ELEC 704, BIOETHICS ELECTIVE
2 CREDITS FOR 2-WEEK
ROTATION
CLINICAL EDUCATION

ROTATION SYLLABUS
ROTATION/4 CREDITS FOR 4-WEEK

1. Contact Information

Course Director

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Supporting Staff

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2. Course Description/Overview

This Bioethics and Primary Care course is scheduled with a preceptor who is an expert in this field as a self-study course.

Americans struggle to make sense of modern medicine and its bioethical challenges. Abortion, euthanasia, genetic research, and publicly funded health care continue to make headlines and fuel debate, but less public concerns also occupy us as families, clergy, researchers, and health providers. How shall we approach common issues like infertility, aging, chronic pain, disability, palliative care, and our neighbor's unmet medical needs? Does our use of medicine reflect a political, philosophical, or spiritual worldview? When physicians have strong differences in worldview from their patients, how does resolution happen? What difference does bioethics make in our everyday medical life?

3. Course Purpose/Goals

The purpose of this Bioethics & Primary Care course is to provide the student with exposure to bioethics in contemporary medicine. To accomplish this, the rotation will allow students to examine the secularity of modern medicine, the structures of modern bioethical frameworks, and the theological and philosophical arguments used to support bioethical positions. Students will examine the complex cultural, medical, ethical, and philosophical issues integral to bioethics and primary care. Goals of the rotation are:

1. To understand the functional role of medicine in society and the challenges it poses to human values in thought and practice;
2. To consider the role of the culture and faith communities in caring for the sick;
3. To consider the multiple bioethical models used in public discourse and to develop a mechanism for bioethical deliberation in various settings of the community, home, and medical complex;
4. To deepen and broaden understandings of bioethical deliberations for the primary care practitioner.

4. Entrustable Professional Activities (EPAs)		
EPAs	**Description of Activity**	**Domains of Competence**
EPA 1: Gather a history and perform a physical examination including an osteopathic structural exam as appropriate.	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.	• Patient Care • Knowledge for Practice • Interpersonal and Communication Skills • Professionalism • Osteopathic Principles and Practice (OPP)
EPA 2: Prioritize a differential diagnosis following a clinical encounter (musculoskeletal considerations that may lead to somatic dysfunction).	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 the 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.	• Patient Care • Knowledge for Practice • Practice-Based Learning and Environment • Interpersonal and Communication Skills • Personal and Professional Development Osteopathic Principles and Practice (OPP)
EPA 3: Recommend and interpret common diagnostic and screening tests	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	• 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 principles of cost-effectiveness and pre-test/post-test prob-ability in developing diagnostic plans. • 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 inter-pretation as needed. • Elicit and consider patient preferences in making recommendations. • Clinical Experiences • Presentations • COMAT
EPA 4: Enter and discuss orders and prescriptions and applicable Osteopathic treatments.	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).	• Patient Care • Knowledge for Practice • Practice-Based Learning and Environment • Interpersonal and Communication Skills • Professionalism • Osteopathic Principles and Practice (OPP)
EPA 5: Document a clinical encounter in the patient record.	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 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).	• Patient Care • Interpersonal and Communication Skills • Professionalism • 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	• Practice-Based Learning and Environment • Interpersonal and Communication Skills • Professionalism

	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.	• 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.	• 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 interprofessional 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).	• Patient Care • Practice-Based Learning and Environment • Interpersonal and Communication Skills • Professionalism
EPA 9: Collaborate as a member of an interprofessional team.	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.	• Interpersonal and Communication Skills • Professionalism • Systems-Based Practice • Interprofessional Collaboration
EPA 10: Recognize a patient requiring urgent or emergent care and initiate evaluation and management.	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	• Patient Care • Interpersonal and Communication Skills

	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.	
EPA 11: Obtain informed consent for procedures/tests (under preceptor supervision).	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.	• Patient Care • Interpersonal and Communication Skills • Professionalism • Systems-Based Practice • Personal and Professional Development
EPA 12: Perform general procedures of a physician including applicable Osteopathic treatments.	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: • Basic cardiopulmonary resuscitation (CPR) • Bag and mask ventilation • Venipuncture • Inserting an intravenous line • Osteopathic manipulative medicine (OMM)	• Patient Care • Interpersonal and Communication Skills • Professionalism • Systems-Based Practice • Personal and Professional Development • Osteopathic Principles and Practice (OPP)
EPA 13: Identify system failures and contribute to a culture of safety and improvement.	Preventing unnecessary morbidity and mortality requires health professionals to have both an understanding of systems and a commitment to their improvement. This commitment must begin in the earliest stages of health professional education and training. 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.	• Knowledge for Practice • Practice-Based Learning and Environment • Interpersonal and Communication Skills • Professionalism • Systems-Based Practice

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**
Osteopathic Practice and Principles Candidates must be able to demonstrate knowledge of osteopathic principles and practice, and to demonstrate and apply knowledge of somatic dysfunction diagnosis and Osteopathic Manipulative Treatment in the clinical setting.	Preceptor and Assistant Dean Feedback and Evaluations, Case Logs, Case Presentations, Preceptor Evaluation, COMAT	Clinical Experiences, Didactics, Case Presentations

Patient Care Provide patient-centered care that is culturally responsive, compassionate, and appropriate for the effective treatment of illness and promotion of health.	Preceptor and Assistant Dean Feedback and Evaluations, Case Logs, Case Presentations, Preceptor Evaluation, COMAT	Clinical Experiences, Didactics, Case Presentations
Medical Knowledge Develop a foundation of practical clinical knowledge on rotations while applying basic science knowledge. Develop skill in transitioning from passive to active learning. Elements include an understanding and application of the evolving ethics of human subject research, osteopathic, biomedical, clinical, epidemiological, biomechanical, and cognate (e.g., epidemiological and social-behavioral) sciences in order to optimize patient care.	Preceptor and Assistant Dean Feedback and Evaluations, Case Logs, Case Presentations, Preceptor Evaluation, COMAT	Clinical Experiences, Didactics, Case Presentations
Clinical Skills Recognize important roles of administrative personnel, nurses and physicians in the delivery of health care that contributes to a student's professional development. Further refine patient history and physical exam, and patient case presentations.	Preceptor and Assistant Dean Feedback and Evaluations, Case Logs, Case Presentations, Preceptor Evaluation, COMAT	Clinical Experiences, Didactics, Case Presentations
Practice-Based Learning and Improvement Demonstrate the ability to continuously evaluate patient care practices, scientific evidence and personal beliefs and biases as they relate to improving the care of patients and optimizing patient outcomes.	Preceptor and Assistant Dean Feedback and Evaluations, Case Logs, Case Presentations, Preceptor Evaluation, COMAT	Clinical Experiences, Didactics, Case Presentations
Interpersonal and Communication Skills Demonstrate the ability to consistently interact respectfully, empathetically, and professionally with patients, families, allied health care providers, staff and colleagues, to optimize patient and research outcomes.	Preceptor and Assistant Dean Feedback and Evaluations, Case Logs, Case Presentations, Preceptor Evaluation, COMAT	Clinical Experiences, Didactics, Case Presentations
Professionalism Cultivate professional growth through interactions with all members of the health care organization Exhibit appropriate, professional behavior.	Preceptor and Assistant Dean Feedback and Evaluations, Case Logs, Case Presentations, Preceptor Evaluation, COMAT	Clinical Experiences, Didactics, Case Presentations, Skills Labs
Knowledge for Practice Develop a foundation of knowledge in anatomy, physiology, pathophysiology, clinical medicine, osteopathic principles related to Primary Care, and clinical research. Students will be expected to apply this knowledge and demonstrate effective diagnostic and therapeutic reasoning skills related to these systems.	Preceptor and Assistant Dean Feedback and Evaluations, Case Logs, Case Presentations, Preceptor Evaluation, COMAT	Clinical Experiences, Didactics, Case Presentations, Skills Labs
Systems-Based Practice Effectively utilize available health care system resources to provide optimal health care to the individual patient and local and global communities.	Preceptor and Assistant Dean Feedback and Evaluations, Case Logs, Case Presentations, Preceptor Evaluation, COMAT	Clinical Experiences, Didactics, Case Presentations, Interprofessional Education (IPE)

NBOME Fundamental Osteopathic Medical Competencies. June 2016.

6. Course Schedule/Calendars

Please refer to the rotation schedule in E*Value. The rotation block is scheduled from Monday of the first day through Sunday of the last day.

7. Course Format

Students will arrange a conference call with the preceptor by emailing the preceptor before starting the course. The call may take 30 – 45 minutes. It will be an opportunity for the preceptor of record to answer questions about the course content and requirements, introduce the conceptual frameworks of bioethics and get to know the interests and experience of the student. The student must also arrange to meet with a PNWU librarian using the "Book a Librarian" -> "ELECT 704 Bioethics" on the PNWU Library website. The librarian can assist with narrowing the topic and planning resources. To get the most out of this independent research elective, students should communicate with their preceptor if they have any questions or need guidance on the papers/projects. While attendance at didactics is required, there are no other attendance requirements within the outlined parameters. Logs should reflect readings that are done to meet the course objectives. Assignments and reading logs will be submitted to your preceptor via email by the last Friday of the rotation.

The Clinical Didactics longitudinal course takes place over the third and fourth years of medical school. It consists of two hundred hours of educational activities. Faculty-led components will be held on Wednesday afternoons. Attendance and completion of assigned tasks will be tracked and will be reviewed with the student's Assistant Dean on a periodic basis. Successful completion of the Clinical Didactics course is required for graduation. Details for educational activities will be shared with students on a weekly basis.

8. Course Logistics

FOUR WEEK ROTATION:

Reading

Students will read at least 600 pages from the list of required reading, and at least 200 pages from the list of recommended reading. Other sources may be approved by your preceptor. Peer reviewed journal articles are allowable, but not popular media unless there are special circumstances. Students will record a log of their reading and turn in a typed log that includes the title of the material, pages read, and date for each entry.

Choice of:

Paper (DUE: Emailed to your preceptor by last Friday of the course)

Nine-page (2,250 word) paper on a topic approved by your preceptor. A menu of topics will be available for the student to consider in consultation with your preceptor. Examples of past paper topics example include discussions of specific cases, considerations of the ethical use of new technologies and responses to such things as legal euthanasia, vaccine refusal, involuntary commitment, and patient perceptions of physician care. Reading for the papers will be drawn from the 800 pages read for the course. Papers are to be double-spaced, 12 pt. Font, and to follow style guidelines as presented in *AMA Manual of Style*

Or:

Project (DUE: Emailed to your preceptor by last Friday of the course)

Students will develop a response to a particular bioethical issue in the form of a resource for use in the community or health professional health setting. For instance, the topic of infertility may be chosen, and the setting may be in the community. The student might design a teaching series on this topic for support groups, or college students. Another example may be palliative care and physician-assisted suicide when presented in the setting of the health professional. In this case, one might provide research information to a medical society on the various options for palliative care and the reasons why assisted suicide has been chosen in states and countries where that is permissible. The project could address the bioethical concerns that should be recognized by, and the particular cultural, philosophical, and theological concerns raised by different groups. Past students developed a bioethics blog and website, a pamphlet for couples considering fertility technologies, a school curriculum, and a guide to using medical resources wisely as a social health concern. Other questions may include: At what point do physicians choose civil disobedience? How might an IRB be adapted to be inclusive of cultural factors within communities of interest? How do physicians respond to other community health workers such as acupuncturists, healing touch therapists, and chiropractors when their patients access them for care? Should more be done to integrate physician practices with alternative practices such as naturopathy, or should physicians oppose such work? The project is not a paper, but a product to be used as a resource to facilitate bioethical deliberation for the community, schools, and health professionals. Your preceptor will work with each student in the design of their project.

TWO WEEK ROTATION:

Reading

Students will read at least 300 pages from the list of required reading, and at least 100 pages from the list of recommended reading. Students will record a log of their reading and turn in a typed log that includes the title of the material, pages read, and date for each entry.

Case Paper (DUE: Emailed to your preceptor no later than the last Friday of this elective course rotation.)

Discuss with your preceptor whether additional readings are expected. Reading for the cases will be drawn from the 400 pages for the course. Students will select an area of interest and either have a case of their own to discuss or one given by their preceptor. The student will review the case and answer the question posed in the case by submitting a 4 to 5 pages paper. Papers are to be double spaced, 12 pt. font, and to follow style guidelines as presented in *The AMA Manual of Style*.

Formative Assessments	
Assessment	Pass/Fail
Assistant Dean Reviews	Pass/Fail
Evaluation of Formal Presentation – Assistant Dean	Pass/Fail
Mid-rotation Preceptor Review (if applicable)	Not graded
Preceptor Evaluation of Student Performance in Core Competencies	Pass/Fail

Summative Assessments	
Assessment	Pass/Fail
Preceptor Evaluation of Student Performance	Pass/Fail

Attendance/Participation (any unexcused absence constitutes a fail)	Pass/Fail
Final Paper/Project	Pass/Fail

10. Exam Policy

No end-of-service examinations are given by PNWU during electives. Students in their fourth year should be preparing for COMLEX 2 CE during their rotations.

11. Course Textbooks & Supplies

Required Textbooks	
Title/ISBN	**Author/Publisher/Edition**
Students may choose readings from this list or substitute other readings with permission of the preceptor.	
Clinical Ethics: A Practical Approach to Ethical Decisions in Clinical Medicine	Albert R. Jonsen, Mark Siegler, William J. Winslade, McGraw-Hill, 9th edition. Available on Access Medicine
Public Health Ethics: Cases Spanning the Globe	Drue H. Barrett, Leonard W. Ortmann, Angus Dawson, Carla Saenz, Andreas Reis, Gail Bolan, SpringerOpen https://link.springer.com/book/10.1007/978-3-319-23847-0
Resolving Ethical Dilemmas: A Guide for Clinicians ©2020	Bernard Lo, 6th edition (available in our LWW Health Library)

Suggested Additional Resources	
Title/ISBN	**Author/Publisher/Edition**
AMA Manual of Style: A Guide for Authors and Editors	JAMA Network, 11th edition https://www-amamanualofstyle-com.proxy.pnwu.org/
American Journal of Bioethics	Taylor & Francis Available through PNWU Library
Being Mortal: Medicine and What Matters in the End ISBN: 9781627790550	Atul Gawande, Metropolitan Books, 1st edition
Bioethics (Wiley)	Available through PNWU Library
CURRENT Medical Diagnosis and Treatment 2021 ISBN: 9781260469868	Maxine A. Papadakis, Stephen J. McPhee, Michael W. Rabow, McGraw-Hill. Available on Access Medicine
Foundations of Osteopathic Medicine ISBN: 9781496368324	Michael A. Seffinger (editor), Lippincott Williams & Wilkins, 4th edition. Available on LWW Health Library
Harrison's Principles of Internal Medicine ISBN: 9781259644030	J. Larry Jameson , et al. (editors), McGraw-Hill. 20th edition. Available on Access Medicine
Health Sciences Literature Review Made Easy	Judith Garrard, Jones & Bartlett Learning. Available on EBSCOhost

How to Read a Paper: The Basics of Evidence-based Medicine and Healthcare	Trisha Greenhalgh, Wiley-Blackwell, 6th edition https://proxy.pnwu.org/login?url=https://www.r2library.com/Resource/Title/111948474X
Merriam-Webster Medical Dictionary	https://www.merriam-webster.com/medical
The New Medicine: Life and Death After Hippocrates ISBN: 9780971159907	Nigel M. De S. Cameron, The Bioethics Press, 2001
The Patient as Person: Explorations in Medical Ethics ISBN: 780300093964	Paul Ramsey, et al., Yale University Press, 2nd edition
Suffering Presence ISBN: 9780268017224	Stanley Hauerwas, University of Notre Dame, 1986
The Washington Manual of Medical Therapeutics ISBN: 9781975113483	Zachary Crees, et. al.,, Lippincott Williams & Wilkins, 36th edition Available on Ovid
UW Ethics in Medicine website	https://depts.washington.edu/bhdept/ethics-medicine

12. Student Roles and Responsibilities

Links to current Student Catalog and Student Handbook:

https://www.pnwu.edu/admissions/student-catalog

https://www.pnwu.edu/students/student-handbook

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.

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 who are having difficulty meeting the requirements of this course should discuss it with their Assistant Dean whenever a problem arises. Students in need of peer tutorial assistance are directed to contact the Learning Skills Specialist on campus through Student Affairs. Though Student Affairs 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)

- 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 adjust 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.