

AY 2023-2024 Pediatric Clerkship

<p>Ajay Singh Pediatric Clerkship Director Ajay.Singh@ttuhsc.edu</p>	<p>4801 Alberta Ave. AEC 2nd Floor Room 225</p>
<p>Celeste Castillo Clerkship Coordinator O: 915-215-6287 Celeste.Castillo@ttuhsc.edu</p>	<p>4801 Alberta Ave. AEC 2nd Floor Room 218E</p>

Clerkship Description:

Objectives for the pediatrics clerkship follow the current COMSEP (Council on Medical Student Education in Pediatrics) General Clerkship Curriculum (2019 COMSEP Curriculum Revision) organized around 3 key themes – care of the well child, care of the acutely ill child, and care of the chronically ill child. The objectives also reflect the integrated nature of the OB-GYN/Pediatrics/Surgery block. Some topics covered during the OB-GYN/Pediatrics block have been identified as “shared topics” and will be addressed with students through integrative lectures, workshops, seminars, case conferences, or shared rounds. Examples of shared topics include adolescent gynecology/contraception, adolescent STIs, pregnancy/birth, neonatology, intrauterine/fetal/congenital infections of the newborn, Delivery Room Resuscitation Simulation, Poor Outcome of birth/Root-Cause Analysis, Discharge Planning activity, Professional Identity Session, Interprofessional Education activity, and an Ethics activity.

Clerkship Objectives:

Medical Knowledge

Goal: You must acquire knowledge about established and evolving biomedical, epidemiological, clinical, and psychosocial sciences and apply this knowledge to patient care. You will develop an understanding in the assessment and management of common clinical conditions in pediatrics in the inpatient and the outpatient setting. You will demonstrate the ability to acquire, critically interpret, and apply this knowledge.

Objectives: Recognize the signs, and symptoms of common pediatric problems including the following (1.1-1.9, 2.1 – 2.6, 3.1, 3.3):

- Health Supervision from birth through adolescence
- Growth
- Development

- Behavior
- Nutrition
- Issues unique to adolescence
- Issues unique to newborn
- Common acute pediatric illness/common pediatric complaints
- Common chronic illness and disability
- Therapeutics with specific pediatric dosing of medications
- Fluids and electrolytes management appropriate for age and clinical situations
- Pediatric emergencies
- Child Abuse

Patient Care

Goals: You must be able to provide patient-centered care that is age-appropriate, compassionate, and effective for the treatment of health problems and the promotion of health.

Objectives: By the completion of this clerkship experience, you will be able to:

- Determine which patients can be managed in an outpatient setting and/or general inpatient setting, and which require higher levels of care and expertise in a critical care unit (1.5, 1.6, 7.2, 7.3, 8.1).
- Demonstrate skills at the MS III level in evaluating, diagnosing, managing, and determining the appropriate disposition of pediatric patients (1.1–1.9, 2.1–2.3, 3.4-3.5, 6.2-6.4,7.2)
- Develop differential diagnoses, planning diagnostic studies, formulate and implement therapeutic options and plans for discharge of patients under the student’s care (1.2–1.4, 1.6, 1.8, 2.2-2.3, 2.6).
- Utilize appropriate consultants/subspecialists (1.5-1.6, 4.2, 6.2, 7.2).
- Utilize diagnostic testing and imaging resources effectively and efficiently (1.1, 1.3, 6.2, 6.3).

Interpersonal And Communication Skills

Goal: You must demonstrate interpersonal and communication skills that result in effective information exchange with patients, their families, and professional associates. You will develop knowledge of specific techniques and methods that facilitate effective, empathic communication and cultural sensitivity.

Objectives: You will demonstrate the ability to:

- Communicate effectively with families and patients (considering patients age/ developmental levels) (4.1–4.4).
- Interview adolescent patients in an effective manner (4.1–4.4).
- Appropriately utilize interpreters, if necessary, to communicate with non-English speaking patients (4.1, 4.3, 6.2, 7.2, 8.1).
- Communicate effectively and respectfully with physicians and other health professionals in order to share knowledge and discuss management of patients (4.2, 4.4).

- Maintain professional and appropriate interactions with patients and their caregivers (4.1, 4.3, 5.1, 5.6).
- Effectively listen, and then utilize verbal and writing skills to communicate with patients, families, and members of the health care team (4.1–4.4, 7.2, 7.3).

Professionalism/ Ethics

Goal: You must demonstrate a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population.

Objectives: During this clerkship, you will demonstrate:

- Sensitivity to patient and family concerns (5.1, 5.6, 5.7).
- Acceptance of parent and patient differences in culture, beliefs, attitudes, and lifestyle (5.1).
- The ability to manage personal biases in caring for patients of diverse populations and different backgrounds, and to recognize how these biases may affect care and decision-making (5.1, 5.4, 8.3 – 8.5).
- Respect for patient privacy and confidentiality (5.2, 5.5, 5.7).
- Commitment to following through with professional obligations (clinical and educational) and to the timely completion of assigned tasks and duties (4.4, 5.3, 5.7, 7.3, 8.1, 8.5).
- Commitment to treat faculty, residents, staff, patients, and fellow students with respect and courtesy (5.1, 5.3, 5.7, 7.3, 7.4).
- Advocate for patient needs (5.7, 6.2-6.4).

Practice Base Learning and Improvement

Goal: You will understand the application of scientific evidence, and seek and accept feedback for continuous self-improvement in patient care and educational practices. You will develop that ability to identify your own deficiencies and remediate them.

Objectives: During this clerkship experience, you will:

- Demonstrate the use electronic technology (e.g., PDA, PC, internet) for accessing and evaluating evidenced-based medical information (e-medicine, journals, textbooks, etc.) (1.2, 2.2-2.4, 3.1, 3.3-3.4, 8,5).
- Accept feedback from the faculty, residents, and other team members, and incorporate this to improve your clinical practice (3.3, 5.3).
- Demonstrate a basic understanding of quality improvement principles and their application to analyzing and solving problems in patient care (3.2).
- Participate fully in educational activities.

System Based Practice

Goal: You must demonstrate an awareness of medical systems, responsiveness to the larger context and system of health care, and the ability to effectively utilize system resources to provide optimal care. You will develop an appreciation of supportive health care resources and understand their utilization as part of patient advocacy.

Objectives: During this clerkship experience, you will demonstrate the ability to:

- Understand the health system and utilize ancillary health services and specialty consultants properly (1.1-1.2, 1.5-1.6, 6.1-6.2, 6.4, 7.2, 8.1, 8.3, 8.5).
- Utilize the integrated systems available to help the mother and infant with unexpected complications or problems during the perinatal period (i.e. neonatal resuscitation teams in delivery room, lactation consultants, etc.) (1.1-1.2, 1.5-1.6, 6.1-6.2, 6.4, 7.2, 8.1, 8.3, 8.5).

Interprofessional Collaboration

Goal: You must demonstrate the ability to engage in an interprofessional team in manner that optimizes safe, effective patient and population-centered care.

Objectives: During this clerkship experience, you will demonstrate the ability to:

- Use knowledge of one’s own role and the roles of other health care professionals to work together in providing safe and effective care. (7.1-7.2)
- Function effectively as a team member. (PGO 7.3)

Personal and Professional Development

Goal: You must demonstrate the qualities required to sustain lifelong personal and professional growth.

Objectives: During this clerkship experience, you will demonstrate the ability to:

- Recognize when to take responsibility and when to seek assistance. (PGO 8.1)
- Demonstrate flexibility in adjusting to change and/or difficult situations.(PGO8.3)
- Demonstrate the ability to employ self-initiated learning strategies (problem definition, identification of appropriate learning resources, and critical appraisal of information) when approaching new challenges, problems, or unfamiliar situations.(PGO 8.5)
- Reflect on clinical experiences with goal of finding meaning in your work and strengthening resiliency (PGO 8.2)

Integration Threads:

–	geriatrics	X	basic science	X	ethics
X	professionalism	X	EBM	X	chronic illness care
X	patient safety	X	pain management	X	clinical pathology,
X	palliative care	X	quality improvement	–	clinical and/or
X	communication skills	X	diagnostic imaging		translational research

PEDIATRIC CLERKSHIP THREADS

In addition to these components being encountered or modeled during inpatient and outpatient clinical activities, activities that specifically address these are:

ETHICS AND PROFESSIONALISM

- 1.) Defined and explained during clerkship orientation and modeled during clinical encounters (3.3, 4.3, 5.1-5.3)
- 2.) Combined Ethics Activity - involving didactics, role playing (3.1, 3.4-3.5, 4.2-4.3, 5.1, 5.3-5.4)
- 3.) Morning or noon report (1.6, 1.8, 2.5, 4.2-4.3, 5.1-5.3, 5.6-5.7, 6.1-6.4, 7.1-7.2, 8.5)
- 4.) Peer Teaching Session (VICE activity) (3.1, 3.4, 3.5, 4.2, 5.6)

PATIENT SAFETY/QI

- 1.) Mock root cause analysis (3.2)
- 2.) Morning or noon report (3.2)
- 3.) Discharge Planning Activity (3.2, 3.4, 6.1-6.2)

PALLIATIVE CARE

- 1.) Morning or noon report (1.8, 2.5, 5.1, 6.2)
- 2.) Clinical encounters (1.8, 2.5, 5.1, 6.2)

COMMUNICATION SKILLS

- 1.) Transparent Group OSCE (1.1-1.3, 3.3, 4.1-4.3)
- 2.) OSCE (1.1, 1.7, 4.1, 4.3)
- 3.) Delivery Room Resuscitation Scenario (1.1, 4.2-4.3, 5.1-5.2, 7.3)
- 4.) Peer Teaching Session (VICE activity) (4.2)
- 5.) Ethics Activity – Mock Ethics Committee Meeting (4.2, 5.1, 5.2, 5.4)

BASIC SCIENCE (2.1 – 2.2)

- 1.) Didactic lectures
- 2.) Morning or noon report
- 3.) ILP
- 4.) VICE (vertical integration in clinical education) sessions
- 5.) Newborn nursery – Texas newborn screening (biochemistry, genetics)

EBM (2.2-2.3)

- 1.) Morning or noon report
- 2.) OSCE
- 3.) Clinical encounters
- 4.) Didactics

PAIN MANAGEMENT

- 1.) Morning or noon report
- 2.) Clinical encounters

DIAGNOSTIC IMAGING

- 1.) Morning or noon report
- 2.) Didactic lectures
- 3.) Clinical encounters

CHRONIC ILLNESS CARE

- 1.) Clinical encounters
- 2.) Didactic lectures
- 3.) Morning or noon report

CLINICAL PATHOLOGY

- 1.) Didactic lectures
- 2.) Morning or noon report
- 3.) VICE (vertical integration in clinical education) sessions

UNDERSERVED POPULATIONS

- 1.) SNAP challenge
- 2.) Discharge planning activity
- 3.) Interprofessional Collaboration
- 4.) Interprofessional Education activity

Op Log Requirements:

Please see **Appendix C for a complete list of required patient encounters for the Pediatric Clerkship**. Please monitor your Op Log Dashboard to ensure that you are on track to complete his requirement. If you do not log a required encounter, you will need to complete an alternate assignment. Your progress will be reviewed at your mid-clerkship meeting.

You are responsible for informing the Clerkship Director or Coordinator that you have not completed a required patient encounter in time for an alternative experience to be arranged. This typically occurs during and after the mid-clerkship evaluation. After Midclerkship evaluations, it is your responsibility to inform the Coordinator when and how (clinical encounter or alternate experience) you satisfied the requirements.

Calendar of Required Clerkship Events:

Noon report – every Monday at 12:00 noon in various locations. Times may vary occasionally. (Please see Elentra schedule).

Morning Report - every Friday@ 8:00 A.M. in various locations (please see Elentra Schedule): Sr. Resident discusses admissions from the night before and an interesting case is presented. You may be assigned a Morning Report presentation while on Wards. (1.2-1.4, 1.6, 1.10, 2.2-2.6, 3.1, 3.3-3.4, 4.2-4.3, 5.1-5.3, 5.6-5.7, 6.1-6.3, 7.1-7.2, 8.5)

Pediatric Grand Rounds takes place the 1st and 3rd Wednesday of the month from 8:00 A.M. – 9:00 A.M. in various locations. This activity is required for students on a Pediatric rotation that week, and fulfills students' CME credit requirements. Breakfast is available at 7:30 A.M. (1.2-1.4, 1.6, 1.8, 1.9-1.10, 2.2-2.6, 3.1, 3.4-3.5, 5.7, 6.2-6.3, 8.5)

Rotations

The Pediatrics component of the integrated Pediatrics/OB-GYN/Surgery rotation occurs in the following settings:

- Inpatient
 - Newborn Nursery
 - Wards
- Outpatient
 - General Pediatrics
 - Subspecialty Pediatrics

Inpatient Services:

Newborn Nursery

You are supervised by the faculty and residents in the “Well-Baby” Nursery. During this time, you will :

- 1.) learn the normal newborn exam, identify physical findings that are normal variants and those that represent pathology, and communicate this information to faculty, residents, and others. (1.1-1.6, 1.8-1.9, 2.1,3.1, 3.3-3.5, 4.1-4.4)
- 2.) learn about jaundice in the newborn and determine how to differentiate pathologic etiologies from physiologic ones. (2.1-2.5, ,3.1, 3.3-3.5, 6.4)
- 3.) learn about the Texas newborn screening. (3.5, 5.5, 5.7, 6.3-6.4, 8.5)

Pediatric Wards

You are integrated into the Pediatric Ward team which includes MS4s, interns (from Pediatrics and Family Medicine), residents (from Pediatrics and Family Medicine), hospitalists, community physicians, nurses, respiratory therapists, social workers, nutritionists, families, patients, etc. You are expected to complete documentation on your own patients. You are supervised by pediatric house staff and pediatric hospitalists. You will:

- 1.) learn about pathophysiology and management of illnesses that commonly affect normal children and children with chronic diseases. (1.1-1.9 , 2.1-2.5, 3.1)
- 2.) learn to triage patients. (1.5, 2.1, 2.3, 2.5, 3.1, 8.1, 8.3, 8.5)
- 3.) learn the mechanics of hospital care, including order writing, documentation, utilization of other specialties, identifying discharge needs and resources, and safe handoff of patient care. (1.3-1.8, 3.1, 3.3–3.5, 4.1-4.4, 5.2, 5.5, 6.1-6.4, 7.2-7.3, 8.3,8.5)

Outpatient Services:

General Pediatric Clinic:

You will experience all aspects of outpatient pediatric care, including taking vital signs, administering hearing and sight exams, giving immunizations, and patient management. You are involved in the care of children from post-nursery discharge through adolescence. You may experience delivering care at the urgent care center. Outpatient experience will occur at TTUHSC EP Clinics at the PLFSOM and Transmountain sites, and in community faculty offices. You will learn:

- 1.) to complete an age-appropriate H&P on children of all ages. (1.1-1.4, 1.6-1.9, 2.1, 4.1, 4.3, 5.1-5.2, 5.5)
- 2.) to anticipate common threats to children and provide appropriate anticipatory guidance to caretakers. (1.5, 1.8-1.9, 2.3-2.5, 3.4, 4.1, 4.3, 8.1)
- 3.) to screen for developmental problems and learn when to refer children for an in-depth evaluation by a specialist. (1.6, 2.3, 3.4, 4.1-4.3, 5.1, 5.7, 6.4, 7.1-7.3, 8.1)
- 4.) to recognize illnesses/conditions commonly treated by a general pediatrician, and learn when to refer to a subspecialist. (1.6, 2.3, 3.4, 4.1-4.3, 5.7, 6.4, 7.1-7.3, 8.1)
- 5.) about nutrition by participating in the **team** activity SNAP (Supplemental Nutrition Assistance Program [food stamps]) Challenge. You will generate a meal plan for a hypothetical child. You will be given the weekly average SNAP benefit in cash to shop for food. Food may be donated by you or given to the Clerkship Coordinator for donation to a food bank. (2.3, 3.1-3.5, 5.7, 6.1-6.3, 7.1-7.3, 8.5)

Other Rotations:

Subspecialty Rotations:

You will interact with patients and subspecialty physicians and teams on multiple subspecialty services. You will:

- 1.) learn how children who require subspecialty care are referred to Pediatric Subspecialists. (3.4, 4.1-4.4, 6.1, 6.4, 7.1-7.2, 8.1)
- 2.) learn how to diagnose and manage common subspecialty illnesses and conditions. (1.1-1.8, 2.1-2.5, 3.1, 3.4, 4.1-4.4, 6.2-6.3, 8.1, 8.5)
- 3.) learn the challenges of managing chronic illnesses for physicians and families. (1.4-1.8, 2.3-2.4, 3.1, 3.4, 4.2, 4.4, 5.5, 6.2-6.3, 7.2, 8.1, 8.3-8.5)

POSSIBLE SUBSPECIALTY ROTATIONS

Adolescent Medicine

- 1.) You will learn the spectrum of diseases and conditions in Adolescent Medicine, including how they present, are diagnosed, and the treatment and sequelae. (1.1-1.6, 1.10, 2.1-2.3, 2.5, 3.3-3.4, 4.1-4.3, 5.1, 5.7, 6.3)
- 2.) You will be able to articulate the criteria for referring patients to an Adolescent Medicine Specialist. (6.4, 8.1)
- 3.) You will learn how to approach and manage adolescent patients in the outpatient setting. You will learn to appropriately document confidential information. (1.1-1.6, 1.8, 1.10, 2.1-2.3, 2.5, 3.3-3.4, 4.1-4.3, 5.1-5.2, 5.6-5.7, 6.3-6.4, 7.2, 8.1, 8.3, 8.5)
- 4.) You will recognize and understand the impact of the family, school, and work environments on the health and development of the adolescent patient. (1.8, 2.5, 3.5, 4.1, 4.3, 5.1)

Anesthesiology:

- 1.) You will learn the scope of Pediatric Anesthesiology practice in the OR, including evaluation of an infant or child for surgery, management of infant or child throughout surgery and recovery from anesthetics, as well as assessment of the neurologic and cardiorespiratory stability of a child while under care of a Pediatric Anesthesiologist. (1.1, 1.2, 1.4 - 1.8, 1.10, 2.1-2.3, 4.1-4.4, 5.1 – 5.3, 5.7, 6.3, 7.2, 7.3)
- 2.) You will learn the scope of Pediatric Anesthesiology practice outside the OR, possible including consultation for pain management and provision of sedation/anesthesia for procedures done in areas other than the OR. (1.1, 1.2, 1.4 - 1.8, 1.10, 2.1-2.3, 4.1-4.4, 5.1 – 5.3, 5.7, 6.3, 7.2, 7.3)
- 3.) You will demonstrate basic skills to manage a pediatric airway. (1.10)
- 4.) You will appreciate the team work involved in safely taking a child from their pre-surgical state to their postsurgical state. (7.1 – 7.3, 8.2 - 8.3, 8.5)

Cardiology:

- 1.) You will learn the spectrum of diseases and conditions in Pediatric Cardiology, including how they present in the pediatric population, how they are diagnosed, and the treatment and sequelae. (1.1-1.6, 1.10, 2.1-2.3, 2.5, 3.3-3.4, 4.1-4.3, 5.1, 5.7, 6.3)
- 2.) You will be able to articulate the criteria for referring patients to a Pediatric Cardiologist. (6.4, 8.1)
- 3.) You will learn to manage patients with pediatric cardiac diseases in inpatient and outpatient settings. (1.1-1.6, 1.8, 1.10, 2.1-2.3, 2.5, 3.3-3.4, 4.1-4.3, 5.1-5.2, 5.6-5.7, 6.3-6.4, 7.2, 8.1, 8.3, 8.5)
- 4.) You will recognize and understand the impact of acute and/or chronic cardiac disorders in the life of the developing child and family. (1.8, 2.5, 3.5, 4.1, 4.3, 5.1)

Developmental and Behavioral Pediatrics

- 1.) You will be able to articulate the criteria for referring patients to a Developmental Pediatric specialist. (6.4, 8.1)

2.) You will learn to diagnoses, manage, and follow patients with developmental disabilities in the outpatient settings. (1.1-1.6, 1.8, 1.10, 2.1-2.3, 2.5, 3.3-3.4, 4.1-4.3, 5.1-5.2, 5.6-5.7, 6.3-6.4, 7.2, 8.1, 8.3, 8.5)

Emergency Medicine

- 1.) You will learn the spectrum of diseases and conditions presenting to a Pediatric Emergency Department, how they are diagnosed, and the treatment and sequelae. (1.1-1.6, 1.10, 2.1-2.3, 2.5, 3.3-3.4, 4.1-4.3, 5.1, 5.7, 6.3)
- 2.) You will be able to articulate the criteria for triage in the Pediatric ED. You will be able to articulate hospital admission criteria and criteria for discharge from the Pediatric ED. (6.4, 8.1)

Gastroenterology

- 1.) You will learn the spectrum of diseases and conditions in Pediatric Gastroenterology, including how they present in the pediatric population, how they are diagnosed, and the treatment and sequelae. (1.1-1.6, 1.10, 2.1-2.3, 2.5, 3.3-3.4, 4.1-4.3, 5.1, 5.7, 6.3)
- 2.) You will be able to articulate the criteria for referring patients to a Pediatric Gastroenterologist. (6.4, 8.1)
- 3.) You will learn to manage patients with pediatric GI diseases/disorders in inpatient and outpatient settings. (1.1-1.6, 1.8, 1.10, 2.1-2.3, 2.5, 3.3-3.4, 4.1-4.3, 5.1-5.2, 5.6-5.7, 6.3-6.4, 7.2, 8.1, 8.3, 8.5)
- 4.) You will recognize and understand the impact of acute and/or chronic GI disorders in the life of the developing child and family. (1.8, 2.5, 3.5, 4.1, 4.3, 5.1)

Hematology/Oncology

- 1.) You will learn the spectrum of diseases and conditions in Pediatric Hematology/Oncology, including how they present in the pediatric population, how they are diagnosed, and the treatment and sequelae. (1.1-1.6, 1.10, 2.1-2.3, 2.5, 3.3-3.4, 4.1-4.3, 5.1, 5.7, 6.3)
- 2.) You will be able to articulate the criteria for referring patients to a Pediatric Hematologist/Oncologist. (6.4, 8.1)
- 3.) You will learn to manage patients with pediatric hematologic and oncologic diseases/disorders in inpatient and outpatient settings. (1.1-1.6, 1.8, 1.10, 2.1-2.3, 2.5, 3.3-3.4, 4.1-4.3, 5.1-5.2, 5.4, 5.6-5.7, 6.3-6.4, 7.2, 8.1, 8.3, 8.5)
- 4.) You will recognize and understand the impact of acute and/or chronic hematologic and oncologic disorders in the life of the developing child and family. (1.8, 2.5, 3.5, 4.1, 4.3, 5.1)

Infectious Diseases

- 1.) You will learn the spectrum of diseases and conditions in Pediatric Infectious Disease, including how they present in the pediatric population, how they are diagnosed, and the treatment and sequelae. (1.1-1.6, 1.10, 2.1-2.3, 2.5, 3.3-3.4, 4.1-4.3, 5.1, 5.7, 6.3)
- 2.) You will be able to articulate the criteria for referring patients to a Pediatric Infectious Disease Specialist. (6.4, 8.1)

- 3.) You will learn to manage patients with pediatric ID diseases/disorders in inpatient and outpatient settings. (1.1-1.6, 1.8, 1.10, 2.1-2.3, 2.5, 3.3-3.4, 4.1-4.3, 5.1-5.2, 5.6-5.7, 6.3-6.4, 7.2, 8.1, 8.3, 8.5)
- 4.) You will recognize and understand the impact of acute and/or chronic ID disorders in the life of the developing child and family. (1.8, 2.5, 3.5, 4.1, 4.3, 5.1)

Neonatology

- 1.) You will articulate reasons that patients are admitted to a NICU. (6.3 -6.4, 8.1)
- 2.) You will understand how neonates present with common critical illnesses/conditions, how they are diagnosed, and the treatment and sequelae. (1.1-1.6, 1.10, 2.1-2.3, 2.5, 3.3-3.4, 4.1-4.3, 5.1, 5.7, 6.3)
- 3.) You will understand and appreciate the importance of the multidisciplinary team in the care of the critically ill neonate. (7.1-7.3)
- 4.) You will recognize the importance of technology and pharmacology in the care of the critically ill neonate. (1.2, 1.5, 1.10, 6.2-6.4, 7.1-7.2, 8.1)
- 5.) You will understand the impact of acute and/or chronic critical illness has on the developing neonate and family. (1.8, 2.5, 3.5, 4.1, 4.3, 5.1)
- 6.) You will understand the importance of following patients after discharge from the NICU.

Nephrology

- 1.) You will learn the spectrum of diseases and conditions in Pediatric Nephrology, including how they present in the pediatric population, how they are diagnosed, and the treatment and sequelae. (1.1-1.6, 1.10, 2.1-2.3, 2.5, 3.3-3.4, 4.1-4.3, 5.1, 5.7, 6.3)
- 2.) You will be able to articulate the criteria for referring patients to a Pediatric Nephrologist. (6.4, 8.1)
- 3.) You will learn to manage patients with pediatric kidney diseases/disorders in inpatient and outpatient settings. (1.1-1.6, 1.8, 1.10, 2.1-2.3, 2.5, 3.3-3.4, 4.1-4.3, 5.1-5.2, 5.6-
- 4.) You will recognize and understand the impact of acute and/or chronic kidney disorders in the life of the developing child and family. (1.8, 2.5, 3.5, 4.1, 4.3, 5.1)
- 5.) You will articulate the types of dialysis available to infants and children, as well as the indication for each type of dialysis. (1.2, 1.10, 2.2-2.3)

Orthopedics

- 1.) You will learn the spectrum of diseases and conditions in Pediatric Orthopedics, including how they present in the pediatric population, how they are diagnosed, and the treatment and sequelae. You will be able to articulate indicate indications for and timing of surgery for common pediatric orthopedic conditions. (1.1-1.6, 1.10, 2.1-2.3, 2.5, 3.3-3.4, 4.1-4.3, 5.1, 5.7, 6.3)
- 2.) You will be able to articulate the criteria for referring patients to a Pediatric Orthopedic Surgeon. (6.4, 8.1)
- 3.) You will learn to manage patients with pediatric orthopedic diseases/disorders in inpatient, outpatient, and OR settings. (1.1-1.6, 1.8, 1.10, 2.1-2.3, 2.5, 3.3-3.4, 4.1-4.3, 5.1-5.2, 5.6-5.7, 6.3-6.4, 7.2, 8.1, 8.3, 8.5)
- 4.) You will recognize and understand the impact of acute and/or chronic orthopedic disorders in the life of the developing child and family. (1.8, 2.5, 3.5, 4.1, 4.3, 5.1)

Pathology

- 1.) You will understand the scope of services that a Pediatric Pathologist performs. (6.2, 6.4, 7.1-7.2, 8.1)
- 2.) You will learn how Pathology is integral to and is integrated with the multiple services offered by a Pediatric Hospital. (6.2, 6.4, 7.1-7.2, 8.1)

Not all experiences may be available each week, and experiences may be deleted or added. Student preferences may not be able to be accommodated.

Student Performance Objectives

Procedures

During this clerkship, you will not be directly responsible for any procedures while on a Pediatric Rotation; however, you may be asked to assist and will be expected to keep a log of the procedures in which you have participated.

Assessment:

Assessment forms used throughout the block are located in Appendix D. There are 2 assessment forms used in the Pediatric Clerkship – Pediatric Clinical Assessment form (AKA long form) and the Assessment card (AKA short form). The Pediatric Clinical Assessment form (AKA long form) is [for use on Wards \(minimum of 2 per week\), Nursery \(minimum of 1\) , and subspecialty \(with the exception of the NICU\) or general pediatric clinic rotations where you have had ≥ 3 encounters with same evaluator \(cumulative over Clerkship\). An encounter is considered 1 day. You are expected to get 1 evaluation \(long form or short form\) per evaluator per week.](#)

Pediatric Clinical Assessment Card: [for use with < 3 encounters \(cumulative over Clerkship\) with evaluator in the outpatient setting.](#)

[Honors for professionalism MUST be accompanied by comments describing the exceptional behavior or the grade may will revert to a Pass.](#)

[See section “Forms used in Clerkship” below for examples of evaluations.](#)

Pediatric Clerkship Final Evaluation (bolded areas carry more weight)

1. Knowledge for Practice
 - a. Grade -“Needs improvement, Pass, Honors”
 - b. Graded activities:

Faculty & Resident evaluations

Observed H&Ps

Prescription writing
Handoff evaluations
Delivery Room Simulation
Transparent Group OSCE
Continuity Patient
SNAP Challenge

c. Comments – meant to justify the score in this competency. Could be taken from the weekly evaluations.

2. Patient Care and Procedural Skills

a. Grade – “Needs improvement, Pass, Honors”

b. Graded activities:

Faculty & Resident evaluations

Observed H&Ps

Prescription Activities
Handoff tool evaluation
Transparent Group OSCE (Telephone Medicine)
Delivery Room Simulation
Continuity Patient

c. Comments – meant to justify grade in this competency

3. Interpersonal and Communication Skills

a. Grade – “Needs improvement, pass, honors”

b. Graded activities:

Faculty & Resident evaluations

Observed H&Ps

Prescription writing
Handoff evaluation
Transparent Group OSCE (Telephone Medicine)
Continuity Patient
Ethics Activity
Communication w/ Director & Coordinator
Delivery Room Simulation
Peer Teaching (VICE) presentations

c. Comments – meant to justify grade in this competency

4. Practice-based Learning and Improvement

a. Grade – “Needs improvement, pass, honors”

- b. Source – list sources for evaluation in this competency

Faculty & Resident evaluations

ILP

Aquifer Pediatric Cases
Transparent Group OSCE (Telephone Medicine)
Delivery Room Simulation
Prescription Activities
Ethics Activity
Peer Teaching (VICE) presentations

- c. Comments – meant to justify grade in this competency

5. Systems-Based Practice

- a. Grade – “Needs improvement, pass, honors”
- b. Source – list sources for evaluation in this competency

Faculty & Resident evaluations

Discharge Planning Activity

Mock RCA
Ethics Activity

- c. Comments – meant to justify grade in this competency

6. Professionalism

- a. Grade – “Needs improvement, pass, honors”
- b. Source – list sources for evaluation in this competency

Faculty & Resident evaluations (to receive Honors, must have comments documenting exceptional professional, otherwise reverts to Pass)

Timely completion of course requirements

Ethics case
Timely Op-Log Entry with completion of required patient encounters
Peer Teaching (VICE) Sessions

- c. Comments – meant to justify grade in this competency

7. Interprofessional Collaboration

- a. Grade – “Needs improvement, pass, and honors”
- b. Source – list sources for evaluation in this competency

Faculty & Resident evaluations

Ethics Case

Discharge Planning Activity
SNAP Challenge
Mock RCA
Interprofessional Activity with UTEP students

- c. Comments – meant to justify grade in this competency
8. Personal and Professional Development
- a. Grade – “Needs improvement, pass, honors”
 - b. Source – list sources for evaluation in this competency

Faculty & Resident evaluations

ILP
Reflective Writings
Professional Identity Sessions

- c. Comments – meant to justify grade in this competency
9. NBME score
10. OSCE
11. MSPE comments
12. General Comments (Optional and not for MSPE)
13. Final grade for Clerkship – Honors, Pass, Fail

Grading for the Pediatric Clerkship will be explained during Orientation and in more detail during a didactic session and Midclerkship evaluation. |

Mid-Clerkship Review: You will meet with Clerkship Director or Associate Clerkship Director on your 6th week of a Pediatric rotation (unless on Wards rotation or other arrangements are made) to review progress, status of requirement completion, identification of red flags, etc. |

Grading Policy – In Addition to Common Clerkship Policies: |

In addition to Clinical Evaluations, the following assignments will be used in determining final grade. **They are expected to be turned in by deadline noted on Quick Guide.** Failure to turn them in by deadline noted on Quick Guide may mean you will receive a “Needs improvement” in Professionalism and are ineligible for Honors as final grade. If assignments are not handed in by Week 22, your final grade will be “In progress” until assignments are completed at an acceptable level of performance.

Wards

Observed H&P – scored by Ward resident or faculty – see scoring rubric. (Scored as Superior/Pass/Fail) (PGO 1.1, 1.3, 1.6, 3.3, 4.1, 4.3, 5.1, 5.7)

- Superior ≥ 90% of scored items
 - Pass = 70 - 89% of scored items
 - If failed, must re-do.
 - Given 2 attempts to pass. If do not pass, may affect ability to receive Honors in appropriate competencies, and as final grade.
 - Must complete to complete Clerkship requirements.
- Handoff Tool evaluation – reviewed by Ward resident or faculty (PGO 4.2)
- Must complete to complete Clerkship requirements.

Nursery

Observed newborn H&P – scored by Nursery resident or faculty - see scoring rubric. (Scored as Superior/Pass/Fail)(PGO 1.1, 3.3, 4.1, 5.1, 5.7)

- Superior ≥ 90%
- Pass = 70 - 89%
- If fail, must re-do it until pass
- Must pass to complete Clerkship requirements.
- Given 2 attempts to pass. If do not pass, may affect ability to receive Honors in appropriate competencies, and as final grade.

General Pediatric Clinic

2 Observed Clinic H&Ps – scored by Clinic faculty or resident - see scoring rubric. (Scored as Superior/Pass/Fail) (PGO 1.1, 1.3, 1.6, 1.9, 2.1-2.3, 3.3, 4.1, 4.3, 5.1, 5.7)

- Superior ≥ 90%
- Pass = 70 – 89%
- If fail, must re-do it until pass
- Must pass to complete Clerkship requirements.
- Given 2 attempts to pass. If do not pass, may affect ability to receive Honors in appropriate competencies, and as final grade.

Prescription Writing - reviewed and signed off by Clinic faculty or resident – must write at least 4 prescription on real or mock patients, and receive feedback from faculty or resident on format of prescription and accuracy/appropriateness of dosing. (PGO 1.6)

Must complete to complete Clerkship requirements.

AAP (American Academy of Pediatrics Autism modules – must complete all six (1.2, 1.8, 2.1–2.3, 2.5, 3.4)

SNAP Challenge (PGO 1.9, 2.3, 3.3, 5.3, 5.7, 6.1-6.2, 7.1-7.4)

Receipts and meal plan

- Must complete to fulfill Clerkship requirements

Reflective writing

- Must complete to satisfaction of Clerkship Director
- Must complete to complete Clerkship requirements

Continuity Patient (all assignments to be turned in to Clerkship Coordinator and/or Clerkship Director by the end of Clerkship)

Newborn H&P (PGO 1.1, 3.3, 4.1, 5.1, 5.7)

- Done on UMC Nursery Admission H&P form with Ballard and growth chart
- Must complete to satisfaction of Clerkship Director to complete Clerkship requirements.
- Follow-up infant visit notes – *if at TTUHSC Clinics* (PGO 1.1-1.4, 1.6-1.8, 2.1-2.5, 3.3, 4.1-4.4, 5.1, 5.7)
- Must complete to complete Clerkship requirements only if patient is seen in TTUHSC clinics.

15 Aquifer Pediatrics Cases - must be completed by end of week 22 (PGO 1.1-1.3, 1.6-1.8, 2.1-2.4, 3.3-3.4, 5.7)

- Must complete to fulfill Clerkship requirements

Discharge Planning Activity - (Honors/High Pass/Pass/Low Pass/Fail) (PGO 1.9, 2.4-2.5, 5.1, 5.7, 6.1-6.4, 7.2)

- Evaluated by OB-Gyn and Pediatric Clerkship Directors and/or Associate Clerkship Directors
- May be asked to redo it if particular deficiencies noted.
- Must pass to complete Clerkship requirements.

Ethics Project -- (Honors/Pass/Fail) – based on participation, performance, and preparation (PGO 1.1-1.2, 1.6, 1.10, 2.2-2.5, 3.1, 3.4, 4.2-4.3, 5.1-5.5, 5.7, 7.1, 7.3-7.4, 8.5)

- Evaluated by OB-Gyn and/or Pediatric and/or Surgery Clerkship Directors and/or Assistant Clerkship Directors.
- If fail, will be given a make-up assignment
- Failure of or to complete make-up assignment will result in loss of Honors.

Delivery Room Simulation -- (Pass/Fail) (PGO 1.1, 1.4-1.6, 3.3, 4.1-4.3, 5.3, 5.7, 7.3, 8.1, 8.5)

- If fail, must re-do it or complete alternate activity to the satisfaction of the faculty or their designee.
- If excused absence – alternate activity will be given.
- Must pass to complete Clerkship requirements.

Mock RCA - (Pass/Fail) (PGO 2.5, 3.1-3.3, 3.5, 5.7, 6.1, 6.3-6.4, 7.3)

- Must complete activity worksheet(s) and participate in didactic activity.
- Failure to complete all components will result in failing grade
- If fail, will be given a make-up assignments.
- If excused absence – alternate activity will be given

Transparent Group OSCE/Telephone Medicine (PGO 1.1-1.2, 1.4-1.5, 1.7, 3.3, 4.1, 5.1, 7.3)

- Must complete pre-activity preparation and participate in activity.
- Failure to complete all components will result in failing grade
- If fails, will be given a make-up assignments and/or must re-do until pass.

- If excused absence – alternate activity will be given.

Professionalism Expectations:
Expected throughout the Clerkship

Educational Professionalism – including but not limited to:

- Attendance at all required educational activities, including clinical assignments, didactics, and simulations, and completion of preparation for activities.
- Complete all assignments in a timely manner.
- Appropriate cell phone and laptop/tablet use – no texting, emailing, etc. when expected to be attentive to faculty/presenter.
- Update Op-Log on at least a weekly basis
- Enter duty hours daily
- Dress and groom appropriately
- Being respectful to all those (including other students) involved in your education.

Clinical Professionalism - including but not limited to:

- Professional interactions with patients, families, and team.
- Respect for personal and professional boundaries.
- Be where you are supposed to be when you are supposed to be, and be ready to learn.
- Appropriate cell phone and laptop/tablet use
- Dress and groom appropriately

Failure to meet standards may result in “Needs improvement” as Professionalism competency grade and result in being ineligible for Honors as final grade. Repeated lapses may result in failure of Clerkship.

Miscellaneous:

Deaths during medical encounters are infrequent but can happen. The death of a child is a tragic event. In the event of a death during your Clerkship, please notify the Clerkship Director and Coordinator. The Clerkship Director should debrief you about the experience and will monitor you going forward.

Please keep copies or photos of all assignments you hand in.

Readings:

Caring for the Hospitalized Child: A Handbook of Inpatient Medicine by AAP Section on Hospital Medicine, (Rauch, Daniel A. and Gershel, Jeffrey C., editors) 2013.

- Handed out for inpatient Wards rotation
- Must be returned at end of Wards week

El Paso Children's Antimicrobial Stewardship Handbook 2014

- Handed out for inpatient Wards rotation
- Must be returned at end of Wards week

Bright Futures: Guidelines for Health Supervision of Infants, Children, and Adolescents by AAP

- Handed out for General Pediatric Clinic rotation
- Must be returned by the end of General Pediatric Clinic rotation
- Also available as pdf in Elantra

Pretest Pediatrics, 12th edition, Yetman, Robert J. and Hormann, Mark D., 2009

- Handed out for the whole Clerkship
- Must be returned by end of Clerkship

Other resources for ILP will be uploaded on Elantra. |