

Boot Camp Syllabus

2018-2019 Academic Year

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Boot Camp Description

This course has been designed to prepare medical students for their first day of residency. Activities will include simulations and other interactive learning modalities to address the Core Entrustable Professional Activities established by the AAMC for graduating medical students. For example, the course will provide opportunities for deliberate practice and skill enhancement in the interpretation of diagnostic testing, the assessment of moderate to high complexity patients across settings, medical documentation, order and prescription writing, giving and receiving patient handovers, and recognition coupled with initial management of patients requiring urgent or emergent care. Specific sessions will also target survival skills for residency such as time management and wellness. The principles of quality improvement, patient safety, risk management, professionalism and medical ethics will be integrated throughout the course.

Disability Support Services

TTUHSC El Paso is committed to providing equal access to learning opportunities to students with documented disabilities. To ensure access to the educational opportunities in the clinical setting, please contact the Director of Disability Support Services (DSS), Dr. Tammy Salazar, to engage in a confidential conversation about the process for requesting accommodations in the classroom and clinical setting. Accommodations are not provided retroactively, so students are encouraged to register with DSS as soon as possible. More information can be found on the DSS website: <http://elpaso.ttuhsu.edu/studentservices/disability-support-services>.

This is a **2 credit course** required for graduation.

Boot Camp Objectives

	EPA	PLFSOM PGO
a. Gather a history and perform a physical examination appropriate to the setting in patients of all ages.	1	1.1
b. Develop a prioritized differential diagnosis.	2	1.3
c. Demonstrate appropriate ordering of therapeutics and diagnostic studies.	4	1.6
d. Demonstrate appropriate interpretation of diagnostic studies	2,3	1.3, 1.6, 2.2
e. Apply evidence-based principles of clinical sciences to diagnostic and therapeutic decision making and clinical problem solving.	7	2.3, 3.1, 3.4
f. Initiate appropriate medication orders and prescriptions.	4	1.3, 1.6
g. Understand when and how to request consultation.	6,9	4.2, 8.1
h. Demonstrate when and how to obtain informed consent for treatment and procedures.	11	5.2
i. Give and receive transition of patient care	8	6.4
j. Understand and apply basic ultrasound principles to patient care	12	1.1



k.	Identify potentially life-threatening conditions and initiate basic stabilization and management.	10	1.4, 1.5, 7.2
l.	Collaborate as an inter-professional care team.	9	7.3
m.	Perform appropriate documentation for for each clinical setting and encounter.	5	1.7
n.	Practice professional behavior and adherence to ethical principles in all interactions and settings.	9,13	5.1, 5.4,5.7
o.	Apply quality improvement principles to patient care during simulations, inpatient and ambulatory experiences and debriefs.	13	3.2
p.	Accept and incorporate feedback into practice.	9	3.3
q.	Recognize heuristics and cognitive biases and apply strategies to improve diagnostic accuracy and enhance patient safety.	13	1.2, 1.3
r.	Prioritize responsibilities to provide care that is safe, efficient, and effective.	13	1.4
s.	Provide an accurate, concise, and well-organized oral case presentation tailored to the clinical situation.	6	4.2
t.	Counsel and educate patients on preventive health care services and chronic care management.	3	1.4

Integration Threads

Integration threads covered in the Boot Camp will include:

√	Geriatrics	√	EBM	√	Ethics
√	Professionalism	√	Chronic Illness Care	√	Patient safety
√	Pain Management	√	Communication Skills	√	Diagnostic Imaging
√	Quality Improvement	√	Clinical Pathology,		

Calendar of Boot Camp Sessions

- a. The dates for the 2018-2019 academic year are:
 - i. February 11 to February 22, 2019
 - ii. February 25 to March 8, 2019
 - iii. March 25 to April 5, 2019
 - iv. April 8 to April 19, 2019
- b. Students should plan to be in class between the fluctuating hours of 6:00 AM to 6:00 PM daily from Monday to Friday.**

Sample Schedule Week 1:

Time	Monday				Tuesday	Wednesday				Thursday	Friday				
07:30	Orientation/Overview/ On-line Pre-Survey				ATACS Clinic Day 4-1 hour clinic visits (30 min in room + 30 min for discharge and documentation)	08:00 - Morning Rounds				(45-45-30 Min) Pre-Op Evaluation Pre-Post Op Mgmt. PEARLS Informed Consent	08:00 - Morning Rounds				
09:00	RR1	Long 1a	TC 1a	SonoSIM (90 Min) --- Wise/Lab (90 Min)		RR2	Long 1b	TC 2a	Dx Jeopardy (90 Min) --- Wise/Lab (90 Min)		Master's Colloquium – "What's your biggest fear?"	RR3	Long 1c	TC SIM	Pharma (90 Min) --- Wise/Lab (90 Min)
10:00	RR1	Long 1a	TC 1a	SonoSIM (90 Min) --- Wise/Lab (90 Min)		RR2	Long 1b	TC 2a				RR3	Long 1c	TC SIM	
11:00	RR1	Long 1a	TC 1a			RR2	Long 1b	TC 2a		RR3		Long 1c	TC SIM		
12:00	Lunch				Lunch (variable)	Lunch				Lunch (variable)	Lunch				
13:00	RR1	Long 1a	TC 1b	SonoSIM (90 Min) --- Wise/Lab (90 Min)	Oral Case Presentations and Debrief of AM Cases	RR2	Long 1b	TC 2b	Dx Jeopardy (90 Min) --- Wise/Lab (90 Min)	Radiology CXR Interpretation	RR3	Long 1c	TC 3b	Pharma (90 Min) --- Wise/Lab (90 Min)	
14:00	RR1	Long 1a	TC 1b			RR2	Long 1b	TC 2b		Dangerous EKGs	RR3	Long 1c	TC 3b		
15:00	RR1	Long 1a	TC 1b			RR2	Long 1b	TC 2b		Oxygen therapy	RR3	Long 1c	TC 3b		
16:00	Group Mgmt./Debrief					1-Min Paper	Group Mgmt./Debrief				Glucose 101	Group Mgmt./Debrief			
17:00	Adjourn				Adjourn				1-Min Paper	Adjourn					

Sample Schedule Week 2:

Time	Monday				Tuesday	Wednesday				Thursday	Friday			
8:00	Morning Rounds				Group 1 ATACS PASE Cases Debrief	Group 2 Self- directed learning	Morning Rounds				Master's Colloquium – "Burnout and Developing Resilience"	Ward Rounds/ Discharge/ Sign Off Notes	Documentation Review / Post Review	
09:00	RR4	Long 2a	TC 4a	Lab/Wise (90 Min) --- Wise/Lab (90 Min)			RR5	Long 2b	TC 5a	Wise Capstone (4 hours)		Time Management		Documentation Review / Post Survey
10:00	RR4	Long 2a	TC 4a				RR5	Long 2b	TC 5a				Patient Safety	Debrief/Feedback Post-Survey & Course Wrap Up
11:00	RR4	Long 2a	TC 4a		RR5	Long 2b	TC 5a	Lunch (Variable)	Boot Camp Adjournment					
12:00	Lunch				Lunch (variable)	Lunch				Lunch (Variable)	Boot Camp Adjournment			
13:00	RR4	Long 2a	TC 4a	Lab/Wise (90 Min) --- Wise/Lab (90 Min)	Group 2 ATACS PASE Cases Debrief	Group 1 Self- directed learning	RR5	Long 2b	TC 5b	Wise Capstone (4 hours)	Pediatric imaging	Planning Committee Debrief and Preparation for Next Boot Camp		
14:00	RR4	Long 2a	TC 4a				RR5	Long 2b	TC 5b		Basic ventilator management			
15:00	RR4	Long 2a	TC 4a				RR5	Long 2b	TC 5b		Beeps in the night			
17:00	Adjourn				1-Min Paper	Adjourn				1-Min Paper				

Boot Camp Location

Time will be split between the two centers:

- Monday, Wednesday and Friday will be primarily at RSTC (Regional Simulation Training Center, SON – SIM Lab) and
- Tuesday and Thursday will be primarily at ATACS (MEB) or identified room.

GENERAL REQUIREMENTS

We expect you to show up on time, appropriately attired (scrubs or business attire, no dangling hair, no open toe shoes), ready to work, with appropriate supplies (such as a pen), **personal laptop computer** and stethoscope. When evaluating standardized patients or simulated patients, always practice appropriate Personal Protective Equipment (PPE) and professionalism. Each student is required to attend all activities. During the high fidelity simulation cases, be prepared for complications. Further research after the scenario concludes is recommended. Please consult the information provided for each session to determine if you may use your phones for reference during simulations.

High Fidelity Simulations

Students will be assigned into teams of four-five students. Each team will rotate through three high fidelity simulations on Monday, Wednesday, and Friday. While half of the teams are in high fidelity simulations, the other half will be in lab. The teams will switch places after lunch. All students will participate in all simulations and lab activities. High fidelity simulations will occur on mannequins. Not all patients will require admission, but the final disposition should be decided by the team. The students will encounter the following types of simulation cases:

- Rapid response (RR) simulation: These simulation cases are isolated patient encounters. The scenarios could present as a patient in the Emergency Department or a patient who is decompensating on the floor, after an admission. No documentation will be required for these cases. The primary focus will be on emergent and urgent medical management and teamwork.
- Longitudinal (Long) simulation: There will be two longitudinal simulation cases, each with three encounters. The scenarios will begin with a patient presenting to the Emergency Department. The patient will require initial medical stabilization, followed by admission, inpatient management and then ultimately discharge. Documentation will be required for all encounters during these cases. Each student will be required to write an admission note, progress note, and discharge summary. They will be required to place orders in a simulated EMR. Additionally, each student will write an SBAR for transition of care after each encounter.
- Transition of care (TC) simulation: These simulation cases are isolated patient encounters, similar to the Rapid Response cases. However, the morning simulation teams will sign out the patient to the teams in the afternoon session. The afternoon teams will manage the patient based on limited knowledge from the SBAR note and sign-out provided to them by the morning team. Documentation will be required for these cases. Each student will write an SBAR note and, as teams, they will practice signing out the patient.

Lab Sessions

Students will be assigned into groups of six-seven students. Each group will rotate through two stations on Monday, Wednesday, and Friday. While half of the students are in lab, the other half will be in high fidelity simulations. The groups will switch places after lunch. The students will encounter the following activities during the lab sessions.



- SonoSIM: Hands-on ultrasound workshops on low fidelity mannequins. It will include self-paced didactics and knowledge assessment section.
- WISE On Call: Virtual modules that focus on a particular symptom or clinical skill/presentation. The modules include self-paced didactics. Students will work through modules and respond to on-call scenarios and case-based practice questions relating to medical management of common disease processes.
- Visual diagnosis Jeopardy: Small group activity to review common EKG and radiology findings.
- Pharmacology overview: Small group activity to review dosing of critical medications, including vasopressors, analgesics, antibiotics, electrolyte repletion, and fluids.
- Ward Rounds: On the last Friday of Bootcamp, each team will participate in ward rounding. Each student will present one admitted patient to the faculty, similar to the presentation style during daily inpatient rounds.

Standardized Patient Activities:

There will two standardized patient activities during the bootcamp.

- The first session will simulate an ambulatory clinic session typically encountered by an intern. There will be 4 patients on the schedule for each student. Students will perform an appropriate history and physical exam, interpret lab and diagnostic testing, develop an assessment and treatment plan, provide patient education and counselling, perform medication reconciliation, document the encounter in a simulated electronic health record, order prescriptions, enter orders for lab and diagnostic testing, and provide written discharge instructions. They will collaborate with a simulated nurse who may interrupt them with urgent requests from other patients.
 - In the debriefing session following the simulated ambulatory clinic, each student will perform an oral case presentation followed by an in-depth discussion of each case. Management of interruptions will also be discussed.
- The second session will consist of six encounters targeted to provide experience with difficult situations encountered by residents and practicing clinicians. Each station will provide specific directions explaining the goal of the encounter. Documentation following the encounter will done using a progress note in the simulated electronic health record.
 - There will be a debriefing session following the encounters.

Additional sessions:

- Additional sessions, primarily on Thursdays, will address topics and skills pertinent to residency such as:
 - interpretation of EKGs
 - diagnostic radiology
 - common cross coverage calls
 - inpatient glucose management
 - oxygen therapy

- time management
- pre-op and post-op care and informed consent
- patient safety

Documentation

Documentation is an essential part of clinical practice. All documentation will take place in LearnSim. Preset templates will be assigned to each student. Students will be responsible for completing documentation relating to the simulation by the end of the day.

- Admission Note & Orders – Students will write two admission notes. One for each of the two longitudinal cases. Additionally, each student will need to place admission orders for each of the two longitudinal cases. This will occur after the first encounter, on Mondays.
- Progress Note & Orders– Students will write two progress notes. This will occur after the second encounter during the longitudinal cases, on Wednesdays. The notes will be followed by placement of daily orders, such as follow up labs and imaging. This will occur after the second encounter, on Wednesdays.
- Discharge Note – Students will write one death summary and one discharge summary. This will occur after their final encounter during the longitudinal cases.
- SBAR Note: Daily transitions of care between teams will require a verbal and written SBAR patient report. This will occur at lunch time. Each student will be responsible for writing two SBAR notes daily, one for the longitudinal encounter and one for the Transition of Care simulation. The morning teams, who are transferring care of the patient, will be responsible for informing the receiving teams of all pertinent information, problems, and plans in the standard SBAR format.
- Ambulatory Clinic Documentation:
 - Documentation for the simulated clinic will take place using a template in LearnSim created to mimic an ambulatory electronic health record. Students will have 30 minutes following the patient encounter to complete the documentation before moving to the next encounter.

Documentation of the difficult situations/encounters will take place on an open form progress note in LearnSim. Students will have 10 minutes to complete the documentation before moving on to the next encounter.

Required, Expected and Optional Events

- c. Attendance and participation in all Boot Camp activities is **mandatory**.
- d. Completion of all assignments is mandatory by the deadline posted.

Student Performance Objectives

- e. Students are required to evaluate standardized patients and/or simulated patients, always practice appropriate Personal Protective Equipment (PPE) and professionalism.
- f. Students must attend and make an effort to participate in all sessions as noted in section 6.
- g. Students are expected to continue reading and research after the scenarios/sessions conclude to better understand the diagnosis, complications and management.
- h. Students must complete all assignments by the posted deadlines, for example,
 - i. 1 minute papers due at the end of the day, Tuesday and Thursday of each week.
(see appendix 1)
 - ii. Simulated EMR documentation as required for the Transition of Care scenarios.
- i. Students are expected to maintain confidentiality of all cases, activities, and content.
- j. Students are required to provide their own personal computing devices, to include your own laptop computer, necessary adapters, etc.

Patient Condition Expectations/Op Log Expectations

- k. There are no Op Log entries required.

Assessment

- l. Professionalism
 - i. See expectations in section 11 below.
- m. Attendance is mandatory.
 - i. See expectations in section 6.
- n. Participation
 - i. Students are expected to participate with their groups, in open discussion in class, and during debriefs. They are expected to pay attention and refrain from unauthorized use of electronic devices and to be respectful of their peers and presenters.
- o. Satisfactory completion of all activities and assignments, to include but not limited to, notes, patient assessments, patient interaction, etc.

Grading Policy

- p. Students will receive a grade of Pass or Fail for the course based on the following:

PASS:

- Complete all activities and assignments to the satisfaction of the course director.

- Any remedial requirements given during the course must be completed to the satisfaction of the course director.

INPROGRESS:

- This grade will be issued at the end of the clerkship if the course requirements have not been met due to mitigating circumstances. Once the requirements have been met the grade will be changed appropriately.

FAIL:

- Unprofessional behavior.
- Failure to complete required activities and assignments.
- Failure to complete course requirements to a satisfactory level.
- Unexcused absence from required activities at the discretion of the course directors.

Professionalism Expectations (see Appendix 3)

- q. As a student, it is important to be professional at all times. This includes:
 - i. Being on time
 - ii. Being honest
 - iii. Being respectful of everyone
 - iv. Admit mistakes
 - v. Being prepared to learn
 - vi. Checking your email daily
 - vii. Timely completion of all activities and assignments by the posted due date
 - viii. Dress code
 - 1. Activities at Regional Simulation Training Center (RSTC), business casual or scrubs are acceptable for any of the sessions.
 - 2. Students are expected to wear their ID badges clearly visible.
 - 3. Note that activities occurring in the ATACS are subject to the established ATACS dress code policies.
- r. Your professionalism is formally evaluated by the Course Directors. Your professionalism is also monitored and evaluated by the Boot Camp coordinator. (see Appendix 2)
- s. Failure to receive a satisfactory rating on any aspect of professionalism may result in failure of the course regardless of performance in other areas.
- t. A pattern of tardiness will result in remediation or failure.

Missed Events- in addition to Common Clerkship Policies

<http://el Paso.ttuhs c.edu/som/ome/common-clerkship-policies.aspx>

- u. All students are required to attend all activities.

- i. If a student will be absent from any activity, they must obtain approval from the Course Directors.
- ii. If the Course Directors determine that a student's excused absence(s) compromises the student's ability to attain the necessary competencies, they may require the student to complete alternate assignments, even though the absence is excused.
- iii. Remediation for missed activities will be required for all unexcused absences and this will be reported as a professionalism concern that may result in failure of the course.
- iv. Remediation will be assigned by the course director based on the specific activities missed.
- v. In the event of an emergency that results in an absence from activities, the student must notify the Boot Camp Coordinator AND the Office of Student Affairs as soon as possible.
- w. If coverage by another student is required to maintain care of your simulated patients, you will be expected to make every effort to arrange this coverage yourself. Please notify the Boot Camp Coordinator to ensure coverage has been confirmed.
- x. Unexcused absences will result in a professionalism concern that may lead to a final grade of "Fail" for the Boot Camp course at the discretion of the Course Directors. Please also note that professionalism concerns after the match may result in notification of your future program director.
- y. If a student is required to make-up assignments, this must be completed during unscheduled time and the hours worked must be in compliance with the duty hour policy.

Readings

- z. A reading list of articles relevant to the patients you will see during the Boot Camp for your reference and review. We recommend reading through them prior to the first day.
- aa. The following websites are available for your review:
 - i. ECG <https://ecg.bidmc.harvard.edu/maven/mavenmain.asp>
 - ii. ECG <https://lifeinthefastlane.com/ecg-library/100-ecgs/>
 - iii. Radiology <http://eradiology.bidmc.harvard.edu/primarycare/>
 - iv. Radiology <https://radiopaedia.org/encyclopaedia/quizzes/all>
 - v. US <http://emergencyultrasoundteaching.com/>
 - vi. US (blocks) <http://highlandultrasound.com/>



Contacts

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Regional Simulation Training Center (RSTC)	915-215-6134	Ida.baray@ttuhsc.edu	SON, 2 nd Floor
ATACS	915- 215-4385	J.hector.aranda@ttuhsc.edu	MEB, 3 rd Floor



Appendices

Appendix 1: 1 Minute Paper Assignment

Date	
<i>(adapted from work by K. Patricia Cross and Elizabeth Armstrong)</i>	
Please list 2-3 core ideas that have emerged for you as important today or during the program thus far.	
1.	
2.	
3.	
List 2-3 questions that have arisen from you relevant to content presented or ideas that remain unclear.	
1.	
2.	
3.	

Appendix 2: Professionalism Assessment

1. Student is reliable and attended all sessions. (PGO 5.3, 5.7)	No concern/slight concern/serious concern
2. Student demonstrates respect for all people. (PGO 5.1)	
3. Student's dress and grooming are appropriate for the setting. (PGO 5.7)	
4. Student came to the sessions prepared to learn. (PGO 5.3, 5.7)	
5. Student demonstrates honesty in all professional matters. (PGO 5.6)	
6. Student completed assignments in a timely manner. (PGO 5.7)	
Comments:	

Appendix 3: Confidentiality Statement

PARTICIPATION, RECORDING, AND CONFIDENTIALITY AGREEMENT

As a participant in the training simulated patient care environment at the TTUHSC El Paso Education & Training Facility, Regional Simulation Training Center, and ATACS:

I understand that I will be an active participant in simulations. I understand that participating in simulation-based training is part of my clinical learning experience. I will engage in and participate in the simulation fully as a professional and treat it as a realistic patient care experience while maintaining and following the policies and procedures set forth by the center.

I understand that the objective of this education center is to train individuals to better assess and improve their performance for real patient care situations. I understand that while participating in simulation based training the scenario may be photographed and/or videotaped for use during guided debriefing sessions following the simulation as well as for future educational experiences. At no time will there be compensation for materials photographed and/or videotaped. I understand that photographs and/or videotapes may be used but not limited to dissemination to the hospital staff, physicians, health professionals, members of the public for education, treatment, research, scientific, public relations, advertisement, and promotional purposes and may be accomplished in any manner.

Simulations are designed to challenge participants. It is a safe environment where mistakes are expected, and participants are encouraged to learn and grow from those mistakes. Because of this, I will maintain strict confidentiality regarding both my performance as well as of the performance of others participating, whether witnessed in real time or in media. I understand that failure to maintain confidentiality may result in unwarranted and unfair defamation of character of the participants. This could cause irreparable harm to me and colleagues and would seriously impair the effectiveness of this simulation based training program.

I understand and will observe simulated and peer confidentiality about the details of the scenario, team member actions, and the debriefing discussions at all times to which I am both directly and indirectly exposed.

I acknowledge that I have read and understand this statement and agree to participate fully and maintain the center's policies and procedures.

Printed Name:

Signature:

Date

Time:
