The clerkship directors or clerkship faculty will observe and verify that each student has met competency standards in the performance of these areas:

- History and Physical Examination
- Concise Oral Case Presentation
- Chart Documentation
- Clinical Diagnostic Decision Making (Critical Thinking)
- Performing AND interpreting EKG
- Interpreting chest x-ray

Call and Weekends

Students may be on-call at the discretion of the clerkship faculty. The call frequency will not exceed every 4th night and will **not** require overnight call. Each student will work at least two weekend days during the six-week clerkship unless otherwise directed by clerkship faculty.

Internal Medicine Clerkship Student Self-Study Program

This self-study program has been designed to assist the student in managing the vast amount of internal medicine information available. This program will result in exposure to the core concepts and breadth of knowledge deemed necessary for students to have acquired during this clerkship. The keys to success during this rotation include a *daily text reading program covering not only the clinical encounters of the day, but also enough to cover the assigned readings by the end of the clerkship.*

Students are to complete the readings in IM Essentials and to work on the questions that accompany that text. Case Files and readings in Harrison's Principles of Internal Medicine 19th edition or Andreoli and Carpenter's Cecil Essentials of Medicine 9th Edition should supplement these readings. While the student is only responsible for the chapters below, additional readings pertaining to the cases seen during this rotation form the basis of medical knowledge and lifelong learning.

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Self-Study AY 2016-17						
	IM Essentials	Case Files			Harrison's Online	Cecil Essentials of
		(4 th Ed)	Lange Case Files	Subject	(19 th Ed)	Medicine (9 th Ed)
Week	Chapters	Case #	Chapter Title		Chapters	Chapters
1						
	1-3	1	Acute MI	MI	293-296	3 & 8
	7 & 8	2	CHF / AS	HF	279 & 280	5 & 7
	31	9	Hypertension	HBP	298	12
	32	46	Hypercholesteralemia	Hypercholesteralemia	421	69
	16	14	Pancreatitis / Gallstones	Abdominal Pain	20	38 & 44
	17 & 18			GERD/dyspepsia	347	35
	19	4	PUD	PUD	348	36
2						
	48	28	Sickle Cell			47
	26	16	Ulcerative Colitis			37
_	57	39	Pneumonia	Pneumonia	153	21 & 92
	60 & 64	54	Sepsis	UTI	162	98
	46			Cellulitis	156	94
	62	7	HIV	HIV / AIDS	226	101
_	65			Hospital Acquired Infections	168	99
	74	29	Meningitis	Meningitis	165	90
3						
	93	34	COPD	COPD	314	16
_	95			Interstitial Lung Disease	315	17
	96	37	PE	Pulmonary Embolism	142	18
	35 & 92	35	Cough / Asthma	Cough / Asthma	48 & 254	14
	11	57	Thyrotoxicosis	Thyroid Disease	405	63
	13 & 14	42	Type 2 DM	Diabetes Mellitus	417-419	66
4						
	33			Obesity	415 & 416	67
	68	36	Hypercalcemia / MM	Hypercalcemia	65	73
	67	5	Hyponatremia	Hyponatremia	63 & 64	27
	75	47	TIA	Stroke / TIA	446	116
	40	60	Dizziness	Dizziness	28	113
	79			Seizure	445	118
	73	50	Headache	Headache	21	111
5						
	70	17	Acute Renal Failure	Kidney Injury	334	31
	66	19	Acute GN	Glomerulonephritis	338	28
	99	24	Low Back Pain	Osteoarthritis	394	111
	100	21	Gout	Crystal Arthropathies	395	76 & 82
	102	22		RA	380	77
	103			SLE	378	79
	30	53	Health Maintenance	Health Maintenance	4	70
	28 & 29			EBM	3	71

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Broad Topic Areas

The student should have an understanding of the following topics, commensurate with their level of training. Students will be required to evaluate the following categories of problems/diagnoses in new or established patients:

	Preventative Care and Health Maintenance –including screening for appropriate risk factors and
1.	understanding appropriate immunization schedules. Students will have the opportunity to continue
	disease screening from other clerkships.
2.	Elder Care –focusing on geriatric syndromes such as delirium, dementia and fall risk
3.	Cardiovascular Disease (for example: hypertension, coronary artery disease, arrhythmia, heart failure)
4.	Renal Disease (for example: acute renal failure, chronic renal failure and glomerular disease)
5.	Gastrointestinal Disease (for example: abdominal pain, peptic ulcer disease, gastritis, reflux, bleeding)
6.	Cerebrovascular Disease (for example: stroke, transient ischemic attack, seizure, headache)
7.	Endocrinology (for example: diabetes, thyroid disease, dyslipidemia, obesity)
8.	Infectious Disease (for example: hospital acquired infections, cellulitis, pneumonia, UTI, HIV/AIDS)
9.	Hematology/Oncology (for example: common malignancies, anemia)
10.	Musculoskeletal Disease (for example: back pain, osteoarthritis, autoimmune diseases)
11.	Pulmonary Disease (for example: COPD, asthma, interstitial lung disease)

If unable to gain access to a patient with a diagnosis in any one of the categories listed, the student may be required to complete a reading assignment or a case with a diagnosis/problem in that category. The need for completing the reading assignment will be determined by the clerkship director based on weekly reviews of the patient log data, which will be discussed with the student on a weekly basis.

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Competencies-3rd year Internal Medicine Clerkship

ACGME Competency	Measurement	Entrustable Professional Activity
a. Demonstrate the ability to conduct a focused history appropriate to the patient's chief complaint and history present illness b. Demonstrate the ability to conduct a focused physical exam using appropriate techniques	director	1: Gather history, perform PE
a. Demonstrate the ability to diagnose, evaluate and construct a treatment plan for common illness in intermedicine b. Demonstrate the ability to perform appropriate health maintenance c. Perform and interpret ECG d. Interpret chest x-ray	Evaluation by clinical faculty Evaluation by clerkship director	2: Develop differential diagnoses 12: Perform general procedures
3. Interpersonal and Communication Skills a. Demonstrate the ability to convey appropriate information orally to other health care personnel in a concise manner b. Demonstrate the ability to document written admission history and physical example progress notes and orders	 Timed oral presentations Chart review Evaluation by clerkship director Evaluation by clinical faculty 	4: Enter orders, prescriptions 5: Document clinical encounter 6: Oral presentation

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4. Practice-based Learning and		7: Form clinical
Improvement a. Demonstrate facility in the application of medical informatics technology and critical appraisal of the medical literature in making diagnostic and management decisions in internal medicine	 Evaluation by clinical faculty Evaluation by clerkship director 	questions and retrieve evidence
Professionalism a. Displays and demonstrates professionalism in all interactions with patients, colleagues and staff	 Evaluation by patients, staff, clinical faculty Evaluation by clerkship director 	9: Contributing interprofessional team member

Achievement of competencies will be assessed mid-point and at the end of the clerkship by faculty and clerkship director.

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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

874 Traditions Way 108 Student Services Building 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. (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 the <u>FSUCOM Student Handbook</u> for details of attendance policy, notice of absences and remediation.

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Library Policy

The <u>COM Maguire Medical Library</u> is primarily a digital library that is available 24/7 through secure Internet access. Library resources that support this course are available on the Internal Medicine Subject Guide on the library website. In addition, many of the point-of-care resources are available for full download to mobile devices. Upon student request, items not found in the library collection may be borrowed through interlibrary loan.

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Supplemental Materials

Texts

Most texts are available through the library's Internal Medicine Subject Guide:

http://med-fsu.libguides.com/IM

The following is the ONLY REQUIRED TEXT for this clerkship:

IM Essentials text and questions (ACP-CDIM) 2015—Available through the FSUCOM Medical
Library. Using this is THE BEST way to prepare for the NBME shelf exam. You may also
purchase the print or electronic version. Some of the clerkship directors have paper copies of this
resource which you may borrow.

Other Recommended Resources:

- Cecil Essentials of Medicine (Andreoli, Carpenter, Griggs, Benjamin),9th edition, Saunders Elsevier,
 2015
- Case Files: Internal Medicine (Toy, EC and Patlan JT,) McGraw-Hill, Inc, 4th edition, 2013
- Dubin's Rapid Interpretation of EKGs

Required Mobile Device Resources-available for download through the FSUCOM library

- Epocrates Essentials
- DynaMed Plus
- Harrison's Manual of Medicine-through UCentral
- PEPID
- ePSS Tool (USPSTF)
- Essential Evidence Plus
- Qx Calculate
- Washington Manual of Medical Therapeutics-through UCentral

Other Suggested Resources

Madruga Marvel Medical Black Book (available as an app at iTunes)

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Grading

The standardized clerkship policy can be found on the Office of Medical Education website.

Evaluation Methods and Assignment

Since this clerkship is an apprentice-style experience, direct clinical observation by internal medicine faculty will be the *primary* method of student evaluation. This will be augmented by review of patient log entries. **All patient encounters must be entered into E-value**. Active participation in the weekly meetings with the clerkship director is another means of assessing student performance. Finally, the NBME Internal Medicine Subject Examination will assess overall knowledge of internal medicine and will allow the student to compare him/herself to peers.

Students will also be evaluated in two other ways. **First**, a concise oral case presentation to clinical faculty, done near the end of the clerkship, will assess case presentation skills, which is one of the course objectives. Students will be expected to present a patient they have seen, including history, exam, diagnostic data, assessment and plan within 5 minutes. **Second**, the student will submit a self-assessment of his/her growth in knowledge of internal medicine and discuss some topic areas where the/she would have liked to have learned more, and the ways he/she hopes to remediate this deficiency. *This self-assessment must be submitted to the Education Director through <u>Student Academics</u> during the final week of the rotation. The Education Director will evaluate this assignment.*

A post-clerkship debriefing may be held as a group with the clerkship director at the end of the clerkship.

Clerkship-Specific Grading Criteria

How the Final grade will be determined

- 1. NBME Internal Medicine Exam (must pass to pass the clerkship)
- Compliance with patient data entry of at least 80 patient encounters, 2/3 of which must be moderate to full involvement (pass/fail)
- 3. Completion of ALL required procedures (pass/fail)
- 4. Active participation in weekly clerkship director meetings (pass/fail)
- 5. Submission of reflection by the end of the clerkship (pass/fail)
- 6. Concise oral presentation to clerkship director (pass/fail)
- 7. Faculty evaluations and clerkship director evaluations of competency milestones
- 8. Professionalism (pass/fail)