

## **Syllabus: Medicine and Behavior II (BMS 6822), 2010**

### **Course Co- Directors:**

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### **Section Leaders:**

Jose Rodriguez, M.D.

Chronic Illness Integration

Michele Manting, M.D.

Women's Health

Marshall Kapp, JD, MPH

Ethics and Legal Integration

Nancy Clark, MS

Medical Informatics Integration

### **Blackboard Site:**

**This course is supported by a Blackboard site.** All relevant course materials are posted to this site. Course announcements will be posted periodically and students are expected to access the site prior to each scheduled class section to access announcements when they are made.

Included on the Blackboard site are the course Syllabus, Weekly Schedule, Assignments, and a Course Library. You can check your current grade status using the "My Grades" tab. The PowerPoint presentations and recorded Camtasia presentations will be posted in the Weekly Schedule. Announcements will be regularly used to remind you of due dates and other important facts about the course. We encourage you to visit it daily.

### **Required Text:**

Lo, Bernard. Resolving Ethical Dilemmas A Guide for Clinicians (3<sup>rd</sup> Ed). Philadelphia: Lippincott Williams & Wilkins, 2005.

### **Overall Course Objectives**

- To develop skills in the behavioral aspects of medical care.
- To develop tools for self-reflection and stress management

## General Course Objectives

1. Describe methods for dealing with uncertainty in medicine, and risk communication
2. Describe skill in motivational interviewing for use with patients to improve their health, nutrition, weight loss, stress management, and exercise.
3. Describe the behavioral components of chronic illness management.
4. Identify, locate and apply evidence-based practice guidelines for the behavioral management of common chronic disorders (e.g., diabetes, congestive heart failure, cancer, pediatric obesity, and renal failure).
5. Develop a personal plan for health behavior change, stress management, detecting bias in medical relationships, and apology for medical errors.
6. Describe behavioral approaches to managing pregnancy, childbirth, decisions regarding unplanned pregnancy, and early pregnancy loss.
7. Exhibit skills in end-of-life discussions.
8. Describe the essential components of a malpractice suit and personal methods for coping.

## Instructional Methods:

This course will employ novel educational methods:

- Lectures will be prepared using Camtasia and be online for downloading as a podcast or viewed on a laptop. The “lecture” time will be conducted at the student’s discretion and the student will be expected to view the lecture before attending the class. When a Camtasia lecture is being used 1 hour of class time will be given to the students to use to view the lectures and the second hour will be devoted to discussing the lessons learned, and for interviewing patient guests, listening to a panel of patients or health care providers, or small groups. This process is used to meet ED 5A of the LCME requirements for “active learning and independent study to foster the skills necessary for lifelong learning.”
  - Most classes will meet in the 10:00 - 11:00 am time slot.
  - Students will write a short reflective piece (1-2 paragraphs) summarizing their response to the Camtasia lecture material.
- One in-depth reflective writing exercise will be dedicated to self-assessment of skills in discussing end-of-life issues and hospice referral.
- Because of the writing assignments, there will not be exam questions for Medicine & Behavior II on the block exams. There will only be one set of Multiple Choice Questions for exam purposes, to be taken on the final comprehensive exam. The final exam will include questions from Medicine & Behavior I as well as Medicine and Behavior II.
- Practice questions will be made available regularly.
- Information technology experiences will be built into most sessions. Students will be expected to search and find information on EBM regarding the topic being presented using their PDAs. They will also search for and deliver samples of quality patient education materials found.

- Each student will have the opportunity to implement one health behavior change and track their personal progress.(*see attached guideline*)

## **Additional General Course Description and Schedule of Topics**

New topics have been selected based upon surveys of current third and fourth year students and their perceptions of areas needing additional coverage before the clinical clerkships. While we have tried to sequence topics to promote coordination/integration with topics that are being covered in Pathology, Physiology, Pharmacology, Microbiology, and Doctoring it is not always possible to do so.

We have elected to change a number of the topics based on student feedback:

Subjects dropped:

- Incontinence
- Helping families deal with children's serious illness

Subject modified:

- Changed chronic pain to dealing with drug-seeking patients

New subjects added:

- Behavioral aspects of pregnancy loss
- Behavioral aspects of pediatric obesity
- Discussing hospice referral and DNR
- Expanded exposure to stress management
- Expanded focus on motivational interviewing
- Discussing CAM and EBM with patients

This course is not designed primarily to enable you to pass the "Boards." It is designed to make you a "twenty-first century physician practicing patient-centered medicine."

However, you should know that for the last four years, our classes have scored above average on the USMLE boards in the area of behavioral medicine.

### **Student Grading:**

All assignments will be graded pass-fail.

If a Camtasia lecture reflection is turned in after 10 am of the class time, it will receive only half credit. If turned in after the deadline, then half credit will be given. If it does not meet minimum standards, it will be returned with the opportunity to complete it correctly within one week. If turned in on time, it will receive the full credit. If not turned in on time it will receive no credit.

If one of the other assignments (BCP, IT, patient ed, DNR reflection) is turned in after the due date and time, it will receive 10% less credit for each day late.

	Total Points(%)
Camtasia lecture reflections – #7 (5 points each)	35
Behavior Change Plan (BCP) (10 points)	10
IT submissions – #3	15
Patient education material hunt – #3	15
DNR reflective paper	15
Final Exam	<u>10</u>
	100(%)

**Extra Credit opportunities - (1 point each)**

Attending Grand Rounds with behavioral medicine content. Just as physicians get credit for CME by attending Grand Rounds, you will be able to get credit for attending those Grand Rounds which are dedicated to behavioral medicine topics.

**January 14:** Kenneth Heilman, M.D., Professor of Neurology, College of Medicine, University of Florida. “Creativity.” Host: Robert Watson, M.D.

**February 4:** Howard Kushner, Ph.D., M.A., Nat C. Robertson Distinguished Professor of Science and Society, Director of Graduate Studies, Rollins School of Public Health and Graduate Institute of Liberal Arts, Emory University. "The Cursing Patient: Neuropsychiatry Confronts Tourette Syndrome, 1825-2009." Host: Joseph Gabriel, Ph.D.

**February 25:** Kenneth Brummel-Smith, M.D., Charlotte Edwards Maguire Professor and Chair, Department of Geriatrics, College of Medicine, Florida State University and Gareth Dutton, Ph.D., Assistant Professor, Department of Medical Humanities and Social Sciences, College of Medicine, Florida State University. “Patient-centered care—an extremist’s approach.” Host: Suzanne Johnson, Ph.D.

Professional Behavior P/F  
 (Breaches in professional behavior may result in lower grades, failure or expulsion.)

**Grading Scale:**

A = >90%
B+ = 87-89.9%
B = 80-86.9%
C+ = 77-79.9%
C = 70-76.9%
D = 65-69.9%
F = <64.9%

## **Integration with COM Goals and Objectives:**

This course contributes to the learning of the following objectives (and *competencies*) for the FSUCOM:

### **Knowledge**

- Demonstrate the ability to use basic bio-behavioral and clinical science principles to analyze and solve problems related to the diagnosis, treatment, and prevention of disease. (*Problem Solving and Critical Thinking*)
- Demonstrate the ability to employ a comprehensive, multidisciplinary approach to the care of patients that integrates biomedical and psychosocial considerations. (*Essential Clinical Skills*)
- Recognize the implications of cultural, social, economic, legal, and historical contexts for patient care. (*Social, Cultural and Community Context of Health, Illness and Care*)
- Describe and discuss the implications of basic ethical principles, including confidentiality, informed consent, truth telling, and justice, for the care of patients. (*Moral Reasoning and Ethical Conduct*)
- Describe strategies to support life-long learning via both print and electronic sources to assist in making diagnostic and treatment decisions (e.g., clinical calculators) and to remain current with advances in medical knowledge and practice (e.g., EBM resources). (*Lifelong Learning and Information Management*)

### **Skills**

- Demonstrate the ability to evaluate the patient's psychosocial problems and to formulate accurate hypotheses to serve as the basis for making diagnostic and treatment decisions. (*Problem Solving and Critical Thinking*)
- Demonstrate the ability to formulate and implement a plan of care for both the prevention and treatment of disease and the relief of symptoms and suffering. (*Problem Solving and Critical Thinking*)
- Demonstrate the ability to educate patients about their health problems and to motivate them to adopt health promoting behaviors. (*Communicating with Patients, Families and Colleagues*)
- Demonstrate the ability to acquire new information and data and to critically appraise its validity and applicability to one's professional decisions, including the application of information systems technologies for support of clinical decision-making. (*Lifelong Learning and Information Management*)

- Demonstrate the ability to communicate compassionately and effectively, both verbally and in writing, with patients, their families, colleagues and others with whom physicians must exchange information in carrying out their responsibilities. (*Communicating with Patients, Families and Colleagues*)

### **Attitudes/Behaviors**

- Display the personal attributes of compassion, honesty, and integrity in relationships with patients, families, communities and the medical profession. (*Professional Values, Attitudes and Behaviors*)
- Exhibit appropriate value for the sensitive nature of the doctor/patient relationship and the importance of compassionate communication and active listening, with attention to the patient's familial, cultural, and spiritual circumstances. (*Professional Values, Attitudes and Behaviors*)
- Demonstrate professionalism and high ethical standards in all aspects of medical practice, specifically competence, honesty, integrity, compassion, respect for others, professional responsibility and social responsibility. (*Moral Reasoning and Ethical Conduct*)
- Exhibit a capacity for self-evaluation, moral reflection and ethical reasoning to form the basis for a self-directed, lifelong engagement in the responsible, committed, compassionate practice of medicine. (*Personal Awareness*)
- Demonstrate awareness of the health care needs of aging patients and a willingness to care for the elderly. (Professional Values, Attitudes and Behaviors)
- Demonstrate awareness of the unique health care needs of ethnically diverse populations and communities. (*Social, Cultural and Community Context of Health, Illness and Care*)

### **Integration Themes**

The following “integration themes” will be included in this course:

- Informatics
- Evidenced-Based Medicine
- Medical ethics/professionalism
- Medical humanities
- Culture
- Geriatrics
- Rural and urban underserved populations

## **Application of “Principles of the Curriculum” in Medicine and Behavior II**

### **Principle 1: The curriculum is student-centered**

Examples:

- A variety of learning methods are employed (lecture, small group, self-directed study) so that each student’s preferred learning style is incorporated into the course.
- Students will be given opportunities to demonstrate the ability to think deeply and critically about the material through small group exercises and self-directed/reflective exercises.
- Students are regularly surveyed as to their learning needs and the course is adjusted both in real-time and over the years to feedback.

### **Principle 2: The curriculum comprises a context-framed educational plan...**

Examples:

- Each learning session will employ clinical scenarios.
- Small group sessions will be facilitated by clinician facilitators.
- The course directors and module leaders are committed to making this course “transparently” clinical in its orientation. We assume that students already know that psychosocial issues are important and that they don’t need to be convinced. Our goal is to provide them with knowledge and skills that can be applied to the care of patients.

### **Principle 3: Coursework is integrated within and across years.**

Examples:

- Medicine and Behavior II attempts to apply principles addressed in Medicine and Behavior I to various illness states and disease entities that are being addressed concurrently in pathology, physiology, pharmacology, microbiology, and Doctoring 2.

### **Principle 4: Curriculum based on measurable competencies**

Please see listing of COM general learning objectives discussed above.

### **Principle 5: Scholarship and the discovery of new knowledge is encouraged and facilitated.**

Students will be encouraged to post their reflective writings in their portfolios. Those displaying interest in any of the topics covered by the course will be encouraged to pursue that interest and provided with information, contacts, etc.

**Principle 6: The educational environment is appropriate to the mission of the College of Medicine and students are educated in the biopsychosocial model.**

The very existence of this course is predicated on this principle. Also see the discussion above regarding the integration of the College of Medicine “integration themes.”





## **FSU COM ATTENDANCE POLICY**

### **We believe that:**

Professionalism is a major component of our medical curriculum. We believe students should conduct themselves appropriately in the various educational activities of the curriculum. This conduct includes coming to educational activities on-time, using the laptop computers only for course work during the educational activity, and not disrupting the class if late. The faculty should also demonstrate professionalism by starting and ending all scheduled educational activities on time and providing a course schedule with clearly explained course policies in the course syllabus. Any changes in the schedule should be given to the students in a timely manner.

Students will be accountable and personally responsible for attending all educational activities (community experiences, examinations, lectures, computer sessions, etc.).

Unexcused absences reflect negatively on the goals and objectives of the medical curriculum and demonstrate unprofessional behavior by the respective student.

We owe it to our state legislature and the citizens of the State of Florida to provide a quality educational program that meets the needs of our students in preparing them for the M.D. degree.

### **Attendance Policy**

Students are expected to attend all scheduled activities. Students are expected to be on time. Being on time is defined as being *ready to start* at the assigned time. If a student has an emergency that prevents her/him from attending a scheduled activity, s/he is to call and notify the Office of Student Affairs (Year 1/2) and request that they inform the supervisors/professors/clerkship faculty/education director for that activity. If at all possible, the student should also call and at a minimum, leave a message with one of the course/clerkship directors. *It is important that students realize that their absence or tardiness negatively impacts a number of other people.* Attendance, including timeliness, is part of the student's evaluation for professionalism. Negative evaluations may result in decreased grades and in severe cases, referral to the Student Evaluation and Promotion Committee.

### **Procedure for Notification of Absence**

#### **Year 1/2**

If the student knows in advance of an upcoming legitimate absence, the "Advance Notification of Absence from Educational Activity(ies)" form should be completed with signatures from the student, the Associate Dean for Student Affairs, the course faculty member and the Course Director. The form will be filed in the Office of Student Affairs. The implications for the absence (e.g., remediation, course grade adjustment, make-up

exam, etc.) will be given to the student by the course director and final decisions regarding these actions shall rest with the course director.

If the absence occurs due to an unforeseen emergency, the student should contact the course director and the Assistant Dean for Student Affairs immediately to report the absence including the reason for the absence. The implications for the absence (e.g., remediation, course grade adjustment, make-up exam, etc.) will be given to the student by the course director and final decisions regarding these actions shall rest with the course director.

### **Remediation Policy for Absences from Examinations, Quizzes, Small Group Sessions, Laboratory Sessions, Clinical Learning Center Sessions, Preceptor visits, and Clerkship Call**

The remediation policies for absences from examinations, quizzes are:

1. **POLICY ON MISSED EXAMINATIONS:** Students are required to take major in-term and final examinations. According to the curriculum committee a student can only be excused from an examination by a course/education director decision based on the personal situation of the student. The course/education director will determine the time of the exam make-up session. Also, according to the curriculum committee decision and the existence of the FSU-COM honor code, the student will be given the same examination given to the other students.
2. **POLICY ON MISSED LARGE GROUP, SMALL GROUP SESSIONS, MOVIE SESSION:** The student should contact the course director, for instructions on remediation of the missed session and material covered.

### **Remediation Policy for Students Who Fail a Course**

Remediation of courses/clerkships will be planned and implemented by a combined decision of the Evaluation and Promotion Committee in collaboration with the course director.

### **Professional Behavior**

Computers During Patient/Visitor Panels - Students will not use computers during the sessions which involve visitor or patient panel discussions.

### **Dress Code**

There are some sessions during the semester that include guests from outside of the FSUCOM community, including agency personnel and patients. Please take this into consideration when dressing. Business casual attire is required on those days. Likewise you should follow this dress code for any off campus visits.

### **Confidentiality**

Any personal material discussed in class by panel members, patients, faculty and students is confidential and should not be discussed outside of class.

### **“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://www.fsu.edu/~dof/honorpolicy.htm>.”

### **Students with Disabilities (ADA Statement):**

Students with disabilities needing academic accommodations should:

1. Register with and provide documentation to the student disability Resource Center (SDRC);

Student Disability Resource Center  
Dean of Students Department, 08 Kellum Hall  
Florida State University  
Tallahassee, FL 32306-4400  
(850) 644-9566 (voice) (850) 644-8504 (TDD)  
[SDRC@admin.fsu.edu](mailto:SDRC@admin.fsu.edu);  
<http://www.fsu.edu/~staffair/dean/StudentDisability/>

2. Bring a letter to the instructor from the SDRC indicating you need academic accommodations. This should be done within the first week of class. Specific arrangements should be settled with the instructor 5 working days prior to each exam for which accommodations are being requested.

### **SYLLABUS CHANGE POLICY:**

This syllabus is a guide for the course and is subject to change with advanced notice.