

# FLORIDA ATLANTIC UNIVERSITY™

## Graduate Programs—NEW COURSE PROPOSAL

UGPC APPROVAL \_\_\_\_\_  
 UFS APPROVAL \_\_\_\_\_  
 SCNS SUBMITTAL \_\_\_\_\_  
 CONFIRMED \_\_\_\_\_  
 BANNER POSTED \_\_\_\_\_  
 CATALOG \_\_\_\_\_

DEPARTMENT: N/A COLLEGE: COLLEGE OF MEDICINE

**RECOMMENDED COURSE IDENTIFICATION:**  
 PREFIX BCC COURSE NUMBER 7170 LAB CODE (L or C) \_\_\_\_\_  
 (TO OBTAIN A COURSE NUMBER, CONTACT RPOLANSK@FAU.EDU)  
**COMPLETE COURSE TITLE: FAMILY AND COMMUNITY HEALTH SCIENCES  
 LONGITUDINAL INTEGRATED CLERKSHIP**

CREDITS: VARIABLE 10 TEXTBOOK INFORMATION: NA

GRADING (SELECT ONLY ONE GRADING OPTION): REGULAR \_\_\_\_\_ SATISFACTORY/UNSATISFACTORY X

**COURSE DESCRIPTION, NO MORE THAN 3 LINES:**  
 FCHS) is organized as a Longitudinal Integrated Clerkship (LIC). It has 24 instructional weeks is made up of 21 weeks of clinical experiences and didactic instruction in three graded integrated clerkships and six disciplines that are not graded, plus two weeks for assessments and one week of orienting activities

<b>PREREQUISITES*:</b> MUST HAVE SUCCESSFULLY COMPLETE ALL PREVIOUS COURSES IN THE MD PROGRAM	<b>COREQUISITES*:</b>	<b>REGISTRATION CONTROLS (MAJOR, COLLEGE, LEVEL)*:</b>
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*\* PREREQUISITES, COREQUISITES AND REGISTRATION CONTROLS WILL BE ENFORCED FOR ALL COURSE SECTIONS.*

**MINIMUM QUALIFICATIONS NEEDED TO TEACH THIS COURSE:**  
M.D. or D.O. licensure

Faculty contact, email and complete phone number: Sarah Wood, M.D., 297-4150, swood31@fau.edu	Departments and/or colleges that might be affected by the new course must be consulted and listed here. Please attach comments from each.
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<b>Approved by:</b> Department Chair: <u>Burton Henson</u> College Curriculum Chair: <u>Aya Tawfik Attar</u> College Dean: <u>Stacy Hulett</u> UGPC Chair: _____ Graduate College Dean: _____	<b>Date:</b> <u>3/12/13</u> <u>3/19/13</u> <u>3/19/13</u>	<b>ATTACHMENT CHECKLIST</b> *Syllabus (see guidelines for requirements: <a href="http://www.fau.edu/graduate/facultyandstaff/programscommittee/index.php">http://www.fau.edu/graduate/facultyandstaff/programscommittee/index.php</a> ) *Written consent from all departments affected by new course
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Email this form and syllabus to [UGPC@fau.edu](mailto:UGPC@fau.edu) one week before the University Graduate Programs Committee meeting so that materials may be viewed on the UGPC website prior to the meeting.

**FLORIDA ATLANTIC UNIVERSITY  
CHARLES E. SCHMIDT COLLEGE OF MEDICINE  
COURSE SYLLABUS**

**GENERAL INFORMATION**

**Course Number:** BCC 7170

**Credit Hours:** 10

**Prerequisites:** Enrolled in 3<sup>rd</sup> Year of MD program

**Online:** Blackboard Learning System

**Term:** All

**Course Title:** Family and Community Health Services Longitudinal Integrated Clerkship

**Course Director:** Sarah Wood, MD

**Office:** BC-55 Room 347

**Office Hours:** Tuesday 1:00 – 5:00 p.m.

**Telephone:** 297 4150

**E-Mail:** swood31@fau.edu

**COURSE DESCRIPTION**

Family and Community Health Sciences (FCHS) is organized as a Longitudinal Integrated Clerkship (LIC). It has 24 instructional weeks is made up of 21 weeks of clinical experiences and didactic instruction in three graded integrated clerkships and six disciplines that are not graded, plus two weeks for assessments and one week of orienting activities. A core developmental clinical skills and professionalism curriculum that cuts across disciplines will run throughout Year 3 in FCHS and the other LIC (Medical and Surgical Sciences) (see Overall Clerkship Objectives).

FCHS will include experiences in Obstetrics and Gynecology, Pediatrics, and Psychiatry and students will receive separate clerkship grades in these 3 disciplines. It will also include experiences in anesthesia, critical care, emergency medicine, neurology, pathology and radiology. The Community and Preventive Medicine Clerkship (Longitudinal Preceptorship) with a medicine or family medicine preceptor will occupy one half day each week in FCHS.

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## **COURSE OBJECTIVES**

### **Third Year Core Clerkship Objectives**

Reflect the core knowledge, attitudes and skills that students should be developing across all of the clerkships and clinical rotations.

#### **Medical Knowledge and Research Skills**

- be able to explain the natural history of a disease state.
- be able to appropriately interpret laboratory and imaging studies.
- be able to conduct a literature search pertaining to a clinical question.
- be able to determine the relevance and validity of a given article to a clinical question
- be able to identify how research findings would affect their clinical management of a patient

#### **Patient Centered Care**

- accurately gather, record, and present patient data.
- perform an accurate history and physical.
- accurately and concisely present patient cases to staff.
- compare the diagnostic tests available to help establish a diagnosis and the indications for use of these tests.
- generate a differential diagnosis and treatment plan.
- demonstrate the ability to develop and implement a treatment plan.
- be able to differentiate between common etiologies based on the presenting symptom.
- be able to recognize critical conditions requiring urgent evaluation that may present with a particular symptom

#### **Interpersonal and Communication Skills**

- communicate effectively with patients, families, and members of the patient care team.
- educate patients about aspects of their disease using understandable language, and communicate respectfully with patients who do not fully adhere to their treatment plan
- present patient data effectively and efficiently.
- document complete patient data in a legible manner.
- communicate and collaborate effectively with members of the care team.

#### **Lifelong Learning and Self Improvement**

- be able to identify gaps in knowledge and develop a plan for addressing them
- be able to identify sources of medical information
- be able to frame a clinical question to include the most specific patient population, intervention, and outcome

#### **Systems of Health Care Practice**

- consider cost-effectiveness in approaching the diagnostic work-up of common complaints
- communicate effectively and efficiently with consulting services.
- explain the process of coordinating quality health care including discharge planning, social services, rehabilitation, and long term care.

#### **Self Awareness and Personal Development**

- demonstrate effective problem solving skills.
- actively seek feedback and make adjustments in response to feedback.

#### **Professionalism**

- justify that decisions are made based on ethical principles.

- protect patient information as outlined by HIPAA regulations.
- demonstrate respect, empathy, and altruism.
- be committed to excellence.
- demonstrate honesty, integrity, responsibility, accountability, and reliability at all times.

### **M3 Clerkship Cultural Competency, Ethics and Service-Learning Project**

#### **Learning Objectives**

##### **1. Cultural Competency Learning Objectives:**

- A. Recognize patient's/family's (ethnomedical) concepts of health and disease & healing traditions and beliefs
- B. Recognize common challenges in cross-cultural communication, e.g., trust, power, and clashes between patient/family and physician worldviews, values & beliefs
- C. Describe factors other than biomedical - such as history, politics, reduced access, environmental, and institutional - that affect health and create inequities
- D. Demonstrate strategies to assess, manage, and reduce cross-cultural communication challenges and inequities
- E. Identify when a linguistic interpreter or cultural broker is needed and collaborate effectively with such professionals

##### **2. Ethics Learning Objectives:**

- A. Recognize common ethical issues arising in each of the core clinical clerkships, e.g., specialty ethical issues arising in pediatrics, OB-GYN/maternal-fetal care, psychiatry, surgery, internal medicine, community and family medicine, geriatrics
- B. Demonstrate clinical ethics skills of applying basic ethics principles, rules, and concepts as lenses and tools to identify and manage ethical issues in patient care
- C. Demonstrate critical reasoning and argumentation skills of constructing and defending a clinical ethical argument for case management
- D. Identify relevant laws, statutes, and regulations that also might affect case management

##### **3. Integrated Cultural Competency and Ethics Competency Learning Objectives:**

- A. Demonstrate Communication Skills of taking a Cultural & Ethics History, and Eliciting associated Value Data, from the patient (and family/community as necessary)
- B. Demonstrate Communication Skills of eliciting patient preferences and responding appropriately to patient feedback about cross-cultural and ethics issues

- C. Describe and implement models of effective cross-cultural assessment, communication, and negotiation for shared decision making upholding patient values and best clinical practices as possible

#### **4. Service-Learning Project Learning Objectives:**

Identify and implement medical student and physician paths – employing the unique power, influence, and status of the physician in society to advance social justice - to perform advocacy on behalf of underserved and vulnerable communities in Palm Beach County, specifically through the service-learning projects

#### **Grading Policy for M3**

##### Grades in the third year clerkships

Student will receive grades in the following Clerkships based on an Honors, High Satisfactory, Satisfactory, Unsatisfactory scale:

Medicine  
Surgery  
Geriatrics  
Pediatrics  
Obstetrics and Gynecology  
Psychiatry  
Community and Preventive Medicine/Longitudinal Preceptorship

Students will receive a Satisfactory/Unsatisfactory grade for each Longitudinal Integrated Clerkship.

A target will be set for a maximum of 25% Honors for each graded clerkship. This will be decided by the members of each discipline specific Clerkship Grading Committee.

##### Grading requirements

Performance in all aspects of the clerkship will be monitored. Students are required to pass all components stipulated in the clerkship syllabus in order to pass the clerkship. The clerkship grade will be determined by components that will assess medical knowledge, clinical skills, professionalism, and discipline-specific skills.

Clinical Performance Evaluation by Faculty Preceptor (Clinical skills)  
NBME Subject Examination (Medical Knowledge)  
Professionalism (attendance, patient logs, participation, communication skills)  
Presentations, Oral Exams, OSCEs and Projects (Clerkship dependent)

Performance in a clerkship that is below expectations or unsatisfactory in any of the components of the clerkship, as defined in the discipline handbook, will result in grade of “Unsatisfactory”.

##### Expectations for the assignments and projects

Clerkship Directors will determine the specific formative and summative requirements for their clerkship including write-ups, OSCE's, presentations, assignments, oral examinations etc. Determinates of the final grade in all clerkships will be clearly stated in the handbook for that discipline. Students should review the handbook for each clerkship so they understand the ways in which they will be assessed and how the final grade will be determined.

### Clinical Performance Evaluations

Evaluation forms will be completed by clinical attendings and/or faculty preceptors.

Clinical Evaluations will assess students based on the following categories:

- (1) History Taking
- (2) Physical Examination
- (3) Record Keeping
- (4) Oral Presentation
- (5) Clinical Problem Solving
- (6) Fund of Knowledge
- (7) Professional Attributes and Responsibility
- (8) Self-Improvement
- (9) Interpersonal Communication Skills (Patients and Families)
- (10) Interpersonal Communication Skills (Relations with Health Care Team)
- (11) Narrative Assessment

The achievement of educational objectives in these areas defines the successful development of the physician-in-training and occurs during the course of a student's progress in medical school and beyond.

The Clerkship Evaluation Form is located in handbook.

### Determining Final Core Clerkship Grades

All final core clerkship grades will be determined by the Grading Committee for that discipline. Further details on how grades are determined in each clerkship will be defined in that discipline's handbook. Grading Committees for each discipline will consist of the Clerkship Directors, Site Directors, and/or faculty members in that discipline. The final grade will reflect the totality of the experiences with that student. The Clerkship Directors have the authority to disregard an individual assessment based on judgment of the preponderance of the evidence. All grades for a given LIC will be reported to students no greater than six weeks after the completion of that LIC.

An **Honors** grade will be given to students for superior or outstanding achievement in all of their components for that clerkship, as determined by the Discipline Grading Committee.

Ordinarily, Honors grades will be given to no more than 25% of a class.

A **High Satisfactory** grade will be given to students with superior achievement in several, but not all components of the clerkship.

A **Satisfactory** grade will be given to students who demonstrate satisfactory achievement in all components of the clerkship.

A grade of **Unsatisfactory** will be given to students whose performance is unsatisfactory or because of important deficiencies in some or all aspects of their clerkship performance.

### Passing/Failing/Remediation policies

Students are expected to pass all of the components of the clerkship including clerkship evaluations, NBME subject exam, professionalism, and other assignments in order to pass the clerkship:

Expectations for the NBME Subject Examination in each discipline: Failure on the NBME shelf exam will result in a grade of "I" providing that performance in all other components of the clerkship is judged satisfactorily. Passing a re-examination will enable the "I" to be converted to a "P." No more than two such "I's" will be allowed during an academic year.

Students are expected to prepare independently. All examinations will be administered at FAU at the dates and times assigned in your clerkship schedule. A student must sit for all examinations as scheduled. *A student must obtain permission for an excused absence from the clerkship director* and notify the Dean for Student Affairs prior to the time for sitting for a scheduled examination. In the event of a personal emergency, the course clerkship director and the Dean for Student Affairs must be notified of the absence as soon as possible. A missed examination will be rescheduled at the discretion of the clerkship director, at a time that does not interfere with other clinical work. Unexcused absences will result in a grade of zero (0) for the missed examination.

### Criteria and Policies Regarding Failing the NBME

To pass the clerkship you must "pass" the NBME, defined as scoring at or above the 5th percentile nationally compared to first takers at a similar period of the academic year. If you fail to do so, you will receive an incomplete grade for the clerkship. You will be required to re-take the exam during one of the preferred NBME Remediation Dates, unless approved by the Clerkship Director to take it later at another time. If you fail to score at or above the 5th percentile on your second attempt, you will receive a failing grade and remediation (which may include repeating the entire clerkship) will be determined by the Clerkship Discipline Coordinator in conjunction with the Clinical Promotions Committee.

### Preferred Shelf Exam Remediation Dates

Upon notification of failing the NBME, the student must contact the LIC Director/or the Clerkship Director to set a date to retake the exam. To avoid having to study for and take the makeup exam while actively in another clerkship, the following dates have been set as preferred Shelf Exam Remediation Dates:

- The 1<sup>st</sup> Monday afternoon upon return from Winter Break
- The 1<sup>st</sup> Monday afternoon after return from Summer Break
- Two weeks after the completion of M3, prior to start of 4<sup>th</sup> year.

Ideally, the earliest one of these dates should be chosen. However, the student should have enough time to study for the exam, preferably spending one-to-two weeks of unscheduled time to do so. The

date is to be determined by the Clerkship Director, after consultation with the student, and if necessary, with the M3/M4 Committee.

### Remediation of a Failing grade

If a student fails a clerkship, remediation will be determined by the Clerkship Director in conjunction with discipline specific Clerkship Grading Committee. If remediation includes additional time in clinical experiences, the scheduling of this time will be set by the LIC Directors, after consultation with the student, the Clerkship Directors, and the student's Learning Community Advisor. Exceptions will be at the discretion of the Clerkship Director and the discipline specific Clerkship Grading Committee. If a student fails 2 clerkships within a given LIC, the student will be required to re-take the LIC in the next calendar year.

### Professionalism

Students whose professionalism prompts concerns will see that reflected in their grade for the clerkship. Major professionalism issues may result in a Fail for the clerkship regardless of clinical grades or final exam performance.

The following is a list of some of the reasons for which the clerkship director will bring student up for discussion at the Clerkship Directors meeting and the students' grade may be impacted.

- Any unexcused absences to didactic sessions or clinical duties
- Any excused or unexcused absences to orientation
- Any excused or unexcused absences to exams (including exams rescheduled for valid reasons)
- Any excused or unexcused absences to simulation exercises
- Any comment of unprofessional behavior on evaluations or otherwise reported to the clerkship director
- Late, incomplete, or unsatisfactory submission of electronic patient log reports
- Recurrent tardiness
- Any late or incomplete assignments

### Attendance Policy

Student attendance and participation in all scheduled learning sessions are important to students' academic and professional progress and ultimate success as physicians. **Attendance at all activities is mandatory.**

**For an absence to be excused, a request must be made to the Clerkship Directors. Only a Clerkship Director can excuse an absence. No missed work associated with a specific session can be made up without loss of credit for satisfactory completion unless an excused absence has been granted.**

Unexpected absences: If a student is absent unexpectedly from the scheduled daily activities of the rotation, the clerkship director and the supervising attending should be notified by phone as early as possible. If the clerkship director is unavailable, the LIC Director should be called. Failure to notify the appropriate individual will result in the absence being unexcused.



All absences will be recorded and reviewed at the monthly Clerkship Director meeting. Repeated absences from required curricular activities may result in disciplinary action, up to and including dismissal from the CESCO.

#### Monitoring Student progress/performance:

Weekly informal discussions on student progress between clerkship directors, site directors, and clinical faculty. These discussions will occur at the various clinical sites and also from 1 to 1:30 on Tuesdays at FAU prior to start of didactic afternoons.

Every two weeks the students' discipline specific patient log lists will be sent to each clerkship directors for review.

Monthly in person, email or phone communication will occur between clerkship directors/site directors and the clinical faculty and preceptors to hear how students are performing, and assure that they are meeting expectations.

Monthly clerkship directors meeting at FAU on Tuesday from 12 to 1 to officially review each student's progress and discuss curricular issues. Final monthly meeting of each LIC will be used as the grading committee meetings to discuss LIC grades for each student. The final meeting of each 6 months will be for discipline specific grading committee meetings and will be used to determine Honors /High Satisfactory/Satisfactory/Unsatisfactory grades for each clerkship.

Every 2 months an on-line evaluation form will be filled out by all clinical faculty/preceptors that will be sent to clerkship directors/LIC Directors for review. First 2 bimonthly on-line evaluations in LIC will be formative, final evaluation will be used for grading/narrative purposes.

#### Feedback to students:

Students will receive daily/weekly informal feedback from the clinical attendings and preceptors they are working with. Faculty development sessions will be used to educate faculty on how to give feedback to students in their offices and in the hospitals.

LIC Directors, Clerkship Directors, and /or designated Site Directors will meet individually every 2 months with students to give them formal feedback on their performance during the LICs. All attending evaluations, patient logs, assignments/projects, and participation in didactic sessions will be reviewed, as well as a student's own self-assessment. These meetings will occur after the on-line evaluations are received from the clinical faculty, so that this information can be reported to students and any plans for improvement/remediation can be implemented.

Students who have concerns or questions about their progress can at any time contact their clerkship director/LIC director individually to set up a meeting.

#### Student Appeal of a Grade

Students who do not feel that their summary evaluation or grade accurately reflected their performance should follow the policies defined in the FAU student handbook.

#### Direct observation of Clinical Skills:

All students are required to be observed interviewing and/or examining patients. Students must return at least three completed Direct Observation of Clinical Skills cards to the LIC director before the end

of the LIC. Any attending may complete the cards after they have observed you interact with a patient. Note that your teacher may observe part of the history, physical, creating a differential diagnosis or counseling a patient. Observation of a complete H&P is time consuming and not required. As this is required, students not returning their DOCS cards will be given an incomplete for the clerkship.

### FCHS Student Report Assignment

Every student on FCHS will be assigned a date and time during the LIC didactic sessions on Tuesdays to run a 20-25 minute clinical teaching session based on a case that they have seen during their clinical experiences in FCHS. Please see guidelines below. The topic and focus of the discussion is up to the student but the LIC Director, Clerkship Directors, and Site Directors are available for help and topic suggestions. This session will be evaluated on a Satisfactory/Unsatisfactory scale and will be incorporated into the FCHS LIC grade.

1. Choose a pediatric, obstetric, gynecologic, or psychiatric clinical case that you have experienced during your clerkship in an inpatient, outpatient, or emergency department setting.
2. Prepare a teaching presentation based on your clinical case. Begin your presentation discussing the case and how it presented. Include all relevant parts of the history, physical examination, laboratory evaluation, and studies performed. You should include a complete differential diagnosis that can be discussed interactively during your presentation.
3. Use the case to make a few salient teaching points about the differential diagnosis or the final diagnosis. This is your chance to be the teacher for your colleagues!
4. In addition to focusing on the diagnosis and management of the patient's condition, you may include social, ethical, inter-professional, and health systems (safety, quality, cost) aspects that were involved in the patient's diagnosis and treatment when relevant.
5. Please include useful references and resources used in preparing your case.
6. The presentation should take between 20 and 25 minutes. Be creative! You can make your presentation with the assistance of a simple power point or with a paper handout. Please submit a copy of your presentation electronically to the LIC director and the clerkship coordinator prior to your presentation. A copy will be placed in your file and used for grading purposes.
7. This presentation will contribute in a Satisfactory/Unsatisfactory manner toward your final FCHS longitudinal integrated clerkship grade.
8. Please feel free to contact the LIC Director or Clerkship directors with any questions or concerns.

### Service-Learning Project Assignment

As a group, based upon the health need or challenge you identified, your service-learning project team will work with the NPO director to identify an appropriate method to advocate for the organization or community. For example, this might involve philanthropy/fund raising for an NPO, grant writing for an NPO, policy making, writing to or otherwise engaging legislators or politicians on their behalf, etc. Since group members will be taking different clerkships in different locations, you will do much of this work electronically (each group will have a Blackboard site). During the M3 year, all of you will be on campus every Tuesday afternoon for clerkship didactics and can plan face-to-face meetings. We estimate that you will spend a total of 5 hours during your M3 year to accomplish this task. The results of your advocacy efforts will be reported during your M4 Year with oral and poster presentations during FAU COM Medical Student Research Day.

## COURSE INFORMATION

## **Educational Hierarchy for M3 students**

Throughout the entire third year, our third year medical students will be paired with a primary care provider, either an internist or a family physician in the community, for one afternoon each week. One of the goals of this experience will be for the student to build his/her own patient panel. The student will ideally develop a relationship over time with these patients, and follow them to different clinical experiences that are part of their medical care. For example, if a student's patient is having a procedure, or going to a subspecialist visit, or has an ER visit, the student will be contacted by the patient and the student will attempt to meet the patient for these important clinical events. We hope that the student can be an advocate and liaison for their patients. Students may also develop relationships with patients they meet during their other rotations, and students may elect to follow a few of these patients in their "panel" as well. This might especially be the case when the student is involved with a patient during a new cancer diagnosis or an acute diagnosis in the ER (acute MI, GI bleed, stroke, etc.).

Students will inevitably have to juggle their other clinical and educational responsibilities to follow their patients, but most of the time students will have 2-3 half-days each week of "white space" time, during their inpatient and outpatient clinical rotations, to allow them the flexibility to follow their patients for significant clinical experiences. Students and faculty can use the "educational hierarchy" list below to guide them as to what learning experiences take priority when a conflict occurs.

"White space" time should be used to follow their patients, read about their clinical cases, or complete assignments. It is not considered "free time" or "time off"... it is time to go where the clinical learning is best!

A priority list to guide you when scheduling conflicts arise....

1. Scheduled Exams, OSCEs, and Presentations
2. Tuesday Core Didactics
3. Significant clinical event with one of your panel patients...that is a meaningful learning experience!! (E.g. your ob continuity patient is delivering)
4. Scheduled preceptor, subspecialty preceptor, geriatrics sessions. (If a session is missed it needs to be rescheduled!)
5. Clinical duties on inpatient service
6. Scheduled feedback sessions (Please attempt to reschedule if a conflict develops...)

When any scheduling conflict occurs it is the student's responsibility to notify the attending who is supervising them. If questions arise, clinical administrative coordinators, site directors, clerkship directors, and/or LIC directors should be involved to clarify when changes have been made to the student's schedule.

## **Pathology Cross-Discipline Curriculum**

Philip Robinson, MD  
Pathology Clerkship Director  
[probinso@fau.edu](mailto:probinso@fau.edu)  
561-297-2379

### Pathology Objectives

- Recognize the basic principles of cytology and surgical pathology
- Describe and recognize benign versus malignant tumors
- Interpret basic lab tests in hematology, microbiology and chemistry
- Be familiar with immunology and blood bank capabilities (transfusion service).

### Clinical Experiences

Surgical Pathology: Students will be required to see at least one frozen section in a surgical case when the surgeon requests it. The student is expected to go to the laboratory and see how the specimen is processed and review a few selected slides with the pathologist. The student's surgical attending will sign off on this requirement via MyEvaluations.com.

### Pathology Didactic Topics

- Cytology
- Peripheral blood smears

### Clinical Sites/Site Directors

Boca Raton Regional Hospital – Dr. Miguel Brito

Bethesda Memorial Hospital – Dr. Jose Olivella

Delray Medical Center – Dr. Albert Cohen

West Boca Medical Center – Dr. Daniel Scharifker

Memorial Regional Hospital – Dr. Paul Malek

Cleveland Clinic Florida – Dr. Mariana Berho

### Pathology References and Resources

Title	Author	Publisher
Henry's Clinical Diagnosis and management by laboratory methods	McPherson RA, Pincus MR	22 ed. Philadelphia: Saunders, 2011. Ebook at FAU library
Pathologic Basis of Disease	Kumar V, Abbas AK, Aster JC, Fausto N. Robbins & Cotran	8ed. Philadelphia: Saunders, 2009. Ebook available through MDConsult

### **Emergency Medicine Cross-Discipline Curriculum**

Terry Cohen, MD

Emergency Medicine Clerkship Director

[terrycohen@comcast.net](mailto:terrycohen@comcast.net)

561-239-2118

### Emergency Medicine Objectives

- Acquire basic life support skills, including the diagnosis and treatment of shock, and related basic procedural skills
- Differentiate and treat common acute problems
- Assess the undifferentiated patient

### Clinical Experiences

ER Shifts: Each student will be assigned approximately 8 ER shift from 3-11 PM and 2 weekend shifts from 7AM – 7PM in the Emergency Room at the hospital where they are assigned for their inpatient Medicine and/or Surgery clerkships.

### Didactics in FCHS

- Common Pediatric Emergencies
- Psychiatric Emergencies
- Acute Abdomen in female patient

### Clinical Sites/Site Directors

Boca Raton Regional Hospital – Dr. Terry Cohen

Bethesda Memorial Hospital – Dr. Craig Kushnir (Adult) and Dr. Sarah Wood (Pediatrics)

Delray Medical Center – Dr. Raelle/Dr. Holland (Psychiatry)

Cleveland Clinic Florida – Dr. Mazyar Rouhani

Joe DiMaggio Children’s Hospital – Dr. Soloway-Simon

West Boca Medical Center – Dr. Harari (Adult) and Dr. Vardag (Pediatrics)

### **Anesthesiology Cross-Discipline Curriculum**

George Luck, MD

Anesthesiology Clerkship Director

Critical Care Clerkship Director

Geriatrics & Palliative Care Associate Director

[gluck@fau.edu](mailto:gluck@fau.edu)

561-297-0676

### Anesthesiology Objectives

- Learn the process of preoperative assessment – ASA classifications
- Learn the various options for anesthesia
- Develop an anesthesia plan
- Learn the methods used for accessing an airway for intubation
- Learn about medications used for induction, maintenance, and emergence of anesthesia
- Learn about the anesthesia machine
- Learn about the intraoperative monitors
- Discuss perioperative complications
- Learn about postoperative pain management
- Observe some common procedures:
  - Placement of IV
  - Mask ventilation
  - Endotracheal Intubation
  - Regional anesthesia
  - Placement of a central line catheter
  - Placement of arterial lines

### Clinical Experiences

The Anesthesia clerkship consists of a 1-week rotation in the Anesthesia Department at one of the FAU surgical clerkship facilities. This rotation will provide an opportunity for students to observe and gain basic knowledge in the care of patients undergoing anesthesia. Under supervision, the students will be involved in every aspect of the patient's care.

### Didactics

- Emergencies in Anesthesiology
- OB Anesthesia and Critical Care

### Clinical Sites/Site Directors

Boca Raton Regional Hospital – Dr. Scott Levin

Delray Medical Center – Dr. Donald Keusch

Memorial Regional Hospital - Dr. Lauren Kimmel

Cleveland Clinic Florida – Dr. Ira Abels

Joe DiMaggio Children's Hospital – Dr. Sandra Kaufman and Dr. Rich Berlin

### **Radiology Cross-Discipline Curriculum**

Joseph Kleinman, MD

Radiology Clerkship Director

[Jkleinman@bocaradiology.com](mailto:Jkleinman@bocaradiology.com)

561-955-4874

### Radiology Objectives

- Learn basic interpretation skills in evaluating images of chest, breast, abdomen and musculoskeletal system, and appreciate the importance of history and clinical data in the proper interpretation of imaging exams.
- Know how to use the radiographic findings to develop a differential diagnosis and outline subsequent diagnostic work-up for common medical problems such as:
  - Bone trauma
  - Chest Pain
  - Shortness of Breath
  - Abdominal pain
  - Masses
- Review appropriate ordering of imaging, and understand the limitations of imaging, as well as the indications, contraindications, clinical impact, and cost of imaging procedures.
- Understand the basic principles of radiation exposure, safety, and radiation protection for patients and healthcare practitioners.

### Clinical Experiences

Hands on Radiology Film/Study Review – Each student must spend 4-5 hours reviewing radiographic studies with a radiologist at their clinical site during their MSS clerkship. Sessions will be scheduled for approximately one hour each week with the radiologists at their Internal Medicine Clerkship site during their inpatient medicine clerkship. General guidelines for the types of films and diagnoses to cover with the students will be provided to the Radiology Site Directors.

### Radiology Didactics in FCHS:

- Pediatric Radiology
- Ob/Gyn Imaging

### Clinical Sites/Site Directors

Boca Raton Regional Hospital – Dr. Joe Kleinman  
Bethesda Memorial Hospital – Dr. David O’Connor  
Memorial Regional Hospital – Dr. Peter Livingstone  
Cleveland Clinic Florida – Dr. Jacobi Kirsch  
Joe DiMaggio Children’s Hospital – Dr. Paul Fisher  
West Boca Medical Center – Dr. Michael Katz (Pediatrics)

### **Intensive Care Unit Cross-Discipline Curriculum**

George Luck, MD  
Anesthesiology Clerkship Director  
Critical Care Clerkship Director  
Geriatrics & Palliative Care Associate Director  
[gluck@fau.edu](mailto:gluck@fau.edu)  
561-297-0676

### Intensive Care Unit Objectives

- During the one week rotation, students will acquire knowledge, skills, and attitudes in the evaluation and management of the following, but not limited to, clinical conditions often encountered in the ICU:
  - Shock
  - Respiratory failure
  - The management of fever in the ICU
  - Sepsis
  - Renal failure
  - Acid-Base disorders

### Clinical Experience

The ICU Clerkship consists of a one-week rotation in the ICU at one of the FAU Internal Medicine clerkship facilities. This rotation will provide an opportunity for students to observe and gain basic knowledge in the care of critically ill patients. The medical students will meet with assigned intensivist each morning. The students will attend team rounds and be assigned a patient to follow. Under supervision, the students will be involved in every aspect of the patient’s care.

### Intensive Care Unit Didactics

- Shock
- ABG interpretation/ventilator management in the ICU
- Pediatric Critical Care
- OB Anesthesiology and Critical Care

### Clinical Sites/Site Directors

Boca Raton Regional Hospital – Dr. Ralph Palumbo

Bethesda Memorial Hospital – Dr. Sreedhar Chintala  
Memorial Regional Hospital – Dr. Ari Sareli  
Cleveland Clinic Florida – Dr. Franck Rahaghi  
Joe DiMaggio Children’s Hospital – Dr. Eric Exelbert (Pediatrics)  
West Boca Medical Center – Dr. Anwar Vardag (Pediatrics)

### Religious Observance (Adapted from the FAU Policy)

The College of Medicine recognizes that students, faculty and staff observe a variety of religious faiths and practices. Although many religious holidays are observed with time off, a few of the religious days of observance may be part of the academic calendar. The College respects the religious beliefs and practices of its students and seeks to accommodate them within the requirements of the academic schedule. As a result, a student who must be absent from a class requirement will not be penalized. Students who anticipate absence should notify the OSA and the supervising faculty in advance. The instructor will provide a reasonable opportunity to make up such excused absences. Any student who feels aggrieved regarding religious accommodations may present a grievance to the Director of Equal Opportunity Programs. Any such grievances will follow Florida Atlantic University’s established grievance procedure regarding alleged discrimination. The College will follow the established FAU policy regarding absences due to personal observances of religious holidays.

To review the policy, access the Leave of Absence Policy:

[http://www.fau.edu/policies/files/PM76\\_OCR.pdf](http://www.fau.edu/policies/files/PM76_OCR.pdf)

### Disability Support Services

In compliance with the Americans with Disabilities Act (ADA), students who require special accommodations due to a disability to properly execute coursework must register with the Office for Students with Disabilities (OSD) located in Boca Raton – SU133 (561-297-3880 and follow all OSD procedures.

### Code of Academic Integrity

Students at Florida Atlantic University are expected to maintain the highest ethical standards. Academic dishonesty, including cheating and plagiarism, is considered a serious breach of these ethical standards, because it interferes with the University mission to provide a high quality education in which no student enjoys an unfair advantage over any other. Academic dishonesty is also destructive of the University community, which is grounded in a system of mutual trust and places high value on personal integrity and individual responsibility. Harsh penalties are associated with academic dishonesty. For more information, see:

1. *The Policy on Academic, Professional and Behavioral Requirements and Standards governing the College of Medicine*
2. *Oath of Academic and Professional Conduct for Students in the College of Medicine*
3. *University Regulation 4.001*