

Intersession Syllabus

2018-2019 Academic Year

1. Intersession Description

There will be two one-week intersessions in the third year – one following Block 2 and one following Block 3. The entire class will participate in the activities. Content will integrate the experiences in the clinical rotations during Year 3 with concepts from the Year 1 & 2 coursework.

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

2. Intersession Objectives

- a. Explore clinical overlap across specialties of medicine (PGO 7.2)
- b. Apply basic science principles/concepts in the clinical context (PGO 2.3)
- c. Document clinical encounters accurately in the medical record. (PGO 1.7, 4.4)
- d. Demonstrate the ability to gather essential information about patients and their conditions through history taking, physical examination, and the use of data from diagnostic tests. (PGO 1.1)
- e. Demonstrate the ability to use clinical information and diagnostic reasoning to develop a reasonable list of differential diagnoses and to begin treatment, including writing appropriate prescriptions and inpatient orders in low to moderate complexity cases (PGO 1.1, 1.2, 1.3, 1.6)
- f. Counsel and educate patients to enable them to participate in their care and promote health. (PGO 1.8, 1.9)
- g. Communicate effectively with patients of all ages and across a broad range of socioeconomic and cultural backgrounds. (PGO 4.1)
- h. Demonstrate competency in the general procedures of a physician – IV line placement, venipuncture, NG tube placement, bladder catheterization (male and female), and airway management (PGO 1.10)
- i. Analyze and solve system-level problems using quality improvement and patient safety principles and tools (PGO 3.2, 6.3)
- j. Understand new and emerging basic science concepts and how these discoveries may impact health care in the future (PGO 2.2, 2.6)
- k. Apply knowledge of biostatistics and epidemiology in diagnostic and therapeutic decision-making. (PGO 2.3, 2.4, 3.4)

- l. Identify social determinants of health in clinical cases and reflect on how this affected patient care (PGO 2.5)
- m. Demonstrate professionalism and adherence to ethical principles in all activities (PGO 5.1, 5.5, 5.6, 5.7)
- n. Recognize potential conflict of interest and ethical dilemmas related to health care business practices and administration. (PGO 5.5)
- o. Demonstrate the ability to apply medical knowledge related to normal variation and pathologic states in diagnostic and therapeutic decision making and clinical problem solving. (PGO 2.1, 2.2, 2.3)
- p. Understand the basics of informed consent, including special situations such as children and patients who do not speak English (PGO 5.2, 4.1)
- q. Demonstrate knowledge of ethical principles related to end of life care and coping mechanisms to deal with death, dying, and human suffering in a respectful and empathic manner (PGO 5.4, 8.2, 4.3)
- r. Reflect on the professional identity formation during medical school as plans are made for entering residency (PGO 8.2, 8.3, 8.4)

3. Integration threads

Integration threads covered in the intersessions will include:

X	Geriatrics	X	Basic Science	X	Ethics
X	Professionalism	X	EBM	X	Patient safety
	Pain Management		Chronic Illness Care	X	Palliative care
X	Quality Improvement	X	Communication Skills		Diagnostic Imaging
X	Clinical Pathology,	X	Clinical and/or Translational Research		

4. Calendar of clerkship events

a. The dates for the 2018-2019 academic year are:

- i. January 7 to 11, 2019
- ii. May 6 to 10, 2019

b. Students should plan to be in class from 8:00 AM to 5:00 PM daily from Monday to Friday.

Sample Schedule Week 1:

	Monday (1/7/2019)	Tuesday (1/8/2019)	Wednesday (1/9/2019)	Thursday (1/10/2019)	Friday (1/11/2019)
AM	<p>8:00 – 8:30 Overview of the week</p> <p>8:30 -9:15 emerging environmental issues</p> <p>9:30 -12 Integrated case-based discussion – Pediatrics and Psychiatry with Basic Sciences.</p>	<p>8:00 start time</p> <p><i>2 activities rotating throughout the day from 8:00 AM to 3:00 PM</i></p> <p><i>(Each student will have assigned slot for each activity)</i></p> <p>1) Student oral case presentations.</p>	<p>8:00 Answer questions from prior day</p> <p>8:30 – 12:00</p> <p>1) Journal Club</p> <p><i>alternating with</i></p> <p>2) Basics of Informed Consent</p>	<p>8:00 Answer questions from prior day</p> <p>8:30 – 9:15 emerging topics in Infectious Disease</p> <p>9:30 – 12 Integrated case-based discussion- Surgery and OB/GYN with Basic Sciences</p>	<p>8 -12</p> <p>1) Masters Colloquium – End of life care/ dealing with death, dying, and human suffering</p> <p><i>alternating with</i></p> <p>2) Quality improvement/ high value care</p>
PM	<p>1)Social determinants of health/health care disparities</p> <p><i>alternating with</i></p> <p>2)Patient safety discussion</p>	<p>2) SP case and documentation exercise.</p> <p><i>3:15 to 5:00 PM</i></p> <p>Conflict of interest and business practice session</p> <p><i>One minute paper for reflection at the end of the day</i></p>	<p>1:00 – 3:30 PM</p> <p>Integrated case-based discussion- Family Medicine and Internal Medicine with Basic Sciences.</p> <p>3:30 – Class Reception</p>	<p>1:00 to 3:00 PM</p> <p>Basic science talks on hot topics and new discoveries.</p> <p><i>One minute paper for reflection at the end of the day</i></p>	<p>Wrap –up and answer any remaining questions</p>

Sample Schedule Week 2:

	Monday (5/6/2019)	Tuesday (5/7/2019)	Wednesday (5/8/2019)	Thursday (5/9/2019)	Friday (5/10/2019)
AM	8 to 12 – Quality Improvement and Patient Safety – interactive exercises	1) Masters’ Colloquium – Professional identity formation and planning for residency <i>alternating with</i> 2) Importance of accurate documentation/law and medicine	EOY 3 OSCE <i>EOY 3 OSCE will rotate with CCSE and Procedure workshop over the 3 days. All students will be assigned individual times for each activity.</i>	CCSE exam	Procedure workshop
PM	Student Affairs Orientation	Self-directed learning time: SCI assignment due Prepare for exams.			

5. Clerkship location

- a. Sessions will be held on the main campus in the MEB and AEC.
- b. Please check Scheduler 15 for specific group assignments.

6. Required, expected and optional events

- a. Attendance and participation in all intersession activities is **mandatory**.

- i. Attendance will be taken for all sessions using the electronic badge system. Students must be responsible to bring their ID badge each day.
 - b. Completion of all assignments is mandatory by the deadline posted.
- 7. Student performance objectives
 - a. Students must pass the EOY 3 OSCE
 - b. Students must demonstrate competency in the general procedures of a physician in the Procedure Workshop
 - c. Students must take the CCSE examination. They must demonstrate an active effort in completing the examination. For example, a student who leaves after a short time and does not attempt to complete the exam or a student who answers all “c”s will not fulfill this requirement. However, there is no target score that must be achieved.
 - d. Students must attend and make an effort to participate in all sessions.
 - e. Students must complete all assignments, for example,
 - i. 1 minute papers due at the end of the day on Tuesday and Thursday of the January session. (see appendix 1)
 - ii. SCI assignment due on Tuesday of the May intersession (see appendix 2 for a description of the assignment and the grading rubric).
- 8. Patient condition expectations/Op Log expectations
 - a. There are no Op Log entries required for the intersessions.
- 9. Assessment
 - a. EOY 3 OSCE
 - b. Procedure workshop
 - i. Pre-test and post-test completion with achievement of 70% score on the post-test.
 - ii. Successful completion of checklist at each station by the supervising faculty member.
 - c. Professionalism
 - i. See expectations in section 11 below.
 - d. Participation
 - i. Students are expected to participate with their small groups and in open discussion in class. They are expected to pay attention and refrain from unauthorized use of electronic devices and to be respectful of their peers and presenters.
 - e. Satisfactory completion of all assignments

10. Grading policy – in addition to common clerkship policies

- a. Students will receive a grade of Pass or Fail based on the following:
 - i. Attendance
 - ii. Participation
 - iii. Satisfactory completion of the procedure workshop with demonstration of competent performance in the simulation lab.
 - 1. Achieve a passing score at each station:
 - a. Bag-valve-mask ventilation
 - b. Adult and infant intubation
 - c. Venipuncture
 - d. IV line placement
 - e. NG tube placement
 - f. Male and female bladder catheterization
 - iv. EOY 3 OSCE –must pass on the first or second attempt
 - v. Satisfactory effort in the CCSE
 - vi. Completion of all class assignments by posted deadlines
- b. EOY 3 OSCE remediation
 - i. Students who do not receive a passing grade (as outlined in the Common Clerkship Policies) on the first attempt will retake the examination a second time.
 - ii. Failure on the second attempt will result in a referral to Grading and Promotions.
- c. Failure to complete remediation assignments in a timely manner will result in a fail and referral to Grading and Promotions Committee.

11. Professionalism expectations

- a. 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 assignments by the posted due date
 - viii. Dress code
 - 1. Scrubs are not acceptable for any of the sessions.
 - 2. Students are expected to be in professional attire and white coats with their ID badges clearly visible.

- 3. Note that activities occurring in the ATACS are subject to the established ATACS dress code policies.
- b. Your professionalism is formally evaluated by the Course Director at the end of the clerkship. Feedback will be given after week 1 of the intersession in January 2018.
- c. Your professionalism is also monitored and evaluated by the Intersession coordinator.
- d. Failure to receive a satisfactory rating on any aspect of professionalism may result in failure of the course regardless of performance in other areas.

12. Missed events- in addition to common clerkship policies:

- a. All students are required to attend all intersession activities.
 - i. If a student will be absent for any activity, they must obtain approval from the Course Director. ***If the Course Director determines that a student's absence(s) compromises the student's ability to attain the necessary competencies, they may require the student to complete alternate assignments, even if the absence is excused.***
 - ii. **Unexcused absences** will result in remediation assignments based on the missed activity and a notation of a professionalism concern, including the possibility of receiving a grade of "fail" for the intersession.
- b. 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.
- c. In the ***event of an emergency or illness*** that results in an absence from intersession activities, the student must notify the Intersession Coordinator and the Office of Student Affairs as soon as possible.

13. Readings

- a. Short material for preparation may be required before individual sessions. This will be posted in Canvas a minimum of 2 weeks before the session.

14. Contacts

Maureen Francis, M.D., MS-HPed, FACP Course Director		Office: 915-215-4333 maureen.francis@ttuhsc.edu		5501 El Paso Dr. MEB, 2 nd Floor Room 2220 (Gold College)
Lourdes Davis Janssen Intersession Program Coordinator		Office: 915-215-4396 lourdes.davis@ttuhsc.edu		5501 El Paso Dr. MEB, 3 rd Floor

Appendix 1: 1 Minute Paper Assignment

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

Appendix 2: SCI Capstone Project and Grading Rubric

During your third year you will complete a SCI Capstone Project designed to integrate SCI topics with your clinical experience as a third year medical student. Using the outline below, you will submit a paper electronically no later than 5:00 on Tuesday of the second intersession. Directions will be posted.

Section 1: Your Patient

Please provide a brief clinical scenario of your patient so the reader can get a clear sense of the clinical problem the patient has. Do not submit your full H&P. Give enough of the history, PE, labs, X-rays, and clinical course that a fellow third year student would understand the medical issues. Please remember to select a patient you saw as a third year medical student and do not provide any patient-identifiable information.

Length: 1-2 paragraphs

Section 2: SCI Issue

Identify the SCI issue that pertains to your patient. Examples could include: social determinants of health, health literacy, health care systems, etc. Please contact Mark Francis if you need any guidance on this. Briefly discuss the SCI issue but most importantly its impact on your patient. This impact should include both (1) the impact on the patient's health and (2) the impact on the patient more globally.

Length: 1-2 paragraphs

Section 3: Management of the SCI Issue

Describe how the SCI issue was managed (or not managed). What was the rationale for the approach taken or not taken? What do you think the effects of approach taken or not taken to address this issue had on the patient?

Length: 1-2 paragraphs

Section 4: Alternative Approaches

After reflecting on this patient, please discuss an alternative approach that you think would have been a better approach to the SCI issue and indicate why you think this would have been better. Alternatively, if you decide that the best option was selected, please discuss a couple of alternative approaches and why you think they would not have worked as well. In both cases, please provide some specific details on the approaches you discuss.

Length: 1-2 paragraphs

SCI Intercession Capstone Grading Rubric

<i>Section</i>	<i>Needs Improvement</i>	<i>Meets Expectations</i>	<i>Exceeds Expectations</i>
<i>Your Patient</i>	<i>Missing relevant information, inclusive of too much irrelevant information, or not well organized.</i>	<i>Provides the relevant information.</i>	<i>Provides the relevant information in a clear and concise manner.</i>
<i>SCI Issue</i>	<i>Does not adequately (1) provide a clear explanation of the SCI issue, (2) address impact on the patient's health, or (3) address impact on patient more globally.</i>	<i>Clearly outlines the SCI issue and addresses how it affects the patient's health and life more globally.</i>	<i>Goes beyond the more obvious implications of the SCI issue.</i>
<i>Management of the SCI Issue</i>	<i>The actual management of the SCI issue is either not explained well or not analyzed sufficiently.</i>	<i>The management of the SCI issue is clearly explained. The rationale and effects of the management are well described.</i>	<i>Goes beyond the more obvious analysis of the management of the SCI issue.</i>
<i>Alternative Approaches</i>	<i>Does not provide reasonable alternative approaches or does not provide an adequate analysis of which approach would be more beneficial.</i>	<i>Provides clear alternative approaches with sufficient detail and analysis of why the preferred approach would be most beneficial.</i>	<i>Provides particularly insightful alternative approaches and clearly reviews the pros and cons of each approach with a well-reasoned final recommendation.</i>

The submission will be returned to the student for revision if there is a "needs improvement" assessment in any section.

Appendix 3: 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 4:

Oral Case Presentation Grading Rubric

See attached.

Appendix 5:

QIKAT R Scoring Rubric

See attached.

ORAL PRESENTATION FEEDBACK

Student Name: _____

Oral Presentation Skills (Please circle the most accurate statement.)

	Unacceptable	Needs Improvement	Acceptable	Above Average	Outstanding
Pace	Does not complete	< 5 min and incomplete >7 min; extraneous data	5 – 7 min < 5 min but complete >7 min, but minimal extraneous data		
HPI	Chronology is poor/chaotic Poor characterization of the symptom No pertinent negatives	Inadequately describes chronology Superficial characterization of symptoms No pertinent negatives	Adequately describes chronology of the illness Adequate characterization of CC Ends with a few pertinent negatives	Chronology is clearly stated Full characterization of the CC Demonstrates recognition of important details	Chronology is clearly stated Full characterization of the CC Demonstrates prioritization of important details
Context: SH/PMH/PSH	Major omissions Completely disorganized	Superficial; lacking important basic details Poorly organized	Generally maintains format Few or minor omissions	Maintains format Complete; no omissions Demonstrates recognition of important details	Maintains format Complete; no omissions Demonstrates prioritization of important details
Physical Exam	Major omissions Completely disorganized	Superficial; lacking important basic details Poorly organized	Generally maintains format Adequate characterization of presenting symptom Describes all Hx and PE elements in adequate detail Occasional omissions/errors	Maintains format Complete; no omissions Demonstrates recognition of important details	Maintains format Complete; no omissions Demonstrates prioritization of important details

Appendix 4:

	Unacceptable	Needs Improvement	Acceptable	Above Average	Outstanding
Overall organization	Completely disorganized; rambling Minimal or no attempt to follow prescribed format Major omissions	Disorganized, but attempts to follow the basic format Superficial; lacking important details Unduly repetitive	Follows basic format Most elements well organized Few or minor omissions Minor repetition	Smooth presentation Minimal or no repetition Demonstrates ability to recognize important data	Fluent presentation Minimal use of notes Demonstrates ability to prioritize data
Summary Statement (Quality of 1 – 3 sentence summary of patient’s reason for presentation.)					
	Unable to summarize	Poor/inadequate summary	Adequate summary	Well-summarized; recognizes key details	Outstanding summary; demonstrates understanding
Differential diagnosis (List diagnoses that would explain the problems represented in the summary statement.)					
	No differential dx given	One diagnosis offered to explain the problems	More than one dx considered but thinking is narrow (e.g., confined to one organ system)	Broad differential considered but potential diagnoses are not discussed in order of likelihood	Broad differential dx considered with identification of most likely dx
	No supporting evidence given	Minimal supporting evidence offered	Some supporting evidence offered for main dx but overall incomplete	Key factors from history and physical provided as evidence for most likely diagnosis	Key factors from history and physical discussed as evidence for most likely diagnosis and in context of what fits and doesn’t fit with other potential diagnoses
Semantic competence (i.e., use of terminology to efficiently and concisely convey patient’s symptoms and findings)					
	Uses lay terms or patient’s words	Incorrect use of medical terminology	Correctly uses some medical terminology	Frequently and correctly uses medical terminology	Advanced fluency in medical terminology; Eloquent and concise

The Scoring Rubric for the Quality Improvement Knowledge Application Tool Revised (QIKAT-R)^a

Three possible points for the Aim. The Aim ...	
A1	is focused on the system level of the problem presented.
A2	includes the direction of change (increase or decrease).
A3	includes at least one specific characteristic such as magnitude (% change) or time frame.
Three possible points for the Measure. The Measure ...	
M1	is relevant to the Aim.
M2	is readily available so data can be analyzed over time.
M3	captures a key process or outcome.
Three possible points for the Change. The Change ...	
C1	is linked directly with the Aim.
C2	proposes to use existing resources.
C3	provides sufficient details to initiate a test of change.

^aScoring is dichotomous (1 = yes; 0 = no); responders may receive one point for each item.

[The Quality Improvement Knowledge Application Tool Revised \(QIKAT-R\)](#)

Academic Medicine 89(10):1386-1391, October 2014