



CLIN 702, INTRO TO CLINICAL CLERKSHIPS SYLLABUS
 ROTATION LENGTH 1 WEEK
 MONDAY – FRIDAY
 First week of the OMS 3 Year
 1.0 Credit

1. Contact Information

Course Director				
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2. Course Description/Overview

The Introduction to Clinical Clerkships Syllabus CLIN 702 is a 1 week, 1.0 credit hour course during the 1st week of OMS3 at the student’s clinical training site. The outline of the topics is provided below with no date, since each clinical site may have a different start date subject to minor revisions. Students will be provided with a multidimensional, multidiscipline approach to the expected clinical and professional behaviors that will assist the student to transition from a didactic setting to a clinical venue that involves administrative staff, nursing staff, medical residents, and physician attendings in a healthcare organization.

This syllabus provides an overview of the topics that will facilitate student success as the OMS3 student transitions from their OMS2 year to the clinical phase of their medical school training. This course is for students assigned to rotations at the Mount Vernon regional site.

3. Course Purpose/Goals

The Introduction to Clinical Clerkships Syllabus CLIN 702 takes a multidimensional approach on various topics to provide medical students with basic knowledge of hierarchal structure in clinical healthcare organizations and typical medical resident and attending physician expectations of 3rd and 4th year medical students on clinical rotations.

AY20 CLIN 702 SYLLABUS

The goal of this course is to provide each student with the core knowledge necessary for a student's successful integration into clinical rotations that include various administrative staff, health care disciplines from nursing, medical residents and attendings, and patients. All of these individuals contribute in some way to the student's development to becoming a competent physician.

Nationally there has been a move towards the use of EPAs to ascertain a student's residency preparedness. Below you will find a table of the EPAs PNWU will be utilizing in the future.

4. Entrustable Professional Activities (EPAs)		
EPAs	Description of Activity	Domains of Competence
<p>EPA 1: Gather a history and perform a physical examination including an osteopathic structural exam as appropriate.</p>	<p>Osteopathic medical students should be able to perform an accurate, complete or focused history and physical exam in a prioritized, organized manner without supervision and with respect for the patient. The history and physical examination should be tailored to the clinical situation and specific patient encounter. This data gathering and patient interaction activity serves as the basis for clinical work and as the building block for patient evaluation and management. Learners need to integrate the scientific foundations of medicine with clinical reasoning skills to guide their information gathering.</p>	<ul style="list-style-type: none"> • Patient Care • Knowledge for Practice • Interpersonal and Communication Skills • Professionalism • Osteopathic Principles and Practice (OPP)
<p>EPA 2: Prioritize a differential diagnosis following a clinical encounter (musculoskeletal considerations that may lead to somatic dysfunction).</p>	<p>To be prepared for the first day of residency, all osteopathic medical students in training need to be able to integrate patient data to formulate an assessment, developing a list of potential diagnoses that can be prioritized and lead to selection of a working diagnosis. Developing a differential diagnosis is a dynamic and reflective process that requires continuous adaptation to avoid common errors of clinical reasoning such as premature closure.</p>	<ul style="list-style-type: none"> • Patient Care • Knowledge for Practice • Practice-Based Learning and Environment • Interpersonal and Communication Skills • Personal and Professional Development • Osteopathic Principles and Practice (OPP)
<p>EPA 3: Recommend and interpret common diagnostic and screening tests</p>	<p>This EPA describes the essential ability of the day one resident to select and interpret common diagnostic and screening tests* using evidence-based and cost-effective principles as one approaches a patient in any setting</p>	<ul style="list-style-type: none"> • Recommend first-line, cost-effective diagnostic evaluation for a patient with an acute or chronic common disorder or as part of routine health maintenance. • Provide a rationale for the decision to order the test. • Incorporate cost awareness and

AY20 CLIN 702 SYLLABUS

		<p>principles of cost-effectiveness and pre-test/post-test probability in developing diagnostic plans.</p> <ul style="list-style-type: none"> • Interpret the results of basic diagnostic studies (both lab and imaging); know • Common lab values (e.g., electrolytes). • Understand the implications and urgency of an abnormal result and seek assistance for interpretation as needed. • Elicit and consider patient preferences in making recommendations. • Clinical Experiences • Presentations • COMAT
<p>EPA 4: Enter and discuss orders and prescriptions and applicable Osteopathic treatments.</p>	<p>Writing safe and indicated orders is fundamental to a physician's ability to prescribe therapies or interventions beneficial to patients. It is expected that Osteopathic medical students will be able to do this without direct supervision when they matriculate to residency. Entering students will have a comprehensive understanding of some but not necessarily all of the patient's clinical problems for which they must provide orders. They must also recognize their limitations and seek review and guidance for any orders and prescriptions they are expected to provide but for which they do not understand the rationale. The expectation is that learners will be able to enter safe orders and prescriptions in a variety of clinical settings (e.g., inpatient, ambulatory, urgent, or emergent care).</p>	<ul style="list-style-type: none"> • Patient Care • Knowledge for Practice • Practice-Based Learning and Environment • Interpersonal and Communication Skills • Professionalism • Osteopathic Principles and Practice (OPP)
<p>EPA 5: Document a clinical encounter in the patient record.</p>	<p>Osteopathic medical students should be able to provide accurate, focused, and context-specific documentation of a clinical encounter in either written or electronic formats. Performance of this EPA is predicated on the ability to obtain</p>	<ul style="list-style-type: none"> • Patient Care • Interpersonal and Communication Skills • Professionalism

AY20 CLIN 702 SYLLABUS

	information through history, using both primary and secondary sources, and physical exam in a variety of settings (e.g., office visit, admission, discharge summary, telephone call, and email).	<ul style="list-style-type: none"> • Osteopathic Principles and Practice (OPP)
EPA 6: Provide an oral presentation of a clinical encounter.	Osteopathic medical students should be able to concisely present a summary of a clinical encounter to one or more members of the health care team (including patients and families) in order to achieve a shared understanding of the patient's current condition. A prerequisite for the ability to provide an oral presentation is synthesis of the information, gathered into an accurate assessment of the patient's current condition.	<ul style="list-style-type: none"> • Practice-Based Learning and Environment • Interpersonal and Communication Skills • Professionalism • Personal and Professional Development
EPA 7: Form clinical questions and retrieve evidence to advance patient care.	It is crucial that students be able to identify key clinical questions in caring for patients, identify information resources, and retrieve information and evidence that will be used to address those questions. Osteopathic medical students should have basic skill in critiquing the quality of the evidence and assessing applicability to their patients and the clinical context. Underlying the skill set of practicing evidence-based medicine is the foundational knowledge an individual has and the self-awareness to identify gaps and fill them.	<ul style="list-style-type: none"> • Knowledge for Practice • Practice-Based Learning and Improvement
EPA 8: Give or receive a patient handover to transition care responsibility.	Effective and efficient handover communication is critical for patient care. Handover communication ensures that patients continue to receive high-quality and safe care through transitions of responsibility from one health care team or practitioner to another. Handovers are also foundational to the success of many other types of inter professional communication, including discharge from one provider to another and from one setting to another. Handovers may occur between settings (e.g., hospitalist to PCP, pediatric to adult caregiver, discharges to lower-acuity settings) or within settings (e.g., shift changes).	<ul style="list-style-type: none"> • Patient Care • Practice-Based Learning and Environment • Interpersonal and Communication Skills • Professionalism

AY20 CLIN 702 SYLLABUS

<p>EPA 9: Collaborate as a member of an interprofessional team.</p>	<p>Effective teamwork is necessary to achieve the Institute of Medicine competencies for care that is safe, timely, effective, efficient, and equitable. Introduction to the roles, responsibilities, and contributions of individual team members early in professional development is critical to fully embracing the value that teamwork adds to patient care outcomes.</p>	<ul style="list-style-type: none"> • Interpersonal and Communication Skills • Professionalism • Systems-Based Practice • Interprofessional Collaboration
<p>EPA 10: Recognize a patient requiring urgent or emergent care and initiate evaluation and management.</p>	<p>The ability to promptly recognize a patient who requires urgent or emergent care, initiate evaluation and management, and seek help is essential for all physicians. New residents in particular are often among the first responders in an acute care setting, or the first to receive notification of an abnormal lab or deterioration in a patient's status. Early recognition and intervention provide the greatest chance for optimal outcomes in patient care. This EPA often calls for simultaneously recognizing need and initiating a call for assistance.</p>	<ul style="list-style-type: none"> • Patient Care • Interpersonal and Communication Skills
<p>EPA 11: Obtain informed consent for procedures/tests (under preceptor supervision).</p>	<p>All physicians must be able to perform patient care interventions that require informed consent. Osteopathic medical students may be in a position to obtain signatures for informed consent for interventions, tests, or procedures they order or perform (e.g., immunizations, central lines, contrast and radiation exposures, blood transfusions, and OMM) after risks and benefits have been explained by the physician caring for the patient.</p>	<ul style="list-style-type: none"> • Patient Care • Interpersonal and Communication Skills • Professionalism • Systems-Based Practice • Personal and Professional Development
<p>EPA 12: Perform general procedures of a physician including applicable Osteopathic treatments.</p>	<p>All Osteopathic medical students must demonstrate competency in performing a few core procedures under supervision on completion of medical school in order to provide basic patient care. These procedures include:</p> <ul style="list-style-type: none"> • Basic cardiopulmonary resuscitation (CPR) • Bag and mask ventilation • Venipuncture • Inserting an intravenous line • Osteopathic manipulative medicine (OMM) 	<ul style="list-style-type: none"> • Patient Care • Interpersonal and Communication Skills • Professionalism • Systems-Based Practice • Personal and Professional Development • Osteopathic Principles and Practice (OPP)

AY20 CLIN 702 SYLLABUS

<p>EPA 13: Identify system failures and contribute to a culture of safety and improvement.</p>	<p>Preventing unnecessary morbidity and mortality requires health professionals to have both an understanding of systems and a commitment to their improvement.</p> <p>This commitment must begin in the earliest stages of health professional education and training.</p> <p>Therefore, this EPA is critical to the professional formation of a physician and forms the foundation for a lifelong commitment to systems thinking and improvement.</p>	<ul style="list-style-type: none"> • Knowledge for Practice • Practice-Based Learning and Environment • Interpersonal and Communication Skills • Professionalism • Systems-Based Practice
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Prepared by the American Association of Colleges of Osteopathic Medicine, in conjunction with all U.S. Osteopathic Medical Schools. April 2016.
Osteopathic Considerations for Core Entrustable Professional Activities (EPAs) for Entering Residency, 2016.

5. Course Learning Objectives (NBOME)		
Course Learning Objectives	Methods of Assessment	Learning Activities
<p>Application of Medical Knowledge:</p> <ol style="list-style-type: none"> 1. Develop a foundation of how to succeed on clinical rotations beyond the application of basic science knowledge. 2. Understand the student's role in how to transition from passive learning in the didactic venue to active student learning in the clinics. <p><i>NBOME Competency domains 5, 6, 7</i></p>	<p>Student reflective writings, Multiple choice quizzes</p>	<p>Lecture, RAD, RSA</p>
<p>Clinical Skills:</p> <ol style="list-style-type: none"> 1. Recognize important roles of administrative personnel, nurses and physicians in the delivery of health care and their role that they may play in a student's professional development. <p><i>NBOME Competency domains 5, 6, 7</i></p>	<p>Student reflective writings, Multiple choice quizzes</p>	<p>Lecture, RAD</p>
<p>Professionalism:</p> <ol style="list-style-type: none"> 1. Cultivate professional growth through interactions with all members of the of the health care organization 2. Exhibit appropriate, professional behavior in the classroom, in small group activities and in testing environments at all times. <p><i>NBOME Competency domain 6</i></p>	<p>Student reflective writings, Multiple choice quizzes</p>	<p>Lecture, RAD, RSA</p>

NBOME Fundamental Osteopathic Medical Competencies. June 2016

AY20 CLIN 702 SYLLABUS

6. Course Schedule/Calendar					
Learning Activity Date	Subject Matter/Description	Learning Activity Type	Primary Instructor Name	Hours	N/A
2019	Welcome and administrative course details	Lecture	TBD	2 hrs.	
2019	Orientation to PNWU PowerPoint (region specific)	Lecture	TBD	2 hrs.	
2019	Making the transition from preclinical student to clinical student	Lecture	TBD	1 hr.	
2019	Making the transition from passive student to active student	FDS	TBD	2 hrs.	
2019	Professionalism	Lecture	TBD	1 hr.	
2019	Professionalism	FDS	TBD	2 hrs.	
2019	Your role as a student doctor	Lecture	TBD	1 hr.	
2019	Your role as a student doctor	FDS	TBD	2 hrs.	
2019	Student doctor roles with medical and surgical residents	Lecture	TBD	1 hr.	
2019	Student doctor roles with medical and surgical residents	FDS	TBD	2 hrs.	
2019	Time management of: Professional, social, and family obligations	Lecture	TBD	1 hr.	
2019	Time management of: Professional, social, and family obligations	FDS	TBD	2 hrs.	
2019	Student doctor roles with medical and surgical residents	Lecture	TBD	1 hr.	
2019	Student doctor roles with medical and surgical residents	FDS	TBD	2 hrs.	
2019	Working with resident teams and student responsibilities. Students in the resident chain of command	Lecture	TBD	1 hr.	
2019	Working with resident teams and student responsibilities. Students in the resident chain of command	FDS	TBD	2 hrs.	
2019	Chain of commands in medical training and health care organizations	Lecture	TBD	1 hr.	
2019	Chain of commands in medical training and health care organizations	FDS	TBD	2 hrs.	
2019	How to address problems and conflicts during clinical rotations	Lecture	TBD	1 hr.	

AY20 CLIN 702 SYLLABUS

2019	How to address problems and conflicts during clinical rotations	FDS	TBD	2 hrs.	
2019	Electronic Medical Record systems	Lecture	TBD	1 hr.	
2019	Electronic Medical Record systems	FDS	TBD	2 hrs.	
2019	Hospital electronic systems	Lecture	TBD	1 hr.	
2019	Hospital electronic systems	FDS	TBD	2 hrs.	
2019	Approaching the patient as a student doctor on rotations	Lecture	TBD	1 hr.	
2019	Approaching the patient as a student doctor on rotations	FDS	TBD	2 hrs.	
2019	The importance of listening	Lecture	TBD	1 hr.	
2019	The importance of listening	FDS	TBD	2 hrs.	
2019	EKG basics review	Lecture	TBD	1 hr.	
2019	EKG basics review	FDS	TBD	2 hrs.	
2019	Heart sounds	Lecture	TBD	1 hr.	
2019	Heart sounds	FDS	TBD	2 hrs.	
2019	Lung sounds	Lecture	TBD	1 hr.	
2019	Lung sounds	FDS	TBD	2 hrs.	
2019	Morning report of hospital clinical patients	Lecture	TBD	1 hr.	
2019	Morning report of hospital clinical patients	FDS	TBD	2 hrs.	
2019	What to do if you feel your rotation experience isn't meeting your needs	Lecture	TBD	1 hr.	
2019	What to do if you feel your rotation experience isn't meeting your needs	FDS	TBD	2 hrs.	
2019	How to give feedback	Lecture	TBD	1 hr.	
2019	How to give feedback	FDS	TBD	2 hrs.	
2019	How to receive feedback	Lecture	TBD	1 hr.	
2019	How to receive feedback	FDS	TBD	2 hrs.	
2019	Ways to say "thank you" at the end of your rotation service	Lecture	TBD	1 hr.	
2019	Ways to say "thank you" at the end of your rotation service	FDS	TBD	2 hrs.	
2019	"Getting out of the shadow box": when shadowing takes over your rotation	Lecture	TBD	1 hr.	

AY20 CLIN 702 SYLLABUS

2019	"Getting out of the shadow box": when shadowing takes over your rotation	FDS	TBD	2 hrs.	
2019	Successful student behaviors discussion with the RAD	See end of syllabus	TBD		
2019	<i>How to Win Friends and Influence People</i>	Book review	TBD		

7. Course Format

The rotation block is scheduled from Monday through Friday of the 1st week of the OMS3 year.

Didactics will be scheduled by the Regional Assistant Dean who will deliver and discuss the topics in the syllabus with assistance from the Regional Site Administrator. Attendance is **mandatory**. Exceptional circumstances that require absence from didactics must be approved before didactics begin by the Regional Assistant Dean.

8. Course Logistics

The Regional Site Administrator conjointly with the Regional Assistant Dean will specify the location and time of day that the topics that will be covered. The Regional Site may provide handouts to assist in the orientation of the student to the clinical rotations.

9. Learning Assessment

Formative Assessments

Assessment	Pass/Fail
Regional Assistant Dean review of student participation	Pass/Fail
Role-playing scenarios	Pass/Fail
Multiple choice quizzes	Pass/Fail

Summative Assessments

Assessment	Pass/Fail
Preceptor Evaluation of student participation	Pass/Fail
Attendance (any unexcused absence constitutes a fail)	Pass/Fail
Student reflective writings on the topics: <ul style="list-style-type: none"> • Professionalism and what that means to me • How to get the most out of my clinical rotation experience – transition from passive to active learning • Steps I will take to prepare me for my fourth year and the Match 	Pass/Fail
Students will generate written feedback for the course based on the feedback models presented in the module and feedback submissions will be reviewed by the RAD	Pass/Fail

AY20 CLIN 702 SYLLABUS

Grades for this course are Pass/Fail. All assessments must have a grade of "Pass" to pass a rotation. Any of the summative assessments with a "Fail" will require remediation of the rotation. Students who have not completed the rotation satisfactorily will be referred to Student Progress Committee for determination of remediation.

10. Exam Policy

No end of service examinations are given by PNWU during this elective course orientation.

11. Course Textbooks & Supplies

Required Textbooks

Title/ISBN	Author/Publisher/Edition
<i>Bates Guide to Physical Examination and History Taking</i> ISBN: 9781469893419	Lynn Bickley, Lippincott, Williams, & Wilkins, 12th edition On LWW Health Library
<i>Rapid Interpretation of EKGs</i> ISBN: 9780912912065	Dubin, Dale. (2000) COVER Publishing Company, 6th edition
<i>How to Win Friends & Influence People</i> ISBN: 9780671027034	Carnegie, Dale. (1998) Pocket Book Publishing Company
<i>Harrison's Principles of Internal Medicine</i> ISBN: 9781259644030	Dan Longo et al. (editors), McGraw-Hill. 20th edition. On Access Medicine

Suggested Additional Resources

Title/ISBN	Author/Publisher/Edition
PNWU Library Subject Guides: Electrocardiography (ECG/EKG) links	PNWU Library website
PNWU Library Subject Guides: Heart Sounds links	PNWU Library website
PNWU Library Subject Guides: Lung Sounds links	PNWU Library website

12. Student Roles and Responsibilities

Links to current Student Catalog and Student Handbook:

<https://www.flipsnack.com/PNWU-Publicity/2019-2020-student-catalog.html>

<https://www.flipsnack.com/PNWU-Publicity/2019-2020-student-handbook.html>

a. Student Professionalism

Professional behavior is expected at all times during this course. It is important that students learn to discuss topics of a sensitive nature in a caring and professional manner. Use of cell phones or texting during class is prohibited. For further clarification of student professionalism expectations, see Student Catalog.

AY20 CLIN 702 SYLLABUS

b. Honor Code

The highest standards of academic honesty are required of all PNWU-COM students at all times. It is expected that no PNWU student will be dishonest in any way, or give the impression of dishonest behavior, nor will PNWU students tolerate dishonesty in others. Disciplinary action may occur as a result of failure to comply with these standards.

c. Academic Support

Students in need of peer tutorial assistance are directed to contact Rica Amity, PhD, Learning Skills Specialist (ramity@pnwu.edu.) Though the Assessment Department strives to accommodate all tutorial assistance requests, priority will be given to students who demonstrate need based on their academic performance.

The most successful students will practice the following behaviors:

First day

- Share contact information with the preceptor and learn what expectations of communication are.
- Ensure the preceptor has a copy of the PNWU syllabus for the course.
- Ask about the regular schedule, on call expectations and notify the preceptor if there are any excused absence days (i.e. COMLEX exams).
- Find out where personal items may be placed and documentation can be done, as well as policies regarding student access to and documentation on medical records.
- Greet and be courteous to clinic staff. Be careful of joking, off color humor or comments that could be misunderstood.
- Clarify expectations for the use of electronic aids.
- Ask if he/she should pre-round on hospital inpatients and clarify time and place for meeting daily.

Daily

- Be on time and prepared with what is needed.
- Greet and be courteous to clinic staff. Be careful of joking, off color humor or comments that could be misunderstood. Review patients for the next day for topics to read on.
- Read or do modules on patients seen that day for reinforcement of learning.
- Log every day. Two to three cases logged every day will help get through the "must see" cases without last minute cramming.
- Be prepared to assist in any opportunities that present.
- Be enthusiastic. No matter what his/her area of interest is, there are things the student will be exposed to that may not be seen again in his/her career.

Weekly

- Participate in didactics.
- Be prepared with interesting cases he/she has seen throughout the week - help teach classmates.
- Return to his/her clinical responsibilities before/after didactics (this should not be a full day off!).
- Review progress on logs and the growth of his/her understanding.

Mid-Rotation (Optional on Electives but Encouraged)

AY20 CLIN 702 SYLLABUS

- The student should request feedback on how he/she is doing. It is the student's responsibility to document the feedback on the mid-rotation feedback form and upload to Portfolio for future reference. Students should make adjustments to performance based on that feedback.

End of Rotation

- The student should ask for a final review of his/her performance during the last week of the rotation. Students should be getting feedback from the preceptor informally daily on performance and areas needing improvement. Supplying the preceptor with a paper copy of the evaluation will help secure completion of the evaluation while the student's performance is fresh in the preceptor's mind. If the student has felt especially positive about the interactions, the student should consider asking the preceptor if he/she would be willing to write a strong letter of recommendation.