PHASE 3
REQUIREMENTS & ELECTIVES
CATALOG
2020 - 2021

University of Illinois
College of Medicine at Peoria
NOTE:

Information contained herein is for informational purposes only and is subject to change without notice. Individual departments and units should be contacted for further information. Courses, faculty assignment, prerequisites, graduation or completion requirements, standards, tuition and fees, and programs may be changed from time to time. The University retains the exclusive right to judge academic proficiency and may decline to award any degree, certificate or other evidence of successful completion of a program, curriculum, or course of instruction based thereupon.

While some academic programs described herein are designed for the purpose of qualifying students for registration, certification, or licensure in a profession, successful completion of any such program in no way assures registration, certification or licensure by an agency not the University of Illinois.
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INTRODUCTION
Philosophy
Phase 3 of the Illinois Medicine Curriculum is designed to serve several important purposes with which you should be familiar as you plan for key activities in your fourth year:

Foundational competencies: Experiences in Phase 3 ensure that all of our graduates possess the foundational skills and competencies that will be expected of you as a physician. In Phase 3, you will be given the challenge of applying evidence-based medicine in complex settings, the increased clinical responsibility of sub-internship, and the opportunity to prepare for your role of resident in the Transition to Residency course.

Focus on your career choice: Phase 3 is also the time for you to make strategic choices to focus on experiences that will create a competitive application to the residency programs that best fit your specific personal goals, and that will prepare you for the career you are choosing.

Requirements
Below are details about required graduation elements in Phase 3:

- Sub-internship – 4 weeks
- Pathway electives – 12 weeks (see below)
- Open electives – 24 weeks
  (Note that electives you have taken this year in Phase 2 are included in this total.)
- Transition to Residency (TTR) Course

Many of your Phase 3 requirements, with the exception of the Transition to Residency course, may be fulfilled at a University of Illinois College of Medicine site or as away rotations as long as they meet the College’s criteria and are approved by your curriculum dean. See below for campus specific restrictions on away rotations.

Sub-Internship:
All students are required to complete a 4 week sub-internship in order to graduate. Sub-I’s are offered in Family Medicine, Surgery, Pediatrics, and Medicine.

A combined maximum number of 10 students per block will be accepted across all four sub-internships. Approval for a sub-internship must be cleared with Tammy Livingston, M4 Coordinator, in Academic Affairs prior to approval at the departmental level after optimizer runs.

Pathways:
The Illinois Medicine Curriculum has three sets of elective experiences in Phase 3 called Pathways. One is dedicated to Rural Medicine, and is created specifically for students in the Rural Medical Education program in Rockford. The Medical Pathway is designed for students who will be selecting non-surgical residencies. The Surgical Pathway includes key electives that prepare you for applying to surgical residencies. Advisors in Student Affairs will discuss the requirements associated with each Pathway and will make recommendations to you about Pathways and open electives.

The Medical Pathway: Students complete three requirements of four weeks each, totaling 12 weeks of Medical Pathway requirements:

1. Emergency Medicine or Critical Care
2. Medical Selectives
3. Core Specialty Care electives: Dermatology, Ophthalmology, Orthopedics/Sports Medicine, Otolaryngology, Plastic Surgery, Urology, Radiology

Electives within the Medical Pathway are outpatient or inpatient rotations with clinical exposure that does not have a surgical focus. Core Specialty Care electives were carefully chosen from six fields that future physicians will benefit from experiencing, but are unlikely to have studied clinically up to now.
The Surgical Pathway: Students complete three requirements of four weeks each, totaling 12 weeks of Surgical Pathway requirements:

1. Clinical Anatomy/Radiology
2. Perioperative Management
3. Critical Care or Emergency Medicine

Changing Pathways: Students' career plans often change, so keep in mind that you can change to another Pathway. Note that you must complete one of the Pathways in its entirety and cannot "mix and match" requirements from different Pathways. Also keep in mind that you do not need to choose the Pathway that matches the career you ultimately decide to pursue. Students' schedules often change during Phase 3, so your local campus registrar works closely with Phase 3 students to make schedule changes and to answer any questions students have.

Credit for Your Phase 2 Electives: Electives that you took prior to Phase 3 will be reviewed by the registrar's office and a curricular dean to confirm which electives meet Pathway requirements.

Phase 3 Plan
As you plan your year, keep these guidelines in mind:

- Phase 3 should be a well-thought-out and well-integrated educational experience.
- It should contain courses that provide appropriate preparation for the chosen specialty.
- At the same time, Phase 3 is not a postgraduate year and should not be spent exclusively in the area of specialty choice. This may be a final opportunity to elect a learning experience unrelated to your future specialty.

Please note that the exact sequence of your preferred electives/courses will most likely not match your preferences. We will be using the E*Value Optimizer scheduling system, which will produce the most equitable schedule. More information and details will be provided in an informational meeting.

In general, residency directors in the major clinical fields prefer that students spend two months of their senior year in that field. It is recommended that time be divided between advanced study in the basic discipline and relevant specialties. If you are undecided about residency, two months in one field and one or two in others might be a wise choice. Most residency directors agree that students need a well-balanced fourth year, not a mini-residency.

_Students may take no more than two electives in a single subspecialty. Any more than two electives in a single subspecialty will need to be approved by Dr. Aiyer, Associate Dean for Academic Affairs._

A well-planned program will include, besides advanced and relevant specialty electives, some experiences in unrelated fields chosen to meet an interest or fill a knowledge gap. You will want to include one or more electives in areas ancillary to clinical medicine such as pathology or anesthesia, and perhaps also in ambulatory care and/or basic or applied research.

USMLE STEP 2
Plan to take two to four weeks to prepare for the USMLE Step 2 Clinical Knowledge and Clinical Skills Exams. The Site Committee on Student Promotions strongly recommends taking Step 2 CK and Step 2 CS before November 1, 2020, which would give you the opportunity to re-take the exam and get a score back before May 1 in the event that you fail your first attempt. Students, however, are strongly advised to take Step 2 CK and CS as soon as possible after the completion of the M3 year to help facilitate the ERAS application and interviews for residency. Students can take the traditional Clinical Knowledge Exam and the Step 2 Clinical Skills Exam in any order. The Clinical Skills Exam scoring is a Pass/Fail. Both Step 2 Exams must be passed to graduate. Turnaround time for posting grades should make exam scores available about four weeks following the clinical knowledge exam and eight to twelve weeks following the clinical skills exam. Documentation of a passing score on USMLE Step 2 Exams must be on file in the Office of Academic Affairs no later than April 30 in order for you to participate in the convocation ceremony.

SCHEDULE CHANGES
Once schedules have been finalized and released to the students by the registrar, students from other schools will be permitted to schedule electives here. Those students will not be "bumped" later on to accommodate changes from UICOM-P students.

It is likely that students will have schedule changes throughout Phase 3. Once away rotations get approved, and interview season begins, it is not unusual to have numerous changes to your schedule. Follow the simple process outlined below for schedule changes:

- Email the appropriate course coordinator to request the change. The most up-to-date list of coordinators can be found here: https://peoria.medicine.uic.edu/education/md-curriculum/m4/.
The course coordinator will respond to your request via email and copy the site registrar, who will then update the student’s schedule accordingly. Students should double check to be sure the registrar has been cc’d on the email so that your schedule and registration will be accurate.

**NOTE:** When doing a schedule change, students must remember to drop any course they may have in a slot where approval has been given for a different course. Schedule drops are handled the same as a schedule change.

*It is required that schedule changes be done four weeks in advance, except under extenuating circumstances, such as interview offers or away rotation approval. When requesting a schedule change inside of the four week limit, students must seek permission from the registrar.*

*Failure to add an elective correctly will result in your receiving NO credit for that elective. Failure to drop an elective correctly could lead to registration issues.* Please remember that many faculty members offering electives are volunteers; requests for schedule changes can seriously disrupt their plans, which is why a 4 week requirement for schedule changes has been implemented.

**“AWAY” ELECTIVES**

When you apply for an elective at another institution (other than a UICOM campus):

- Once student receives approval from a rotation outside of UICOMP, student must complete the approval form and provide attachments mentioned below.
- **Attach a copy of the approval letter or email from the outside institution.**
- **Attach a course description of the rotation.**
- **Attach a copy of the outside institution’s immunization requirements. Do not attached your immunizations.**
- Send the UICOMP approval form **with attachments** to the appropriate department coordinator to obtain the department Chair’s approval for the rotation. For example, a rotation in Nephrology would be sent to the Internal Medicine Coordinator.
- Once the department Chair has approved the rotation, student will send the signed form to Student Health Service to verify compliance with immunizations.
- Once Student Health Service has signed the form, student will send or bring the form with attachments to the registrar, who will obtain the signature of the academic affairs dean.

When all of the approved paperwork is in your file, you have approval to take the elective. **Failure to obtain approvals prior to taking an “away” elective may result in you not receiving credit for the experience.** The registrar will send a blank evaluation to the institution’s program coordinator when all of the approved paperwork has been received. If you wish to drop an away elective, you must contact the program and also inform the UICOM-P registrar.

*It is important that we be able to communicate with you while you are on an “away” elective. Please be sure we have a telephone or pager number to reach you.*

The Association of American Medical Colleges (AAMC) has an electronic application system for away rotations. Over 240 schools are participating in the Visiting Student Application Service (VSAS). You will be required to complete your application on line if you are applying to one of the VSAS schools (go to [https://services.aamc.org/20/vsas/](https://services.aamc.org/20/vsas/)).

**ELECTIVES AT OTHER UICOM CAMPUSES**

The registrar will notify students when electives at the Chicago and Rockford campus become available for other UICOM campuses. Once approval has been received, the UICOM Rotation Information Form must be completed. The form can be found online: [https://peoria.medicine.uic.edu/education/md-curriculum/m4/](https://peoria.medicine.uic.edu/education/md-curriculum/m4/). Instructions are below:

- In order to receive credit for a course taken at another UICOM campus, the student must complete the proper form once approval has been confirmed by that campus’ coordinator.
- This form is to be returned to the UICOMP site registrar, Loni Wenzel, via email at loniw@uic.edu, or in person at her office in Academic Affairs. The registrar will obtain the signature of the academic affairs dean.

**Student must:**

- **Attach a copy of the approval letter or email from the other campus’ coordinator.**
- **Attach a course description of the rotation.**

**INTERNATIONAL ELECTIVES**

Those considering experiences in other countries should initiate discussion with the Office of Academic Affairs and the sponsoring department beginning about the middle of the M3 year. Four to eight weeks is the usual length of such experiences. See your doctor at least 4-6 weeks before your trip to allow time for any necessary immunizations to take effect. Always check for new requirements due to outbreaks. Two good sources of information are [http://travel.state.gov/](http://travel.state.gov/) and [http://wwwnc.cdc.gov/travel/](http://wwwnc.cdc.gov/travel/)
The International Elective Approval Form must be completed, signed, and sent to the registrar upon approval of an international elective. The form can be found online: https://peoria.medicine.uic.edu/education/md-curriculum/m4/

**RESIDENCY INTERVIEWS**

Plan to schedule interviews during times when no courses are scheduled if at all possible. If you learn that you must go to an interview during the time a course is scheduled, you **must ask permission and make arrangements with the course director PRIOR to the beginning of the course or as soon as you receive the invitation. It is not acceptable to simply not show up in order to go on an interview.** You are to **ask permission** to be away from a course as necessary. As a fourth-year student, others will be counting on your participation as a member of the team providing care. In most cases you will be scheduled for activities, and course directors will have gone to considerable efforts to ensure a quality experience for you. It is **not appropriate to simply tell the course director that you will be absent.** The course director may or may not grant permission for you to be absent. You may (offer or be asked to) take extra call evenings or weekends in order to make up the time you will be away.

If you are absent for a significant amount of time from either a two-week or a four-week course, you may not receive a grade for the course, and it will not count toward the required weeks of instruction.

You may take more than the required weeks of instruction. If you receive remuneration at any time, that work will not “count” toward required weeks of instruction, nor will you be covered by the University of Illinois Malpractice Insurance. Refer to attached policy on student stipends. If, after you have completed the required weeks of instruction, you decide to seek employment (e.g., paramedic, etc.), **BE SURE THAT YOU ARE COVERED FOR MALPRACTICE INSURANCE BY YOUR EMPLOYER.**

Free periods may be scheduled throughout the year, even though you are registered for the entire year. We urge you to leave some free time to interview at postgraduate programs. Most programs will invite you to visit and interview before the end of January.

**Any time you are away from the Peoria area for more than one week, an emergency contact number should be provided to the UICOM-P Offices of Student and Academic Affairs. You should make alternative/forwarding arrangements to ensure timely receipt of mail sent to your home address or placed in your student mailbox. It is expected that you will respond promptly to emails and phone calls within 72 hours unless in a remote area that is out of range.**
<table>
<thead>
<tr>
<th>Department</th>
<th>Course #</th>
<th>Course Name</th>
<th>2 or 4 Weeks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emergency Medicine</td>
<td>352</td>
<td>Introduction to Emergency Medicine</td>
<td>4 Weeks</td>
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<tr>
<td>Emergency Medicine</td>
<td>603</td>
<td>Advanced Emergency Medicine</td>
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<tr>
<td>Pediatrics</td>
<td>654</td>
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<tr>
<td>Surgery</td>
<td>682</td>
<td>Surgical Critical Care/Trauma</td>
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### Medical Selectives

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<tr>
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<td>Family Medicine</td>
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<td>Family Medicine - UICOMP/UPH*</td>
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<td>Internal Medicine</td>
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<td>Cardiovascular Diseases</td>
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<td>Infectious Diseases</td>
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<td>Maternal Fetal Medicine*</td>
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### Core Specialty Care

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*Not in optimizer - schedule by special request only*
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**Perioperative Care**

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<td>Neurological Surgery</td>
<td>2-4 Weeks</td>
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<tr>
<td>OB/Gyn</td>
<td>638</td>
<td>Gynecology Oncology*</td>
<td>4 Weeks</td>
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<tr>
<td>OB/Gyn</td>
<td>638</td>
<td>Min. Invasive Gyn Surg &amp; Urogyn</td>
<td>4 Weeks</td>
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<tr>
<td>Surgery</td>
<td>673.3</td>
<td>Adv. Community Gen Surg</td>
<td>4 Weeks</td>
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<tr>
<td>Surgery</td>
<td>673.1</td>
<td>Advanced General Surgery</td>
<td>4 Weeks</td>
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<tr>
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<td>932</td>
<td>Advanced Thoracic Surgery</td>
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<td>Anesthesia/Pain Management</td>
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<td>946</td>
<td>GI Surgery</td>
<td>2-4 Weeks</td>
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**Anatomy and Radiology**

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<th>Course #</th>
<th>Course Name</th>
<th>2 or 4 Weeks</th>
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</thead>
<tbody>
<tr>
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<td>Advanced Anatomy</td>
<td>4 Weeks</td>
</tr>
<tr>
<td>Radiology</td>
<td>223</td>
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<tr>
<td>Radiology</td>
<td>672</td>
<td>Diagnostic Radiology</td>
<td>4 Weeks</td>
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</table>

*Not in optimizer - schedule by special request only*
Student Stipends Policy

1. Students registered with the University of Illinois College of Medicine shall not receive monetary remuneration or fringe benefits (meals, laundry, uniforms, supplies, lodging, parking, etc.) for patient services that result from their participation in the educational programs of hospitals associated with the University of Illinois College of Medicine.

2. Associated institutions cannot impose fees or other charges upon students for use of the facilities of the institution for educational purposes. Affiliation agreements define the terms of the financial reimbursement to these institutions by the College of Medicine.

3. Students shall not be reimbursed for travel or other expenses incurred in association with ongoing curricular programs of a school or the College.

4. Students of the College may receive stipends for selected programs. Payment of such stipends must be approved by the Dean of the School concerned and the Committee on Educational Policy. Policy shall not exceed those paid students in the Graduate College.

Approved by the Academic Council, June 27, 1973

Approved by GMEC: 5-2-2008
COM @ Chicago UGME Curriculum Committee
Introduction

The primary purpose of medical students involved in clinical educational experiences is to learn. As extended hours can cause fatigue and compromise the student’s ability to retain information, limitations in attendance are necessary.

Attendance Limitations on Student Assignments

The following attendance limitations are established for all clinical experiences:

1. The maximum number of required hours at clinical sites (hospital, clinic, nursing home, etc.) should not exceed 80 hours per week.
2. Students should not work longer than 16 continuous hours.
3. Night shift hours should not be required the day before administration of the end of clerkship examination.
4. Students should have an average of at least 24 continuous hours each week free of clinical responsibilities (including lectures, seminars, clinic, and rounds).
5. Students must have eight hours free of duty between scheduled duty periods.

The above restrictions do not include independent study time apart from clinical duties or optional activities in which the student voluntarily participates.

Approved by CCIA: 04 September 13
Approved by College Executive: 12 February 14
Policy for Clinical Student Documentation in the Medical Record

(adopted March 2010)

1. Introduction
   a. All clinical (M-3 and M-4) students are expected to document their evaluation of the patient in the patient’s medical record.
   b. Student medical record documentation should comply with the current and applicable payer regulations.

2. Standards
   a. The medical record should document pertinent historical, physical exam, laboratory and radiological results, assessment and care plans for the patient.
   b. The medical record serves as a means of communication between healthcare workers including students and teaching physicians.
   c. The collection of data within the medical record may be useful for the education of the student.
   d. Documentation must be consistent with contractual obligations of payers.
   e. The date of the entry and a written or electronic signature are required on every entry to the medical record.
   f. Corrections to the medical record must be clearly and accurately documented to maintain the integrity of the record and to avoid the appearance of tampering.
      i. Corrections to a student’s entry must be clearly documented by maintaining the readability of the original entry and providing the corrected information. Corrections should be dated and initialed (written or electronic) by the note’s editor.
   g. Student performance of a billable service must be performed in the physical presence of a teaching physician or resident.
      i. Students cannot be used as scribes as this does not contribute to the education of the medical student.
      ii. If a student documents a billable service, the teaching physician must verify and re-document that service.
         1. Reference to the student’s note is limited to the past medical history, family and social history, and the review of systems.
         2. The teaching physician must document the history of present illness, physical exam, assessment and plan in his/her note.
            a. Copy and paste of the student’s note into the teaching physician’s note is not permitted.
      iii. The teaching physician must be physically present for the entire billable procedure performed by a student.

3. Process
   a. Students should have full viewing rights to the medical records of those patients they are assigned.
   b. Students should see and document their findings, assessment and plans on all assigned patients on a daily basis.
   c. Templates may be used by students.
      i. Each discipline may develop a student template.
      ii. Students may use the general admission template (EPIC system).
   d. The student’s note will be documented as separate from the attending or resident.
      i. When electronic medical records are utilized, students will be assigned a unique username and password. Entries will only be made utilizing the student’s username.
      ii. Only the attending physician’s note will be utilized for billing purposes.
iii. It is recommended that disclaimer should be added to all cosigned notes by the resident or attending which states: "Student documentation is for educational purposes only. The content of this note is not utilized to guide patient care. This note has been reviewed and feedback has will be provided to the student."

e. Teaching physicians or residents should review the student’s note for accuracy.
   i. Responsibility for cosigning the note.
      1. Students assigned to the residents should have residents cosign their notes unless the service indicates otherwise.
      2. Students working directly under an attending should have the attending cosign the student’s note.
   ii. Feedback should be provided to the student either verbally or in writing.
   iii. Corrections (errors or omissions) should be appropriately documented by the reviewing the physician.

f. Student can update problem lists, educate patients, and gather information from consultants.

g. Student may not finalize orders.
   i. All student orders should be identified as “orders pending”.

University of Illinois College of Medicine at Peoria
**M4 (Phase 3) Calendar**

**Class of 2021 (AY 2020-2021)**

*Phase 2&3 requires 82 wks instruction including all required courses.*

<table>
<thead>
<tr>
<th>Dates by Week</th>
<th>58 weeks</th>
<th>Term Dates</th>
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</thead>
<tbody>
<tr>
<td>04/27/20-05/01/20</td>
<td>Block 1a</td>
<td>Summer 4/27-8/14</td>
</tr>
<tr>
<td>05/04/20-05/08/20</td>
<td>Block 1b</td>
<td>Must have minimum 6 weeks</td>
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<tr>
<td>05/11/20-05/15/20</td>
<td>Block 2a</td>
<td>instruction to qualify for financial aid.</td>
</tr>
<tr>
<td>05/18/20-05/22/20</td>
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<td>Full time in summer is 6 weeks.</td>
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<tr>
<td>05/25/20-05/29/20</td>
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<tr>
<td>06/01/20-06/05/20</td>
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<td>06/08/20-06/12/20</td>
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<tr>
<td>06/15/20-06/19/20</td>
<td>Block 4b</td>
<td>Fall 8/17-12/14</td>
</tr>
<tr>
<td>06/22/20-06/26/20</td>
<td>Block 5a</td>
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</tr>
<tr>
<td>06/29/20-07/03/20</td>
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<td>Must have minimum 6 weeks</td>
</tr>
<tr>
<td>07/06/20-07/10/20</td>
<td>Block 6a</td>
<td>instruction to qualify for financial aid.</td>
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<td>07/13/20-07/17/20</td>
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<td></td>
</tr>
<tr>
<td>07/20/20-07/24/20</td>
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<tr>
<td>07/27/20-07/31/20</td>
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</tr>
<tr>
<td>08/03/20-08/07/20</td>
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</tr>
<tr>
<td>08/10/20-08/14/20</td>
<td>Block 8b</td>
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<tr>
<td>08/17/20-08/21/20</td>
<td>Block 9a</td>
<td>Spring 1/4-4/24</td>
</tr>
<tr>
<td>08/24/20-08/28/20</td>
<td>Block 9b</td>
<td>Must have minimum 6 weeks</td>
</tr>
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<td>09/07/20-09/11/20</td>
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<td>09/21/20-09/25/20</td>
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<tr>
<td>09/28/20-10/02/20</td>
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<tr>
<td>10/05/20-10/09/20</td>
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<tr>
<td>10/12/20-10/16/20</td>
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<tr>
<td>10/19/20-10/23/20</td>
<td>Block 12c</td>
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<tr>
<td>10/26/20-10/30/20</td>
<td>Block 13a***</td>
<td>Summer term begins (approximately) 4/26/2021</td>
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<td>11/02/20-11/06/20</td>
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<td>11/09/20-11/13/20</td>
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<tr>
<td>11/16/20-11/20/20</td>
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<td>11/23/20-11/27/20</td>
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<td>11/30/20-12/04/20</td>
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<td>12/07/20-12/11/20</td>
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<td>12/14/20-12/18/20</td>
<td>Block 15d***</td>
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<td>12/21/20-12/25/20</td>
<td>Block 15e***</td>
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<tr>
<td>12/28/20-01/01/21</td>
<td>Block 15f***</td>
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**Fall Breaks:**
- 08/17-12/20
- 11/09-11/13
- 11/16-11/20
- 11/23-11/27
- 11/30-12/04
- 12/07-12/11
- 12/14-12/18
- 12/21-12/25
- 12/28-01/01

**Winter Breaks:**
- 01/04-01/08
- 01/11-01/15
- 01/18-01/22
- 01/25-01/29
- 02/01-02/05
- 02/08-02/12
- 02/15-02/19
- 02/22-02/26
- 03/01-03/05
- 03/08-03/12
- 03/15-03/19
- 03/22-03/26
- 03/29-04/02
- 04/05-04/09
- 04/12-04/16
- 04/19-04/23
- 04/26-04/30
- 05/03-05/07
- 05/10-05/14
- 05/17-05/21
- 05/24-05/28
- 05/31-06/04

* Recommended break time; courses available if interested.

**No courses available; may do a research elective (applied to Spring registration) or take the time off.

***Blocks 13a, 13b, 14a are extra blocks only for students to complete requirements under special circumstances if needed (delayed start, fail, etc.). Requirements must be completed by 06/05/21 in order to be a May grad & participate in the 2021 Match.

Class of 2021 degree date is 05/09/21.

Convocation for the Class of 2021 is the first Saturday in May of 2021.

Schedule change requests must be made via email to the appropriate department coordinator. If approved, forward approval email to Loni Wenzel, Site Registrar, at loniw@uic.edu. You can find an updated list of department coordinators here: https://peoria.medicine.uic.edu/education/md-curriculum/m4/

Phase 3 required courses & weeks: Sub-I (4), Intern Prep (2), Pathways (12). Remaining required weeks can be any electives.
# Medical Pathway Sample Schedule

**Student Name:**

**Email:**

**UIN #:**

**Class of:** 2021

## M3 YEAR

### Summer Term 4/29/19 to 8/11/19 - 220195

<table>
<thead>
<tr>
<th>Clerkship</th>
<th>Course #</th>
<th>Reg #</th>
<th>Dates</th>
<th>Wks</th>
<th>Grd</th>
<th>Notes</th>
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<tbody>
<tr>
<td>Int Med Clerk Optim</td>
<td>605</td>
<td>15611</td>
<td>P1a 4/29/19-5/10/19</td>
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<tr>
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<td>P1b 5/13/19-5/24/19</td>
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<td>P2b 6/10/19-6/21/19</td>
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<td>Cardio Diseases</td>
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<td>22126</td>
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<td>Intro to EM</td>
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<td>22125</td>
<td>1b 7/8/19-7/19/19</td>
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### Fall Term 8/12/19 to 1/3/20 - 220198

#### FALL TERM BEGINS 8/12/19

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<th>Reg #</th>
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<th>Wks</th>
<th>Grd</th>
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<td>15888</td>
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<td>3b 9/2/19-9/13/19</td>
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<td>4a 9/16/19-9/27/19</td>
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<tr>
<td>Psych Clerk Optim</td>
<td>602</td>
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<td>Brk 12/23/19-1/3/20</td>
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### Spring Term 1/6/20 to 4/24/20 - 220201 (approximate dates)

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<th>Wks</th>
<th>Grd</th>
<th>Notes</th>
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<tbody>
<tr>
<td>Med Imaging</td>
<td>361</td>
<td>41515</td>
<td>8a 2/3/20-2/14/20</td>
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<td>Mspec</td>
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<tr>
<td>Med Informatics</td>
<td>156</td>
<td>24887</td>
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<td>2</td>
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<tr>
<td>Surg Clerk Optim</td>
<td>604</td>
<td>15872</td>
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<td>9b 3/16/20-3/27/20</td>
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<td>10a 3/30/20-4/10/20</td>
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<td>10b 4/13/20-4/24/20</td>
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</table>

### Clerkships: Completed:

**Phase 2 Weeks:** 48

- Fam Med (6 weeks)
- Psych (6 weeks)
- Internal Med (8 weeks)
- Surgery (8 weeks)
- Peds (6 weeks)
- Ob/Gyn (6 weeks)
- Electives (8 weeks)

### Pathway Choice:

**Med:**

- Med EM/Crit Care 2 Intro to EM
- Med Selectives 2 Cardiology
- Med Specialty 2 Med Imaging

**Surg:**

- Surg EM/Crit Care 0
- Surg Perioperative 0
- Surg Anatomy/Rad 2 Med Imaging
# Medical Pathway Sample Schedule

**Student Name:**

**Pathway:** MEDICINE

**UIN #:**

**Class of:** 2021

## M4 YEAR

### Summer Term - 4/27/20 to 8/14/20 - 220205

<table>
<thead>
<tr>
<th>Course</th>
<th>Course Rubric</th>
<th>CRN</th>
<th>Location</th>
<th>Dates of Rotation (if not UICOM Bks)</th>
<th>Block</th>
<th>Wks</th>
<th>Grd</th>
<th>Pthwy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Neonatology (NICU)</td>
<td>654</td>
<td>15413</td>
<td>OSF</td>
<td>2a-5/25/20-6/5/20 2b-6/8/20-6/19/20</td>
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<td>EM/CC</td>
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<tr>
<td>Reserved time for Step Study</td>
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<td>3a-6/22/20-7/3/20 3b-7/6/20-7/17/20</td>
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<tr>
<td>Palliative Care</td>
<td>294</td>
<td>21468</td>
<td>OSF</td>
<td>4a-7/20/20-7/31/20 4b-8/3/20-8/14/20</td>
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<td>Dermatology</td>
<td>602</td>
<td>15370</td>
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### Fall Term - 8/17/20-12/14/20 - 220208 (Research only during 2-week Winter Break)

<table>
<thead>
<tr>
<th>Course</th>
<th>Course Rubric</th>
<th>CRN</th>
<th>Location</th>
<th>Dates of Rotation (if not UICOM Bks)</th>
<th>Block</th>
<th>Wks</th>
<th>Grd</th>
<th>Pthwy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pediatric Hem/Onc</td>
<td>123</td>
<td>21871</td>
<td>Rush U</td>
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### Spring Term - 1/4/21-4/24/21 - 220201

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<th>Wks</th>
<th>Grd</th>
<th>Pthwy</th>
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<td>21676</td>
<td>OSF</td>
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<tr>
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<td>OSF</td>
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### Summer Term - 4/26/20 to 8/9/20 - 220205 (use only if student is not able to finish requirements by 4/23/21)

|                                                                 |                           |                               |                           |                           |                           |                           |                           |                           |                           |                           |                           |                           |                           |                           |                           |                           |                           |                           |                           |
|                                                               |                           |                               |                           |                           |                           |                           |                           |                           |                           |                           |                           |                           |                           |                           |                           |                           |                           |                           |                           |
|                                                               |                           |                               |                           |                           |                           |                           |                           |                           |                           |                           |                           |                           |                           |                           |                           |                           |                           |                           |                           |

| EM or Crit Care (4 weeks)                                      | x                          | Phase 3 Weeks:               | 34                         |                           |                           |
| Radiology/Anatomy OR Medical Selectives (4 weeks)             | x                          | Phase 2 Weeks:               | 48                         |                           |                           |
| Perioperative Care OR Specialty Care (4 weeks)                | x                          |                              |                            |                           |                           |
| Sub-Internship on campus (Med, Peds, Fam Med, Surg)           | x                          |                              |                            |                           |                           |
| Intern Prep Course                                           | x                          |                              |                            |                           |                           |
| 82 Weeks for Phase 2/3                                       | x                          | TOTAL WEEKS:                 | 82                         |                           |                           |

## Surgical Pathway Sample Schedule

### M3 YEAR

**Summer Term 4/29/19 to 8/11/19 - 220195**

<table>
<thead>
<tr>
<th>Clerkship</th>
<th>Course #</th>
<th>Reg #</th>
<th>Dates</th>
<th>Wks</th>
<th>Grd</th>
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<td>604</td>
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<td>P1b 5/13/19-5/24/19</td>
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<td>P2a 5/27/19-6/7/19</td>
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<td>Cardio Diseases</td>
<td>353</td>
<td>22126</td>
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<td>Intro to EM</td>
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<td>2b 8/5/19-8/16/19</td>
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**Fall Term 8/12/19 to 1/3/20 - 220198**

**FALL TERM BEGINS 8/12/19**

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<td></td>
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<td>4a 9/16/19-9/27/19</td>
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<td>4b 9/30/19-10/11/19</td>
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<td>6a 11/25/19-12/6/19</td>
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<td>Psych Clerk Optim</td>
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**Spring Term 1/6/20 to 4/24/20 - 220201 (approximate dates)**

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<td>10b 4/13/20-4/24/20</td>
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### Clerkships: Completed:

- Fam Med (6 weeks)
- Psych (6 weeks)
- Internal Med (8 weeks)
- Surgery (8 weeks)
- Peds (6 weeks)
- Ob/Gyn (6 weeks)
- Electives (8 weeks)

### Pathway Choice: Med
- Pathway Choice: Surg

### Total: 48 weeks in Phase 2

- Pathway Choice: Med EM/Crit Care
- Pathway Choice: Surg EM/Crit Care
- Pathway Choice: Surg Perioperative
- Total: 48 weeks in Phase 2
<table>
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<tr>
<th>Course</th>
<th>Course Rubric</th>
<th>CRN</th>
<th>Location</th>
<th>Dates of Rotation (if not UICOM Blks)</th>
<th>Block</th>
<th>Wks</th>
<th>Grd</th>
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**Phase 3 Weeks:** 36  
**Phase 2 Weeks:** 48  
**TOTAL WEEKS:** 82

M3 & M4 Department Coordinators

The following departments have designated the personnel indicated to authorize schedule change requests for their area:

**Cancer Biology & Pharmacology**
- Christina Constantinidou - CBP/UICOMP - 671-3414 - cconstan@uic.edu

**Emergency Medicine and Clinical Simulation**
- Christie Perry – SFNB Rm 2620 – 655-6998 – cperry09@uic.edu
- Nancy Feltham – SFNB Rm 2620 – 624-3070 - nmf20@uic.edu

**Family & Community Medicine**
- Jodi Frasure – DFCM Suite B – 672-4593 – jfrasure@uic.edu
- Kendra Saylor-Gordon – DFCM Suite B – ksaylo3@uic.edu (RSPP Asst. Coord.)

**HSE (Advanced Anatomy, Dermatology, Pathology, etc.)**
- Debby Tucker – HSE/UICOMP – 680-8641 – dtucker3@uic.edu

**Internal Medicine**
- Jenny Doerr – SFNB Rm 5683 – 655-7733 – jjdoerr@uic.edu

**Medicine/Pediatrics**
- Erin Driscoll – SFNB Rm 5607 – 655-3863 – erind@uic.edu

**Neurology & Neurosurgery**
- Charlotte Bess – SFNB 4640 - 655-7779 - cobess@uic.edu (main contact)

**Obstetrics/Gynecology**
- Lauren Keeton – SFNB 2644 - 624-5592 – keeton2@uic.edu

**Pediatrics**
- April Day – SFNB Rm 5651 – 655-7999 – aaday1@uic.edu (M4)
- Brandon Beekman – 1800 N. Knoxville, Suite B. - 655-2587 – bbeekman@uic.edu (M3)

**Psychiatry**
- Maureen Wolfe – UPH/Methodist – Rm W716 – 671-8395 – maureenw@uic.edu

**Radiology**
- Deanna Silotto – SFNB Rm 4695 – 655-3230 – dsilotto@uic.edu

**Rehab Medicine**
- Tammy Livingston – Academic Affairs – 671-8412 – tliving@uic.edu

**Surgery**
- Dawneva Sasse – SFNB Rm 2675 – 655-2383 – dsasse@uic.edu (M4)
- Lorraine Deluhery – SFNB Rm 2686 – 655-6940 – lorraine@uic.edu (M3)
Course # (assigned by Registrar):

Away Rotation Approval Form
(Approval for an elective experience outside of UICOMP)

- Once student receives approval from a rotation outside of UICOMP, student must complete this form and provide attachments mentioned below.
- **Attach a copy of the approval letter or email from the outside institution.**
- **Attach a course description of the rotation.**
- Attach a copy of the outside institution’s immunization requirements. Do not attach your immunizations.
- Send the UICOMP approval form with attachments to the appropriate department coordinator to obtain the department Chair’s approval for the rotation. For example, a rotation in Nephrology would be sent to the Internal Medicine Coordinator.
- Once the department Chair has approved the rotation, student will send the signed form to Student Health Service to verify compliance with immunizations.
- Once Student Health Service has signed the form, student will send or bring the form with attachments to the Registrar, who will obtain the signature of the academic affairs dean.

| Student Name: |
| Title of Elective: |
| Is this rotation intended for Pathways credit? |
| Sponsoring Institution: |
| Name of Preceptor (if known): |
| Email of Preceptor (if known): |
| Name of Institution’s Coordinator: |
| Email of Institution’s Coordinator: |
| Dates of Rotation (from/to – be specific): |

**Student statement (signature required):** *I authorize release of my transcript to external schools where I am applying for a fourth-year rotation:*

| Student Signature: | Date: |

**Approval of department Chair at UICOMP (student must attach a course description and copy of approval letter):**

| Printed name of department Chair: |
| Signature of Department Chair: |
| Date Signed: |

**Approval of Director of Student Health Service at UICOMP (must attach a copy of the outside institution’s immunization requirements):**

The above student has had all immunizations, serum immune titers, or other diagnostic tests which are required by UICOMP and the external institution offering the clerkship. Students must attach current external institution requirements for verification.

| Printed name of Student Health director: |
| Signature of Department Chair: |
| Date Signed: |

**Approval of Associate Dean for Academic Affairs at UICOMP (to be obtained by Registrar upon completion of this form):**

| Printed name of Academic Affairs Dean: | Jessica Hanks, M.D. |
| Signature of Academic Affairs Dean: | Date: |
UIUCOM Rotation Information Form
(For use after receiving approval for an elective experience at UIUCOM campus that is not Peoria)

• In order to receive credit for a course taken at another UIUCOM campus, the student must complete this form once approval has been confirmed by that campus’ coordinator.

• This form is to be returned to the UIUCOMP site registrar, Loni Wenzel, via email at loniw@uic.edu, or in person at her office in Academic Affairs. The registrar will obtain the signature of the Academic Affairs dean.

Student must:

• Attach a copy of the approval letter or email from the other campus’ coordinator.
• Attach a course description of the rotation.

Please note: A blank evaluation will be sent by the site registrar to the appropriate campus coordinator to be completed on the student at the end of the rotation. The completed evaluation must be returned by the campus coordinator or preceptor directly to the site registrar. The site registrar will not accept a completed evaluation directly from a student.

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<tr>
<th>Student Name:</th>
</tr>
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<tbody>
<tr>
<td>Title of Elective:</td>
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<tr>
<td>Is this rotation intended for Pathways credit?</td>
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<td>Sponsoring Institution: University of Illinois COM – Chicago</td>
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<td>Name of Preceptor (if known):</td>
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<td>Email of Preceptor (if known):</td>
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<tr>
<td>Name of Institution’s Coordinator:</td>
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<td>Email of Institution’s Coordinator:</td>
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<td>Dates of Rotation (from/to – be specific):</td>
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Approval of Associate Dean for Academic Affairs at UIUCOMP
(to be obtained by Registrar upon completion of this form):

| Printed name of Academic Affairs Dean: Jessica Hanks, M.D. |
| Signature of Academic Affairs Dean: Date: |
International Rotation Approval Form
(Approval for an elective experience outside of UICOMP; further instructions on back of this form)

- Once student receives approval from a rotation outside of UICOMP, student must complete this form and provide attachments mentioned below.
- Attach a copy of the approval letter from the outside institution.
- Attach a course description of the rotation.
- Attach a copy of the outside institution’s immunization requirements.
- Send the UICOMP approval form with attachments to the appropriate department Coordinator to obtain the department Chair’s approval for the rotation.
- Once the department Chair has approved the rotation, student will send the signed form to Student Health Service to verify compliance with immunizations.
- Once Student Health Service has signed the form, student will send or bring the form with attachments to the Registrar.

| Student Name: | 
| --- | --- |
| Student Contact Information While Away: | 
| Title of Elective: | 
| Sponsoring Institution: | 
| Name of Preceptor (if known): | 
| Email of Preceptor (if known): | 
| Name of Institution’s Coordinator: | 
| Email of Institution’s Coordinator: | 
| Dates of Rotation (from/to – be specific): | 

Student statement (signature required): I authorize release of my transcript to external schools where I am applying for a fourth-year rotation:

Signature __________________________ Date __________________________

Approval of department Chair at UICOMP (student must attach a course description and copy of approval letter):

Printed Name of Department Chair: ________________________________________________

Signature __________________________ Date __________________________

Approval of Director of Student Health Service at UICOMP:

___Africa ___Haiti ___India ___Latin America ___US Site ___Other: __________________________

The above student has had all immunizations, serum immune titers, or other diagnostic tests which are required by UICOMP and the external institution offering the clerkship. Students must attach current external institution requirements for verification.

Signature __________________________ Date __________________________

Approval of Associate Dean for Academic Affairs at UICOMP (to be obtained by Registrar upon completion of this form):

Signature __________________________ Date __________________________
SEE YOUR DOCTOR AT LEAST 4 TO 6 WEEKS BEFORE YOUR TRIP TO ALLOW TIME FOR SHOTS TO TAKE EFFECT.

Always check for NEW requirements due to outbreaks.


<table>
<thead>
<tr>
<th>Africa (Central &amp; West)</th>
<th>Asia (East &amp; Southeast)</th>
<th>East</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hepatitis B</td>
<td>Hepatitis A or immune globulin, except to Japan</td>
<td>Hepatitis A or immune globulin</td>
</tr>
<tr>
<td>Meningococcal</td>
<td>Hepatitis B</td>
<td>Hepatitis B</td>
</tr>
<tr>
<td>Yellow fever</td>
<td>Japanese encephalitis</td>
<td>Rabies</td>
</tr>
<tr>
<td>Rabies</td>
<td>Typhoid</td>
<td>Typhoid</td>
</tr>
<tr>
<td>Typhoid</td>
<td>As needed, booster dose for</td>
<td>As needed, booster dose for</td>
</tr>
<tr>
<td>As needed, booster doses for</td>
<td>Tetanus-diphtheria, measles, and</td>
<td>Tetanus-diphtheria, measles, and</td>
</tr>
<tr>
<td>Tetanus-diphtheria, measles, and</td>
<td>one-time dose of polio vaccine</td>
<td>one-time dose of polio vaccine.</td>
</tr>
<tr>
<td>one-time dose of polio vaccine</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Caribbean</th>
<th>Southern &amp; North</th>
<th>Latin America (Central &amp; South)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hepatitis A or immune globulin</td>
<td>Hepatitis A or immune globulin</td>
<td>Hepatitis A or immune globulin</td>
</tr>
<tr>
<td>Hepatitis B</td>
<td>Hepatitis B</td>
<td></td>
</tr>
<tr>
<td>Rabies</td>
<td>Rabies</td>
<td></td>
</tr>
<tr>
<td>Typhoid</td>
<td>Typhoid</td>
<td></td>
</tr>
<tr>
<td>Yellow fever</td>
<td>As needed, booster doses for</td>
<td></td>
</tr>
<tr>
<td>As needed, booster doses for</td>
<td>Tetanus-diphtheria, measles, and</td>
<td></td>
</tr>
<tr>
<td>Tetanus-diphtheria and measles</td>
<td>one-time dose of polio vaccine</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Consider one-time dose for oral poliomyelitis vaccine or enhanced potency in activated polio vaccine if more than 5 years since primary series</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Indian (Subcontinent)</th>
<th>Health Hotline Number</th>
<th>Traveler Checklist</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hepatitis A or immune globulin</td>
<td>Toll-free 1-877-FYI-TRIP</td>
<td>Carefully follow the information for your destination.</td>
</tr>
<tr>
<td>Hepatitis B</td>
<td>Begin the vaccination process early.</td>
<td></td>
</tr>
<tr>
<td>Japanese encephalitis</td>
<td>Find a travel clinic for immunizations.</td>
<td></td>
</tr>
<tr>
<td>Rabies</td>
<td>Plan ahead if you are traveling with children or have any special needs.</td>
<td></td>
</tr>
<tr>
<td>Typhoid</td>
<td>Learn about safe food &amp; water, insect protection, and other precautions.</td>
<td></td>
</tr>
<tr>
<td>As needed, booster doses for</td>
<td>Prepare for medical emergencies and for non-medical emergencies such as crime and natural disasters.</td>
<td></td>
</tr>
<tr>
<td>Tetanus-diphtheria, measles, and</td>
<td></td>
<td></td>
</tr>
<tr>
<td>one-time does of polio vaccine</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Individualized and Research Elective Approval Form
(for individualized electives and research done outside of electives available in the UICOMP catalog)

- Student will complete Section 1 of this form.
- Student will submit this form, along with a course description to the Course Director (the preceptor that has agreed to work with the student on the individualized elective is considered the course director).
- The Course Director will sign Section 2 of this form.
- Student will submit this form and course description to the appropriate department Coordinator to obtain the department Chair/Head signature in Section 3 of this form.
- Student will return this form along with the course description to the Registrar. The Registrar will complete Section 4.
- This form should be completed at least 30 days prior to the start of the elective/research.

Section 1

<table>
<thead>
<tr>
<th>Student Name:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Title of Individualized/Research Elective:</td>
</tr>
<tr>
<td>Sponsoring Department:</td>
</tr>
<tr>
<td>Dates of Elective/Research (from/to):</td>
</tr>
</tbody>
</table>

Section 2 (signature below indicates approval)

<table>
<thead>
<tr>
<th>Printed Name of Course Director:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Signature of Course Director:</td>
</tr>
</tbody>
</table>

Section 3 (signature below indicates approval)

<table>
<thead>
<tr>
<th>Printed Name of Department Chair/Head:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Signature of Department Chair/Head:</td>
</tr>
</tbody>
</table>

Section 4 (signature below indicates approval)

<table>
<thead>
<tr>
<th>Printed Name of Associate Dean for Academic Affairs:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jessica Hanks, M.D.</td>
</tr>
<tr>
<td>Signature of Associate Dean for Academic Affairs:</td>
</tr>
</tbody>
</table>
Online Electives

Below are the electives currently offered by the University of Illinois College of Medicine by the Chicago, Peoria, and Rockford campuses. This list is subject to change and availability may be limited.

### Peoria Online Electives

<table>
<thead>
<tr>
<th>Department</th>
<th>Elective</th>
<th>Length (2 or 4 week)</th>
<th>Max Number of Students</th>
<th>Elective Director</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cancer/Bio/Pharm</td>
<td>Compassion, Resiliency, and Emotional Awareness</td>
<td>2</td>
<td>30</td>
<td>Soares</td>
</tr>
<tr>
<td>HSE</td>
<td>Community Health</td>
<td>2</td>
<td>6</td>
<td>O'Bryant</td>
</tr>
<tr>
<td>Medicine</td>
<td>IM Health Humanities</td>
<td>2</td>
<td>3</td>
<td>Vazquez-Melendez, Gina Vozenilek</td>
</tr>
<tr>
<td>Medicine</td>
<td>Survey of Medical Informatics</td>
<td>2</td>
<td>6</td>
<td>Johnson</td>
</tr>
<tr>
<td>Radiology</td>
<td>Radiology</td>
<td>4</td>
<td>-</td>
<td>Meagher</td>
</tr>
</tbody>
</table>

### Chicago Online Electives

<table>
<thead>
<tr>
<th>Department</th>
<th>Elective</th>
<th>Length (2 or 4 week)</th>
<th>Max Number of Students</th>
<th>Elective Director</th>
<th>Date 1</th>
<th>Date 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dermatology</td>
<td>Online Dermatology</td>
<td>4</td>
<td>50</td>
<td>Bain, Michelle</td>
<td>4/27-5/22</td>
<td>5/25-6/19</td>
</tr>
<tr>
<td>Psychiatry</td>
<td>Neuroscience Perspectives in Psychiatry</td>
<td>2</td>
<td>Unlimited</td>
<td>Cooper, Joey</td>
<td>5/11-5/22</td>
<td></td>
</tr>
</tbody>
</table>


### Rockford Online Electives

<table>
<thead>
<tr>
<th>Department</th>
<th>Elective</th>
<th>Length (2 or 4 week)</th>
<th>Max Number of Students</th>
<th>Elective Director</th>
<th>Date 1</th>
<th>Date 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Infectious Disease, Humanities, &amp; Ethics</td>
<td>COVID: Emerging Infectious Diseases &amp; Pandemic Planning</td>
<td>2-4</td>
<td>100</td>
<td>M. Richards, J. Jokela, K. Kirschner, E. Vazquez-Melendez, S. Pope, R. Tapping</td>
<td>4/27-5/22 (or either 2-week combination)</td>
<td>5/25 - 6/19 (or either 2-week combination)</td>
</tr>
<tr>
<td>Medical Writing</td>
<td>Wikipedia Editing for the Medical Professional</td>
<td>4</td>
<td>100</td>
<td>M. Richards, K. Wombacher, M. King</td>
<td>5/25-6/19</td>
<td>Fall Date Pending</td>
</tr>
</tbody>
</table>
Peoria Campus
Online Electives
Recognizing that we provided throughout the Respond to challenges, Become more aware of implicit biases and their impact on our behavior and emotional experiences.

Develop feelings of warm-heartedness towards an ever-widening circle of people.

Become a compassionate friend to self and others.

Prior to attending the course is required.

Reading materials will be provided during the course for discussions in class. Most reading will be done in class. No reading prior to attending the course is required.

<table>
<thead>
<tr>
<th>Address</th>
<th>Phone</th>
<th>Prerequisites</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>One Illini Drive</td>
<td>(309) 680-8628</td>
<td>Completion of Phase 2</td>
<td>UICOMP- ONLINE</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Dates Available</th>
<th>Dates Not Available</th>
<th>Duration in Weeks</th>
<th>Hours/Week</th>
</tr>
</thead>
<tbody>
<tr>
<td>Block 1a</td>
<td>Fall Break</td>
<td>2 weeks</td>
<td>40 hours/week</td>
</tr>
<tr>
<td>Winter Break</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Lectures/Seminars</th>
<th>House Staff</th>
<th>Night Call</th>
<th>Weekends</th>
<th>No. of Students</th>
</tr>
</thead>
<tbody>
<tr>
<td>Didactic lectures, reflective writing, group exercises, meditation</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>Minimum of 6 Maximum of 30</td>
</tr>
<tr>
<td>Lab</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Outpatient</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Inpatient</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Optimizer</th>
<th>Pathways</th>
<th>Visiting Students</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>No</td>
<td>No</td>
</tr>
</tbody>
</table>

NARRATIVE DESCRIPTION

This course will enable development of skills that promote emotional awareness, attention stabilization and clarity, meta-awareness, self-compassion, and compassion towards others. It will foster feelings of endearment and empathetic concern towards a wider circle of people, beyond our inner circle of friends and loved ones, to whom indifference might otherwise prevail.

Deepening our experience of common humanity, and the realization that others (our patients) are "just like me", enables the arousal of feelings of warm-heartedness, such that upon attending to someone's vulnerability, empathic concern and engaged compassion naturally arises, i.e. the aspiration to bring about some level of comfort and a growing sense of urgency to act in whatever way possible to promote some healing.

Course format: the course will include didactic sessions, reflective writing exercises, guided meditation practices, small group and whole class discussions, and development of emotional timelines based on a series of case studies that have been crafted based on actual interview s with medical students, residents, physicians/attendings, and nurses. The objective is to analyze these cases based on the concepts discussed in class to determine whether a re-appraisal may occur, a shift in view that may enable a different experience to arise, less impulsive and reactive, kinder and more discerning.

Also included in the course will be two half days of clinical service to the homeless population, in a mobile clinic setting, with the participation of a nurse and a resident, under the direction of Dr. Mary Stapel. This clinical service experience will be followed by reflective writing and small group discussions. This will provide an opportunity for the students to relate the concepts and practices learned in the course with their actual experience interacting with this vulnerable patient population. An important goal will be to assess the impact that a more intentional approach — with greater awareness of one's emotional state — might have on the overall experience and in the quality of the interpersonal interactions.

OBJECTIVES. At the end of this course, the student will be able to:

1. Relate to adversities with greater emotional awareness and kindness to self and others
2. Relate to patients with empathetic concern and compassion, not with empathetic distress or indifference
3. Become more aware of implicit biases and their impact on our behavior and emotional experiences
4. Respond to challenging situations with greater discernment and kindness, rather than reacting impulsively and harshly
5. Recognizing that well-being and compassion are skills that can be developed with training, and acquiring the tools — and resolving - to do so
6. Develop feelings of warm-heartedness towards an ever-widening circle of people
7. Become a compassionate friend to self and others

METHOD OF EVALUATION

Students will be expected to maintain a record of their daily practice (meditation or reflective writing), and they will be provided with a rubric to be utilized for systematic assessment of the quality of each practice. In addition, evaluation will be based on class participation and on presentations of their clinical service experience in view of the concepts discussed throughout the course.

REQUIRED READING

Reading materials will be provided during the course for discussions in class. Most reading will be done in class. No reading prior to attending the course is required.
### COMMUNITY HEALTH (ELEC 423.1)

| **Address** | UICOMP  
Dept. of HSE & Pathology  
1 Illini Dr.  
Peoria, IL 61605 | **Coordinator**  
Debby Tucker  
309-680-8641  
dtucker3@uic.edu | **Prerequisites**  
Completed Phase 1 | **Location**  
UICOMP - ONLINE |
|---|---|---|---|
| **Dates Available** | Blocks 2b, 3a, 4b, 5a  
7b, 8a, 11a, 11b  
Upon Approval | **Dates Not Available** | Blocks 1a-2a, 3b, 4a, 5b-7a,  
8b-10b, 12a-b  
Winter Break | **Duration in Weeks** | 2 | **Hours/Week** | 32 hours/week |
| **Lectures/Seminars** | With prior notice | **Lab** | no | **Outpatient** | No | **Inpatient** | No |
| **House Staff** | No | **Night Call** | No | **Weekends** | Varies | **No. of Students** | 6 (max) |
| **Optimizer** | No | **Pathways** | No | | | **Visiting Students** | No |

### NARRATIVE DESCRIPTION

This elective is designed to develop the skills of the M3 and M4 student in the management of an undifferentiated patient in the community health setting. It will provide a basic knowledge of common experience and allow them to appreciate the unique environment of the community healthcare team providing care, disposition of patients and the multiple challenges that face patients trying to access care.

Central Illinois FRIENDS is a 501(c)(3) organization located in Peoria on the campus of Unity Point Health. They offer community support for individuals living with HIV as well as transportation, rent, utilities, and emergency services. They provide free and confidential HIV and STI screenings, plus education and referral services. They participate in Get Yourself Tested Day at the local Peoria high schools by partnering with multiple community organizations to bring HIV and STI education and screening to area high school students.

Each student will be required to prepare a windshield survey based on one neighborhood of the population served by the organization. This will be a 2-3 page document to be turned in at the completion of the elective.

### OBJECTIVES

At the end of this rotation, the student will be able to:

1. Analyze your role in the community setting.
2. Interact in a professional manner with an interdisciplinary team of community healthcare workers.
3. Deliver evidence based education and quality care to the client population.
4. Identify how the social determinants of health affect the population of clients served by this organization.
5. Detect how medical physicians can become advocates for patients meeting the challenges identified by the social determinants of health.

### METHOD OF EVALUATION

1. Individual discussions with the student.
   a. Two 1:1 discussions with members of the organization during Elective
   b. One discussion with Ms. O’Bryant immediately prior to Elective (orientation)
   c. One discussion with Ms. O’Bryant at conclusion of Elective
2. Formative feedback of clinical and interviewing skills by site clinician or educator.
3. Activity/procedure log demonstrating procedures observed and performed by student in addition to community activities that the student participated in.
4. Conduct and briefly summarize 3 patient encounters/interviews.
5. Windshield survey form completed.
6. Narrative reflection (1000 words max)
7. Standard Clinical Evaluation Form to be completed by the course director.
REQUIRED READING

Reading assigned prior to or during elective:

- A Framework for Educating Health Professionals to Address the Social Determinants of Health: Chapter 2
- Windshield Survey document (resource to be provided)
- Tri-County Community Health Needs Assessment (CHNA) Community Health Improvement Plan 2016-2019
- Online phlebotomy module
- Other articles and training modules assigned depending on location of Elective

Department of Health Sciences Education

Schedule Change Authorizations:
Debby Tucker (dtucker3@uic.edu)
Health Humanities (ELEC ###)

Course Directors
Dr. Elsa Vazquez-Melendez
Gina Vozenilek, MFA, MA

Address
1 Illini Dr.
Peoria, IL 61605

Coordinator
Jenny Doerr
309-655-7733
jpdoerr@uic.edu

Prerequisites
None

Location
Online

Dates Available
All except Winter Break

Dates Not Available
Winter Break

Duration in Weeks
2

Hours/Week
30

Lectures/Seminars
Yes

Lab
No

Outpatient
No

Inpatient
No

House Staff
No

Night Call
No

Weekends
No

No. of Students
3

Optimizer
Yes

Pathways
No

Visiting Students
No

NARRATIVE DESCRIPTION

This elective focuses on the application of creative arts and humanities disciplines to discourse about human health and well-being. These “health humanities” may take many forms, from the history of medicine to medical ethics, from literature and creative writing to music, film, and the visual arts. A portion of the instruction will be dedicated to analysis and discussion of the COVID-19 pandemic through a health humanities lens. The student will survey these forms with the course director and identify a form in which to realize a personal creative project. Current and potential future academic research in health humanities will be discussed as well.

OBJECTIVES

At the end of this rotation, the student will be able to:

1. Describe the benefits and tenets of health humanities from various perspectives and applications.
2. Analyze and appraise different modalities of health humanities including writing, music, film, and the visual arts.
3. Create an artistic or analytic project that explores an experience with health or illness, especially in response.

METHOD OF EVALUATION

M4 standardized evaluation form completed by attending faculty based on the participation in course, (and/or other methods of eval)

REQUIRED READING

Verghese A. “The Importance of Being.” Health Affairs 35, no.10 (2016):1924-1927. Available at: http://content.healthaffairs.org/content/35/10/1924

Additional resources (optional)
SURVEY OF MEDICAL INFORMATICS  
(ELEC 156)  

<table>
<thead>
<tr>
<th>COURSE DIRECTORS</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Emily Johnson, MLIS</td>
<td>Carmen Howard, MLS</td>
<td>Deborah Lauseng, AMLS</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>ADDRESS</th>
<th>COORDINATOR</th>
<th>PREREQUISITES</th>
<th>LOCATION</th>
</tr>
</thead>
</table>
| One Illini Drive  
Peoria, IL | Jenny Doerr  
309-655-7733  
jdoerr@uic.edu | Passing of Step One exam & completion of one clinical clerkship | UICOM  
Peoria, IL |

<table>
<thead>
<tr>
<th>DATES AVAILABLE</th>
<th>DATES NOT AVAILABLE</th>
<th>DURATION IN WEEKS</th>
<th>HOURS/WEEK</th>
</tr>
</thead>
</table>
| Blocks 2b - 12b except as noted. | Blocks 7b-8a  
Winter Break | 2 | 25-30 |

<table>
<thead>
<tr>
<th>LECTURES/SEMINARS</th>
<th>LAB</th>
<th>OUTPATIENT</th>
<th>INPATIENT</th>
<th>NO. OF STUDENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes - online</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>3 per 2-week session</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>HOUSE STAFF</th>
<th>NIGHT CALL</th>
<th>WEEKENDS</th>
<th>VISITING STUDENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>No</td>
<td>No</td>
<td>No</td>
<td>1 per 2 week session if available. No visiting students Block XII.</td>
</tr>
</tbody>
</table>

| OPTIMIZER | PATHWAYS |  |
|-----------|----------|  |
| Yes | No |  |

NARRATIVE DESCRIPTION

Medical informatics is an interdisciplinary field that deals with resources, devices, and formalized methods for optimizing the storage, retrieval, and management of biomedical information. This course surveys information resources and management tools using a variety of instructional methods including online lectures/seminars, readings, and assessments. Assessment mechanisms include quizzes, short essays, hands-on exercises, and reflective writing. Assignments are designed to build informatics skills and for students to reflect and synthesize the impact informatics will have on their future career. This course is an asynchronous online course best suited to self-directed learners. The goal is to prepare the student for success in residency and practice by providing a foundation in medical informatics.

OBJECTIVES  
Upon completion of this elective, the student will be able to:

1. Define Medical Informatics and explain its component competencies as they relate to various roles in the practice of medicine, including clinical care, research, and lifelong learning.
2. Retrieve, appraise, and apply medical information for clinical decision-making and patient education using a variety of decision support tools and other information resources.
3. Discuss the impact of the electronic health record, government systems/resources, and “big data” on patient care, biomedical research, and practice management.
4. Define health literacy concepts and utilize them in patient education and communication.
5. Develop a personal information management plan that demonstrates basic knowledge of information technologies, tools, and resources.

METHOD OF EVALUATION  
The faculty will base their evaluation on:

1. Class participation.
2. Course quizzes, short essays, hands-on exercises, and reflective writing.
3. Timely completion of the elective.

REQUIRED READING

Readings are available on the Blackboard course site.
This course provides a broad-based introduction to the world of medical imaging. Students will be required to purchase a textbook (approximately $60.00). They will be required to read the textbook in its entirety and will be tested on the material in the book as well as lecture content. A series of formal lectures and case presentations will be presented to the students. The students will each be assigned a case that they will need to research and present to the class in PowerPoint format. The student's grade, to a large part, will be based on tests that will be given during the elective.

Students will be encouraged to attend optional clinical rotations within the Dept. of Radiology at OSF Saint Francis Medical Center: fluoroscopy, plain films, neuroradiology, interventional radiology, nuclear medicine, body imaging, radiation oncology, and pediatric radiology.

OBJECTIVES At the end of this rotation, the student will be able to:

1. Perform basic reading of chest and abdomen films.
2. Describe the appropriate use of diagnostic radiological examinations and their applications in medicine.
3. Discuss the field of medical imaging and the types of evidence that radiologists use in formulating diagnoses.

METHOD OF EVALUATION The faculty will base their evaluation on:

1. Written examinations.
2. Evaluation of performance on discussion of case presentations.
3. Attendance required at all lectures unless prior approval obtained.
4. Completion of Standard Clinical Evaluation Form by preceptor and discussion with student, if warranted.

REQUIRED READING

Chicago Campus
Online Electives
Title: Dermatology Online

Pre-Requisites: None

Purpose: During this COVID-19 pandemic when all medical student clinical rotations have been placed on hold, we are offering this online alternative dermatology course to offer excellent basic dermatology education.

Objectives:

1) Obtain a full, appropriate medical history relating to dermatologic problems
2) Perform a skillful physical exam
3) Accurately describe skin lesions using precise dermatologic language
4) Formulate a differential diagnosis
5) Construct a logical treatment plan for relieving pain, itch, disfigurement, or other suffering related to common dermatologic diagnoses

Instructional Methods:

1) LearnDerm—Visual Dx: www.visualdx.com
   This self-study dermatology education consists of 5 interactive lessons and 2 quizzes that build a solid foundation in essential terminology and improve the learner's pattern recognition skills.
2) Basic Dermatology Curriculum—American Academy of Dermatology: https://www.aad.org/education/basic-derm-curriculum
   This self-study dermatology education consists of 41 case-based dermatology courses, each followed by a quiz, covering a plethora of common dermatologic diagnoses including specific aspects of their history, clinical presentation, best morphologic description, differential diagnoses, recommended work up, and potential therapies. There are also modules detailing the skillful physical exam.
3) Students will be included in our Dermatology departmental online journal clubs, case presentations, faculty lectures, and invited guest speakers (such as the Chicago Dermatological Society monthly meeting) that occur during their rotation.
4) Students will complete the online Dermatology Exam (on Blackboard) and must pass with a score of 70% or better.

Lectures/Conferences/Faculty hours per week: potentially two to three hours/week of online journal club and/or other faculty or invited online lectures, Chicago Dermatological Society speakers, etc.

Independent Study hours per week: up to 30

Total number of hours per week: up to 33

Course Director: Dr. Michelle Bain
Course Contact: Jeanette Agustin jagust2@uic.edu

Length: 4 weeks
Credit Hours: 4

Max. Number of Students: 50
When Offered: April 27, 2020 and May 25, 2020

Resources

Suggested Texts - Principles of Dermatology—Lookingbill and Marks
Skin Disease Diagnosis & Treatment—Thomas Habif
Both of these books are available on the library database at: http://library.uic.edu and online at https://www.clinicalkey.com.
PREREQUISITES AND PLACEMENT IN THE CURRICULUM: Students must have completed their M3 Core Clerkship in Psychiatry.

PURPOSE: The primary goal of this rotation is to increase the student’s understanding of the assessment and management of patients with cognitive, emotional, and/or behavioral problems related to neurological diseases. Students will have the opportunity to participate in the care of outpatients and inpatients with complex neuropsychiatric illnesses. Students will perform cognitive and neurological examinations on the patients and will gain experience in the interpretation of neuropsychological testing, neuroimaging, and EEG (electroencephalography) results. The student will also be responsible for the presentation of a literature review on a topic of neuropsychiatric interest.

INSTRUCTIONAL FEATURES: The student will see one to two new patients per week with the attending and possibly with psychiatry residents. Students will present their patients to the attending and possibly to residents and other trainees. The settings in which patients are seen include the Neuropsychiatry Clinic, the Interdisciplinary Memory and Aging Clinic, and the hospital Neuropsychiatry Consultation Service. Patients seen will typically have cognitive, emotional, and/or behavioral problems related to neurological disorders such as epilepsy, brain tumors, multiple sclerosis, traumatic brain injury, neurodegenerative disease (e.g., Alzheimer disease, Parkinson’s disease, frontotemporal lobar degeneration), or stroke. Common cognitive problems seen in patients with brain disorders include memory impairment, inattentiveness, distractibility, difficulty with problem solving, and loss of self-monitoring skills. Mood and behavior difficulties are also frequently part of neurological disorders and depression, irritability, anger, impulsivity, inappropriate behavior, and/or apathy can be seen. Learning opportunities associated with this rotation also include the Departments of Psychiatry & Neurology and Rehabilitation Grand Rounds and smaller, treatment unit-based didactic sessions.

ADMINISTRATIVE INFORMATION:

Program Number: ELEC 659
Location: UI Health
Program Director: Joseph Cooper, MD
Coordinator: Graciela Bernal
Email: Bernal@uic.edu
Telephone: 312-996-4981
Duration: 2 weeks
Night Call: No
Weekends: No
Students Accepted: Max: 1
Housestaff Used as Faculty: No
Lectures/Conferences/Faculty Contact: Variable
Laboratory/Independent Study: Variable
Outpatient: Variable
Inpatient: Variable
Total Hours /Week: 30

Available: 4/27 and 5/25
Title: Neuroscience Perspectives in Psychiatry

Pre-Requisites: None

Purpose:
Pathophysiology is integral to clinical medicine but has historically been missing from clinical psychiatry. What is happening in our patients’ brains when they present with psychiatric symptoms? Is this a black box, too complex to ever approach? The early 20th century theories of the mind were layered with late 20th century explanations of “chemical imbalances,” based on the response of symptoms to medications, but the 21st century demands that a modern understanding of neurobiology is integrated into every aspect of psychiatric care. Neuroscience Perspectives in Psychiatry is intended as an introduction to cutting edge psychiatric neuroscience, with an emphasis on helping learners to navigate the science and to make it digestible for use with patients and their families. Neuroscience Perspectives in Psychiatry will prepare students to discuss mental health topics with the same approach as other medical models of disease/treatment relationships. This neurobiological approach can help reduce the stigma of mental illness and create a way of breaking down barriers to discussing issues often regarded as immoral, sinful, or unspeakable. This class is ideal for any students with an interest in clinical neuroscience specialties, primary care (where the largest percentage of mental health care occurs), or anyone interested in exploring the last great frontier in medicine, the brain.

Objectives:
At the end of the course the student is expected to be able to:
1. Integrate modern neuroscience perspectives into psychiatric formulation, diagnosis and treatment planning.
2. Describe the differences between a diagnostic system based on phenomenology (DSM) and one based on neurobiology, and the strengths and limitations of each.
3. Practice translating cutting-edge neuroscience into narratives that can be used to explain psychiatric illnesses to patients, families, and the public.
   ▪ Describe the information, skills, behaviors, or perspectives students will acquire through attendance and participation.
   1. Psychiatric neuroscience is approachable and can be made accessible to patients and families.
   2. Neuroscience perspectives complement (and do not contradict) other rich traditions in psychiatric formulation, such as psychotherapeutic, social, and cultural perspectives.
   3. Practice distilling the essential narrative from cutting-edge science, and applying it to patient care.
   ▪ Clearly identify the outcomes or actions students can expect to demonstrate as a result of the educational experiences.
   1. Students will become familiar with the neuroscience of common psychiatric disorders.
   2. Students will gain exposure to methods for distilling narratives from scientific articles for use with patients, families and broader audiences.
   3. Students will practice developing their own narratives for integrating modern neuroscience into mental health care and psycho-education.
   ▪ Write the learning objectives that relate to these outcomes and that reflect the content of the course.
At the end of the course the student is expected to be able to:
1. Integrate modern neuroscience perspectives into psychiatric formulation, diagnosis and treatment planning.
2. Describe the differences between a diagnostic system based on phenomenology (DSM) and one based on neurobiology, and the strengths and limitations of each.
3. Practice translating a cutting-edge neuroscience topic into a narrative that can be used to explain psychiatric illnesses to patients, families, and/or the public.

Instructional Methods:
1. Students will review a syllabus of self-study resources, primarily from the National Neuroscience Curriculum Initiative, which include educational videos, podcasts, e-learning modules, and Biological Psychiatry Clinical Commentaries (a series of peer-review published articles which use a narrative format to teach one aspect of psychiatric neuroscience). Students will be given formative questions targeting each day of self-study, and will submit responses for review to the course director.
2. Students will work in small groups to develop their own neuroscience narrative for communicating with patients, families or the lay public. Students will work in groups of 2-3 to design a succinct presentation of their neuroscience narrative on the final day of the course. Supervision will be given from the course director on the development of these narratives.
3. Live sessions with the course director to review self-directed learning, and to teach methods and examples of narrative development.

Lectures/Conferences/Faculty hours per week: 2 (faculty conference), 5 (small group work)
Independent Study hours per week: 28
Total number of hours per week: 35
Course Director: Joey Cooper
Course Contact: Graciela Bernal (bernal@uic.edu)
Length: 2 Weeks
Credit Hours: 2
Max. Number of Students: 50
When Offered: 5/11/2020
Title: Radiology Online

Pre-Requisites: None

Purpose:
In the current practice of modern medicine, imaging plays an important role in providing diagnosis, treatment, and minimally invasive interventions. The widespread use of imaging tests is also contributing to the increased burden of healthcare costs and the potential of exposing patients to unwarranted risks such as radiation. The purpose of this course is to provide an introduction to radiology, including the basic science principles underlying various imaging modalities, their appropriate use in clinical practice, and understanding of the limitations of the technology. This course is serving a particular need during the COVID outbreak because radiology is very amenable to online learning and will allow us to offer essential clinical knowledge to students working remotely.

This learning of radiology will serve as a strong knowledge foundation in diagnostic and interventional radiology, as an appropriate and necessary component of undergraduate medical education to in-training physicians in all medical specialties.

Objectives:
• Explain the functions of various subspecialties in radiology as well as the basic techniques and physics of different imaging modalities.
• List the indications and utilities of various imaging procedures in the diagnosis and management of patients. Choose the most appropriate radiologic study for workup of common clinical situations.
• State the risks of radiation and contrast media, describe imaging-related costs, and discuss limitations and alternatives of radiologic studies.
• Describe normal radiologic anatomy, point out radiologic pathology in commonly encountered problems, and identify common abnormal findings on chest and abdominal x-ray.
• Discuss the basics of point-of-care ultrasound and the basic techniques of bedside ultrasound examination.
• Justify the importance of supplying appropriate clinical history when requesting imaging studies and provide rationale for the decision to order imaging tests.

Instructional Methods:
This course is offered in two-week segments, and do not need to be taken contiguously. You must have taken weeks 1-2, or its equivalent, such as Fundamentals of Radiology, before you take week 3-4. The first two weeks will cover essential knowledge and topics in radiology, week 3 and 4 will focus on additional topics such as oncology imaging, interventional radiology topics, etc. If students already have 2 weeks of radiology previously, you can register for week 3 and 4 to get a total of 4 weeks of radiology.

Lectures/Conferences/Faculty hours per week: 7
Independent Study hours per week: 24.5
Total number of hours per week: 31.5

Course Director: Dr. Karen Xie
Course Contact: Namrata Soni (nson21@uic.edu)

Length: 4 weeks total
When Offered:  
  
Weeks 3 & 4 5/11/2020, 6/8/2020

The entire online course will be offered again in February, March, or April, exact month to be determined.
Rockford Campus
Online Electives
I. Program

**Course Title:** Emerging Infectious Diseases & Pandemic Planning  
**Department:** Health Sciences Education, Rockford 
**Offered to:** M3 and M4 students 
**Minimum/Maximum students accepted:** 1-100 
**Time of Year Offered:** This course will be offered during the spring and summer terms. 
**Number of weeks:** 2-4; A student may take weeks 1 and 2 of this course for 2 weeks of credit or all 4 weeks for 4 weeks of credit. 
**Total Credit Hours:** 2-4

II. Program Contact Information

**Site:** University of Illinois College of Medicine, all campuses (Online course) 
**Hospital:** N/A 
**Faculty Director Name:** Maureen H. Richards, PhD, Sam Pope, JD, PhD, Janet Jokela, MD, Richard Tapping, PhD, Kristi Kirschner, MD, Elsa Vazquez MD, Alfredo Mena Lora, MD 
**Email:** mhr@uic.edu, spope42@uic.edu, jokela@illinois.edu, tapping@uic.edu, kkirschn@uic.edu, eluciva@uic.edu, amenalor@uic.edu 
**Staff Coordinator:** Donna Johnson, dojohnso@uic.edu

III. Elective Overview:

**Duration of elective:** 4-8 weeks 
**Longitudinal:** No 
**Night Call:** No 
**Weekends:** No 
**Minimum/Maximum students accepted:** 1-100 
**Lectures/Conferences/Faculty hours per week:** Approximately 15 hours per week 
**Laboratory hours per week:** NA 
**Independent Study hours per week:** Approximately 15 hours per week 
**Inpatient hours per week:** NA 
**Outpatient hours per week:** NA 
**Total number of hours per week:** varies 
**Number of weeks of credit:** 4

IV. Pre-Requisites and Placement in Curriculum:

A. **For Cohorts in the Spring and Summer Terms of 2020:** 
   1. This course is open for enrollment to students in the class of 2020, 2021, and 2022 who have completed all of the Phase 1 curriculum with the exception of Block 9: Transition to Clerkships and sitting for Step 1.

B. **For all future cohorts beginning Fall of 2020:** 
   1. This course will be open for enrollment to students in Phase 2, who have successfully completed all core clerkships and all phase 3 students.

V. Participating Faculty

- **Maureen H. Richards, PhD, Assistant Dean of Medical Education & Evaluation**
- **Janet Jokela, MD, MPH, Acting Regional Dean, University of Illinois College of Medicine - Urbana**
- **Sam Pope, JD, PhD, Associate Professor University of Illinois College of Medicine Rockford**
- **Richard Tapping, PhD, Professor University of Illinois College of Medicine at Peoria**
- **Kristi L. Kirschner MD, Clinical Professor, Department of Medical Education, and Dept of Neurology and Rehabilitation Medicine, University of Illinois College of Medicine, Chicago (HIS/Health humanities subtheme lead)**
- **Elsa L Vazquez MD, FAAP, FACP HIS Theme leader, Assistant Dean of Diversity and Inclusion, Associate Professor Clinical Medicine and Pediatrics, University of Illinois College of Medicine at Peoria**
- **Alfredo Mena Loa, MD, Director of Infection Control St. Anthony’s Hospital, Assistant Professor of Medicine, University of Illinois.**
- **Other clinical, basic science, public health and health humanities & ethics faculty at University of Illinois College of Medicine as needed.**

VI. Learning Objectives

Learning Objectives are broken down by course parts. Parts 1 & 2 focus on Microbiology, Immunology, and Clinical Care of Infected patients. Parts 3 & 4 focus on Population health, Ethics & Health Humanities.

At the conclusion of Part I of this course a student will be able to:

- Explain the differences in microbiology, transmission, infectivity, and presentation between the Influenza virus and COVID-19 virus. 
- Discuss the impact of the yearly influenza season on the population.
• Compare the 1918 pandemic response to the COVID-19 pandemic response.
• Utilize personal protective equipment.
• Discuss the measures a hospital system may put in place to keep its patient's and community safe while preparing for a pandemic.
• Discuss the mechanisms by which experimental treatment options may be vetted during the early stages of a pandemic.
• The testing of potential treatment options for a patient with COVID-19.
• Participate in and evaluate the responses of an incident management team.

At the conclusion of Part II of this course a student will be able to:
• Describe the overarching public health framework, nomenclature, and taxonomy of epidemic/pandemics: eg, prevention, tracking and surveillance, public health messaging, crisis preparation and management, resource allocation and triage decisions during the various stages of a pandemic.
• Discuss the differences in population health ethics and clinical medical ethics, when and how community interests take precedence over individual rights, and the types of ethical dilemmas that health professionals will need to be prepared to negotiate during a pandemic.
• Critique the critical roles of governance and advocacy groups in managing a pandemic, and fast-tracking therapeutics and vaccines for emerging illnesses.
• Understand common themes and experiences of patients and health professionals during a pandemic (including fear, stigma, anxiety, abandonment, social isolation, moral distress) and strategies to mitigate on an individual and structural level.
• Evaluate the possible moral distress and post-traumatic stress that can result when health professionals are called to work in high risk, resource-limited clinical settings, and must make conflictual decisions that compromise their identities as persons and professionals.
• Explore the liminal role and responsibilities of being a health professions student during a pandemic and how it is similar to and different from being a layperson and a licensed treating professional.

VII. Instructional Method
For part I:
This course will be an online only course. Students will be asked to complete various online learning modules, read papers, and attend worldwide conferences offered virtually by the CDC, WHO, and CROI. Students will then meet with faculty members 1-2 times per week to discuss journal articles and scenarios. Students will be required to complete any assessments contained within online learning modules and submit up to three reflection papers during the course on data acquired during the outbreak, pandemic management, or ethical considerations.

For part II:
there will be approximately 90 mins of prep materials a day (usually short readings, online modules, narrated ppts) with 60-75 mins of virtual synchronous contact in a large group format on Monday, Wednesday and Friday of week 3, and on Monday and Wednesday for week 4 (depending on size of students we may bring into two groups)

On Tuesday and Thursday for Week 3, and Tuesday of week 4 we will have facilitated small ethics and humanities groups (size 10-12 students each) lasting 60-75 mins. These small groups will stay together for the duration of these two weeks

For the special Part II project assignment, the small groups will be broken into teams of 4-6 students, which will work together to complete one of 3 possible projects (of their choosing). For the last two days of their course, each team will do a formal presentation of their project to their fellow classmates.

VIII. Assessment
This is a Pass/Fail course. In order to pass the course students must complete all assigned online modules, attend and participate in all online discussions, submit completion certificates for any online modules for which one exists and verbally attest to completion of those for which one does not exist using a supplied survey. Students may write reflective essays during the course. For the final project in part 2 of the course the students are expected to participate in the research around a chosen problem, the development of a proposal, and presentation to their fellow students of their projects.

IX. Weekly Schedule
Students must complete all the assigned readings and online modules for a given week and attend mandatory sessions as scheduled. The schedule will vary by week.

Types of sessions offered per week:
• Journal Clubs/Paper Discussion
• Small group health humanities and ethics case discussions
• Reflection on resources
• Small group projects
Part I (weeks 1&2)
Week 1: Infectious Disease of COVID-19 and Influenza & NIMS - Sam Pope and Maureen Richards

Monday thru Thursday students will complete online modules and readings. Each day, students will be required to fill out a jotform asking them to state what they learned and what questions the modules prompted for each assignment. On Friday there will be a discussion with students across campuses on the readings and training modules they completed throughout the week. On Monday of this week students will complete the National Incident Management Training from the Emergency Management Institute. Students must submit completion certificates for each module. On Tuesday, students will complete the American College of Physicians Course, COVID-19: An ACP Physician’s Guide and Resources. Students will also begin a mini-research project using peer reviewed resources and governmental sites, to answer questions about the yearly impact of the Influenza. These questions will form the basis of a comparative discussion on Friday between Influenza and COVID. On Wednesday, students will read 5 papers published during the beginning of the COVID epidemic discussing the immune response to the virus, testing of vaccines, and life of the virus on surfaces. Students will be asked to draw conclusions from each of the papers during their daily attestation survey. On Thursday, students will again be assigned several papers on the COVID outbreak this time focusing on differences in demographics as the virus has spread across the world. Students will also be required to choose a single non-assigned publication on the COVID pandemic and share why they chose that article and what they learned from it.

The Friday discussion will be a 2-3 hour discussion using the Zoom platform to allow students to discuss in small groups and then share with the larger group. During this discussion students will share what they learned on the yearly burden of the Influenza virus from their Tuesday mini-research assignment and compare it to the rapid spread of the Coronavirus across the world which they learned about in readings and modules throughout the week. Topics which will be covered include: Tracking of disease year to year across the world, how abatement measures impact viral mutation, how the R0 can be accurately defined and what factors of the virus and human population contribute to spread of disease and demographics of severely affected patients. These discussions will lay groundwork for later discussions on prevention, screening, testing, public health, and ethics.

Week 2: Prevention of COVID-19 spread and Clinical Management of Patients with COVID-19 - Jokela, Richards, and other faculty as needed

During the second week of the course, students will discuss the general procedures behind infectious disease prevention. They will use a series of videos from Dr. Alfredo Mena, Director of Infection Control for St. Anthony Hospital. These videos will cover general principles on the most common questions asked by patients, family members, and medical staff; donning and doffing of personal protective equipment; PAPR use; what it means to be a Person Under Investigation (PUI) at home and in the clinic; Patient in-take and screening; what it means to flatten the curve; and how hospitals and communities are preparing for the surge. Students will receive readings to complete on: setting up mobile triage and testing centers and developing the clinical algorithm/steps for placing a patient on a ventilator. Students will also discuss best practices in management and treatment. This will include using readings to discuss the necessity to contact patients to ensure they are up to date on medications for chronic health conditions and identifying patients in your practice who may be high risk due to chronic health conditions. We will also discuss use of experimental medications in treating an emerging infection. This discussion will focus on identifying medications for HIV+ patients during the beginning of the AIDS epidemic and compare to the discussions surrounding the use of Hydroxychloroquine for COVID-19. Lastly, students will learn how patients are discharged from care following a COVID diagnosis. This will include best practices for patients who were under self-quarantine at home and patients who are admitted to the hospital. Students would be required to use a jotform to attest to the fact they had completed the day's assignments each day. The jotform would require that they state information they learned from the assignment as well as 2 questions they had about the assignment. These questions will form the basis for the live discussion to take place on Friday.

Part II (Week 3 and 4) Health Illness and Society
Population health, Ethics & Health Humanities

Faculty: Kristi Kirschner, Elsa Vazquez Melendez and others TBD
The HIS team will focus on integrating population health pedagogy and approaches to pandemics; concepts of justice, triage and rationing paradigms and how these often disproportionately burden already marginalized and vulnerable populations during a pandemic; the public health and clinical medical ethics frameworks and the resultant dilemmas that occur during pandemics; and common themes from various narrative descriptions of people who have acquired the infectious agent, and the health professionals and other various health team members involved in treatment and managing a pandemic crisis. The students will do reflective work on professional and personal identities, discuss the toll pandemic crises can take, as well as possible strategies to address and mitigate these. Finally the students will be asked to apply their coursework to a small group project, in which they research and create a proposal to a current COVID problem, for future epidemics/ pandemics.

Week 3
Day 1 (large group)
Public health framework, infrastructure, nomenclature, and taxonomy for epidemic/pandemics: What do clinicians need to know?
- Prevention, tracking and surveillance and the role of CDC, public health depts and the state
Day 2 (ethics small group work)
How are population health ethics and clinical medical ethics similar and different?
- When can community interests take precedence over individual rights?
- What are the types of ethical dilemmas that health professionals will need to be prepared to negotiate during a pandemic?
- Framework and resources for considering and addressing pandemic ethics dilemmas

Day 3 (large group)
Exploring the history of pandemics, and the role of government, stakeholders and advocacy groups by comparing and contrasting HIV/AIDS with COVID
- Why constitutes good governance and why is it critical? What happens when it falters?
- What role have patient advocacy groups played during HIV/AIDS and COVID?
- How are new vaccines and emerging therapeutic treatments fast-tracked during a pandemic? What parts of the health care system are involved? (FDA, NIH, etc)

Readings:
No, Mr. President, healthcare workers aren’t stealing masks. You failed them.
American affinity for high-tech innovation has left us without the gear our doctors and nurses need
https://www.washingtonpost.com/outlook/2020/03/30/low-tech-medical-equipment-saves-lives/

Day 4 (HH small group work with close reading exercises)
Identify common themes and experiences described by critical stakeholders during a pandemic (e.g., fear, stigma, anxiety, despair, abandonment, social isolation, moral distress)
- Patients
- Health care Professionals
- Policy and Triage Decision-makers

Day 5 (large group)
Evaluate the personal and professional risks and duties of health care workers during pandemics, and strategies for addressing
- What are the factors that cause risk?
  - Physical: Consider the contribution of infectious agent, equipment and resource constraints (such as PPE or inadequate capacity of beds and health professionals), lack of leadership, clear guidelines and policies; public anger
  - Emotional: moral injury, structural violence, existential despair, PTSD

Week 4
Day 1 (large group)
Theories of social justice, vulnerable populations, and the impact of pandemics on marginalized populations
- What are different theories of justice that can be considered during a pandemic?
- Who is likely to be vulnerable and why?
- What strategies and allocation schema can help mitigate and prevent worse harm to historically disenfranchised and marginalized populations?

Day 2 (ethics small groups)
What is my role? Explore the liminal role and responsibilities of being a health professional student during a pandemic and how it is similar to and different from being a layperson and a licensed treating professional

Day 3 NO CLASS: students work on finalizing their team proposals and presentations

Day 4-5 Team presentations and discussion

Team projects (PICK ONE)
1. Compare and contrast the experiences and outcomes during the COVID pandemic in two disparate countries or geographic areas in the US (such as Singapore and Italy, Washington State and Ohio, Germany and the US). Develop a proposal to address to present to the CDC to improve the response and planning for the next pandemic
- Research the timelines of infectivity and pattern of spread, testing capabilities, intervention by public health measures, government leadership, health system structures and capacities
• What strategies seemed effective and what did not? Look for evidence of cultural attitudes, health care system structures and preparation, government responses, etc
• What are guiding principles and lessons learned?
• You are doing a post-hoc analysis of COVID and must present a proposal to your public health department of what to do differently to prepare for the next pandemic. Consider guiding principles, lessons learned, etc

2. You are the head of the hospital ethics committee and you have been asked by the hospital board to develop a triage mechanism or algorithm for rationing and allocating ventilators during COVID.
   • What is your goal in triage? Research various rationing schema, their stated objectives and what metrics they use, and how effectively has triage and resource allocation been deployed during prior pandemics. What are some lessons learned?
   • How would you measure the "success" or effectiveness of the triage algorithm?
   • What does fairness, equity and justice mean in triage? Whose voices should count in deciding on the recommended schema? Would you include community members? Why or why not?
   • Who should make the final allocation decision - the clinician at the bedside or a triage committee or ethicist? What are the pros and cons for each that you are considering?
   • What are the responsibilities of healthcare systems and structures to increase capacity rather than allow "crisis" allocation decisions to occur?
   • How would you message to hospital staff and the community what mechanisms will be used in crisis triage?

3. Please discuss what populations in the US have been disproportionately affected or “vulnerable” in terms of COVID infectivity and death. Generate ideas for why this might be, and what public health policies and services you would recommend to mitigate these disproportionate burdens
   On AA men, and young people in South (higher chronic disease burden?)

Potential resources:


2. And about disproportionate burdens on young people in South (higher levels of chronic disease?)

I. Program

**Course Title:** Wikipedia for the Medical Editor  
**Department:** Health Sciences Education  
**Offered to:** M3 and M4 students  
**Minimum/Maximum students accepted:** 1-100  
**Time of Year Offered:** This course will be offered during the spring and summer terms.  
**Number of weeks:** 4  
**Total Credit Hours:** 4

II. Program Contact Information

**Site:** University of Illinois College of Medicine, all campuses (Online course)  
**Hospital:** N/A  
**Faculty Director Name:** Maureen H. Richards, PhD, Kevin Wombacher, PhD & Mitch King, MD  
**Email:** mhr@uic.edu, kwombac2@uic.edu, msking@uic.edu  
**Staff Coordinator:** Donna Johnson, dojohnso@uic.edu

III. Elective Overview:

**Duration of elective:** 4-weeks  
**Dates of Elective:** 05/25/2020 - 6/22/2020  
**Longitudinal:** No  
**Night Call:** No  
**Weekends:** No  
**Minimum/Maximum students accepted:** 1-100  
**Lectures/Conferences/Faculty hours per week:** 2 hours per week  
**Laboratory hours per week:** NA  
**Independent Study Hours per week:** Approximately 30 hours per week  
**Inpatient hours per week:** NA  
**Outpatient hours per week:** NA  
**Total number of hours per week:** varies  
**Number of weeks of credit:** 4

IV. Pre-Requisites and Placement in Curriculum

- Students must have completed all of Phase 1 curriculum with the exception of Block 9: Transition to Clerkships and sitting for Step 1 in the 19-20 academic year only.  
- If offered in future academic years, all phase 1 curricular requirements must be met.  
- If offered in future academic years, this course will be restricted to Phase 3 students or Phase 2 students who have successfully completed all core clerkships.  
- If offered in future academic years, this course will be offered longitudinally across the M4 year and should be able to be taken concurrently with other courses.

V. Participating Faculty

- Maureen H. Richards, PhD, Assistant Dean of Medical Education & Evaluation  
- Kevin Wombacher, PhD, Assistant Dean of Medical Education & Evaluation for Phase ¾ and GME

VI. Purpose

This course will be offered to third and fourth-year medical students to enhance their communication skills as it pertains to explaining complex medical conditions, treatments, and healthcare systems to non-medically trained individuals. Being able to successfully communicate complex medical information to patients is an invaluable skill for students and physicians to have. This course will help develop the ability of students to communicate with individuals who have a lower health literacy level. Students will also learn how to condense information from secondary resources into best practice guides, using systematic reviews, literature reviews, and foundation papers to update wiki-articles.

VII. Learning Objectives

1. Discuss neutrality, conflict of interest and bias avoidance in scientific writing and discussing medicine with patients and society.  
2. Identify resources that provide a broad understanding of a topic and synthesize that information to educate non-medical educated individuals on a given topic.  
3. Evaluate the importance of primary research and reliable secondary sources in continuing to educate a clinician’s practice over the course of their career.
4. Understand the influence that Wikipedia and other resources like have in managing patient expectations and knowledge of medicine.
5. Practice utilizing information from a wide variety of sources to update Wikipedia while avoiding plagiarism and close paraphrasing.
6. Discuss the difference between editing an open-access encyclopedia like Wikipedia from writing literature or systemic review.
7. Understand health literacy and how it can impact how a physician interacts with a patient.
8. Learn best practices for communicating with patients with low health literacy.

VIII. Instructional Method
This will be an online course. Students will be enrolled in the course for 4 weeks in total. During this course, students will be grouped into groups of 6 or fewer students. Students will be responsible for completing all of the Wiki-training modules. Each week students will meet with instructors online to engage in classroom discussions on the topics listed below in the weekly schedule. Students will be required to choose a page to edit or create during the first week of the block, they will then have 2 weeks to edit their page before engaging in the peer-review process. During the final week, they will respond to peer review and present what they learned during the course.

IX. Assessment
Students will be assessed by the following parameters:
- Completion of all required online training modules.
- Attendance at each of the weekly online discussion classes.
- Completion of edits made to at least 1 article per group, this will be tracked using the wiki-course dashboard and the article’s talk page.
- Completion of the peer review project, this will be tracked using the wiki-course dashboard and the article’s talk page.
- Presentation video submitted to course directors on what was learned.

X. Weekly Schedule

Students will receive their group assignments by the end of the first week. They must also each register for a Wikipedia account and share that with the course director so that they may be added to the wiki-course dashboard. Students will attend an introductory session on Monday discussing the influence of Wikipedia and open access resources and the impact they have on a patient’s relationship with the healthcare field. Students will have a Friday discussion session on sources and plagiarism.

Students must complete the following modules:
- Introduction to Wikipedia
- Wikipedia policies
- Sandboxes, talk pages, and watchlists
- Evaluating articles and sources
- How to edit: Wikicode vs. Visual Editor
- Review the rules for Health Topics

Students will work in their groups to identify which possible topics they would like to edit. The topics will be approved by the course directors. The course directors will discuss with groups why they chose their pages and what they would like to edit in it and how they plan on addressing the needs on the page. Monday’s discussion will focus on understanding content gaps and identifying them in scientific literature vs. open access resources like Wikipedia. A second discussion will occur with small groups meeting 1 group to 1 instructor to discuss their individual pages prior to writing.

Students must complete the following modules:
- Finding your article
- Choosing your article
- Adding citations
- Add to an article
- Copyedit an article
- Finalizing your topic and finding sources
- Plagiarism
- Drafting as a group
• Guide(s) for writing articles in your topic area (students need only complete the guide for their topic field)
  o Genes and Proteins
  o LGBT+ studies
  o Medicine
  o Political Science
  o Psychology
  o Science and Communication
  o Sociology

Week 3: 4/26/2020-5/1/2020  First round edits & introduction to peer review
Students will complete first-round edits on the article by Friday of this week. Students will then be told to review the work of another group using talk pages and peer review components of Wikipedia. They should complete these by Monday 4/26.
Discussion this week will focus on neutrality, notability of research and articles, and avoiding bias when editing and review ing.

Modules to complete:
  • Peer review and article: Guiding Framework

Week 4: 5/1/2020-5/8/2020  Completion of Edits and Presentation of work
Students will move their work from the sandbox and talk pages to the actual Wikipedia pages. Students will also record a short 5-10 minute video to be shared with the class and faulty answering the following questions:
  1. What did they learn about the Wikipedia process: what went well, what didn’t?
  2. How did the greater wiki-community impact their final product (edits deleted, reports, community changes)
  3. What they learned about communicating about medical topics using secondary sources.
  4. How these skills may impact their ability to stay current during their medical careers.

Modules to complete:
  • Moving group work live
  • Contributing images and media files
  • Continue improving your article
Department of Cancer Biology & Pharmacology

Chair: Marcelo Bento Soares, Ph.D.

Schedule Change Authorizations:
Christina Constantinidou cconstan@uic.edu
**Compassion, Resilience and Emotional Awareness Training for Healthcare Professionals**  
**(ELEC 450)**

<table>
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<tr>
<th>Address</th>
<th>Phone</th>
<th>Prerequisites</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>One Illini Drive</td>
<td>(309) 680-8628</td>
<td>Completion of Phase 2</td>
<td>UICOMP</td>
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<table>
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<th>Dates Not Available</th>
<th>Duration in Weeks</th>
<th>Hours/Week</th>
</tr>
</thead>
<tbody>
<tr>
<td>Blocks 7b, 8a, 10, 12</td>
<td>All other blocks Fall Break Winter Break</td>
<td>2 weeks</td>
<td>40 hours/week</td>
</tr>
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<th>Lectures/Seminars</th>
<th>Lab</th>
<th>Outpatient</th>
<th>Inpatient</th>
</tr>
</thead>
<tbody>
<tr>
<td>Didactic lectures, reflective writing, group exercises, meditation</td>
<td>No</td>
<td>Yes/Homeless Mobile Clinic ½ day on week 1 ½ day on week 2</td>
<td>No</td>
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<th>Night Call</th>
<th>Weekends</th>
<th>No. of Students</th>
</tr>
</thead>
<tbody>
<tr>
<td>No</td>
<td>No</td>
<td>No</td>
<td>Minimum of 6 Maximum of 30</td>
</tr>
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<tr>
<th>Optimizer</th>
<th>Pathways</th>
<th>Visiting Students</th>
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<tr>
<td>Yes</td>
<td>No</td>
<td>No</td>
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**NARRATIVE DESCRIPTION**

This course will enable development of skills that promote emotional awareness, attention stabilization and clarity, meta-awareness, self-compassion, and compassion towards others. It will foster feelings of endearment and empathetic concern towards a wider circle of people, beyond our inner circle of friends and loved ones, to whom indifference might otherwise prevail. Deepening our experience of common humanity, and the realization that others (our patients) are "just like me", enables the arousal of feelings of warm-heartedness, such that upon attending to someone’s vulnerability, empathic concern and engaged compassion naturally arises, i.e. the aspiration to bring about some level of comfort and a growing sense of urgency to act in whatever way possible to promote some healing.

Course format: the course will include didactic sessions, reflective writing exercises, guided meditation practices, small group and whole class discussions, and development of emotional timelines based on a series of case studies that have been crafted based on actual interviews with medical students, residents, physicians/attendings, and nurses. The objective is to analyze these cases based on the concepts discussed in class to determine whether a re-appraisal may occur, a shift in view that may enable a different experience to arise, less impulsive and reactive, kinder and more discerning.

Also included in the course will be two half days of clinical service to the homeless population, in a mobile clinic setting, with the participation of a nurse and a resident, under the direction of Dr. Mary Stapel. This clinical service experience will be followed by reflective writing and small group discussions. This will provide an opportunity for the students to relate the concepts and practices learned in the course with their actual experience interacting with this vulnerable patient population. An important goal will be to assess the impact that a more intentional approach – and with greater awareness of one’s emotional state - might have on the overall experience and in the quality of the interpersonal interactions.

**OBJECTIVES** At the end of this course, the student will be able to:

1. Relate to adversities with greater emotional awareness and kindness to self and others
2. Relate to patients with empathetic concern and compassion, not with empathetic distress or indifference
3. Become more aware of implicit biases and their impact on our behavior and emotional experiences
4. Respond to challenging situations with greater discernment and kindness, rather than reacting impulsively and harshly
5. Recognizing that well-being and compassion are skills that can be developed with training, and acquiring the tools – and resolving - to do so
6. Develop feelings of warm-heartedness towards an ever-widening circle of people
7. Become a compassionate friend to self and others

**METHOD OF EVALUATION**

Students will be expected to maintain a record of their daily practice (meditation or reflective writing), and they will be provided with a rubric to be utilized for systematic assessment of the quality of each practice. In addition, evaluation will be based on class participation and on presentations of their clinical service experience in view of the concepts discussed throughout the course.

**REQUIRED READING**

Reading materials will be provided during the course for discussions in class. Most reading will be done in class. No reading prior to attending the course is required.
CRITICAL THINKING USING THE SCIENTIFIC METHOD
(ELEC 849)

Course Directors
S. Asuthkar1, K. Fukuchi2, S. Lasley3, S. Malchenko4, K. Veeravalli5, E. Zakharian6

Address
UICOM-P
Phone
309-671-8535

Prerequisites
Completion of Phase 2
Previous lab experience

Location
Cancer Biology & Pharmacology Department

Dates Available
Flexible
Dates Not Available
Winter Break

Duration in Weeks
4-8

Hours/Week
40 hrs./week (Per One Credit Hour)

Lectures/Seminars
Yes
Lab
Yes

Outpatient
N/A

Inpatient
N/A

House Staff
N/A
Night Call
N/A

Weekends
Possible

No. of Students
Variable

Optimizer
No
Pathways
No

Visiting Students
No

NARRATIVE DESCRIPTION
This course is intended to introduce the student to the critical thinking foundations of scientific research, including developing a research proposal, formulating testable hypotheses, collecting reliable and valid data, and preparing written reports of the experimental findings. Critical thinking is intended to cultivate problem-solving skills, nurture the spirit of inquiry, and encourage individualized learning. The elective is designed to encourage expansion of knowledge and self-directed learning, essential components of the scientific research method. Also emphasized are writing and presenting skills necessary for reporting research results, important for interactions with the scientific community.

RESEARCH AREAS

- Alzheimer’s disease2
- Alzheimer’s disease and brain metabolism2
- Alzheimer gene therapy2
- Alzheimer’s immunotherapy2
- Brain tumor animal modeling1,4
- Endogenous regulation of inflammatory pain; role of oxytocin on TRPV15
- Epigenetic aberrations including DNA methylation, histone modifications, chromatin remodeling & non-coding cancer1
- Introduction to basic and translation research methods in CNS tumors1
- Models of neuroinflammation2
- Neuroprotection & neurological recovery after gene therapy in ischemic stroke5
- Neuroprotection & neurological recovery after stem cell therapy in ischemic stroke5
- Nervous system tumors4
- Neural stem cells (radial glia)4
- Pain perception: nociceptors6
- Pain-sensing TRP channels6
- Pluripotent stem cells4
- Role of immune checkpoints in tumor microenvironment & novel immunotherapy approaches to treat cancer1
- Role of TRPM8 in prostate cancer6
- Role of testosterone-receptor TRPM8 in sexual and social behaviors5

OBJECTIVES Upon completion of the Laboratory portion of this elective, the student will be able to:

1. Write a research proposal
2. Conduct research project
3. Write a report of the research

METHOD OF EVALUATION The faculty will base their evaluation on:

1. Periodic conferences to assess progress and discuss problem areas
2. Writing of research proposal
3. Conducting the research project
4. Written report of research project
5. Professionalism
6. Standard evaluation form
Department of Emergency Medicine

Chair: Timothy Schaefer, M.D.

Schedule Change Authorizations:

Clinical Simulation
Introduction to Emergency Medicine
Christie Perry (cperry09@uic.edu)

Advanced Emergency Medicine
Nancy Feltham (nmf20@uic.edu)
This is a non-clinical elective in clinical simulation. The Jump Trading Simulation and Education Center provides an outstanding opportunity for students interested in academic careers to participate in the use of simulation technology to improve patient safety, quality, and to reduce healthcare costs.

The use of simulation technology is steadily progressing within the medical school curriculum and is globally recognized as a major advance in medical education. Simulation has proven to be a valuable and well-accepted tool for improving patient outcomes through intensive training. Jump uses the full spectrum of simulation technologies, from computer simulations and task trainers to complex high-fidelity, whole body simulators.

Simulation provides a forum for the establishment of a high performance standard in technical and professional skills. It permits optimization of teaching and learning by matching learning environments to learner needs and it ensures a uniform learning experience that is not dependent on the serendipity of “good cases.”

10-15 hours will be spent in direct contact with simulation, obtaining mastery of key skills useful in the internship year. Students will engage in task training, standardized patient, and high fidelity simulation in the following topic areas; Emergency vascular access, Basic and Advanced Airway techniques, Informed consent, Resuscitation, and Trauma care.

There are three "Tracks" offered which the student must declare before beginning the rotation, and 10-15 hours will be spent in one of the following pursuits:

1. **Educational Track**: The student will participate in the use of simulation in the pursuit of learning objectives. There are three domains of educational practice, cognitive, psychomotor, and affective. Jump will often combine procedural skills with communication and team skills during its training sessions to access those three domains for the learner. Students in this track will create a simulation scenario (a two page description with learning objectives and measures) which address two of the three domains, targeting medical students as potential learners.

2. **Research Track**: The student will participate in an ongoing quality assurance program designed to evaluate the efficacy of a simulation-based intervention. Jump maintains a portfolio of ongoing quality assurance programs, all of which are tied to key quality and safety goals within the clinical space. Students in this track will produce a two page write up of their findings.

3. **Innovation Track**: The student will participate in the creation of synthetic tissue analogs for a diagnostic or procedural training device. Jump is continuously producing prototypes for training devices using 3-D printing and CAD modeling techniques. Jump maintains a staff with several Bio-Medical Engineers who will facilitate this work. Students in this track will produce or refine a prototype training device.

**OBJECTIVES**

Upon completion of this elective, the student will be able to:

1. Describe the process of mastery training for procedural competency.
2. Demonstrate the ability to integrate quality and safety goals into clinical education.
3. Demonstrate competency in the listed procedural and clinical skills.
4. Contribute meaningfully to education, research, or innovation in clinical simulation.
**INTRODUCTION TO EMERGENCY MEDICINE (ELEC 352)**

**COURSE DIRECTOR**
Victor Chan, D.O.

<table>
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<th><strong>Location</strong></th>
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<tr>
<td>SFMC</td>
<td>Christie Perry</td>
<td>Completion of Phase 1</td>
<td>SFMC, ED</td>
</tr>
<tr>
<td></td>
<td>309-655-6998</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td><a href="mailto:cperry09@uic.edu">cperry09@uic.edu</a></td>
<td></td>
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<td>5 Hours Weekly</td>
<td>Occasional during conference</td>
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<th>Visiting Students</th>
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<tbody>
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<td>Yes</td>
<td>Medical and Surgical Pathways – Emergency Medicine and Critical Care</td>
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**NARRATIVE DESCRIPTION**

The main goal of this course is to develop the skills of the M3/M4 student in the diagnosis and management of an undifferentiated patient in an emergency department setting. This course will allow the student to experience and appreciate the unique environment of the ED in the context of providing care, disposition of patients, and the multiple challenges that face patients trying to access care. Students will staff directly with senior emergency medicine residents to help sharpen their history and physical exam skills as well as develop assessment and plan for workup of various patients.

**OBJECTIVES**

Upon completion of this elective, the student will be able to:
1. Formulate a differential diagnosis for various complaints from emergency department patients.
2. Discuss the approach and management of common medical emergencies.
3. Improve skills at performing various procedures including: IV insertion, EKG, Foley insertion, NG/OG insertion, splinting, wound evaluation and preparation.
4. Demonstrate effective communication skills with patients, their families, and ED physicians and nurses.
5. Demonstrate a fund of knowledge level commensurate with M3/M4 level.

**METHOD OF EVALUATION**

The faculty will base their evaluation on:
1. Final exam (approximately 30% of grade).
2. Direct observation of clinical skills by faculty and senior residents (approximately 70% of grade).
3. Participation in weekly conference is mandatory.
4. Procedure log demonstrating procedures observed and performed by student.
5. Students will be given feedback and evaluation at end of each clinical shift.

**REQUIRED READING**

Reading assigned during elective

**NOTE: CONTACT FOR ELECTIVE ASSIGNMENT**

UICOMP, Department of Emergency Medicine: Christie Perry: (309) 655-6998
ADVANCED EMERGENCY MEDICINE
(ELEC 603)

Course Director
Andrew Vincent, D.O.

<table>
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<tr>
<td>SFMC</td>
<td>Nancy Feltham</td>
<td>Completion of Phase 2</td>
<td>SFMC E.D.</td>
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<tr>
<td></td>
<td>309-624-3070</td>
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<tr>
<td></td>
<td><a href="mailto:nmf20@uic.edu">nmf20@uic.edu</a></td>
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<tr>
<td>Blocks 1-7</td>
<td>Blocks 8-12</td>
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<td>With Director Approval</td>
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<td>Simulation Lab</td>
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<tr>
<td>&amp; 4 hours of didactics</td>
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<th>Visiting Students</th>
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<tbody>
<tr>
<td>No</td>
<td>Medical and Surgical Pathways – Emergency Medicine and Critical Care</td>
<td>Yes</td>
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NARRATIVE DESCRIPTION

Students who rotate through the Emergency Department assume intern level responsibility for patient care. They perform the primary evaluation for non-critical patients and assist in the management of critical patients. They work all shifts and are expected to participate in weekly didactic conferences. Additionally, there are two 2-hour didactic teaching sessions specifically for medical students during the month.

OBJECTIVES

Upon completion of this elective, the student will be able to:

1. Evaluate and initiate treatment for emergency department patients.
2. Demonstrate proficiency in selected E.D. procedures.
3. Describe an approach to, a differential diagnosis for, and a management plan for 11 common E.D. problems.
4. Demonstrate effective communication skills with patients and their families, nursing and E.D. staff, physicians, and other hospital or EMS personnel.
5. Complete EPIC electronic medical record course, and document patient data.
6. Demonstrate a fund of knowledge level commensurate with M4 level.

METHOD OF EVALUATION

The faculty will base their evaluation on:

1. Final exam testing knowledge of specific written learning objectives (approximately 1/3 of grade).
2. Direct observation of clinical skills by faculty and senior residents (approximately 1/3 of grade).
3. Participation in weekly conference is mandatory. Attendance is taken.
4. The student must complete a course evaluation.
5. A midpoint evaluation will be given for each student.
6. In addition to verbal feedback given throughout the rotation, the Standard Clinical Evaluation Form will be completed by the Course Director following the monthly Departmental Clinical Competence Committee attended by all faculty in the E.D.

NOTE: CONTACT FOR ELECTIVE ASSIGNMENT

Student must contact Christie Perry at (309) 655-6998 or cperry09@uic.edu at least 4-7 days before the start of the elective to receive assignment.
DEPARTMENT OF FAMILY & COMMUNITY MEDICINE

Chair: Kelvin Wynn, M.D.

Schedule Change Authorization:
Jodi Frasure (jfrasure@uic.edu)
(Revised 10/22/2019)
NARRATIVE DESCRIPTION:
This 4-week Family Medicine elective will expose the student to the prenatal, intrapartum, postpartum, and first outpatient follow-up care. The focus of care will include the mother, fetus and newborn. This inpatient experience will occur at UnityPoint Health Methodist though the Family Medicine Residency MNPS. The student will work with family physicians and residents delivering maternal-fetal-newborn care.

OBJECTIVES: Upon completion of this elective, the student will be able to:
1. Diagnose pregnancy after evaluating historical, physical exam, and laboratory data obtained from a female patient.
2. Identify and interpret the routine and specialized laboratory and imaging testing necessary to fully evaluate the pregnant patient throughout each stage of pregnancy.
3. Identify and apply appropriate management strategies to care for the pregnant patient.
4. Apply knowledge of pregnancy care to provide appropriate patient education to the pregnant patient.
5. Recognize the stages of labor.
6. Evaluate the patient in labor based on history, physical exam, and appropriate testing.
7. Describe obstetrical risk factors and recognize those factors in a pregnant patient.
8. Recognize the appropriate time to obtain consultation for the management of a high risk pregnant patient.
9. Perform a normal vaginal delivery.
10. Assist in forceps, vacuum, and Caesarean deliveries.
11. Evaluate and assess the newborn immediately postpartum and in the nursery.
12. Communicate with and educate the parents about the care of their newborn.
13. Evaluate the postpartum patient at her first outpatient follow-up visit.
14. Evaluate the infant at his/her first outpatient follow-up visit.
15. Employ techniques to promote family bonding after delivery.
16. Educate patients and family to initiate and maintain breastfeeding (if that is the preferred feeding method for their newborn).

METHOD OF EVALUATION: The faculty will base their evaluation on:
1. The Standard Clinical Evaluation Form.
2. Daily observation.

RECOMMENDED READING:

IMPLEMENTATION:
Students will spend most of their elective on the MNPS service.
| **Family Medicine – UICOMP/UPH**  
| (ELEC 814.2) | **Course Director**  
| | Kelvin Wynn, MD |
| **Address**  
Family Medical Center  
815 Main Street  
Peoria, IL 61602 | **Coordinator**  
Jodi Frasure  
(309) 672-4593  
jfrasure@uic.edu |
| **Prerequisites** | **Location**  
UnityPoint Health Methodist /  
UICOMP  
Family Medicine Residency |
| Completion of Phase 2 | **Dates Available**  
Only available per  
direct request |
| **Dates Not Available**  
Blocks 1, 2, 4-7,  
& Winter Break | **Duration in Weeks**  
4 |
| **Hours/Week**  
40 - 50 | **Lectures/Seminars**  
Yes |
| **Lab**  
Yes | **Outpatient**  
Yes |
| **Inpatient**  
No | **House Staff**  
Yes |
| **Night Call**  
No | **Weekends**  
No |
| **No. of Students**  
A maximum of 1 student  
per any Family Medicine  
elective per block | **Optimizer**  
No |
| **Pathways**  
Medical Pathway – Medical Selective | **Visiting Students**  
Yes |

**NARRATIVE DESCRIPTION:**
This 4-week elective will provide outpatient experience at the University of Illinois College of Medicine at Peoria Residency in Family Medicine at the UnityPoint Clinic Family Medical Center. A focus on ambulatory OB is available at outside clinics.

Ambulatory Family Medicine may be performed in outpatient settings:
1. Family Medical Center - model ambulatory care center for the residency
2. Havana OB Clinic, Havana, Illinois
3. Carver Clinic, Peoria, Illinois

**OBJECTIVES:** Upon completion of this elective, the student will be able to:
1. Appropriately manage common problems seen in an ambulatory setting.
2. Recognize the diversity of patient care responsibilities in Family Medicine.
3. Understand the principles of family medicine and their application to clinical practice.

**METHOD OF EVALUATION:** The faculty will base their evaluation on:
1. Faculty assessment of history taking and physical examination skills.
2. Assessment of ability to interpret laboratory and radiographic data.
3. Assessment of the ability to form an appropriate problem list and treatment plan.
4. Observation of interpersonal skills and patient visits.
5. Review of verbal and dictated comments made by the student regarding patient encounters.
A combined maximum number of 10 students will be accepted across all four sub-internships. Initial approval for a sub-internship must be cleared with Tammy Livingston, M4 Coordinator, in Academic Affairs prior to approval at the departmental level.

NARRATIVE DESCRIPTION:
The goal of this 4-week elective is to provide an educational experience where medical students will have direct responsibility for patient care under the supervision of the family medicine senior residents and attending physicians, including initial and follow-up assessments, diagnostic and therapeutic plans, patient education and disease prevention. Although there is a component of outpatient family medicine, this rotation prepares the student for patient-centered inpatient care. Based on their demonstrated knowledge, skills, and attitudes, students will act as “surrogate interns” with an advanced degree of independence and responsibility during the rotation in preparation for their intern year. This will help them broaden their knowledge, learn to accept responsibility and improve their professional and interpersonal skills. Except for RSPP students who have the option of completing their sub-internship at the RSPP site, the sub-internship is only offered at the Family Medicine Residency.

OBJECTIVES: Upon completion of this elective, the student will be able to:
1. Actively take responsibility for assigned patients as “surrogate interns.”
2. Perform a comprehensive, yet pertinent history and physical.
4. Develop a plan for the patient’s care which includes admit orders.
5. Formulate an evidence-based, cost efficient and ethical management strategy.
6. Write, dictate or electronically enter outpatient progress notes and admission history and physical documents.
7. Follow the patient in the office or hospital, write pertinent notes, update problem lists, and monitor lab, imaging and other diagnostic results.
8. Develop a “whole person” approach to patient care that focuses on the patient’s physical, emotional, psychological and spiritual health.
9. Demonstrate good interpersonal skills.
10. Employ skills as a member of the health care team.
11. Describe the common problems in Family Medicine and the various diagnostic and therapeutic interventions.
12. Describe the influences and importance of the family, community, occupation and psychological factors on patient care.
13. Identify appropriate times for specialty consultation and referral and arrange for that consultation.

METHOD OF EVALUATION:
The preceptor will provide ongoing, constructive evaluation and feedback of the student’s competence in taking accurate histories, performing directed examinations, making assessments, forming and following appropriate plans, and building good relationships with the patients and their families.

The faculty will base their evaluation on:
1. Daily observation.
2. The Standard Clinical Evaluation Form.
3. Sub-internship OSCE.

RECOMMENDED EDUCATIONAL AIDES:
Visual Dx https://www.visualdx.com
Dyna Med https://dynamed.com/home/about
INTERNATIONAL FAMILY MEDICINE  
(ELEC 824.5)  
Course Director  
Kelvin Wynn, MD

<table>
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<tr>
<th>Address</th>
<th>Coordinator</th>
<th>Prerequisites</th>
<th>Location</th>
</tr>
</thead>
</table>
| Family Medical Center  
815 Main Street  
Peoria, IL 61602 | Jodi Frasure  
(309) 672-4593  
jfrasure@uic.edu | International Elective  
Organization on Blackboard  
required;  
Completion of Phase 2;  
*Approval of site by Department Chair | Varies –  
all in other countries |

<table>
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*The location of this elective should be pre-approved by the Department Chair prior to making any financial commitments.  
PLAN EARLY!

NARRATIVE DESCRIPTION:
The physician in international primary care settings is required to function frequently as clinician, teacher, environmentalist, and leader of the health care team. Resources are limited, environmental hazards many, and skilled personnel few. Furthermore, mortality and morbidity are often enormous, caused by diseases that are essentially controllable through public health and environmental measures.

Developing nations often lack physicians, and the supportive paramedical disciplines and social resources upon which physicians in the United States depend. Typically, American medical students discover similarities with non-urban U.S. medical practice, where many resources for patient care are not immediately accessible. The lack of services for the emotionally or mentally ill, the blind, the deaf, and other handicaps are problems that must be faced. The medical resourcefulness required to meet community needs and the appreciation of a health structure normally invisible to American physicians can develop in an international primary care preceptorship.

Clinical experiences will cover the spectrum of semitropical or tropical medical practice, in which acute illness and the care of children and women are dominant.

This is an elective and cannot be substituted for the required clerkship in family medicine.

OBJECTIVES: Upon completion of this elective, the student will be able to:

1. Have gained perspectives on allocating scarce medical resources and setting priorities.
2. Realize the value of preventative medicine and public health interventions in international health.
3. Develop skills appropriate for use in any small town setting.
4. Recognize the importance of teamwork in health care delivery, particularly in international primary care health settings.
5. Experience the unique problems of tropical medicine and common health problems in a different culture.

METHOD OF EVALUATION: The faculty will base their evaluation on:

1. Verbal and written presentations of the student.
2. Technical procedures.
3. Case discussions.
4. Interactions between student and patients.
Department of Health Sciences Education and Pathology

Chair: Meenakshy Aiyer, M.D.

Schedule Change Authorizations:

Debby Tucker (dtucker3@uic.edu)
ADVANCED ANATOMY
(ELEC 342)

Coordinators
Debby Tucker
309-680-8641
dtucker3@uic.edu

Prerequisites
Completion of Phase 2

Location
UICOMP
JUMP
OSF

Address
UICOMP
1 Illini Drive
Peoria, IL

Dates Available
All year except Winter Break

Dates Not Available
Winter Break

Duration in Weeks
4

Hours/Week
40

Lectures/Seminars
N/A

Lab
Yes

Outpatient
N/A

Inpatient
N/A

House Staff
Yes

Night Call
No

Weekends
No

No. of Students
6

Optimizer
Yes

Pathways
Surgical Pathway – Anatomy and Radiology

Visiting Students
No

NARRATIVE DESCRIPTION

This elective will incorporate cadaveric anatomic dissection, radiologic diagnostic interpretation and various educational modalities of anatomy technology. The learner will provide teaching assistance in the anatomy cadaver lab during the Phase 1 organ based segment curriculum. The elective can pair the organ segment to the interest of the learner (i.e. orthopedic surgery interest paired with MSK organ based block). This will also provide a back to the basic science opportunity while advancing technical anatomic skills.

OBJECTIVES

At the end of this rotation, the student will be able to:

1. Identify, describe, and apply cadaveric anatomic structures and function
2. Compare radiologic anatomy to cadaveric anatomic relationships to enhance understanding of disease processes
3. Develop enhanced dissection skills
4. Apply various technology applications to enhance anatomy understanding

METHOD OF EVALUATION

M4 standardized evaluation form completed by attending faculty based on the participation in clinic, and/or other methods of evaluation

REQUIRED READING

Relevant sections of Anatomy textbook for Phase 1
ANATOMICAL & CLINICAL PATHOLOGY  
(ELEC 645)  
Course Director  
Lori Racsa, M.D.  

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| 221 N. E. Glen Oak  
309-672-4918      | Debby Tucker    | None          | UPH – Methodist - Lab |
|                  | 309-680-8641    |               |                   |
|                  | dtucker3@uic.edu|               |                   |

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Fall Break  
(with prior approval) | Blocks 7-8  
Winter Break | 4 weeks only | 40 |

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NARRATIVE DESCRIPTION

The student will participate in the daily work of surgical pathology and cytopathology in the laboratory in a pathologist assistant-preceptor role. This course will also give the student an introduction to Clinical Pathology and will cover areas of the clinical laboratory including hematology, blood bank, microbiology and chemistry.

OBJECTIVES  
Upon completion of this elective, the student will be able to:

1. Describe the pathologist's role in the clinical laboratory.
2. Describe the basic methodology of the most commonly performed laboratory tests.
3. Explain the work flow in the clinical laboratory.
4. Order appropriate laboratory tests or blood components in a given clinical situation.
5. Describe the process by which a pathologist approaches the problem of tissue and cytopathologic diagnosis.
6. Identify the salient features of gross pathology as the surgical pathologist sees them.
7. Observe and describe the technical processing of tissues and cytopathologic samples.
8. Describe some of the common pathologic specimens seen in surgical pathology.
9. Differentiate between benign and malignant tissues and cells by listing identified criteria.
10. Recognize the indications for and uses of frozen sections in surgical pathology.
11. Research a pathology topic and make a presentation.

METHOD OF EVALUATION  
The faculty will base their evaluation on:

1. Individual discussions with the student.
2. Observation and daily contact with the student.
3. Presentation at the conclusion of the elective.

REQUIRED READING

None at this time.
COMMUNITY HEALTH
(ELEC 423.1)

Course Director
Ms. Angela O’Bryant & Dr. Meenakshy Aiyer

Address
UICOMP
Dept. of HSE & Pathology
1 Illini Dr.
Peoria, IL 61605

Coordinator
Debby Tucker
309-680-8641
dtucker3@uic.edu

Prerequisites
Completed Phase 1

Location
Central Illinois FRIENDS

Dates Available
Blocks 2b, 3a, 4b, 5a
7b, 8a, 11a, 11b
Upon Approval

Dates Not Available
Blocks 1a-2a, 3b, 4a, 5b-7a,
8b-10b, 12a-b
Winter Break

Duration in Weeks
2

Hours/Week
32 hours/week

Lectures/Seminars
With prior notice

Lab
no

Outpatient
Yes

Inpatient
No

House Staff
No

Night Call
No

Weekends
Varies

No. of Students
2 students

Optimizer
No

Pathways
No

Visiting Students
No

NARRATIVE DESCRIPTION

This elective is designed to develop the skills of the M3 and M4 student in the management of an undifferentiated patient in the community health setting. It will provide a basic knowledge of common experience and allow them to appreciate the unique environment of the community healthcare team providing care, disposition of patients and the multiple challenges that face patients trying to access care.

Central Illinois FRIENDS is a 501(c)(3) organization located in Peoria on the campus of Unity Point Health. They offer community support for individuals living with HIV as well as transportation, rent, utilities, and emergency services. They provide free and confidential HIV and STI screenings, plus education and referral services. They participate in Get Yourself Tested Day at the local Peoria high schools by partnering with multiple community organizations to bring HIV and STI education and screening to area high school students.

Each student will be required to prepare a windshield survey based on one neighborhood of the population served by the organization. This will be a 2-3 page document to be turned in at the completion of the elective.

OBJECTIVES

At the end of this rotation, the student will be able to:

1. Analyze your role in the community setting.
2. Interact in a professional manner with an interdisciplinary team of community healthcare workers.
3. Deliver evidence based education and quality care to the client population.
4. Identify how the social determinants of health affect the population of clients served by this organization.
5. Detect how medical physicians can become advocates for patients meeting the challenges identified by the social determinants of health.

METHOD OF EVALUATION

1. Individual discussions with the student.
   a. Two 1:1 discussions with members of the organization during Elective
   b. One discussion with Ms. O’Bryant immediately prior to Elective (orientation)
   c. One discussion with Ms. O’Bryant at conclusion of Elective
2. Formative feedback of clinical and interviewing skills by site clinician or educator.
3. Activity/procedure log demonstrating procedures observed and performed by student in addition to community activities that the student participated in.
4. Conduct and briefly summarize 3 patient encounters/interviews.
5. Windshield survey form completed.
6. Narrative reflection (1000 words max)
7. Standard Clinical Evaluation Form to be completed by the course director.
REQUIRED READING

Reading assigned prior to or during elective:
- A Framework for Educating Health Professionals to Address the Social Determinants of Health: Chapter 2
- Windshield Survey document (resource to be provided)
- Tri-County Community Health Needs Assessment (CHNA) Community Health Improvement Plan 2016-2019
- Online phlebotomy module
- Other articles and training modules assigned depending on location of Elective

Department of Health Sciences Education

Schedule Change Authorizations:
Debby Tucker dtucker3@uic.edu
NARRATIVE DESCRIPTION

This elective is designed to develop the skills of the M3 and M4 student in the management of an undifferentiated patient in the community health setting. It will provide a basic knowledge of common experience and allow them to appreciate the unique environment of the community healthcare team providing care, disposition of patients and the multiple challenges that face patients trying to access care.

Faith Community Nurses of OSF offers Peoria residents the opportunity to interact with healthcare professionals outside of their home or the clinic/hospital setting. Through outreach with the Care-A-Van, patients can get valuable health screenings, nutrition and exercise counseling, help with establishing a primary care physician and insurance assistance. Faith Community Nurses also see patients at the Peoria Riverplex and OSF Senior World. They work with many schools in the area to provide school physicals and offer other services such as weight loss clinics, cardiac rehab and medical exercise programs.

Each student will be required to prepare a windshield survey based on one neighborhood of the population served by the organization. This will be a 2-3 page document to be turned in at the completion of the elective.

OBJECTIVES

At the end of this rotation, the student will be able to:

1. Analyze your role in the community setting.
2. Interact in a professional manner with an interdisciplinary team of community healthcare workers.
3. Deliver evidence based education and quality care to the client population.
4. Identify how the social determinants of health affect the population of clients served by this organization.
5. Detect how medical physicians can become advocates for patients meeting the challenges identified by the social determinants of health.

METHOD OF EVALUATION

8. Individual discussions with the student.
   a. Two 1:1 discussions with members of the organization during Elective
   b. One discussion with Ms. O’Bryant immediately prior to Elective (orientation)
   c. One discussion with Ms. O’Bryant at conclusion of Elective
9. Formative feedback of clinical and interviewing skills by site clinician or educator.
10. Activity/procedure log demonstrating procedures observed and performed by student in addition to community activities that the student participated in.
11. Conduct and briefly summarize 3 patient encounters/interviews.
12. Windshield survey form completed.
13. Narrative reflection (1000 words max)
14. Standard Clinical Evaluation Form to be completed by the course director.
REQUIRED READING

Reading assigned prior to or during elective:
- A Framework for Educating Health Professionals to Address the Social Determinants of Health: Chapter 2
- Windshield Survey document (resource to be provided)
- Tri-County Community Health Needs Assessment (CHNA) Community Health Improvement Plan 2016-2019
- Online phlebotomy module
- Other articles and training modules assigned depending on location of Elective

Department of Health Sciences Education

Schedule Change Authorizations:
Debby Tucker dtucker3@uic.edu
M4 DERMATOLOGY
(ELEC 602)

Course Director
Dr. Joshua Kentosh
814-397-9302
jkentosh@uic.edu

Address
1 Illini Dr.
Peoria, IL 61605

Coordinator
Debby Tucker
309-680-8641
dtucker3@uic.edu

Prerequisites
None

Location
TBD by course director

Dates Available
All except as noted.

Dates Not Available
Blocks 8b, 9
Winter Break

Duration in Weeks
2

Hours/Week
20-30 hours/week

Lectures/Seminars
2 per week

Lab
Yes: Dermatopathology

Outpatient
Yes

Inpatient
Varies

House Staff
No

Night Call
No

Weekends
No

No. of Students
1 student

Optimizer
Yes

Pathways
Medical Pathway – Core Specialty Care

Visiting Students
Yes

NARRATIVE DESCRIPTION

This dermatology elective is designed to provide a basic knowledge of the common skin lesions seen in practice. Students will learn how to perform a thorough skin examination, identify physical exam findings that determine improvement or deterioration in a dermatosis and wound healing. They will also gain knowledge in the approach to and management of common dermatologic conditions seen in ambulatory settings. They will also recognize and learn the skills need to counsel and instruct patients and their families on the cause, management and prevention of the common skin conditions.

The students will be expected to complete the American Academy of Dermatology (AAD) online core curriculum. This is a comprehensive resource composed of 26 modules covering a broad range of dermatologic disease with additional features. Each module and its brief exam component would take approximately one hour to complete. These modules also include videos of various procedures including biopsy techniques, pathology form completion etc.

The students will spend time with faculty dermatologists in private practice in Peoria and/or Galesburg, Bloomington locations in addition to the Family Practice Dermatology Clinic in Peoria, as arranged for each rotation. Depending upon interest, opportunities will also be available for the students to work with faculty dermatopathologists and discuss clinical pathologic correlations on skin biopsies.

OBJECTIVES

At the end of this rotation, the student will be able to:

1. Perform a thorough skin examination (including hair, nails, and mucous membranes)
2. Describe the skin lesions using precise dermatologic language
3. Formulate a differential diagnosis based on the morphology of the skin lesions
4. Recognize and diagnose life threatening dermatosis and identify the available therapeutic options for these life threatening dermatosis
5. Discuss the indications and contraindicates to perform the various biopsy techniques

METHOD OF EVALUATION

M3 or M4 standardized evaluation form completed by attending faculty based on the participation in clinic and completion of the AAD online core curriculum.

REQUIRED READING

AAD Core Curriculum: www.aad.org/education/medical-student-core-curriculum
Recommended readings:
- Fitzpatricks Color Atlas and Synopsis of Clinical Dermatology
- DermAtlas by John Hopkins
- DermPath Tutor: University of Iowa
- Skin Disease Diagnosis and Treatment, Thomas Habif
NARRATIVE DESCRIPTION
Students will follow Board certified Forensic Pathologists through a very busy consultant private practice serving Illinois Coroners in central Illinois in Bloomington and Peoria autopsy facilities. The student will review the investigation circumstances of the death; participate in pre-autopsy interactions with police, coroner, deputy coroners, and assist in performing the autopsies in individuals who suffer sudden unexpected death, most commonly of traumatic nature, involving natural, accidental, and suicidal means. The student will view but not assist in homicidal autopsies. The student will choose one of their autopsies to prepare a final report discussing the forensic aspects of the investigation, autopsy, ancillary studies, and determining the cause and manner of death. The paper may be submitted as a case report to a forensic pathology or sciences journal and will be appropriately referenced and researched.

OBJECTIVES
Upon completion of this elective, the student will be able to:
1. Understand how Cause and manner of Death is determined medically and be able to perform this task after completion of the rotation on their own patients who die naturally.
2. Understand the pathophysiology of the death of the individual under investigation and postmortem examination.
3. Understand the morbid anatomy of the deceased and the pathologic alterations seen at autopsy and learn to apply those principals of anatomy to their own future patients.
4. Understand the basic injuries seen in motor vehicle incidents, suicide, drug intoxication, gunshot wounds, medical mishaps, and asphyxia deaths.
5. Appropriately, verbally communicate their understanding of the anatomic and pathologic features seen on and within the deceased utilizing the terms of pathology and clinical medicine previously learned.
6. Interact in a professional manner with other physicians, coroners, deputy coroners, police, autopsy assistants, and office support staff within the coroner offices.
7. Understand that the physician, even in primary care, must learn to interact with the coroner and forensic pathologist when a death occurs, whether they are the attending physician or the deceased or not.

METHOD OF EVALUATION
The faculty will base their evaluation on:
1. The student will continually be evaluated by the forensic pathologists so that they meet the above objectives.
2. The student will prepare a case report from the first two weeks of their rotation and the case report will be suitable for publication, as described above. Successful completion and credit for the rotation depends on completion of the written report.
3. The standard medical school clinical evaluation form will be completed by the course director.

REQUIRED READING:
Selected Topics as assigned related to the relevant daily casework from MedScape Forensic Pathology Section at https://emedicine.medscape.com/pathology#forensic
## NEUROPATHOLOGY (ELEC 767)

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<td>SFMC</td>
<td>Debb Tucker</td>
<td>Completion of Phase 2 &amp; Neurology Elective*</td>
<td>Sarah Bach, M.D.</td>
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*ADDITIONAL PREREQUISITES:
- Student must be planning to pursue a residency in pathology, neurology, or neurosurgery.
- Student must have the elective pre-approved by Dr. Bach at least two months in advance of the start date.

### NARRATIVE DESCRIPTION

This elective is specifically offered for those students who plan to pursue a residency in pathology, neurology, or neurosurgery. During this elective, the student will learn fundamentals of neuropathology. Reading material will be assigned for independent study and didactic sessions and/or discussions about each topic will follow. The student will review surgical as well as autopsy slides of interest and participate in frozen sections and brain autopsies. Participation in a monthly brain cutting conference will enable the student to improve basic neuroanatomy and appreciate clinical correlation. The student will be required to do a PowerPoint presentation on a neuropathology topic of his or her choosing at the end of the rotation. Weekly quizzes and a final exam will help the student gauge his or her progress.

### OBJECTIVES

Upon completion of this elective, the student will be able to:

1. Describe basic gross anatomy of the nervous system.
2. Distinguish the cellular details of the nervous system on light microscopy.
3. Describe pathological changes that affect the different cells of the nervous system in disease.
4. Describe the pathology of some common lesions of the nervous system, including tumors as well as non-neoplastic disease, e.g., neurodegenerative diseases, demyelinating diseases, infections of the CNS, cerebrovascular diseases, pediatric neuropathology, and diseases of skeletal muscle.
5. Identify the basic special stains, immunostains and molecular tests that are used to aid in neuropathologic diagnosis.

### METHOD OF EVALUATION

The faculty will base their evaluation on:

1. Individual discussions with the student.
2. Observation and daily contact with student.
3. Quizzes, PowerPoint presentation, and final exam.

### REQUIRED READING

None at this time.
QUALITY AND SAFETY (ELEC 436)

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<td>Debby Tucker</td>
<td>Completion of IHI Open School QI and PS modules</td>
<td>OSF Healthcare or UnityPoint Health</td>
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<tr>
<td>1 Illini Dr. Peoria, IL 61605</td>
<td><a href="mailto:dtucker3@uic.edu">dtucker3@uic.edu</a></td>
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<tr>
<td>Mary Stapel, MD</td>
<td>Jonathan Gehlbach, MD</td>
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NARRATIVE DESCRIPTION

Health care systems is one of the five themes that is embedded longitudinally throughout the Illinois College of Medicine Curriculum. The primary goal of this elective is to provide applied learning opportunities for the content of quality improvement and patient safety in healthcare settings. During this 4 week elective, students will work with various members of quality and safety teams of local healthcare systems. They will participate in several activities which can include:

- Serving as a member of a quality improvement project team (roles can include data gathering and management, planning meetings, analysis of data, interviews and education of stakeholders).
- Observing leadership level meetings related to quality and safety reporting and strategic planning.
- Participating in a peer review meeting or an RCA of a critical event.
- Participating in either Lean or Six Sigma approaches to healthcare improvement when logistically possible.
- Participate in dedicated case-based discussions with a director or facilitator about quality and safety topics.
  - Overview of why QI is important and how to do QI
  - Patient Safety: addressing adverse events and event reporting
  - Systems of care approaches to QI and Safety
  - Debriefing and self-directed learning topic

OBJECTIVES At the end of this rotation, the student will be able to:

1. Describe how promoting quality improvement and patient safety may achieve better patient outcomes.
2. Describe how promoting a culture of safety and learning systems can achieve safety.
3. Participate in developing and measuring an improvement plan around a selected quality indicator.
4. Participate in applying different evidence-based quality improvement methodologies to adapt to different quality opportunities.
5. Describe Just Culture and participate in system activities which address safety reporting such as peer reviews and RCAs.

METHOD OF EVALUATION

M4 standardized evaluation form completed by attending faculty based in meetings and projects.
Reflective paper – standardized prompts will be provided to the students to serve as template for reflection.

REQUIRED READING

Completion or review (if already completed) of IHI Open School Curricula
Department of Internal Medicine

Interim Department Chair: Teresa Lynch, M.D.

Schedule Change Authorizations:

Jenny Doerr   jjdoerr@uic.edu
## CARDIOVASCULAR DISEASES
### (ELEC 608.1)

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<tr>
<td>OSF Healthcare Cardiovascular Institute 5405 N Knoxville 309-691-4410</td>
<td>Jenny Doerr</td>
<td>Phase 2 Medicine Clerkship</td>
<td>SFMC</td>
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### NARRATIVE DESCRIPTION

Students will have the opportunity of participating in the evaluation of select adult patients with cardiovascular disease in the hospital setting. The student will work with a fellow, resident, and attending cardiologist in the initial evaluation, diagnostic work-up and follow-up of these patients. Techniques of physical examination, electrocardiographic monitoring and therapy will be emphasized. Special diagnostic techniques such as echocardiography and cardiac catheterization will be included.

### OBJECTIVES

Upon completion of this elective, the student will be able to:

1. Cultivate and refine accurate and detailed cardiovascular history and physical examination skills.
2. Develop a diagnostic impression and differential diagnosis based upon history and physical examination.
3. Recognize clinical therapeutics of basic cardiovascular drugs.
4. Formulate a diagnostic and treatment plan.
5. Correlate the results of specialized diagnostic tests with clinical problems.

### METHOD OF EVALUATION

The faculty will base their evaluation on:

1. Daily rounds and student presentations.
2. Standard Clinical Evaluation Form
### CLINICAL MICROBIOLOGY (ELEC 425)

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<td>OSF System Lab 1224N. Berkeley Ave. Peoria, IL 61603</td>
<td>Jenny Doerr 309-655-7733 <a href="mailto:jndoerr@uic.edu">jndoerr@uic.edu</a></td>
<td>Passing score on USMLE Step 1 Exam Director Pre-approval</td>
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</thead>
<tbody>
<tr>
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### OBJECTIVES:

At the end of this rotation, the student will be able to:

1. Describe the basic concepts of medical microbiology, e.g. taxonomy of human pathogens, modes of transmission, growth requirements, appearance on Gram stain, and important benchtop biochemical reactions, and learn clinical implications of clinical laboratory results.
2. Choose appropriate laboratory techniques to aid in the identification of a suspected pathogen.
3. Assist with processing of patient specimens.
4. Evaluate antibiotic resistance in microbial isolates by both phenotypic methods (eg, modified carbapenem inhibition assay) and molecular methods (eg, CARBA-R real time PCR).
5. Assign species identity to an isolate based on 16S sequencing results.
6. Develop a whole genome sequence for a novel clinical isolate and upload the genome to the NIH NCBI database

### METHOD OF EVALUATION

M4 standardized evaluation form completed by attending faculty based on student’s lab performance and his/her translation of the lab findings to the clinic and the bedside.

### REQUIRED READING


### OPTIONAL

1. Present an abstract at a national ID or microbiology conference (e.g., ID Week or Microbe)
NARRATIVE DESCRIPTION

This rotation, based in the Medical Intensive Care Unit, is designed to provide students with experience with a critically ill population. As a member of the critical care team, the student will participate in the formulation of comprehensive management plans based on an organ system approach. Collaborative practice is emphasized with frequent input from nursing, respiratory therapy and nutritional support services. Teaching will be coordinated through faculty intensivists and pulmonologists and include unit rounds, small group lectures and "hands on" sessions involving new technologies.

OBJECTIVES  Upon completion of this elective, the student will be able to:

1. Utilize the organ system approach with the critically ill patient.
2. Demonstrate management of intravascular devices, hemodynamic monitoring, mechanical ventilation, techniques of nutritional support and evaluation of ongoing sepsis.

METHOD OF EVALUATION  The faculty will base their evaluation on:

1. Interactive rounds with assigned residents and attending staff.
2. Standard Clinical Evaluation Form
This is an inpatient with elective outpatient experience in clinical gastroenterology in a single specialty OSF practice staffed by seven full-time physicians with specialty interests in interventional endoscopy, hepatology, inflammatory bowel disease, and general gastroenterology. Both inpatient and outpatient services are supported by gastroenterology fellows, full-time nurse specialists (APN) and physician assistants (PA). The elective is a mix of inpatient and outpatient experience. Inpatient experience is with the GI attending physicians on weekly call rotation. Outpatient experience is at the GI Clinic for a week predominantly with Dr. Balouch and Dr. Dhillon. The inpatient senior fellow has weekday accountability for the clinical and educational activities. The practice operates on a patient-centered basis, focused on assuring patient autonomy, evidence based medicine, strong communication among providers, patients and families. Open access to Internet healthcare resources are used to provide patient education and foster the goals of high quality care. The scope of the practice includes general gastroenterology with basic endoscopic procedures, hepatology, interventional endoscopy (ERCP & EUS) with special interest in inflammatory bowel disease, motility & chronic viral hepatitis.

Most mornings start with interactive didactic series paralleling the fellowship structure which students are encouraged to attend and participate. These include Case Conferences, M&M, Journal clubs and IBD focused case conferences, Gastrointestinal Cancer Conference (GICC) and GI pathology. Additionally participation at the GI fellowship core curriculum and board review is encouraged as well. After the AM conferences the attending physicians are focused on diagnostic and therapeutic endoscopy procedures which students are welcome to observe. Clinical rounds are initiated by the inpatient care team at OSF-SFMC with staffing later in the day by the on call attending. Afternoon office sessions involve consultations, continued care of established patients, analysis of clinical information, problem solving and discussion and are available for students on request. A collaborative effort is fostered to create a sense of pride in providing state of the art care in the most personal way. Student involvement is personalized to fit the student’s learning goals. The patients’ problems represent the broad spectrum of digestive disorders and complexity. The course director provides indirect supervision and teaching. The physician assigned to the inpatient service is the faculty member responsible for clinical supervision and clinical teaching. Supplemental teaching sessions are provided as time permits.

**OBJECTIVES** Upon completion of this elective, the student will be able to:

1. Relate the process of effective evidence-based diagnostics and clinical management for basic, common gastrointestinal disorders.
2. Demonstrate the ability to integrate internet healthcare information resources into patient care.
3. Integrate principles of communication and patient autonomy into patient care.
4. Recognize the supervisory role of the physician in effective patient care.
5. Demonstrate approaches to use the electronic medical record in an efficient way using the problem-oriented method and structured templates.

**METHOD OF EVALUATION** The faculty will base their evaluation on:

1. Students will be given daily feedback by the inpatient attending based upon the performance of the above tasks.
2. A composite evaluation of the faculty will be prepared by the course director and using the Standard Clinical Evaluation Form.
GERIATRICS
(ELEC 615)  
Course Director
Larry Lindahl, M.D.

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<tr>
<td>530 N.E. Glen Oak OSF North Building #5679</td>
<td>Jenny Doerr 309-655-7733 <a href="mailto:jdoerr@uic.edu">jdoerr@uic.edu</a></td>
<td>Phase 2 Medicine Clerkship</td>
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<td>Medical Pathway – Medical Selective</td>
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NARRATIVE DESCRIPTION

Students work one-to-one with the individual assigned geriatric attending and will participate in the evaluation and care of elderly patients in the hospital and ambulatory care setting. In the ambulatory setting the student will perform the appropriate history and physical examination including the mental status exam and identify key management strategies and the importance of an interdisciplinary approach to the care of the geriatric population. In the inpatient setting, the student will perform the appropriate history and physical examination and will formulate plans based on the history and physical examination. The student will also identify some of the key illnesses in the elderly, focusing on some of the atypical presentations of common diseases.

OBJECTIVES

Upon completion of this elective, the student will be able to:

1. Describe the functional implications of aging organ systems.
2. Describe the key illnesses in the elderly, focusing on geriatric presentation of common disease processes like urinary tract infection, pneumonia, depression, myocardial infarction, thyroid dysfunction and acute abdomen.
3. Describe common geriatric syndromes including falls, polypharmacy, pressure wounds, delirium, dementia, osteoporosis and incontinence.
4. Demonstrate skills at performing an adequate history from a geriatric patient with special emphasis on physical and mental functioning.
5. Demonstrate skills at performing a mental status examination to evaluate memory loss or confusion in an elderly patient.
6. Practice interdisciplinary approach to management of elderly patients.
7. Demonstrate respect to older patients and make efforts to preserve their dignity.

METHOD OF EVALUATION

The faculty will base their evaluation on:

1. The student skills will be assessed primarily by the attending physician based on the performance of the above tasks.
# Health Humanities (ELEC 502)

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<tr>
<td>1 Illini Dr. Peoria, IL 61605</td>
<td>Jenny Doerr 309-655-7733 <a href="mailto:jjdoerr@uic.edu">jjdoerr@uic.edu</a></td>
<td>Completion of phase 1 Online</td>
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## Narrative Description

This elective focuses on the application of creative arts and humanities disciplines to discourse about human health and wellbeing. These “health humanities” may take many forms, from the history of medicine to medical ethics, from literature and creative writing to music, film, and the visual arts. A portion of the instruction will be dedicated to analysis and discussion of the COVID-19 pandemic through a health humanities lens. The student will survey these forms with the course director and identify a form in which to realize a personal creative project. Current and potential future academic research in health humanities will be discussed as well.

## Objectives

At the end of this rotation, the student will be able to:

1. Describe the benefits and tenets of health humanities from various perspectives and applications.
2. Analyze and appraise different modalities of health humanities including writing, music, film, and the visual arts.
3. Create an artistic or analytic project that explores an experience with health or illness, especially in response.

## Method of Evaluation

M4 standardized evaluation form completed by attending faculty based on the participation in clinic, (and/or other methods of eval- can modify grading once we are able to do pass/fail.

## Required Reading


Verghe A. “The Importance of Being.” Health Affairs 35, no.10 (2016):1924-1927. Available at: http://content.healthaffairs.org/content/35/10/1924

Additional resources (optional)
HEMATOLOGY AND ONCOLOGY
(ELEC 804)

Course Director
Michael H. Veeder, M.D.

Coordinator
Jenny Doerr
309-655-7733
jjdoerr@uic.edu

Prerequisites
Completion of Phase 2

Address
8940 N. Wood Sage
Peoria, IL 61615

Dates Available
All year except Winter Break

Dates Not Available
Winter Break

Duration in Weeks
4

Location
SFMC, MMCI

Hours/Week
30-40

Lectures/Seminars
No

Lab
Yes

Outpatient
Yes

Inpatient
Yes (optional)

House Staff
1 Resident

Night Call
No

Weekends
No

No. of Students
1

Optimizer
Yes

Pathways
Medical Pathway – Medical Selective

Visiting Students
Yes

NARRATIVE DESCRIPTION

The student will evaluate and assist in the management and treatment of patients admitted with hematologic or oncologic diseases. Only selected cases will be assigned to the medical student to assure there will be adequate time for reading and thoughtful evaluation. The student will spend time both in the office setting and in the hospital so as to achieve a balanced view of the care of the oncology patient, but a significant amount of the student’s time will be spent in the office. Exposure will be provided in the interpretation of bone marrow aspirations and biopsies. Approaches to the care of the terminally ill patient and the chronically ill patient in pain will also be stressed.

OBJECTIVES

Upon completion of this elective, the student will be able to:

1. Identify hematologic and oncologic diseases.
2. Recognize the concepts of correct approaches to the care of the terminally and chronically ill patient.

METHOD OF EVALUATION

The faculty will base their evaluation on:

1. Student’s level of competence will be ascertained by daily contact with the attending physician and during ward rounds, lectures, and conferences.
INFECTIOUS DISEASES 
(ELEC 617)

Course Director
Rone Lin, M.D.

Address
530 N.E. Glen Oak

Coordinator
Jenny Doerr
309-655-7733
jidoerr@uic.edu

Prerequisites
Phase 2 Medicine Clerkship

Location
530 N.E. Glen Oak

Dates Available
All year except Winter Break

Dates Not Available
Winter Break

Duration in Weeks
2-4

Hours/Week
40

Lectures/Seminars
Yes

Lab
No

Outpatient
Yes

Inpatient
Yes

House Staff
Yes

Night Call
No

Weekends
No

No. of Students
1

Optimizer
Yes

Pathways
Medical Pathway – Medical Selective

Visiting Students
Yes

NARRATIVE DESCRIPTION

Students will work on a one-to-one basis with the infectious disease specialist assigned to teaching infectious disease consult service. They are expected to learn about the pathophysiology of infectious disease, differential diagnosis and principles of antimicrobial therapy. They will gain knowledge of infectious disease problems by bedside teaching, lectures, and conferences. There will be an opportunity to see a broad spectrum of clinical problems including common community-acquired infections, AIDS, nosocomial infections and infections related to immunosuppression, surgery (+/- pregnancy). This subspecialty elective is largely inpatient based, but could also have an outpatient component upon request from individual student.

LEARNING GOALS and OBJECTIVES

Upon completion of this elective, the student will be able to:

- Learn to evaluate patients presenting with a wide range of infectious problems. They will take a comprehensive history with emphasis on clinical presentation, epidemiologic risk factors for infectious diseases, and predisposing medical conditions.
- Observe and perform physical examinations with particular attention paid to common physical findings associated with important infectious problems.
- Generate a differential diagnosis with particular attention paid to the most probable and the most serious causes of a patient’s complaints.
- Learn appropriate empiric antimicrobial regimens for a wide range of clinical situations, followed by selection of targeted therapy for de-escalation based on microbiology/culture data.
- Understand the particular indications and complications of a wide range of antimicrobials.
- During rotation, students will participate in up-to-date review of Journal/Articles on a particular ID case they see to understand role of research in clinical decision making.
- Use the medical literature to inform their diagnostic and therapeutic recommendations, including application of Basic Science content and Evidence Based Medicine to clinical practice of Infectious Disease.

STUDENT’S EXPECTATIONS:

1. Present their findings, both written and oral, to the attending each day for review and feedback.
2. Round on each of their consults daily until discharge or signoff and write progress notes in the medical record.
3. Will be supervised by attending on their work on a daily basis and obtain daily feedback on student's performance.
4. Attend weekly lectures and conference in accordance with Internal Medicine conferences for the Residents
5. Give one brief presentation during the course of rotation about a patient or a problem that they encountered.

METHOD OF EVALUATION

The faculty will base their evaluation on:

1. Daily contact with the infectious disease attending physician during rounds, lectures, and conferences.
3. Presentation of review/journal article of their interest.
M4 INPATIENT HOSPICE HOME (ELEC 334)

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<td>8630 IL-91</td>
<td>Jenny Doerr</td>
<td>Completion of Core Clerkships</td>
<td>Dr Patricia Deters</td>
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<tr>
<td>Peoria, IL 61615</td>
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NARRATIVE DESCRIPTION

Students have a brief encounter with the Owens Hospice Home during their M3 internal medical core clerkship. This elective is offered for students who are interested in a more in depth experience with hospice care, particularly inpatient hospice care. The elective will occur at Owens Hospice Home under the guidance of the Medical Staff at Owens, and the student will assist in the care of patients transferred to the home for holistic, interdisciplinary, complex hospice care.

OBJECTIVES Upon completion of this elective, the student will be able to:

1. **Patient Care**
   - Demonstrate knowledge and a student level of proficiency in evaluation of patients at the end of life, and patients with specific symptom palliation needs.
   - Perform a careful and complete history and physical, with emphasis on communication and active listening with the patient and/or his/her family about end-of-life issues such as advance directives and prognosis.
   - Develop a treatment plan for patients with common symptoms associated with life-limiting illnesses.
   - Demonstrate knowledge of hospice, including the interdisciplinary meeting, and knowledge in determining a patients' eligibility and appropriateness for hospice referral as well as carrying levels of hospice care, such as General Inpatient versus outpatient, etc.

2. **Systems Based Practice**
   - Identify the role of hospice in providing excellent care for seriously ill patients while ensuring both patient autonomy and good stewardship of health care resources.
   - Gain proficiency in care planning for complex patients with multiple medical needs.
   - Show awareness of the team approach to health care and identify the utility of each member of the team, particularly in the setting of advanced illness and at the end of life.
   - Describe the indications, roles, timing, and evidence for both hospice and palliative care/medicine involvement.
   - Understand the impact of good palliative care and hospice care on patient satisfaction, hospital mortality, hospital 30 day readmissions, and ED visits.

3. **Practice Based Learning**
   - Utilize available resources to assist in making both timely and appropriate diagnostic management decisions.
   - Discuss outcomes of patient management plans with the attending physician.
   - Evaluate and target areas for self-improvement.
   - Demonstrate awareness of medical literature and content relevant to the field of hospice care and palliative medicine.

4. **Professionalism**
   - Explain why skilled communication, empathy, and excellent pain and symptom management are critically important to performing excellent holistic medical care.
   - Identify the role of a physician as it pertains to advanced care planning and goals of care discussion with patients with advanced disease.
   - Demonstrate respect and compassion for all patients, as well as other caregivers and hospice staff.

5. **Interpersonal Skills and Communication**
   - Develop and utilize effective strategies to establish rapport, assess understanding and communicate an advanced care plan.
   - Identify and respond appropriately to anger, fear, grief, and denial as well as other blocks to effective communication by addressing concerns on both the intellectual and emotional planes.
   - Determine goals of care through in depth discussion with patients and family members.
6. Medical Knowledge
   - Apply basic medicine concepts learned in the third and fourth year to complex medical scenarios.
   - Identify common side effects and problems of a range of medications in elderly and end of life populations, particularly regarding benzodiazepines, opioids, and antipsychotics as well as various medications that may cause delirium.
   - Identify critical areas of knowledge of hospice and palliative medicine as it will pertain to each field of practice, including pain and symptom management and communication skills.

**METHOD OF EVALUATION** The faculty will base their evaluation on:

1. Direct observation.

**REQUIRED READING**

1. To be assigned by course director
INTERN PREPAREDNESS  
(Transition to Residency)  
(ELEC 258)  

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<tr>
<td>1306 N Berkeley Ave, Peoria, IL 61603</td>
<td>Tammy Livingston 309-671-8412 <a href="mailto:tliving@uic.edu">tliving@uic.edu</a></td>
<td>Completion of Phase 3</td>
<td>Jump Trading Simulation and Education Center</td>
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**NARRATIVE DESCRIPTION:**
This is a mandatory, two week clinical skills course (i.e. bedside manner, sign out and transfer of care, admission and discharge preparation, medication reconciliation etc.) designed to prepare the student for residency. Both general and discipline specific instruction will be provided. The goal of the course is to provide a framework that allows the student to “hit the ground running” in residency with a skillset that is applicable regardless of institution or field of training. The course will employ didactic instruction, small group discussion, role modeling and role playing, procedural technique instruction and standardized patient encounters with real time feedback on student performance.

**OBJECTIVES:**  
Upon completion of this elective, the student will be able to:

1. Identify common problems for which an intern will be the first contact and develop a framework for triaging and cross-covering.
2. Describe strategies for transitions of care.
3. Describe appropriate use of healthcare resources as they relate to the health care system as a whole.
4. Define diagnosis and management of common medical topics relevant to every intern, and as they relate to residency of choice.
5. Demonstrate medication reconciliation using simulated patient cases for admission and discharge.
6. Display knowledge of indications, contraindications, and techniques for common procedures as they relate to the residency of choice.
7. Perform intern-level history and physical exams on simulated patients, with construction of progress notes and H&P’s following patient interaction.
8. Demonstrate advanced communication techniques in breaking bad news, disclosing a medical error, communicating with ancillary staff, etc.
9. Demonstrate familiarity with principles of ACLS in the bedside management of decompensating patients
11. Delineate strategies and techniques for time management and efficiency.
12. Identify the importance of communication skills as they relate to patient safety and outcomes.
13. Identify the importance of transitions of care as they relate to patient outcomes and safety.
15. Describe the impact of unprofessional behavior on the patient-physician and patient-ancillary staff relationship.
16. Identify key aspects of professionalism as they apply to resident physicians.

**METHOD OF EVALUATION:**  
The faculty will base their evaluation on:

1. Competency-based checklists and Entrustable Professional Activity.
2. Direct observation and video-recording.

**REQUIRED READING:**
To be assigned by course directors.
**MEDICINE SUB-INTERNSHIP**  
(ELEC 899)  

| **Address** | 530 N.E. Glen Oak Avenue  
Peoria, Illinois 61637  
Department of Internal Medicine, North Building  
SFNB #5683 | **Coordinator** | Jenny Doerr  
309-655-7733  
jdoerr@uic.edu | **Prerequisites** | Completion of Phase 2 Clerkships | **Course Co-Directors** | Manajyoti Yadav, M.D.  
Saurabh Bansal, M.D. |
|---|---|---|---|---|---|---|---|
| **Dates Available** | All year except as noted | **Dates Not Available** | Fall Break  
Winter Break  
Block XI | **Duration in Weeks** | 4 weeks | **Location** | OSF SFMC Hospital  
Peoria Illinois |
| **Lectures/Seminars** | Yes | **Lab** | None | **Outpatient experience** | None | **Inpatient** | Yes |
| **House Staff** | Yes (work with senior IM or M/P resident) | **Night Call** | Yes  
5 consecutive nights from 7pm-7am during the 2nd | **Weekends** | Yes (3-4 weekend days per 4 weeks) | **No. of Students** | 4 |
| **Optimizer** | Yes | **Pathways** | No | **Visiting Students** | Yes |

A combined maximum number of 10 students will be accepted across all four sub-internships. Initial approval for a sub-internship must be cleared with Tammy Livingston, M4 Coordinator, in Academic Affairs prior to approval at the departmental level.

**NARRATIVE DESCRIPTION**

The goal of the Medicine Sub-internship is to provide an educational experience where medical students will have direct responsibility for patient care (evaluation/assessment/notes/orders/presentation/consults/handoff) including patient education/prevention. This rotation will help fourth year medical students develop skills to practice and function at a level of Medicine Intern in an inpatient setting. It will also help the students critically utilize principles of evidence-based medicine in their daily management of patients.

During this rotation student will act as “surrogate interns.” This will help them to broaden their knowledge, learn to accept progressive responsibility and improve clinical reasoning and decision-making. This will also help them develop their professional and interpersonal skills. Student will also attend daily didactic lectures such as morning report, noon conferences and grand rounds per Internal Medicine residency schedule.

**OBJECTIVES:** Upon completion of this elective, the student will be able to:

1. Dictate or type the history and physical examination (a minimum of 3-4 new admissions per week).
2. Assess and design a basic medical management plan for the admitted patient.
3. Write admit orders after initial evaluation of the patient.
4. Follow assigned patients, write daily progress notes, update problem lists and follow up on labs, x-rays, and other diagnostic tests ordered (no more than five patients per day).
5. Discuss their clinical reasoning skills and therapeutic strategies.
7. Demonstrate understanding of their patients’ situations by discussing the various psychosocial, economic, religious and ethnic backgrounds of patients that underlie their belief and convictions. Engage in direct one-on-one relationships with patients that will enable them to deal with complex issues of individual patients.
8. Actively work with social services to coordinate discharge planning.
9. Demonstrate interpersonal skills and skills as a member of the health care team.
10. Describe the common problems in Internal Medicine and be able to understand the various diagnostic and therapeutic interventions.
11. Assess and formulate a plan for the following common clinical situations: hypertension, diabetes mellitus, congestive heart failure, chronic obstructive pulmonary disease, abdominal pain, chest pain, shortness of breath, cellulitis.
DAILY RESPONSIBILITIES

- The sub-I should be able to carry 3-5 patients at a time by the end of their rotation.
- The sub-I student is responsible for generating a full H and P as well as a daily SOAP note on the patients they are following.
- The sub-I student is expected to arrive in the morning to receive check-in from night float on his/her patients, and to pre-round prior to morning attending rounds.
- Student responsible for being present during check out to check out their patients to the cross covering resident team.
- Sub-I student is responsible for presentation of their patients at the bedside. They are expected to call consulting physicians to request a consult with the assistance of their senior resident.
- Sub-I student is expected to take late call with their team once per week. During their call day student is expected to admit patients with their assigned team and generate a full H&P and present to the attending on call.
- Sub-I student is responsible for discharging their patients in conjunction with the senior resident, including medication reconciliation and arrangements of follow-up.
- Sub-I student is responsible for generating a discharge summary into the patient record for practice. A separate discharge summary will still need to be done by the discharging team.
- Sub-I student is responsible for communicating with their patients, patient’s families, nurses, ancillary staff, and other providers about the day to day needs and action plans of their patients.
- Sub-I student is responsible for beginning discharge planning from admission, speaking with the discharge planner and case management, and assisting in the process of obtaining the resources and referrals needed for a safe discharge.
- Sub-I student is responsible for contacting the PCP at discharge with the supervision of their senior resident to inform them of the follow-up plans.
- Sub-I student is expected to participate fully in family meetings, end of life and code discussions, and emergent bedside management of their patients when needed.
- Sub-I student will complete the Proficiency Checklist for the month with clinical skills observed or witnessed by the senior resident or the attending.

DAYS OFF

- The student will receive a total of 3 days off over the first three weeks of the rotation, averaging one per week. The last week of the rotation is a 5 day week with the last weekend off for the student. The student is allowed one “extra” day for educational activities, taking boards, residency interviews etc. This must be cleared and approved by the Sub-I director.

DIDACTICS

- Sub-I student is expected to attend and participate in morning report daily, as well as noon conferences daily and grand rounds every Wednesday.
- The sub-I will have conference time about 4 hours per week for didactic sessions, including simulation, professor rounds, and small group discussion. This will take the sub-intern away from the wards for roughly 2-3 hours at a time on a given afternoon.

METHOD OF EVALUATION: Preceptors will provide ongoing, constructive evaluation and feedback of the student’s competence in taking accurate histories, performing directed examinations, making assessments, forming appropriate plans, and building good relationships with patients and their families. Student will also be evaluated on professionalism and good interpersonal skills. Preceptors who work with the assigned student will also fill out a standardized evaluation form and send it to the Sub-I director for review. This will eventually get released and send to student for review. Faculty will base their evaluation on:

1. Daily observation of the student during rotation.
2. Feedback by the assigned resident(s) and attending physicians.
3. Sub-internship OSCE.
## NARRATIVE DESCRIPTION

Students will evaluate and assist with the management of all patients admitted to or seen in consultation by the Nephrology service. There will be opportunities for observation of hemodialysis and renal biopsy, clinical discussion of nephrological diseases. Students will attend renal and dialysis conferences. Opportunity to observe outpatient office practice is available (optional).

## OBJECTIVES

Upon completion of this elective, the student will be able to:

1. Describe the basic concepts of renal pathology, i.e., proliferative, membranous changes, interstitial abnormalities, etc., and relate them to clinical presentations.
2. Recognize the basis of the various renal diagnostic tests as well as their indications and complications.
3. Evaluate and properly manage a patient with acute and chronic renal failure.
4. Identify pathogenesis and treatment program for the complications of uremia.
5. Explain the principles and basic clinical concepts of peritoneal dialysis and hemodialysis.
6. Evaluate and manage a patient with nephrotic syndrome.
7. Diagnose and treat fluid and electrolyte and acid-base disorders.
8. Describe the principles of renal stone formation and develop a plan of evaluation and treatment of renolithiasis.
9. Identify the use of commonly used drugs in patients with chronic renal disease.
10. Evaluate and treat hypertension.

## METHOD OF EVALUATION

The faculty will base their evaluation on:

1. Qualitative evaluation by the attending nephrologist during and after the rotation.

## NOTE

Notification of interested students/residents for a rotation in Nephrology must be received at least one month in advance. In emergency situations, which I understand do occur, we will need at least two-week notice.

One month rotations are the minimum. It is too difficult when a student breaks up their block into two segments of two weeks each.

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<th>Address</th>
<th>Coordinator</th>
<th>Prerequisites</th>
<th>Location</th>
</tr>
</thead>
</table>
| 420 NE Glen Oak Ave Peoria, IL | Jenny Doerr
309-655-7733
jndoerr@uic.edu | Phase 2 Medicine Clerkship | SFMC      |

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<th>Visiting Students</th>
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| Course Director | Anthony Horinek, M.D. | NEPHROLOGY (ELEC 621) |
Welcome to the outpatient practice of medicine! Not long ago, it was routine to admit patients with new onset diabetes or hypertension, abdominal pain, change in bowel habits or many other common medical problems. Today, many such patients are evaluated, referred for testing and treated without ever seeing a hospital bed. Physicians in practice have easily adjusted to this change. But, our educational system for medical students is lagging behind. While much can be learned from sick, complicated hospitalized patients, students on an inpatient rotation never see many day to day common medical problems. During the Medicine Outpatient Experience, as a student, you will have a chance to evaluate varied common medical problems. You will also get multiple opportunities to see how complex medical problems interact with each other and how they are managed comprehensively in an outpatient setting. This will complement and build your skills needed on the inpatient rotation as well as help you build skills for future use necessary to work in an outpatient practice.

**OBJECTIVES:** Upon completion of this elective, the student will be able to:

1) Practice patient-centered care, and demonstrate understanding of the value of comprehensive care
2) Develop the skills necessary to obtain pertinent information from all parts of history and refine interview and communication skills
3) Develop the clinical reasoning skills and therapeutic strategies in the management of common ambulatory illnesses
4) Present a case in an organized, clear and time efficient manner in keeping with the time constraints of an ambulatory office
5) If applicable, discuss the procedure, indications, contraindications and complications of the common ambulatory procedures
6) Develop and refine knowledge of the common outpatient medical problems such as hypertension, diabetes Mellitus, joint pain, cough and cancer screening
7) Recognize importance of health maintenance, immunization, healthy lifestyle, healthy eating, smoking cessation and preventive care in patients and help provide counseling to patients on these issues
8) Participate in care of patients at various sites or offsite where care is provided by the sponsoring office
9) Collaborate effectively with members of health care team, staff, nurses and other health care professionals

**METHOD OF EVALUATION:** The faculty will complete an evaluation form on each student who rotates through them. Preceptor will base their evaluation on:

1. Review of histories and physical examinations done by the student.
2. Daily contact with preceptor and making an organized presentation for the patients seen.
3. Based on demonstrated medical knowledge and ability to build a differential diagnoses.
4. Based on student’s ability to approach a particular problem.
5. Based on students understanding of basic medical concepts and ability to apply that on the patient population encountered.
6. Based on students communication skills with patients and staff and timely completion of given tasks.
7. Student’s professional interaction with patient, their families, nurses and other staff members.
8. Using standard Clinical Evaluation Form which will be sent to the preceptor electronically through e-value.
Mock Schedule Week 1 and Week 2 Illustrated

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<tr>
<th>Week 1</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
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<th>Sunday</th>
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<tbody>
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<td></td>
<td>Continuity clinic with community preceptor</td>
<td>Continuity clinic with community preceptor</td>
<td>Continuity clinic with community preceptor</td>
<td>Continuity clinic with community preceptor</td>
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<td>Weekend off</td>
<td>Weekend Off</td>
</tr>
<tr>
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<td>Morning report</td>
<td>Continuity clinic with community preceptor</td>
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<td></td>
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<table>
<thead>
<tr>
<th>Week 2</th>
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<th>Saturday</th>
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<tbody>
<tr>
<td></td>
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<td>Continuity clinic at Heartland preceptor or SOAR resident</td>
<td>Continuity clinic at Heartland or OSF CARE-A-VAN</td>
<td>Continuity clinic at Heartland or Psychiatry didactic/clinic</td>
<td>Continuity clinic at Procedure Clinic or weekly article Presentation</td>
<td>Weekend off</td>
<td>Weekend Off</td>
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<tr>
<td></td>
<td>Morning report</td>
<td>Continuity clinic at Heartland preceptor or SOAR resident or Didactics or epic inbox management</td>
<td>Continuity clinic at Heartland preceptor or geriatrics clinic</td>
<td>Continuity clinic at Heartland preceptor or SOAR resident or didactics</td>
<td>Continuity clinic at Heartland preceptor or SOAR resident or Didactics</td>
<td>Weekend Off</td>
<td>Weekend Off</td>
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Outpatient Rotation

- All Clinic Assignments with no housing are scheduled for Monday Mornings (exceptions noted) and full day shifts Tuesday – Friday. For most clinic assignments, be prepared to drive daily!

- Your attendance at every Monday afternoon lecture is mandatory while you are on Outpatient Rotation, regardless of Clinic Assignment.
Students have a brief encounter with hospice during their Internal Medicine Core Clerkship in the 3rd year, but receive no structured exposure or experience to palliative medicine during their medical school career. The Palliative Medicine Rotation focuses on training communication skills and pain & symptom management skills, which are essential for every physician who provides direct patient care. The tenets of palliative medicine as a specialty extend to every physician, and physicians in all fields of practice benefit from understanding of palliative care principles. The goal of this M4 elective is to provide exposure to inpatient palliative medicine, basic training in key communication and pain/symptom management skills, as well as approaches to decision-making and caring for the patient (and family) suffering with potentially life-threatening or life-limiting illness. A student on this rotation will gain a more thorough understanding of the tenets of palliative medicine through hands on instruction and active participation in a busy inpatient palliative care service.

1. Patient Care
   • Assess patient and families’ understanding of their situation, diagnoses, and prognosis, and utilize effective strategies to communicate these.
   • Determine and describe appropriate goal-based options available to various seriously ill patients, and assist families in coming to a decision.
   • Assess decision making capacity, and roles of HCDPOA agents and proxies in medical decision-making
   • Perform a multidimensional evaluation of various pain syndromes and propose reasonable and appropriate multimodal pain treatment for each.
   • Perform a thorough symptom assessment in seriously ill patients, to include dyspnea, nausea, agitation, delirium, insomnia and other common issues, and propose a reasonable treatment plan for each.

2. Systems Based Practice
   • Identify the role of hospice and palliative medicine in providing excellent care for seriously ill patients while ensuring both patient autonomy and good stewardship of health care resources.
   • Gain proficiency in discharge planning of complex patients with multiple medical needs
   • Show awareness of the team approach to health care and identify the utility of each member of the team, particularly in the setting of advanced illness
   • Describe the indications, roles, timing, and evidence for both hospice and palliative care/medicine involvement.

3. Practice Based Learning
   • Discuss up to date palliative medicine topics as they pertain broadly to patient care
   • Demonstrate awareness of medical literature and content relevant to the field of palliative medicine

4. Professionalism
   • Explain why skilled communication, empathy, and excellent pain and symptom management are critically important to performing excellent holistic medical care.
   • Identify the role of a physician as it pertains to advanced care planning and goals of care discussion with patients with advanced disease

5. Interpersonal Skills and Communication
   • Develop and utilize effective strategies to establish rapport, assess understanding and communicate difficult information including bad news.
   • Identify and respond appropriately to anger, fear, grief and denial as well as other blocks to effective communication by addressing concerns on both the intellectual and emotional planes.
   • Determine goals of care through in depth discussion with patients and family members
   • Liaison between services as a member of the palliative care team in order to balance the needs of the patient and family with the goals of the care teams
   • Communicate with other consultants and primary inpatient teams
6. Medical Knowledge

- Apply basic medicine concepts learned in third and fourth year to complex medical scenarios
- Identify common side effects and problems of a range of medications in elderly populations, particularly regarding benzodiazepines, opioids, and antipsychotics as well as various medications that may cause delirium.
- Identify critical areas of knowledge of palliative medicine as it will pertain to each field of practice, including pain and symptom management and communication skills

**METHOD OF EVALUATION:** The faculty will base their evaluation on:

1. Direct observation

**REQUIRED READING/ASSIGNMENTS:**

To be assigned by the course director
PULMONARY MEDICINE –
SAINT FRANCIS MEDICAL CENTER/UNITY POINT METHODIST
(ELEC 625)

Address
1001 Main St., Suite 200
900 Main St., Suite 630

Coordinator
Jenny Doerr
309-655-7733
jndoerr@uic.edu

Prerequisites
Phase 2 Medicine Clerkship

Location
SFMC
Unity Point
Methodist/Proctor

Course Directors
OSF:
Deepak Taneja, MD

UNITY POINT-METHODIST:
Kishore Karamchandani, MD

Dates Available
All year except Winter Break

Dates Not Available
Winter Break

Duration in Weeks
4

Hours/Week
45

Lectures/Seminars
Yes

Lab
No

Outpatient
Some

Inpatient
Yes

House Staff
Yes

Night Call
No

Weekends
No

No. of Students
1 at OSF
or Unity Point

Optimizer
Yes

Pathways
Medical Pathway – Medical Selective

Visiting Students
Yes

NARRATIVE DESCRIPTION

The student will work closely with the pulmonary medicine internist and, when available, the resident on the pulmonary service. The student will take an active role in the evaluation and management of patients with a wide variety of pulmonary diseases. The student will obtain proficiency in a pulmonary history and physical examination and be able to formulate a diagnostic and therapeutic plan. Ventilator management and care of intensive care unit patients will be stressed. Basic pulmonary physiology, arterial blood gas analysis, respiratory therapy modalities and pulmonary function testing will be taught.

OBJECTIVES  Upon completion of this elective, the student will be able to:

1. Obtain a pulmonary disease history and perform a pulmonary evaluation.
2. Demonstrate ventilator management and hemodynamic monitoring.
3. Recognize pulmonary physiology and arterial blood gas analysis.
4. Identify the various modalities of respiratory therapy.

METHOD OF EVALUATION  The faculty will base their evaluation on:

1. Review of histories and physical examinations done by the student.
2. Daily contact with the pulmonary physician.
SURVEY OF MEDICAL INFORMATICS  
(ELEC 156)

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<tbody>
<tr>
<td>One Illini Drive Peoria, IL</td>
<td>Jenny Doerr 309-655-7733 <a href="mailto:jidoerr@uic.edu">jidoerr@uic.edu</a></td>
<td>Passing of Step One exam &amp; completion of one clinical clerkship</td>
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<tr>
<td>Yes</td>
<td>No</td>
<td>1 per 2 week session if available. No visiting students Block XII.</td>
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NARRATIVE DESCRIPTION

Medical informatics is an interdisciplinary field that deals with resources, devices, and formalized methods for optimizing the storage, retrieval, and management of biomedical information. This course surveys information resources and management tools using a variety of instructional methods including online lectures/seminars, readings, and assessments. Assessment mechanisms include quizzes, short essays, hands-on exercises, and reflective writing. Assignments are designed to build informatics skills and for students to reflect and synthesize the impact informatics will have on their future career. This course is an asynchronous online course best suited to self-directed learners. The goal is to prepare the student for success in residency and practice by providing a foundation in medical informatics.

OBJECTIVES Upon completion of this elective, the student will be able to:

1. Define Medical Informatics and explain its component competencies as they relate to various roles in the practice of medicine, including clinical care, research, and lifelong learning.
2. Retrieve, appraise, and apply medical information for clinical decision-making and patient education using a variety of decision support tools and other information resources.
3. Discuss the impact of the electronic health record, government systems/resources, and “big data” on patient care, biomedical research, and practice management.
4. Define health literacy concepts and utilize them in patient education and communication.
5. Develop a personal information management plan that demonstrates basic knowledge of information technologies, tools, and resources.

METHOD OF EVALUATION The faculty will base their evaluation on:

1. Class participation.
2. Course quizzes, short essays, hands-on exercises, and reflective writing.
3. Timely completion of the elective.

REQUIRED READING

Readings are available on the Blackboard course site.
Department of Medicine-Pediatrics

Program Director: Matthew J. Mischler, M.D.

Schedule Change Authorizations:
Erin Driscoll (erind@uic.edu)
## COMMUNITY BASED MEDICINE-PEDIATRICS (ELEC 800.1)

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<td>Erin Driscoll</td>
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<tr>
<td>Chillicothe, IL</td>
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<tr>
<td>Farmington, IL</td>
<td><a href="mailto:erind@uic.edu">erind@uic.edu</a></td>
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### NARRATIVE DESCRIPTION

The student will work with Med-Peds physicians in Central Illinois. The student will participate in the practice of general Internal Medicine and Pediatrics. If desired, an inpatient experience can be arranged.

### OBJECTIVES

Upon completion of this elective, the student will be able to:

1. Apply knowledge of Internal Medicine and Pediatrics to patients with common outpatient presentations.
2. Describe how an office practice is run, including: office management and patient flow, triage, phone-call patient management, CPR procedure diagnosis and coding, and billing practices.
3. Describe the role of a Med-Peds physician within primary healthcare.

### METHOD OF EVALUATION

The faculty will base their evaluation on:

Standard Clinical Evaluation Form

### REQUIRED READING

As dictated by patient problems, readings will be selected from:

*Harrison's Principles of Internal Medicine* or *Cecil's Essentials of Medicine*, *Nelson's Essentials of Pediatrics*.
Department of Neurology

Chair: Jorge C. Kattah, M.D.

Schedule Change Authorizations:
Charlotte Bess (cobess@uic.edu)
Lee Ann Kriegshauser (leeann6@uic.edu)
The purpose of this clerkship is to afford an opportunity to the student to accept responsibility, under supervision, for the workup and management of neurological patients seen in clinical practice. The clerkship will familiarize you with a spectrum of the most common neurologic abnormalities that you will face in the practice of general medicine. Select lectures are held early in the morning and are designed to help you with the clinical examination. The student will have 2 weeks each in stroke and inpatient neurology rotations.

**OBJECTIVES**
Upon completion of this elective, the student will be able to:

1. Demonstrate the ability of history taking and physical examination of patients with common neurological problems and formulate a clinical differential diagnosis.
2. Use the laboratory in an integrated fashion, selectively and with a hypothesis-formulating approach in the further exploration of a given case utilizing the following tests and identifying their indications and contradictions.
   - Non-invasive Neurological Diagnostic Tests
     a. Electroencephalography (EEG)
     b. Computerized tomography (CT Scan)
     c. Magnetic resonance imaging (MRI) and angiography (MRA)
     d. Doppler carotid flow studies.
   - Invasive Neurological Diagnostic Tests
     a. Lumbar puncture for analysis of cerebrospinal fluid
3. Demonstrate the initial workup, investigations, and management of common acute neurological emergencies and stroke, and provide night call coverage of emergency services at OSF Saint Francis Medical Center under supervision.
4. Student in-depth with complete literature review of significant neurological problems encountered and present these in rounds.
5. Perform, under supervision, lumbar puncture for CSF examination, if possible.

**METHOD OF EVALUATION**
The faculty will base their evaluation on:

- A shelf test will be given at the end of the rotation. The scope of the test includes the material given in the first- and second-year clinical neuroscience course. It is important to emphasize that the current clerkship conferences are not guided to cover the test questions, but rather to enhance your clinical skills.
- The rotation consists of two main components: a two-week inpatient Neurology teaching rotation and a two-week stroke rotation. The final grade will be determined from the score obtained on the test together with the grades from each rotation. You will be assigned one week night call and one weekend call. Comments from the supervising attending will be used to evaluate performance. Every week the student will submit to the Clerkship Director, Jorge C Kattah, MD, an electronic copy of the best 2 Neurology Teaching Service and Stroke Service work-ups, for a total of 8 write-ups. These can be selected from cases seen during the “on call” assignment. The assessment section of the write-up will be evaluated by the Clerkship Director. The assigned Attending or Neurology resident must read the write-up and sign each write-up.
- Standard Clinical Evaluation Form.
NEURO-OPHTHALMOLOGY ELECTIVE
(ELEC 240)

Address
530 N.E. Glen Oak

Coordinator
Charlotte Bess
309-655-7999
cobess@uic.edu

Prerequisites
Completion of Phase 2 Psychiatry Clerkship

Location
Neuro-ophthalmology clinic

Course Director
Bahareh Hassanzadeh

Dates Available
Based on availability. By request only.
Only 1 day absent allowed for 2-week rotation

Dates Not Available
Fall Break
Winter Break

Duration in Weeks
2 weeks
4 weeks w/dept. approval

Location
Neuro-ophthalmology clinic

Hours/Week
40

Lectures/Seminars
Friday Noon Conference

Lab
Give 10 minute presentation

Outpatient
100%

Inpatient

House Staff
No

Night Call
No

Weekends
No

No. of Students
1

Optimizer
No

Pathways
Medical Pathway – Medical Selective

Visiting Students
Yes

Only 1 absent day allowed for 2-week elective. Days off will need to be approved prior to the start of the rotation.

NARRATIVE DESCRIPTION

This course introduces students to neuro-ophthalmology. Students will observe patients with staff physicians, and gain exposure to Humphrey and Goldmann visual fields, optical coherence tomography, fundus photography, and the neuro-ophthalmologic exam.

OBJECTIVES

Upon completion of this elective, the student will be able to:

1. Describe common neuro-ophthalmologic conditions, including the pathophysiology, epidemiology and treatment.
2. Perform the neuro-ophthalmologic exam, including visual acuity, colors, fields, extraocular movements.
3. Perform fundoscopy, and describe fundus findings of the optic disc, macula, and peripheral retina.

METHOD OF EVALUATION

The faculty will base their evaluation on:

1. Student participation in clinic and lectures.
2. Student technique in performing the neuro-ophthalmologic examination.
3. Student presentation of assigned topic.

REQUIRED READING

- 2010 American Academy of Neurology Continuum: Neuro-ophthalmology. - will be provided to student on first day of rotation.
- Please bring your ophthalmoscope
SLEEP DISORDERS ELECTIVE (ELEC 930)

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<td>309-655-7999 <a href="mailto:cobess@uic.edu">cobess@uic.edu</a></td>
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Course Director
Sarah Nath Zallek, M.D.

*Narrative Description*

This elective is designed for all students. The elective is designed to introduce the student to the field of sleep disorders and allow her/him to understand the basic clinical aspects as well as the impact upon the patient and society in general of the patient with known or suspected sleep disorders. The student will both observe and participate in activities encountered within the evaluation and management of patients with complaints of sleep disorders, which may include, but are not limited to the following: sleep apnea, insomnia, nonrestorative sleep, excessive daytime sleepiness, unusual movement or behaviors during sleep, sleep-related seizures and disorders of the sleep/wake schedule.

Annually, the INI Sleep Center conducts approximately 3,000 sleep studies and carries out 7,200 office visits at the OSF Saint Francis Medical Center and the INI Sleep Center - Knoxville. OSF Saint Francis Medical Center is the major teaching affiliate of this site. The student will attend teaching conferences and other educational exercises along with members of the house staff.

**Objectives**

Upon completion of this elective, the student will be able to:

1. Recognize sleep disorders in children and adults.
2. Perform clinical evaluations (history and physical) and determine differential diagnosis on patient with sleep complaints.
3. Determine diagnostic evaluation for patients with sleep disorders. Interpret basic features of sleep studies and apply interpretations to clinical cases.
4. Discuss the effect known or suspected sleep disorders can have upon the patient, her/his family/friends and society as a whole.

**Method of Evaluation**

The faculty will base their evaluation on:

1. Conferences between the Course Director and the student to guide student in meeting objectives.
2. Evaluation of performance on discussion of case presentations.
3. Completion of Standard Clinical Evaluation Form by preceptor and discussion with student, if warranted.

**Required Reading**


*Student will spend one night in sleep lab observing sleep studies, with time off the following day(s).*

**On a rare occasion, a student will have the opportunity to perform a sleep consultation on an inpatient.*
Department of Neurosurgery

Head: Jeff Klopfenstein, M.D.

Schedule Change Authorizations:
Charlotte Bess (cobess@uic.edu)
Lee Ann Kriegshauser (leeann6@uic.edu)
NARRATIVE DESCRIPTION

The student will be directly involved with the initial evaluation and subsequent treatment of neurosurgical patients. Emphasis will be placed on neurological evaluation and the subsequent laboratory and radiographic investigation. The student will be either an observer or assistant in the operating room and will participate in the emergency care of neurosurgical patients.

The neurosurgery clerk will be expected to scrub on only a very limited number of cases, but will be encouraged to see the pathology on the microscope on a number of cases.

OBJECTIVES  Upon completion of this elective, the student will be able to:

1. Be competent in doing a careful neurological-neurosurgical history and physical examination, an anatomical and pathological analysis, and a proposed investigation.
2. Understand the pathophysiology, evaluation and management of patients with intracranial and spinal trauma.
3. Identify the common benign and malignant brain tumors in adults and children and have a basic knowledge of the treatment modalities available.
4. Be able to specifically identify and diagnose the common cervical and lumbar radicular syndromes and outline a diagnostic therapeutic approach in cervical and lumbar radiculopathy.
5. Identify, diagnose and outline the management of the common entrapment syndromes, i.e., carpal tunnel syndrome and neuropathy.
6. Recognize subarachnoid hemorrhage, outline the diagnostic steps in subarachnoid hemorrhage and discuss in basic terms the management of intracranial aneurysms and anomalies.
7. Examine, diagnose and outline the treatment of the common ischemic and hemorrhage brain syndromes and discuss their management.
8. Become knowledgeable concerning requirements for the intraoperative management of spinal and cranial disease in terms of the basic operative experiences.
9. Become familiar with the common English language sources available for investigation of a problem, i.e., the “Journal of Neurosurgery” and “Neurosurgery.”

METHOD OF EVALUATION  The faculty will base their evaluation on:

1. Written weekly work-ups with care outlines and/or a 10-15 minute PowerPoint presentation at one of the morning conferences will represent 25% of the grade.
2. Performance on daily work rounds with the attendings and residents will represent approximately 50% of the grade.
3. A Shelf test is given at the end of the four week rotation. The scope of the test includes the material presented in the first and second year clinical neuroscience course and will represent 25% of the final grade.

REQUIRED READING

Handbook of Neurosurgery, Mark St. Greenburg (most current edition).
Department of Obstetrics & Gynecology

Chair: Stephen Thompson, M.D.

Schedule Change Authorizations:
Lauren Keeton (keeton2@uic.edu)
NARRATIVE DESCRIPTION

The student will be exposed to both the outpatient and inpatient management of the patient with dysplastic and malignant gynecological disorders. The student will work directly with a sub specialist in gynecologic oncology. The medical student will become an integral part of the team performing in a role as a sub-intern.

OBJECTIVES
Upon completion of this elective, the student will be able to:

1. Obtain a comprehensive history and physical from the gynecologic oncology patient.
2. Discuss the differential diagnosis of premalignant and malignant disorders of women.
3. Describe the appropriate use of diagnostic testing in the evaluation of the gynecologic oncology patient.
4. Describe the pre-operative and post-operative management of patients undergoing gynecologic procedures for premalignant and malignant conditions.
5. Discuss the different modalities of therapy available for the treatment of gynecological malignancies including surgery, radiation and/or chemotherapy.
6. Observe surgeries performed by the gynecologic oncology attendings.
7. Attend the outpatient office of gynecologic oncology attendings.

EXPECTATIONS OF THE STUDENT
The student is expected to:

1. Perform all of the assigned duties.
2. Attend Grand Rounds on Thursday mornings.
3. See all of the assigned patients on a daily basis and write comprehensive SOAP notes.
4. Have all pertinent information about the assigned patients readily available.
5. Actively participate in the management of the patient.
6. Perform literature reviews as requested for presentations.
7. Coordinate the total care of the gynecologic oncology patient.

EDUCATIONAL OPPORTUNITIES

1. Morning Report – The residents meet daily from 0645 to 0715 hours. They discuss various topics in obstetrics and gynecology. This conference is required for the medical student.
2. Daily Patient Rounds – The student is required to attend and participate in daily patient rounds. The time of patient rounds is variable. This will be under the direction of the resident.
3. Grand Rounds – The student is required to attend the weekly Grand Rounds. This conference will be held every Thursday (except July and August) at 0800 hours.
4. Resident and Student Lectures – There are opportunities for formal didactics during the rotation.

REQUIRED READING

As assigned by the resident and/or attending physician.

Reference Text: Clinical Gynecologic Oncology, Disaia.
STUDENT EVALUATION

The grade assigned to the student will be a compilation of input from faculty and residents. Direct observation will be required. The components will include:

1. Communication with patients.
2. Sensitivity to the needs of the gynecologic oncology patient.
3. Willingness to ask for help.
4. Motivation and interest in the subspecialty.
5. Ability to obtain an Ob/Gyn history and perform an Ob/Gyn physical examination.
7. Demonstration of knowledge base in gynecology and oncology.
8. Independence in patient management decisions.

A final grade will be issued to the Academic Affairs office on a Standard Clinical Form of the University of Illinois College of Medicine at Peoria.
The student will work directly with obstetric residents and three subspecialists in Maternal-Fetal Medicine. Learning opportunities will come from a busy, high-risk obstetric service that includes over 300 maternal transports per year from outlying hospitals, a high-risk obstetric clinic, formal teaching sessions two times per week, weekly perinatology conference, daily rounds with faculty, and an active fetal ultrasonography service. The student will be responsible for initial work-up, daily patient rounds, and assistance with delivery of pregnant patients with a wide range of medical and obstetrical complications.

**OBJECTIVES** Upon completion of this elective, the student will be able to:

1. Describe obstetric risk factors, medical problems of the high-risk mother and fetus, and appropriate clinical management.
2. Describe appropriate use of the following technologies in the management of the high-risk pregnancy: electronic fetal monitoring, ultrasound, and non-invasive fetal evaluation.

**METHOD OF EVALUATION** The faculty will base their evaluation on:

1. Input from faculty and residents working with student. Written evaluation discussed with student.

**REQUIRED READINGS**

As assigned.
NARRATIVE DESCRIPTION

During this medical clerkship, the rotating medical student will be shadowing and assisting on the evaluation of patients with benign complex gynecologic conditions. This is a comprehensive rotation that is divided into an outpatient clinic portion, and an operative portion where the rotating student will function in an “acting-intern” capacity. This includes participation in key elements of patient physical examinations, in-patient rounding, and assisting in the operating room as well. The rotation will follow the schedule herein:

Monday – Reading, research, outpatient heartland clinic, or the operating room (either one or a combination of these)
Tuesday – Outpatient clinic at the IMC building 4th floor – Minimally Invasive Gynecology Clinic
Wednesday – All day in the operating room
Thursday – Lectures and didactics, followed by Outpatient clinic at the IMC building 4th floor as on Tuesday
Friday – Reading, research, outpatient heartland clinic, or the operating room (either one or a combination of these)
Weekends – usually off unless in-patients need to be rounded on

The rotating student is required to read the assigned topics noted below. They are also required to prepare a lecture for residents by the end of their rotation and the topic would be determined with the course director. Rotating students are also highly encouraged to participate in departmental research. Such scholarly opportunities can include case reports, surgical videos, or assisting other residents/faculty in ongoing research projects. Authorship to such studies is granted based on the extent of involvement.

At the conclusion of the rotation, the medical student will convene with the course director and a formal evaluation will be completed.

OBJECTIVES At the end of this rotation, the student will be able to:

Demonstrate knowledge of abdominal and pelvic anatomy
Describe pelvic support as relates to uterovaginal prolapse and urinary incontinence.
Elicit and identify patient history which may suggest variations and alterations in normal anatomy.
Interpret exam findings which would indicate normal and abnormal anatomy.
Define abnormal uterine bleeding and its evaluation.
Discuss medical vs. surgical options to treat different gynecologic disorders.
Describe the pathophysiology and management of fibroids.
Describe the pathogenesis, symptomatology, evaluation and treatment of endometriosis.
Describe the etiology, evaluation and treatment of adnexal masses.
Describe the surgical approach to pelvic floor disorders, pelvic organ prolapse and incontinence.
Develop a differential diagnosis for acute and chronic pelvic pain.
Understand the energy sources utilized for surgical dissection particularly monopolar, bipolar and ultrasonic energy devices.
Provide appropriate assistance during surgery including suturing and manipulation.
Demonstrate good hand-eye coordination when performing the surgical procedure.

METHOD OF EVALUATION

M4 standardized evaluation form completed by course director.
REQUIRED READING

1. Diagnosis of Abnormal Uterine Bleeding in Reproductive-Aged Women – Practice Bulletin # 128
4. Pelvic Organ Prolapse. Practice Bulletin Number 185, November 2017
5. Urinary Incontinence in Women Practice Bulletin Number 155, November 2015
NARRATIVE DESCRIPTION

This obstetrics and gynecology phase 3 sub internship is designed to synthesize medical knowledge gained during phase 2 clerkship with further application in primary patient management and care. The learner will be assigned 3-5 patients to actively manage under the supervision of a senior resident or attending. The learner will have experiences on labor and delivery, gynecologic surgery and obstetrics and gynecology clinic. This will allow the learner to navigate the three primary environments that an obstetrician-gynecology resident will be responsible for during residency.

OBJECTIVES

At the end of this rotation, the student will be able to:

1. Admit and manage patients on the labor and delivery service
2. Identify, discuss and enter orders on assigned patients
3. Identify and perform appropriate triage of patients on labor and delivery
4. Effectively utilize electronic medical record on assigned patients including History and Physical, progress notes and update problem list
5. Effectively and professionally communicate with an interdisciplinary healthcare team.
6. Describe common gynecologic surgical technique and approach
7. Identify gynecological anatomical structures during surgical procedures
8. Manage patient care from pre-operative through post-operative phases on assigned patients
9. Identify and describe medical and surgical management of common obstetric and gynecologic processes included, but not limited to, spontaneous abortion, full term and pre-term vaginal and cesarean section deliveries, hysterectomy.

METHOD OF EVALUATION

1. Medical Knowledge and application to Patient Care
2. Formative feedback on patient and interdisciplinary interaction skills.
3. Standard Clinical Evaluation Form to be completed by the course director.

REQUIRED READING

At direction of course director and faculty
Department of Pediatrics

Chair: Pedro de Alarcón, M.D.

Schedule Change Authorizations:
April Day (aaday1@uic.edu)
NARRATIVE DESCRIPTION
Child Abuse Pediatricians are specialists trained in the evaluation of cases of suspected child abuse and neglect, as well as education of others in the field. The increase in literature surrounding child abuse and neglect has increased dramatically, with journals devoted specifically to the topic. Despite this increased knowledge surrounding child abuse and neglect, the education of medical students and physicians regarding the topic is limited. In order for physicians to be able to provide quality evaluation services without access to academic centers where most child abuse pediatricians practice, education for physicians is crucial. The first place to begin the education for physicians is at the medical student level. This elective will provide an overview of child maltreatment including physical abuse, sexual abuse and neglect for the medical student.

OBJECTIVES
At the end of this rotation, the student will be able to:

1. Student will recognize common presentations of child physical abuse and neglect.
2. Student will understand they are required to report suspected abuse and the mechanism for doing so.
4. Discuss how child maltreatment and adverse child experiences affect long-term health outcomes.

METHOD OF EVALUATION
M4 standardized evaluation form completed by attending faculty based on the participation in clinic, (and/or other methods of eval)

REQUIRED READING
Suggested Reading list with multiple articles related to child maltreatment will be provided electronically at the start of the rotation.
NARRATIVE DESCRIPTION
The purpose of this individualized elective is to expose students who are considering careers in primary care to a multidisciplinary pediatric weight management program. The student will participate in clinic and team care, group weight management sessions, community-based health promotion activities, and case-based didactics. The student will also be required to assist with current QI projects of the program, capacity building for care initiatives, or scholarly work. The student will receive training in motivational interviewing.

OBJECTIVES:

Upon completion of this elective, the student will be able to:
1) Describe the socioecological model of childhood obesity
2) Identify co-morbidities of childhood obesity and describe management strategies
3) Demonstrate patient-centered approach to lifestyle management
4) Describe how social determinants of health, genetic and epigenetic changes contribute to childhood obesity and its related co-morbidities

METHOD OF EVALUATION

M4 standardized evaluation form completed by attending faculty based on the participation in clinic, (and/or other methods of eval)
- Direct observation and feedback of motivational interviewing skills and clinical care
- Preceptor/student case-based discussions with reflection
- Completion of standard clinical evaluation form by preceptor

REQUIRED READING
- Estrada et al. Children’s Hospital Association Consensus Statements for Comorbidities of Childhood Obesity. Childhood Obesity Vol 10, No 4, Aug 2014

RECOMMENDED READING
- https://ihcw.aap.org/Documents/Assessment%20%20and%20Management%20of%20Childhood%20Obesity%20Algorithm_FINAL.pdf
**NEONATOLOGY**  
**ELEC 654**

**Course Director**  
M. Jawad Javed, M.D.

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**NARRATIVE DESCRIPTION**

The student will be assigned to the Neonatal Intensive Care Unit under the supervision of a neonatologist, neonatal nurse practitioners and a resident. He/she will gain experience in the management of various problems of newborns and will learn to perform procedures such as endotracheal intubation and umbilical vessel catheter placement. Emphasis will be placed on early recognition of high-risk factors in the perinatal periods as they affect the infant. The student will see and examine other premature and normal newborn infants as part of this experience. The student will be expected to take night call (with a senior resident or nurse practitioner) every 4th night. The student will be treated as the equivalent to a first-year resident.

**OBJECTIVES**

**Competency Areas:**  
PC=Patient Care; SBP=Systems Based Practice; MK= Medical Knowledge; PROF=Professionalism; PBL=Practice Based Learning; ICS=Interpersonal and Communication Skills

1. Recognize newborns requiring subspecialty consultation and/or transfer to a referral center. SBP
2. Students will take part daily in radiology rounds reviewing radiologic imaging of their patients with pediatric radiology attendings and the neonatology team. PBL
3. Students will regularly meet or call parents to listen to their concerns and keep them updated on their child’s condition and care plan. ICS
4. Students will coordinate consult services and facilitate discussion among clinician members of the team and the family. ICS
5. Daily notes in the chart clearly documenting patients’ progress, diagnostic results and ongoing plan will be completed in order to maintain an accurate medical record and share information among team members. When leaving the rotation, an off-service summary will be prepared and made part of the medical record. ICS
6. List the pieces of equipment necessary for effective neonatal resuscitation. MK PROF SBP
7. Perform a thorough newborn physical exam, including gestational age assessment. MK PROF SBP
8. Effectively interact with a team of multidisciplinary health care providers. MK PROF SBP
9. Effectively communicate with parents of sick newborns. MK PROF SBP
10. Utilize internet and other resources containing up-to-date medical information. MK PROF SBP
11. Recognize newborns requiring subspecialty consultation and/or transfer to a referral center. MK PROF SBP
12. List common causes of neonatal respiratory distress. MK PROF SBP
13. List maternal risk factors for and signs of neonatal sepsis. MK PROF SBP
14. List causes of neonatal seizures. MK PROF SBP
15. Utilize process improvement techniques to continually improve quality/safety of health care delivery. PBL

**METHOD OF EVALUATION**  
The faculty will base their evaluation on:

1. Oral presentations.
2. Quality of daily progress notes, history & physicals, and final summaries.
3. Knowledge base, including ability to formulate differential diagnosis and problem-oriented diagnostic and treatment plan.
4. Quality of interaction with parents.
5. Completion of Standard Clinical Evaluation Form by preceptor and discussion with student.

**REQUIRED READING:**

2. Additional readings distributed at the beginning of the elective.
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<td>309-655-7999</td>
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**Dates Available**
- All year except Winter Break

**Dates Not Available**
- Winter Break

**Location**
- Resident's work room #5354
- 5th floor main house

**Dates Available**
- All year except Winter Break

**Dates Not Available**
- Winter Break

**Dates Available**
- All year except Winter Break

**Dates Not Available**
- Winter Break

**Lectures/Seminars**
- Yes

**Lab**
- No

**Outpatient**
- No

**Inpatient**
- Yes

**House Staff**
- Yes

**Night Call**
- No

**Weekends**
- No

**No. of Students**
- 1

**Optimizer**
- Yes

**Pathways**
- Medical Pathway – Medical Selective

**Visiting Students**
- No

**NARRATIVE DESCRIPTION**

Welcome to Well Baby. This is your opportunity to become proficient in the examination of the newborn and management of the common questions and problems that come up in clinical practice.

At the end of this rotation, the student will be familiar with these goals and objectives:

**GOAL 1: Physical Exam**
- Understand how to perform newborn exam.

**GOAL 2: Transition**
- Understand the importance of the transition period and the red flags for significant illness.

**GOAL 3: Preventive medicine**
- Understand the rational for routine prophylaxis in the neonate.

**GOAL 4: Blood Group Incompatibility and Jaundice**
- Understand the differential diagnosis for jaundice and the relative risks of kernicterus.

**GOAL 5: Maternal VDRL/RPR**
- Understand the evaluation and treatment for infants of VDRL/RPR positive mothers.

**GOAL 6: Maternal HSV**
- Understand the management of infants at risk for neonatal HSV.

**GOAL 7: Maternal HIV**
- Understand the necessary precautions, evaluation, and follow up required for infants born to HIV positive mothers.

**GOAL 8: Varicella**
- Understand the relative risks and management of neonates exposed to varicella.

**GOAL 9: Social Risk Factors**
- Understand red flags in the social history and their implications.

**GOAL 10: Hypoglycemia**
- Understand rationale for screening and management of hypoglycemic newborns.

**GOAL 11: Screening HCT**
- Understand normal parameters for newborn Hct and CBC.

**GOAL 12: Nutrition**
- Understand how to manage breast and bottle feeding in the newborn.

**GOAL 13: Voiding and Stooling**
- Understand normal time parameters for first void and stool and the medical implications when these parameters are exceeded.

**GOAL 14: Newborn Screening**
- Understand the rationale for performing newborn screens.

**GOAL 15: Circumcisions**
- Understand the risks, indications, and contraindication for circumcision.

**GOAL 16: Discharge Planning**
- Understand criteria for early discharge and provide appropriate follow up.

**GOAL 17: Common Conditions and Symptoms of the Newborn**
- Understand the importance and approach to the evaluation of infants who become symptomatic after the transition period or any other potential issue of parental importance.

**GOAL 18: Identification of "At Risk" Infants**

**GOAL 19: Knowledge of Prenatal Labs/Tests**

**The Bottom Line**
- Know the normal ranges of vital signs, stooling / voiding.
- Perform a complete, careful physical examination, differentiate "sick" from "well".
- Know the common rashes, birthmarks, reflexes.

**METHOD OF EVALUATION**

M4 standardized evaluation through MedHubE Value, completed by attending based on the participation in Newborn Nursery morning rounds and daily activity. M4 students will also complete an evaluation for the attending and the rotation.
NARRATIVE DESCRIPTION

The student will have the opportunity to examine pediatric outpatients with a variety of congenital and acquired heart conditions. Self-instructional materials will be used to assist the student in learning the principles of cardiac examination, the hemodynamics of certain congenital heart lesions and pediatric electrocardiograms. The student will examine preoperative patients and will observe cardiac catheterizations as part of this experience. The student will engage in some independent study during the course.

OBJECTIVES

Patient Care
1. Attend all outpatient clinics at Pediatric Cardiology Center.

Medical Knowledge
1. Discuss the pathophysiology of the following aspects of the cardiovascular system:
   - Genetics
   - Fetal circulation
   - Pulmonary vascular resistance
   - Hemodynamics
2. Describe the indications, limitations, complications of diagnostic techniques used in the assessment of congenital heart disease.
   - Electrocardiography
   - Echocardiography
   - Cardiac catheterization
3. Broad classification of congenital heart disease
   - Discuss various types of congenital heart disease
   - Recognize potential congenital heart disease
   - Recognize normal vs. abnormal ECG’s
   - Be familiar with chest x-ray interpretation as applied to CHD
4. Describe the diagnosis and treatment of the newborn with cyanotic heart disease
   - Define cyanosis
   - Differentiate between cyanosis secondary to cardiac disease vs. pulmonary disease
   - Discus stabilization of the newborn with cyanotic disease
5. Discuss the diagnosis and treatment of congestive heart failure
6. Discuss the clinical course of the 8 most common congenital heart defects and their surgical intervention.
7. Diagnose and manage dysrhythmias.
8. Diagnose and manage cardiorespiratory emergencies including:
   - Shock
   - Cardiac arrest
   - Pericardial tamponade
9. Diagnosis and appropriate management of endocarditis.
10. Discuss risk factors for cardiovascular disease.
11. Assess cardiovascular fitness.
12. Describe the approach to common cardiac related symptoms.
13. Discuss the clinical aspects, diagnosis, treatment and prevention of rheumatic fever.
14. Discuss the clinical aspects, diagnosis and treatment of Kawasaki disease.
Practice-based learning and improvement
1. Apply medical literature to the evaluation and treatment of the above cardiac-related conditions, including but not limited to:
   - The evaluation of infective endocarditis
   - The decision to treat Kawasaki disease
   - The need for evaluation of heart murmurs in children
   - The need for exercise testing
2. Gain experience with resident and medical student teaching

Interpersonal skills and communication
1. Communicate physical findings and discuss plan for evaluation and treatment with attending pediatric cardiologist.
2. Communicate and interact with pediatric intensive care team, inpatient pediatric team and referring physicians.
3. Communicate effectively with parents and children.

Professionalism
1. Maintain professional appearance by compliance with the resident dress code.
2. Attend and participate in cardiac catheterization conference.
3. Show respect to attending physicians, fellow residents, medical students, ancillary staff and parents/patients.

Systems-based practice
1. Gain experience with appropriate referral and utilization of resources for children with abnormal cardiac findings.
2. Become familiar with the risks/benefits of various cardiac procedures such as catheterization.
3. Gain experience with working as a team with other disciplines (intensive care, rehab, cardiovascular surgery).

METHOD OF EVALUATION The faculty will base their evaluation on:
2. Written evaluation developed by the attending pediatric cardiologist.
3. Use of the Standard Clinical Evaluation Form by preceptor and discussion with student.
PEDIATRIC HEMATOLOGY (ELEC 651.1)  

Address  
Bleeding & Clotting Disorders Institute (BCDI)  
9128 N. Lindberg Dr.  
Peoria, IL 61615  
309-692-5337  

Coordinator  
April Day  
309-655-7999  
aaday1@uic.edu  

Prerequisites  
Completion of Phase 2 Internal Medicine or Pediatrics Clerkship  

Location  
Clinic: BCDI and regional outreach clinics  
Inpatient: SFMC, CHOI  

Dates Available  
All year except Winter Break  

Dates Not Available  
Winter Break  

Duration in Weeks  
2-4  

Hours/Week  
50-60  

Lectures/Seminars  
Yes  

Lab  
Yes  

Outpatient  
Yes  

Inpatient  
Yes  

House Staff  
Varies  

Night Call  
Yes  

Weekends  
Yes  

No. of Students  
1  

Optimizer  
Yes  

Pathways  
Medical Pathway – Medical Selective  

Visiting Students  
No  

NARRATIVE DESCRIPTION  
During this rotation, the student will have the opportunity to follow patients in both the inpatient and outpatient setting, while under the supervision of a Pediatric Hematologist/Oncologist. The student will become acquainted with the fundamentals of pediatric hematology, with an emphasis on developing a working knowledge of hemostatic and thrombotic diseases. The student will attend weekly conference/meetings, including Pediatric Grand Rounds and outpatient BCDI clinical meetings. Orientation to BCDI will take place on the first weekday of the rotation. The student will participate in outpatient clinics at BCDI and/or regional outreach clinics. Additionally, students are encouraged to further study a hematologic topic of their interest, and a brief oral presentation on this topic is requested at the completion of the rotation.

OBJECTIVES  
1. To acquaint the senior medical student with the fundamentals of hemostasis, thrombosis, and classical hematology.  
2. To acquaint the senior medical student with common and uncommon congenital hemostatic and thrombotic diseases of children/young adults.  
3. To acquaint the senior medical student with common and uncommon acquired hemostatic and thrombotic and other nonmalignant diseases of children/young adults.  
4. To acquaint the senior medical student with the hematologic manifestations of systemic disease states.  
5. To acquaint the senior medical student with therapeutic interventions for thrombotic diseases and coagulation defects.  
6. To augment the student’s ability to assimilate history, physical exam findings, and laboratory analysis in the evaluation of hemostatic, thrombotic, and nonmalignant disorders.  
7. To enhance the student’s critical thinking of commonly ordered laboratory testing (such as CBC, coagulation profiles) and specific hemostatic and thrombotic testing.  
8. To enhance the student’s ability to develop a management plan for pediatric patients with chronic or acute hematologic and thrombotic disorders.  
9. To introduce the senior medical student to clinical research.  
10. To understand the working of providing integrated care though a hemophilia treatment center.

METHOD OF EVALUATION  
Assessment will be made by Drs. Tarantino, Roberts, and/or Jesudas during clinics, interactions, performance and didactic sessions. The standard M-4 Clinical Evaluation form will be completed.

REQUIRED READING  
Selected readings from various medical journals to be provided by the Course Director.
| **PEDIATRIC HEMATOLOGY/ONCOLOGY**  
| (ELEC 651.2) | **Course Director**  
| | Jaime Libes, M.D. |
| **Address** | Coordinator  
| SFMC  
| 309-624-0917 | April Day  
| Contact: Becky Holthe | 309-655-7999  
| | aaday1@uic.edu |
| **Prerequisites** | Location  
| Completion of Phase 2  
| Pediatrics Clerkship | CHOI |
| **Dates Available** | **Dates Not Available**  
| All year except Winter Break | Winter Break |
| **Duration in Weeks** | **Hours/Week**  
| 2-4 | 25-30 |
| **Lectures/Seminars** | Lab  
| Tumor boards | No |
| **Outpatient** | Inpatient  
| Yes | Yes (separate rotation) |
| **Inpatient** | Yes |
| **House Staff** | **Night Call**  
| Yes - Inpatient  
| Sometimes outpatient | No |
| **Weekends** | **No. of Students**  
| No/Optional | 1 |
| **Optimizer** | **Pathways**  
| Yes | Medical Pathway – Medical Selective |
| **Visiting Students** | Yes |

**Please note that the inpatient and outpatient rotations are separate unless specifically requested.**

**NARRATIVE DESCRIPTION**

Under the supervision of the Pediatric Hematologists/Oncologists, the rotating student will receive an intensive exposure to the principles and practice of clinical hematology and oncology. Students participating in the outpatient rotation will participate in the general Pediatric Hematology and Oncology Clinics, seeing new patients and selected returning patients, and will follow these patients through their diagnosis and/or treatment. The student will also participate in the Hemoglobinopathy Clinic. Students rotating on the inpatient unit will participate in the evaluation and management of inpatients referred for diagnosis and/or treatment of hematologic and oncologic problems. Students are welcome to develop a research project during the rotation under the supervision of the hematology-oncology staff.

**OBJECTIVES**

**Patient Care**
The goals of this rotation are to provide the student with skills that enable him/her to:
1. Manage patients with common hematologic and oncologic problems.
2. Identify when subspecialty assistance for these problems is appropriate.
3. Function as a member of the multi-disciplinary team to optimize patient care.
4. Evaluate and support a patient with a malignancy in all phases of their disease.

**Medical Knowledge**
The goals of this rotation are to expose the student to a wide variety of hematologic and oncologic diseases through patient contact, case discussions, lectures, and self-directed study.

**Practice-Based Learning**
The goals of this rotation are to allow the student to
1. Be exposed to a wide variety of hematologic and oncologic diseases through patient contact, case discussions, lectures, and self-directed individual readings.
2. Conduct literature searches and be encouraged to write articles on appropriate patient cases or medical topics.

**Interpersonal and Communication Skills**
The rotating student will be trained in
1. Collaborating with members of the multi-disciplinary team while caring for children with chronic blood disorders or malignant conditions.
2. Guiding primary care physicians.
3. Consulting physicians and health care professionals as needed.
4. Maintain comprehensive, timely and legible records.

**Professionalism**
Includes
1. Completion of appointed patient care duties.
2. Complete and timely documentation in the medical records.
3. Demonstration of compassion and respect for both team members and patients.
4. Respect patient privacy and autonomy.
5. Demonstrate accountability to both patients and team members.
6. Demonstrate sensitivity to diverse cultural backgrounds.
Systems-Based Practice
While providing care for children with hematologic and oncologic disorders, residents are expected to:

1. Work effectively in both/either the inpatient (CHOI) and outpatient (St. Jude Midwest Affiliate Clinic) settings, depending on the assigned rotation.
2. Coordinate patient care between the two settings by interaction with specialty attendings and the inpatient resident team.
3. Advocate for quality patient care
4. Incorporate consideration of cost awareness and risk-benefit analysis while caring for this specialized patient population.
5. Work with the interdisciplinary team to ensure and enhance patient safety.
6. Participate in identifying system errors and developing solutions for these errors.

1. **METHOD OF EVALUATION** The faculty will base their evaluation on:

   1. Clinical skills.
   2. Analysis of clinical data.

   Students are required to perform histories and physicals on their patients. Each patient should be thoroughly presented to the attending physician and an accurate, comprehensive daily note should be written on each patient.

**REQUIRED READING:**

Students will be directed to suitable text books and papers to read during their rotation. During the outpatient rotation, and as requested during the inpatient rotation, the rotation coordinator can load reading materials onto each student’s USB.

Please also refer to the curriculum for helpful pearls and protocols to guide students through the rotation.
NARRATIVE DESCRIPTION

This elective provides the M4 with the opportunity to learn to manage critically ill pediatric patients in a supervised environment. The student will be assigned several patients to admit and follow. He/she will become skillful at organizing the patient’s multiple problems and understanding the pathophysiology of respiratory failure and multi-system failure. There will be opportunities for research during the course of the elective.

OBJECTIVES

<table>
<thead>
<tr>
<th>Objectives</th>
<th>PC</th>
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<th>PBL</th>
<th>ISC</th>
<th>PRO</th>
<th>SBP</th>
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<tbody>
<tr>
<td>Familiarize with fluid-electrolytes, metabolic and renal disorders, trauma, nutrition, cardio-respiratory management, infection control</td>
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<td>Recognize congenital anomalies presenting in critical care unit &amp; communicate with family</td>
<td>✅</td>
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<tr>
<td>Recognize isolated and multiple organ system failure &amp; interact with team and family</td>
<td>✅</td>
<td>✅</td>
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<tr>
<td>Perform clinical assessment to formulate management plan for critically ill patient</td>
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<tr>
<td>Familiarize invasive and noninvasive techniques for monitoring and supporting pulmonary, cardiovascular functions</td>
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<tr>
<td>Participate in decision making in admitting, discharge, and transfer of patients in the intensive care units and communicate with colleagues, primary care provider and family</td>
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<td>Understand the role of general pediatrician and the intensivist in perioperative management of surgical patients</td>
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METHOD OF EVALUATION

The faculty will base their evaluation on:
1. Day-to-day observation and critique of patient care.
2. Demonstrated ability to organize complicated patients and their problem.
3. Feedback from the resident’s colleagues in Pediatric ICU: Nurse Practitioners, Nursing Staff, and Family Members.

REQUIRED READING

Selected readings from various medical journals to be provided by the Course Director.
<table>
<thead>
<tr>
<th>PEDIATRIC SUB-INTERNSHIP (ELEC 875)</th>
<th>Course Director</th>
<th>Nadia Shaikh, MD</th>
</tr>
</thead>
</table>
| **Address** SFMC                  | **Coordinator** | April Day  
309-655-7999  
aaday1@uic.edu |
| **Prerequisites**                 | **Location**    | Children's Hospital of Illinois at SFMC |
| **Dates Available** | **Dates Not Available** | Block 11  
Winter Break |
| **Duration in Weeks** | **Hours/Week** | 4  
60-70 average |
| **Lectures/Seminars** | **Lab** | No |
| **Outpatient** | **Inpatient** | No  
Yes |
| **House Staff** | **Night Call** | 5 nights of night shift  
5 nights of night shift |
| **Weekends** | **No. of Students** | Yes  
3** |
| **Optimizer** | **Pathways** | No  
Yes |
| **Visiting Students** | | Yes |

**A combined maximum number of 10 students will be accepted across all four sub-internships. Initial approval for a sub-internship must be cleared with Tammy Livingston, M4 Coordinator, in Academic Affairs prior to approval at the departmental level.**

**NARRATIVE DESCRIPTION:**

This elective provides a continuation of the required M3 clerkship with increased patient load and clinical responsibility approaching that of an intern. The student will be assigned to one of four teaching services and will be responsible to several attending pediatricians and residents for the care of pediatric inpatients with a variety of problems. The student will attend teaching conferences, patient and family-centered care rounds and other educational exercises along with members of the house staff.

**OBJECTIVES: Principles essential to providing patient care as a fourth-year medical student:**

1. Taking on primary responsibility for the patient.
2. Focusing histories, physicals, and oral and written communication appropriately.
3. Sharing information effectively with a patient and family.
4. Prioritizing and organizing work effectively.
5. Anticipating what a patient will need during the course of hospitalization (i.e. when they need to be re-examined, when a lab needs to be repeated, when additional therapy is necessary, when additional history needs to be obtained, discharge criteria) and communicating this information effectively in hand-overs.
6. Re-evaluating a patient when you take on their care (i.e. the assessment and plan, as well as the clinical status) and looking further when the clinical picture does not fit.
7. Continuing to think about and re-assess the patient during the course of the day.
8. Coping with uncertainty in patient care issues (i.e. knowing what you know and what you don’t know, accessing best resources, and knowing when and how to get help).
9. Functioning as a “team player” with residents, attendings, nurses, ancillary staff and all others involved in the care of the patient.
10. Coordinating the care of your patient during hospitalization and in planning for discharge.

**METHOD OF EVALUATION:** The faculty and residents will provide day to day feedback if needed and also weekly written formative evaluation/feedback during the course of the elective. A final composite evaluation by the Hospitalists will be then performed which will be based on the student’s overall performance including but not limited to the following areas (these are the six core competencies):

1. **Patient care: Provide patient care that is compassionate, appropriate and effective for the treatment of health problems.**
   - Independently collect both focused and comprehensive, developmentally appropriate patient histories and perform the appropriate exam
   - Recognize patients requiring immediate attention by the supervising senior resident or attending physician
   - Synthesize the information to formulate a primary diagnosis and differentials, formulate an appropriate problem list.
   - Demonstrate family centered approach to patient care.
   - Suggest appropriate tests, modify primary diagnosis based on test results, identify discharge needs
   - Reassess patients continuously, write orders under supervision
2. **Medical knowledge:**
   - Demonstrate knowledge in management of common inpatient pediatric illness including but not limited to: febrile infant, dehydration, failure to thrive, asthma, pneumonia, DKA, seizures, etc.
   - Identify criteria for admission to and discharge from the hospital.
   - Obtain copies of the inpatient articles and work with your team to present the same.
   - Evidence based medicine: select a ‘PICO’ based on a patient seen during the rotation and present at a morning report with your team at the end of the month.

3. **Practice based learning:** Assimilate scientific evidence and use it to improve patient care practices.
   - Demonstrate proper evidence based decisions.
   - Demonstrate ability to appropriately seek and use available educational resources.

4. **Systems based practice:**
   - To become familiar with the roles of different health care professionals and supporting staff and their contributions in caring for the patient and/or patient population.
   - Recognize, address, and work to prevent errors and near-misses.
   - Identify medical needs, arrange follow up care.

5. **Professionalism:**
   - Demonstrate personal accountability towards patients, colleagues and staff, demonstrate punctuality.
   - Demonstrate a humanistic, family-centered approach to the care of each patient, provide culturally effective care.

6. **Communication and Interpersonal skills:**
   - Communicate effectively with patients and families across a broad range of socioeconomic and cultural backgrounds.
   - Demonstrate relationship building skills.
   - Provide education and patient instructions to patients and families using layman terms without medical jargon.
   - Include the family in the decision making process to the extent they desire.
   - Explain to patients and families about patient and family centered rounds.
   - Communicate patient information accurately to the team in a timely manner.
   - Convey concise, pertinent information during hand-offs.

The student will also be evaluated based on their performance in the OSCE which is done separately. The rotation evaluation does not include OSCE performance.

More information about the new COMSEP curriculum can be obtained by visiting:
http://www.comsep.org/Curriculum/pdfs/COMSEP-APPDF.pdf
Department of Physical & Rehabilitation Medicine

Chair: Lisa Snyder, M.D.

Schedule Change Authorizations:
Tammy Livingston (tlliving@uic.edu)
REHABILITATION MEDICINE
(ELEC 658)

Address
See Below*

Coordinator
Tammy Livingston
309-671-8412
tlliving@uic.edu

Prerequisites
Completion of Phase 1

Location
See Below*

Date Available
Year round except as noted.

Dates Not Available
Blocks 8b & 9a
Winter Break

Duration in Weeks
2 maximum

Hours/Week
40

Lectures/Seminars
No

Lab
E.M.G. Lab

Outpatient
Yes

Inpatient
Yes

House Staff
No

Night Call
No

Weekends
No

No. of Students
1 maximum

Optimizer
Yes

Pathways
Medical Pathway – Medical Selective

Visiting Students
Yes

*OSF HealthCare Illinois Neurological Institute, 200 E. Pennsylvania Avenue, Peoria, IL 61603
*OSF HealthCare Center for Health – Pekin, 3422A Court Street, Pekin, IL 61554

NARRATIVE DESCRIPTION

Designed to provide the student with the necessary clinical facilities, patient exposure and professional supervision, to learn the basic principles of evaluation and treatment of physical disabilities and pain management. Clinical experience includes the various neuromuscular disabilities such as stroke, spinal cord injuries, demyelinating diseases, brain injury, muscular dystrophies, etc., various arthritides, amputations, automotive and industrial injuries, cerebral palsy, developmental disorders, etc., in adults as well as pediatric and geriatric patients. Emphasis will be given to the comprehensive multisystem approach to the medical management of severe disabilities, to the use of the rehabilitation team in programming physical, psychological, social and vocational therapeutic objectives, and to learn the basic principles of prescribing physical agents, prostheses, orthoses and assistive devices.

OBJECTIVES

Upon completion of this elective, the student will be able to:

1. Describe the methods and skills used in the total evaluation of physical disabilities and pain management.
2. Identify the principles of prescribing physical modalities and other rehabilitation procedures in the total management of neuromuscular disabilities.
3. Participate with other allied rehabilitation professionals in the team management of rehabilitation patients.

METHOD OF EVALUATION

The faculty will base their evaluation on:

1. Daily meetings with the attending faculty member, in which the student's knowledge and skills in the clinical work-up, diagnosis and treatment planning can be assessed.
2. Completion of Standard Clinical Evaluation Form by preceptor with input from faculty.
Department of Psychiatry

Chair: Ryan F. Finkenbine, M.D.

**Schedule Change Authorizations:**
Maureen Wolfe (maureenw@uic.edu)
Special Studies in Psychiatry (ELEC 857)

Address
Methodist Atrium Building
900 Main Street, Suite 720
Peoria, IL 61602

Phone
Maureen Wolfe
309-671-8395
maureenw@uic.edu

Prerequisites
Completion of Phase 2

Location
Unity Point Health-Methodist
221 N.E. Glen Oak Ave., W717

Dates Available
Per arrangement

Dates Not Available
Per arrangement
Winter Break

Duration in Weeks
2-4

Hours/Week
40

Lectures/Seminars
Yes

Lab
No

Outpatient
Possibly

Inpatient
Possibly

House Staff
Possibly

Night Call
Possibly

Weekends
Possibly

No. of Students
1 per faculty member

Optimizer
No

Pathways
Medical Pathway – Medical Selective

Visiting Students
Yes

Narrative Description

This elective is designed to provide students an advanced clinical experience with a selected psychiatry faculty member or members. Examples of previous electives include adult or child inpatient, consult-liaison, and addiction psychiatry. Some electives may also require preparation of a paper, case study, or other scholarly project. To arrange for this elective, students must first complete the following two-step pre-approval process: 1) contact a Psychiatry Department faculty member (or members) with whom they would like to work and confirm that the faculty member will supervise them during the elective on the desired dates. 2) Once this agreement has been made, the student should then contact the Department’s Education Coordinator (Maureen Wolfe: 309-671-8395, maureenw@uic.edu) and provide a brief written description of the elective. This description should include the course title and elective number, the attending’s name(s), and the dates of the elective. Students failing to complete this pre-approval process will not be allowed to participate in the elective.

Objectives

The overall goal of the elective is to improve the student’s clinical skills in the assessment and treatment of psychiatric disorders, over and beyond what was learned in the M-3 Psychiatry Clerkship.

Upon completion of this elective, the student will be able to:

1. Conduct comprehensive diagnostic evaluation.
2. Formulate and implement an appropriate treatment plan.
3. Manage ongoing care of patients with psychiatric disorders.
4. Conduct on-call duties (if applicable).

Method of Evaluation

The faculty member will base their evaluation on:

1. Ongoing supervision;
2. Formal evaluation of clinical skills using the Standard Clinical Evaluation Form;

Required Reading:

Dependent upon the clinical assignments/research project and student goals.
Department of Radiology

Chair: Sean Meagher, M.D.

Schedule Change Authorizations:
Deanna Silotto (dsilotto@uic.edu)
ADVANCED RADIOLOGY
(ELEC 223)

Address
Dept. of Radiology
UICOMP

Coordinator
Deanna Silotto
309-655-3230
dsilotto@uic.edu

Prerequisites
Completion of Phase 2

Location
OSF SFMC
UICOMP

Dates Available
Prior arrangement with
course director only.

Dates Not Available
Winter Break

Duration in Weeks
2-4

Hours/Week
40

Lectures/Seminars
Yes

Lab
No

Outpatient
No

Inpatient
No

House Staff
No

Night Call
No

Weekends
No

No. of Students
Max of 3

Optimizer
No

Pathways
Medical Pathway – Core Specialty Care
Surgical Pathway – Anatomy and Radiology

Visiting Students
No

NARRATIVE DESCRIPTION
The Advanced Radiology Elective is for students who are entering the field of Radiology. The students will be required to give a 30-60 minute presentation to only the clerkship director and other interested parties. There will be frequent meetings with the clerkship director, ranging from one to three times a week, to monitor the progress of the student and to offer advice.

OBJECTIVES At the end of this rotation, the student will be able to:

1. Greatly increase their knowledge of medical imaging in a specific area.
2. Develop skills in gathering medical imaging information from a wide variety of sources and to assimilate it in an orderly fashion.
3. Presentation for critical review.

METHOD OF EVALUATION The faculty will base their evaluation on:

1. The overall effectiveness of their presentations.
2. The effort and persistence of the student in their research efforts.
3. The attendance of the student at the various learning experiences.

REQUIRED READING
This will vary depending upon the area of the students’ interest. It will include the extensive availability of Web information, current textbooks of medical imaging, etc.
NARRATIVE DESCRIPTION

This course provides a broad-based introduction to the world of medical imaging. Students will be required to purchase a textbook (approximately $60.00). They will be required to read the textbook in its entirety and will be tested on the material in the book as well as lecture content. A series of formal lectures and case presentations will be presented to the students. The students will each be assigned a case that they will need to research and present to the class in PowerPoint format. The student's grade, to a large part, will be based on tests that will be given during the elective.

Students will be encouraged to attend optional clinical rotations within the Dept. of Radiology at OSF Saint Francis Medical Center: fluoroscopy, plain films, neuroradiology, interventional radiology, nuclear medicine, body imaging, radiation oncology, and pediatric radiology.

OBJECTIVES At the end of this rotation, the student will be able to:

1. Perform basic reading of chest and abdomen films.
2. Describe the appropriate use of diagnostic radiological examinations and their applications in medicine.
3. Discuss the field of medical imaging and the types of evidence that radiologists use in formulating diagnoses.

METHOD OF EVALUATION The faculty will base their evaluation on:

1. Written examinations.
2. Evaluation of performance on discussion of case presentations.
3. Attendance required at all lectures unless prior approval obtained.
4. Completion of Standard Clinical Evaluation Form by preceptor and discussion with student, if warranted.

REQUIRED READING

The course provides a broad-based introduction to oncology. The student will see in-patients at Saint Francis Medical Center and review characteristic tumor gross and microscopic pathology specimens and radiographic case studies. Students will also see outpatient oncology patients in the Radiation Oncology Department at Saint Francis. The elective can be tailored to the student's interests and career plans.

The student will also attend a series of tumor boards. The student's grade will be based on the student's grasp of the fundamentals of staging of cancer, the appropriate diagnostic work-up for each given tumor site, and appreciate that multi-modality management that should occur in modern cancer therapy.

Specific sessions will have required attendance:

1. Tumor Board Conferences as assigned.
2. Physics and Treatment Planning work sessions.
4. Radiation treatment delivery sessions.

OBJECTIVES Upon completion of this elective, the student will be able to:

1. Understand the clinical behavior of common cancers.
2. Describe the multi-modality management of cancer by disease site including initial cancer evaluation and ultimate treatment based on the results of staging.
3. Distinguish the fields of surgical, medical, and radiation oncology and their role in common malignancies.

METHOD OF EVALUATION

The faculty will base their evaluation on:

1. Interaction in the clinical settings between the clinicians and the student.
2. Attendance at tumor boards.
3. Completion of Standard Clinical Evaluation Form by preceptor and discussion with student, if warranted.
4. Have an appreciation for cancer control methods.

REQUIRED READING

Readings will be tailored to individual student interests and career plans.
NARRATIVE DESCRIPTION

This elective is designed for students contemplating a career in diagnostic radiology. The student will both observe and participate in the performance of a variety of vascular and nonvascular interventional radiologic procedures. The pre- and post-procedure care of patients referred to the service will be stressed. Basic normal and abnormal angiographic anatomy will be reviewed.

For a two-week rotation, a maximum of two days will be allowed for interviews. For a four-week rotation, a maximum of four days will be allowed for interviews.

OBJECTIVES Upon completion of this elective, the student will be able to:

Identify which patients are candidates for interventional and/or angiographic procedures and describe the indications, contraindications and potential complications of these procedures.

METHOD OF EVALUATION The faculty will base their evaluation on:

1. Conferences between Course Director and the student.
2. Completion of Standard Clinical Evaluation Form by preceptor and discussion with student if warranted.

REQUIRED READING

Department of Surgery

Interim Chair: J. Stephen Marshall, M.D.
Surgery Clerkship Director: Richard C. Anderson, M.D.

Schedule Change Authorizations:
Dawneva Sasse (dsasse@uic.edu)

Note to students:
Dr. Richard C. Anderson will coordinate all surgery clerkships and electives. Please call (309) 655-2383 for assistance. Those students contemplating surgery away rotation(s) should meet with Dr. Anderson at the beginning of the M-4 year or earlier to discuss the requirements of that activity.
ADVANCED COMMUNITY GENERAL SURGERY  
(ELEC 673.3)  

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<th>Location</th>
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</table>
| 150 Lake St.  
  Tremont, IL 61568 | Dawneva Sasse  
  309-655-2383  
  dsasse@uic.edu | Completion of Phase 2 | Clinic and Hopedale Med |

<table>
<thead>
<tr>
<th>Course Director</th>
<th>Trent Proehl, M.D.</th>
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<tr>
<td>Yes</td>
<td>Surgical Pathway – Perioperative Care</td>
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NARRATIVE DESCRIPTION

Each student will be assigned to an active general surgery/primary care service with the Course Director in Tremont. The student will function in the capacity of an intern as an integral part of the surgical team in the hospital and operating room as well as office outpatient setting. The student will be given some experience in instructing hospital personnel. This clinical course is particularly suitable for developing the surgical and primary care skills of those students who plan a career in surgery and are interested in practicing in the community setting.

In addition to office and hospital experience, students are expected to attend and participate in general surgery conferences.

OBJECTIVES Upon completion of this elective, the student will be able to:

1. Demonstrate advanced competence in surgical and primary care diagnoses, preoperative care, intra-operative care, and postoperative care.
2. Assume additional responsibility in managing surgical illnesses such as patients with malignancy and infections as well as the more common general surgical conditions encountered in the community setting.

METHOD OF EVALUATION The faculty will base their evaluation on:

1. Ongoing observation of performance and informal discussions with student by preceptor.
2. Completion of Standard Clinical Evaluation Form by preceptor and discussion with student.

REQUIRED READING:


Additional reading assignments will be made by the Course Director during this elective.

NOTE: CONTACT FOR ELECTIVE ASSIGNMENT

UICOM-P, Department of Surgery:  Dawneva Sasse (309) 655-2383.
NARRATIVE DESCRIPTION

Each student will be assigned to an active general surgical service. The student will function in the capacity of an intern as an integral part of the surgical team in the hospital and operating room as well as office outpatient setting. The student will gain experience in instructing the M3 students. This clerkship is particularly suitable for developing the surgical skills of those students who plan a career in surgery or are undecided about a career in surgery.

In addition to office and hospital experience, students are expected to attend and participate in weekly general surgery conferences including M&M Conference, Grand Rounds, Trauma Conference, and/or Tumor Conference, Critical Care Conference, GI Conference, and a monthly Vascular Conference.

OBJECTIVES Upon completion of this elective the student will be able to:

1. Demonstrate advanced competence in surgical diagnoses, preoperative care, intraoperative care, and postoperative care.
2. Assume additional responsibility in managing critical illness.

METHOD OF EVALUATION The faculty will base their evaluation on:

1. Ongoing observation of performance and informal discussions with student by preceptor.
2. Completion of Standard Clinical Evaluation Form by preceptor and discussion with student.

REQUIRED READING

Reading assignments will be made by Dr. DeBord at the start and during this elective.

NOTE: CONTACT FOR ELECTIVE ASSIGNMENT

UICOM-P, Department of Surgery: Dawneva Sasse (309) 655-2383.
ADVANCED THORACIC SURGERY
(ELEC 932)

Course Director
Richard C. Anderson, M.D.

Address
Illinois Medical Center
1001 Main St., 3rd Flr.
Peoria, IL 61606
309-495-0200

Coordinator
Dawneva Sasse
309-655-2383
dsasse@uic.edu

Prerequisites
Completion of Phase 2 UnityPoint Orientation

Location
SFMC & UPH

Dates Available
All year except Winter Break

Dates Not Available
Winter Break

Duration in Weeks
4

Hours/Week
40-50

Lectures/Seminars
All scheduled general surgery conferences

Lab
No

Outpatient
Yes

Inpatient
Yes

House Staff
When available

Night Call
No

Weekends
Yes

No. of Students
1

Optimizer
Yes

Pathways
Surgical Pathway – Perioperative Care

Visiting Students
Yes

NARRATIVE DESCRIPTION

Each student will be assigned to the Thoracic Surgery Service. The student will function in the capacity of an intern as an integral part of the surgical team in the hospital and operating room as well as the outpatient setting. The student will gain experience in instructing the M-3 students. This clinical course is particularly suitable for developing surgical skills for those students who plan a career in surgery or are undecided about a career in surgery. In addition to office and hospital experience, students are expected to attend and participate in weekly general surgery conferences including M&M, Grand Rounds, Trauma Conference, Tumor Board, and Critical Care conferences.

OBJECTIVES

Upon completion of this elective, the student will be able to:

1. Demonstrate advanced competence in surgical diagnosis, perioperative care, intraoperative care, and postoperative care with a thoracic surgery patient
2. Assume additional responsibility in managing critical care patients with focus on pulmonary function management in thoracic surgery patients.

METHOD OF EVALUATION

The faculty will base their evaluation on:

1. Observation of the performance
2. Informal discussions with the student by the preceptor
3. Standard Clinical Evaluation Form

REQUIRED READING/INFORMATION

Thoracic Surgery, textbook by Griffith Pearson. Chapter 3, Perioperative Assessment of the Thoracic Surgery Patient, A Surgeon’s Viewpoint; Chapter 5, Pulmonary Function Testing, A Practical Approach; Chapter 27, Cancer; Chapter 28, Non-Small Cell Lung Cancer; and Chapter 29, Small Cell Lung Cancer.


The course director has the above textbooks.

NOTE: CONTACT FOR ELECTIVE ASSIGNMENT

UICOM-P, Department of Surgery: Dawneva Sasse (309) 655-2383.
ANESTHESIA/PAIN MANAGEMENT  
(ELEC 795)  

<table>
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<tr>
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| Associated Anesthesiologists  
| Scheduling Office  
| OSF 3rd Floor Gerlach  
| 309-655-2156  
| Fax: 309-655-3951  
|  

<table>
<thead>
<tr>
<th>Coordinator</th>
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</table>
| Dawneva Sasse  
| 309-655-2383  
| dsasse@uic.edu  
|  

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<tbody>
<tr>
<td>Jocelyn McClain, M.D.</td>
</tr>
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</table>

*Students must meet with Dr. McClain prior to the start of the rotation for the purpose of planning the rotation, which must consist of four consecutive weeks. Exceptions to the consecutive limitation may be made on an individual basis.

NARRATIVE DESCRIPTION

The course is designed for the student to observe, discuss and participate in all phases of anesthesia within a clinical setting. Responsibilities will be delegated according to the student's demonstrated ability. There will be scheduled times outside of the operating room for pre-anesthesia and post-anesthesia rounds, recovery room care, and conferences. One afternoon a week, max time will be spent in the Pain Management Clinic. The student will acquire knowledge in the evaluation and management of both chronic and acute pain problems as these are handled in a comprehensive pain management clinic. Students will be given a daily participation log to complete.

OBJECTIVES

Upon completion of this elective the student will be able to:

1. Complete a pre-anesthetic evaluation of patient status by making rounds with an anesthesiologist.
2. Observe and participate in anesthesia management of inpatients and outpatients.
3. Perform insertion of intravenous catheters.
4. Perform endotracheal intubations.
5. Recognize indications, contraindications of various drugs used in anesthetic management.
6. Discuss anesthesia record charting in the operating room and recovery room.
7. Observe peripheral nerve block and catheter placement techniques.
8. Observe and discuss management of anesthesia for patients undergoing cardiac, neurosurgical, pediatric, and obstetric procedures.
9. Evaluate and treat both chronic and acute pain problems.

METHOD OF EVALUATION

The faculty will base their evaluation on student performance.

1. Final overall evaluation will be made by the Program Director after discussion with faculty.
2. Completion of Standard Clinical Evaluation Form will be done by the Program Director.

REQUIRED READING

Introductory text in anesthesia/pain management by Miller and Stoelting will be provided.

NOTE: CONTACT FOR ELECTIVE ASSIGNMENT

UICOM-P, Department of Surgery: Dawneva Sasse (309) 655-2383.
GI SURGERY (ELEC 946)

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<td>Dawneva Sasse</td>
<td>Completion of Phase 2 Internal Medicine, Peds, and Surgery Reliant Point Orientation</td>
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<tr>
<td>1001 Main St., 3rd Flr.</td>
<td>309-655-2383</td>
<td>UnityPoint Orientation</td>
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<tr>
<td>Peoria, IL 61606 309-495-0200</td>
<td><a href="mailto:dsasse@uic.edu">dsasse@uic.edu</a></td>
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<td>Surgical Pathway – Perioperative Care</td>
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NARRATIVE DESCRIPTION

This course is available to students with a particular interest in surgery. The emphasis will be the GI anatomy, physiology, pathology and surgery. The student will have an opportunity to improve skills in the diagnosis and treatment of GI disease. The student will participate in the surgical procedures and take an active part in the preoperative and postoperative management of patients.

OBJECTIVES

Upon completion of this elective the student will be able to:

1. Refine and increase medical and surgical diagnosis and treatment skills.
2. Demonstrate competency in preoperative, intraoperative and postoperative management of GI surgical patients.
3. Present a GI topic approved by Dr. Bonello.
4. Perform duties as instructed by the attending in charge.

METHOD OF EVALUATION

The faculty will base their evaluation on:

1. Ongoing observation of student to determine skill level of performing various procedures and management of GI patients.
2. Discussion with student by course director.
3. Completion of Standard Clinical Evaluation Form by course director.

REQUIRED READING

Dr. Bonello will provide pertinent reading references at the start of this course.

NOTE: CONTACT FOR ELECTIVE ASSIGNMENT

UICOM-P, Department of Surgery: Dawneva Sasse (309) 655-2383.
OPHTHALMOLOGY
(ELEC 639.1)

<table>
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</table>
| 6800 N. Knoxville, Peoria
725 S. 14th St., Pekin
309-692-2020        | Dawneva Sasse
309-655-2383
dsasse@uic.edu     | Completion of Phase 1  | OSF Pekin Hospital |

<table>
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| All year except as noted. | Block 7b
Winter Break | 2-4                  | 35          |

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Students planning to take the four-week elective course must take this over four consecutive weeks. Exceptions to the consecutive limitation may be made on an individual basis.

NARRATIVE DESCRIPTION

The course will acquaint the student with the clinical practice of ophthalmology. The experience will center around outpatient private office care of patients and will include exposure to ocular surgery. The course is designed to prepare the student to diagnose common ocular disorders and recognize ocular manifestations of systemic disease. Emphasis will be placed on the differentiation of those conditions appropriately handled by the non-ophthalmologist from those requiring specialty care. The management of common eye disorders will be stressed. The course provides an opportunity to improve the skills of physical diagnosis of the visual system.

OBJECTIVES

Upon completion of this elective, the student will be able to:

1. Describe indicators of when to refer patients to an ophthalmologist.
2. Perform an orderly eye examination, including proper use of the ophthalmoscope.
3. Examine a patient with red eye and initiate management when appropriate.
4. Evaluate pupillary abnormalities.
5. Evaluate visual field abnormalities.
6. Detect and describe disorders of ocular motility and describe prevention and treatment of amblyopia.
7. Recognize the major types of glaucoma and describe their clinical presentation and treatment.
8. Write an accurate and thorough medical record in regards to ocular disease.
9. Demonstrate a professional and systematic approach in working with a patient with an ocular injury.

METHOD OF EVALUATION

The faculty will base their evaluation on:

1. Completeness, accuracy, and general quality of oral presentation and written documentation of history and physical and work-ups. Appraisal of oral presentations at conferences.
2. Technical skill.
3. Observation and assessment of interactions with professionals and patients.
4. Standard Clinical Evaluation Form will be reviewed with the student by the preceptor.

REQUIRED READING

Reading assignments will be made during the elective.

NOTE: CONTACT FOR ELECTIVE ASSIGNMENT

UICOM-P, Department of Surgery: Dawneva Sasse (309) 655-2383.
OPHTHALMOLOGY
(ELEC 639.2)

Address
Illinois Eye Center
8921 N. Wood Sage Rd.
Peoria, IL 61615
309-243-2400

Coordinator
Dawneva Sasse
309-655-2383
dsasse@uic.edu

Prerequisites
Completion of Phase 1

Location
Illinois Eye Center

Dates Available
All year except as noted.

Dates Not Available
Blocks 1-2
Winter Break

Duration in Weeks
2 or 4

Hours/Week
40

Hours/Week
40

Lectures/Seminars
Occasionally

Lab
No

Outpatient
Yes

Inpatient
Few

Night Call
No

Weekends
No

No. of Students
1

House Staff
No

Optimizer
Yes

Pathways
Medical Pathway – Core Specialty Care

Visiting Students
No

*Students planning to take the four-week elective course must take this over four consecutive weeks. Exceptions to the consecutive limitation may be made on an individual basis.

NARRATIVE DESCRIPTION

The course will acquaint the student with the clinical practice of ophthalmology. The experience will center on outpatient private office care of patients and will include ocular surgery. The course is designed to prepare the student to diagnose common ocular disorders and recognize ocular manifestations of systemic disease. Emphasis will be placed on the differentiation of those conditions appropriately handled by the non-ophthalmologist from those patients requiring specialty care. The management of common eye disorders will be stressed. The course provides an opportunity to improve the skills of physical diagnosis of the visual system.

OBJECTIVES

Upon completion of this elective, the student will be able to:

1. Describe indicators of when to refer patients to an ophthalmologist.
2. Perform an orderly eye examination, including proper use of the ophthalmoscope.
3. Examine a patient with red eye and initiate management when appropriate.
4. Evaluate pupillary abnormalities.
5. Evaluate visual field abnormalities.
6. Detect and describe disorders of ocular motility and describe prevention and treatment of amblyopia.
7. Recognize the major types of glaucoma and describe their clinical presentation and treatment.
8. Demonstrate a professional and systematic approach in working with a patient with an ocular injury.

METHOD OF EVALUATION

The faculty will base their evaluation on:

1. Completeness, accuracy, and general quality of oral presentation and written documentation of history and physical and work-ups. Appraisal of oral presentations.
2. Technical skill.
3. Observation and assessment of interactions with professionals and patients.
4. Standard Clinical Evaluation Form may be reviewed with the student by the preceptor.

REQUIRED READING

Reading assignments will be made during the elective.

NOTE: CONTACT FOR ELECTIVE ASSIGNMENT

UICOM-P, Department of Surgery: Dawneva Sasse (309) 655-2383.
ORTHOPEDIC SURGERY
(ELEC 642.1)

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<tr>
<td>Midwest Orthopedic Center 6000 N. Allen Rd. Peoria, IL 61615 309-691-1400</td>
<td>Dawneva Sasse 309-655-2383 <a href="mailto:dsasse@uic.edu">dsasse@uic.edu</a></td>
<td>Completion of Phase 2 UnityPoint Orientation</td>
<td>SFMC/UPH</td>
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<td>No</td>
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<tr>
<td></td>
<td>Surgical Pathway – Perioperative Care</td>
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</tbody>
</table>

NARRATIVE DESCRIPTION

Each student will develop knowledge of specific orthopedic medical conditions and problems and gain experience in the treatment of these conditions and problems. The student will be responsible for assigned "work-ups" on the preceptor’s service, especially with regard to the presenting orthopedic condition. Call will be taken, not more than every third night, to ensure adequate experience with trauma problems. Under faculty supervision, the student will perform those procedures (wound closure, reductions, cast applications, etc.), depending upon his or her level of competence. Attendance and participation in clinics and rounds will be expected. At least four to six hours per day will be spent in the preceptor’s office.

OBJECTIVES

Upon completion of this elective, the student will be able to:

1. Describe indicators of when to refer patients to orthopedics.
2. Describe the anatomy of the musculoskeletal system.
3. Describe the technology used in orthopedic medicine to diagnose common problems.
4. Describe orthopedic management, treatment and reconstruction aspects of common musculoskeletal problems of the hip, knee, shoulder, spinal, and hand.
5. Orally describe the presenting orthopedic condition of patients.
6. Write an accurate and thorough medical record.
7. Describe the management of simple fractures.
8. Describe the basic principles of treatment for acute and chronic musculoskeletal problems.
9. Identify the basic principles of trauma management.
10. Under faculty or resident supervision, perform the following basic orthopedic procedures: wound closure, reductions, application of splints, casts, braces and appliances.

METHOD OF EVALUATION

Dr. Akeson will base his evaluation on:

1. Verbal interchange between student and preceptor to assess progress.
2. The student will be evaluated by quality of history and physical examination and technical skills observed by the faculty while on the orthopedic service.
3. Observation of interrelations with professionals and patients.
4. Final evaluation will be a discussion with the student and completion of Standard Clinical Evaluation Form by preceptor.

REQUIRED READING

Reading assignments will be made during the elective.

NOTE: CONTACT FOR ELECTIVE ASSIGNMENT

UICOM-P, Department of Surgery: Dawneva Sasse(309) 655-2383.
ORTHOPEDIC SURGERY  
(ELEC 642.3)  
Mainly Resident Elective  

<table>
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<tr>
<th>Address</th>
<th>Coordinator</th>
<th>Prerequisites</th>
<th>Location</th>
</tr>
</thead>
</table>
| Midwest Orthopedic Center  
6000 N. Allen Rd.  
Peoria, IL 61615  
309-691-1400 | Dawneva Sasse  
309-655-2383  
dsasse@uic.edu | Completion of Phase 2  
UnityPoint Orientation | Office, OSF, UPH |

<table>
<thead>
<tr>
<th>Dates Available</th>
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<th>Duration in Weeks</th>
<th>Hours/Week</th>
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<th>Lab</th>
<th>Outpatient</th>
<th>Inpatient</th>
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<th>No. of Students</th>
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<tr>
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<th>Optimizer</th>
<th>Pathways</th>
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<tbody>
<tr>
<td>No</td>
<td>No</td>
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</tr>
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</table>

NARRATIVE DESCRIPTION

The students’ primary responsibility will be in the office, where they will see and evaluate patients with the faculty member. They will also go to surgery with the assigned faculty member on surgery days but will not necessarily be responsible for inpatient care.

Rotation will include experience in orthopedic spinal surgery; hand surgery, and hip, knee and shoulder reconstruction. Attendance and participation in weekly conferences, clinics and rounds will be expected. At least four to six hours per day will be spent in the preceptor’s office.

OBJECTIVES  Upon completion of this elective, the student will be able to:

1. Describe indicators of when to refer patients to orthopedics.
2. Describe the anatomy of the musculoskeletal system.
3. Describe the technology used in orthopedic medicine to diagnose common problems.
4. Describe orthopedic management, treatment and reconstruction aspects of common musculoskeletal problems of the hip, knee, shoulder, spinal, and hand.
5. Orally describe the presenting orthopedic condition of patients.
6. Write an accurate and thorough medical record.
7. Describe the management of simple fractures.
8. Describe the basic principles of treatment for acute and chronic musculoskeletal problems.
9. Identify the basic principles of trauma management.
10. Under faculty or resident supervision, perform the following basic orthopedic procedures: wound closure, reductions, application of splints, casts, braces and appliances.

METHOD OF EVALUATION  The faculty will base their evaluation on:

1. The student will be evaluated by quality of oral and written work-ups of patients and technical skills observed by the faculty while on the orthopedic service.
2. Discussion with student and completion of Standard Clinical Evaluation Form by preceptor.

REQUIRED READING

Reading assignments will be made during the elective.

NOTE: CONTACT FOR ELECTIVE ASSIGNMENT

UICOM-P, Department of Surgery:  Dawneva Sasse (309) 655-2383.
ORTHOPEDIC SURGERY
(with special emphasis on sports medicine)
(ELEC 859)

<table>
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<th>Coordinator</th>
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<td>Dawneva Sasse</td>
<td>Completion of Phase 2 UnityPoint Orientation</td>
<td>Office, OSF, UPH – Field of Athletics</td>
</tr>
<tr>
<td>6000 N. Allen Rd.</td>
<td>309-655-2383</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Peoria, IL 61615</td>
<td><a href="mailto:dsasse@uic.edu">dsasse@uic.edu</a></td>
<td></td>
<td></td>
</tr>
<tr>
<td>309-691-1400</td>
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<th>Inpatient</th>
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<td>Yes</td>
<td>Medical Pathway – Core Specialty Care</td>
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NARRATIVE DESCRIPTION

The elective course emphasizes outpatient orthopedic care with a special emphasis on sports medicine. The student will assist in the diagnosis and management of sports-related injuries. The patient population consists of high school, collegiate, professional, and recreational athletes.

OBJECTIVES

Upon completion of this elective, the student will be able to:

1. Evaluate acute musculoskeletal problems of the knee, ankle/foot, and shoulder (other body parts as able). If available to follow other providers who are willing to allow student to participate.
2. Demonstrate an understanding of a therapeutic exercise rehabilitation program to address sport-related injury of above.
3. Demonstrate an understanding of management of simple fractures and the appropriate casting, splinting, or bracing (if available).

METHOD OF EVALUATION

The faculty will base their evaluation on:

1. The student will be evaluated by quality of oral and written work-ups of patients and technical skills observed by the preceptor.
2. Discussion with student and completion of Standard Clinical Evaluation Form by preceptor.

REQUIRED READING

Reading assignments will be made during the elective.

NOTE: CONTACT FOR ELECTIVE ASSIGNMENT

UICOM-P, Department of Surgery: Dawneva Sasse (309) 655-2383.
The course is designed to introduce the student to the field of otolaryngology and allow him/her to understand the basic clinical and pathologic conditions treated by this specialty. It will be conducted under the supervision of attending otolaryngologists in the office, hospital, and operating rooms of Saint Francis, Methodist and Proctor Hospitals.

**OBJECTIVES**  Upon completion of this elective, the student will be able to:

1. Identify the physical diagnosis of ears, nose and throat.
2. Treat common infectious diseases of the ears, nose, and throat.
3. Recognize the problems of hearing loss, both diagnosis and treatment, in the child and the adult.
4. Identify the histopathology and clinical science of neoplasms of the sinuses, nose, oral cavity, pharynx, and larynx, and describe the need for rehabilitation following laryngeal surgery.
5. Perform a basic diagnosis and treatment of traumatic and congenital disorders of the head and neck.
6. Recognize an indication for referral to otolaryngology care.
7. Preview this field in order to make career decisions.

**METHOD OF EVALUATION**  The faculty will base their evaluation on:

1. Discussion between student and preceptor will be conducted to guide student in meeting objectives.
2. A continuous assessment of student's performance will be conducted by preceptor.
3. Discussion with student at the completion of the rotation and final overall evaluation will be conducted with completion of Standard Clinical Evaluation Form by preceptor.

**RECOMMENDED READING**

2. *Essential Otolaryngology*; KJ Lee

**NOTE: CONTACT FOR ELECTIVE ASSIGNMENT**

UICOM-P, Department of Surgery:  Dawneva Sasse (309) 655-2383.
# PEDIATRIC SURGERY (ELEC 657)

<table>
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<th>Address</th>
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<tbody>
<tr>
<td>420 N.E. Glen Oak</td>
<td>Dawneva Sasse</td>
<td>Completion of Phase 2</td>
<td>Office, OSF</td>
</tr>
<tr>
<td>Office Suite 101</td>
<td>309-655-2383</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Clinic Suite 301</td>
<td><a href="mailto:dsasse@uic.edu">dsasse@uic.edu</a></td>
<td></td>
<td></td>
</tr>
<tr>
<td>309-655-5707</td>
<td></td>
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<th>Inpatient</th>
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<th>Visiting Students</th>
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</thead>
<tbody>
<tr>
<td>Yes</td>
<td>Surgical Pathway – Perioperative Care</td>
<td>Yes</td>
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</table>

## Course Director
Charles Aprahamian, M.D.

## NARRATIVE DESCRIPTION

This course is particularly focused on the student who has developed interest in surgery involving infants from birth to adolescents.

The student will function as a junior intern working with the resident and the preceptor on pediatric surgery. This will involve outpatients and inpatients who are hospitalized for surgical conditions or who are seen in consultations with pediatricians. An attempt is made to allow the students to perform in accordance with the level of their competence. They participate actively in patient evaluations in the office setting and with the team, operating on a wide variety of cases including surgical emergencies in premature infants, congenital anomalies, and a variety of acute, subacute and chronic surgical problems which may occur in children up to the age of 18 years.

## OBJECTIVES

Upon completion of this elective, the student will be able to:

1. Describe differences in the physiology of very young patients which dictates management different from that of adult patients.
2. List pediatric surgical conditions that are rarely seen in adult surgery.
3. Demonstrate ability to interact appropriately with children and their parents in discussions concerning multiple aspects of patient care (i.e., pre- and post-surgery and long-term management issues).
4. Display skill and compassion in dealing with very small patients in the overall care of their surgical conditions.

## METHOD OF EVALUATION

The faculty will base their evaluation on:

1. Oral presentations and discussions will be evaluated both by the faculty and the resident.
2. The quality of work-ups and progress notes in the office and hospital setting will be monitored by the staff and the resident.
3. Technical skills will be evaluated by the resident and/or the attending.
4. The student's experience will be discussed with the course director.
5. Standard Clinical Evaluation Form will be completed at the end of the course.

## REQUIRED READINGS

Selected readings from *Pediatric Surgery*, 2nd edition by Holder & Ashcraft.

## NOTE: CONTACT FOR ELECTIVE ASSIGNMENT

UICOM-P, Department of Surgery: Dawneva Sasse (309) 655-2383.
PLASTIC SURGERY  
(ELEC 656.1)  
Course Director  
Eric Elwood, M.D.

<table>
<thead>
<tr>
<th>Address</th>
<th>Coordinator</th>
<th>Prerequisites</th>
<th>Location</th>
</tr>
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</table>
| Illinois Medical Center  
1001 Main St., 3rd Flr.  
Peoria, IL 61606  
309-495-0250 | Dawneva Sasse  
309-655-2383  
dsasse@uic.edu | Completion of Phase 1 and Phase 2 Surgery  
Clerkship  
UnityPoint Orientation | SFMC, UPH |

<table>
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</table>
| Yes       | Medical Pathway – Core Specialty Care  
Surgical Pathway – Perioperative Care | No               |

Students planning to take the four-week elective course must take this over four consecutive weeks.

**NARRATIVE DESCRIPTION**

Student responsibilities will include evaluation and management of patients in the office two days per week, participation in surgical procedures, and evening and weekend trauma cases occasionally.

The student will gain knowledge in treating acute and chronic hand and upper extremity problems, facial trauma, and reconstructive procedures of the head and neck, trunk, and extremities. The student will also participate in selected cosmetic surgery cases.

**OBJECTIVES** Upon completion of this elective, the student will be able to:

1. Describe and discuss the concept of Functional Restoration.
2. Explain principles of assessment and management of plastic surgical problems.
3. Verbalize selection criteria for plastic surgery patients and treatment options.

**METHOD OF EVALUATION** The faculty will base their evaluation on:

1. Fund of factual knowledge.
3. Ability to follow inpatients with an organized approach to inpatient care.
4. Ability to diagnose conditions seen in the office setting.

**REQUIRED READINGS**

Plastic Surgery by Grabb and Smith, (provided).

**NOTE: CONTACT FOR ELECTIVE ASSIGNMENT**

UICOM-P, Department of Surgery: Dawneva Sasse (309) 655-2383.
A combined maximum number of 10 students will be accepted across all four sub-internships. Initial approval for a sub-internship must be cleared with Tammy Livingston, M4 Coordinator, in Academic Affairs prior to approval at the departmental level.

**NARRATIVE DESCRIPTION**

The purpose of the Sub-Internship is to familiarize the student with responsibilities of a resident and to aid in the transition from medical student to resident physician. The Surgery Sub-Internship provides additional surgical experiences and patient care responsibilities to the fourth-year student who may be considering a career in surgery. This Sub-Internship represents a full-time intensive commitment and significant responsibility of the student caring for patients in the hospital and the outpatient departments. The student will have direct responsibility for comprehensive patient care, including medical and surgical needs of the patient, but will always be acting under the supervision of a senior surgical resident and attending surgeons. The student will see the new patient first, as in the office outpatient setting, inpatient consultation, or inpatient surgical admission. The student will identify the time for appropriate medical consultation, (i.e. diabetes management, nephrology, cardiology, etc.) and make the necessary communication to request consultation, and be present for dialogue and instruction with the consultant and/or consulting service, and in this manner gain experience in the management of the medical needs of the patient. The student will continue to work with the medical consultant as well, to provide on-going comprehensive patient management. The student will participate in preoperative care, assist in surgery and participate in postoperative care, including interpretation and assessment of laboratory findings, imaging information, and other diagnostic tests. It is important to emphasize that the student should function as a Surgery PGY-1, and resident/attending supervision will ensure that all hospital policies of patient care are met. The student will be expected to participate in all of the educational activities of the Department of Surgery during the course of the student’s sub-internship as well as an assigned Laparoscopic Skills Simulator Curriculum.

**OBJECTIVES**

Upon completion of this elective, the student will be able to:

1. Actively take responsibility for assigned patients.
2. Perform appropriate accurate complete history and physical exams and record history and physical and surgical admission notes.
3. Develop comprehensive assessment of the patient’s problem and review the assessment with attending surgeon/senior resident.
4. Discuss and explain assessment, tests to be ordered, test results, and treatment plans with patient and family, including providing informed consent information and the postoperative reports to the patient and family.
5. Demonstrate improved surgical skills during appropriate surgical procedures.
6. Describe the improvement of his/her abilities as measured by the AAMC six competencies of patient care, medical knowledge, practice-based learning and improvement, interpersonal and communication skills, professionalism, and systems-based practice.
7. Show ability to develop PowerPoint presentation for 15-minute teaching lecture to his/her service.

**METHOD OF EVALUATION**

1. On-going observation of performance and informal discussion with student by preceptor.
2. Completion of Standard Clinical Evaluation Form by preceptor and discussion with student.

**REQUIRED READING:**

Reading assignments will be made by course directors during this elective.

**NOTE: CONTACT FOR ELECTIVE ASSIGNMENT**

UICOM-P, Department of Surgery: Dawneva Sasse (309) 655-2383.
SURGICAL CRITICAL CARE/TRAUMA
(ELEC 682)

Address
Illinois Medical Center
1001 Main St., 3rd Flr.
Peoria, IL 61606
309-495-0200

Coordinator
Dawneva Sasse
309-655-2383
dsasse@uic.edu

Prerequisites
Completion of Phase 2

Location
OSF - SICU

Dates Available
All year except Winter Break

Dates Not Available
Winter Break

Duration in Weeks
4

Hours/Week
40-60

Lectures/Seminars
Daily teaching rounds
1 lecture every session in Critical Care

Lab
No

Outpatient
No

Inpatient
Yes

House Staff
Surgical

Night Call
None

Weekends
2 weekends/month

No. of Students
2

Optimizer
Yes

Pathways
Medical and Surgical Pathways – Emergency Medicine and Critical Care

Visiting Students
Yes

NARRATIVE DESCRIPTION
Surgical Critical Care offers an exciting rotation in the care and management of critically ill surgical and trauma patients. The student will function at a sub-intern level and will have his/her own patients to follow with faculty supervision.

OBJECTIVES
Upon completion of this elective, the student will be able to:

1. Develop skills in logical evaluation and treatment of critically ill patients.
2. Understand basic physiology of multiple organ systems.
3. Understand fundamental principles of shock and resuscitation.
4. Describe and demonstrate multiple ventilatory modes.
5. Discuss nutritional support, therapeutic principles and their practical applications.
6. Understand acute care physiology and treatment principles in regards to MOFS, SIRS, and ARDS.

METHOD OF EVALUATION
The faculty will base their evaluation on:

1. Daily presentation of patients.
2. Daily progress notes.
3. One prepared lecture during the month – topics to be chosen after first week of rotation.
4. Nursing staff evaluations, resident staff evaluations.
5. Completion of Standard Clinical Evaluation Form by preceptor.

REQUIRED READINGS

1. *The ICU Book*, Marino
2. *Critical Care Physiology*, Bartlet
3. *Surgical Critical Care*, Weigelt and Lewis

NOTE: CONTACT FOR ELECTIVE ASSIGNMENT
UICOM-P, Department of Surgery: Dawneva Sasse (309) 655-2383.
**SURGICAL RESEARCH**  
*(ELEC 723)*

<table>
<thead>
<tr>
<th><strong>Course Director</strong></th>
<th>J. Stephen Marshall, M.D.</th>
</tr>
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<tbody>
<tr>
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<td>UICOMP Dept. of Surgery</td>
</tr>
<tr>
<td></td>
<td>624 N.E. Glen Oak Ave.</td>
</tr>
<tr>
<td></td>
<td>North Bldg. 2nd Floor</td>
</tr>
<tr>
<td><strong>Coordinator</strong></td>
<td>Dawneva Sasse</td>
</tr>
<tr>
<td></td>
<td>309-655-2383</td>
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<tr>
<td></td>
<td><a href="mailto:dsasse@uic.edu">dsasse@uic.edu</a></td>
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<tr>
<td><strong>Visiting Students</strong></td>
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</tr>
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*Student must make an appointment to speak with Dr. Marshall prior to scheduling this elective to discuss project possibilities.*

**NARRATIVE DESCRIPTION**

This course is available to students with a definite interest in surgery. The course will focus on research and not daily clinical activity. Dr. Marshall performs a wide range of General Surgery procedures specializing in hepatobiliary and bariatric. The student may participate in an ongoing research project or independent study assignments can be created or assigned. Topics of research could focus on treatment or outcomes of ablation, distal pancreatectomy, minimally invasive pancreatectomy, partial hepatectomy, surgical resection, Whipple procedure, gastric bypass, sleeve gastrectomy, laparoscopic duodenal switch, robotic surgery and minimally invasive surgery.

**OBJECTIVES**  
Upon completion of this elective, the student should be able to:

1. Design and carry out a study/chart review.
2. Understand and work within the requirements of the IRB.
3. Participate in CITI training.
4. Research databases and complete a comprehensive literature review.

**METHOD OF EVALUATION**  
Dr. Marshall will base his evaluation on:

1. Informational periodic discussions with student.
2. Final project outcome or progress.
3. Completion of Standard Clinical Evaluation Form.

**REQUIRED READING**

Research Training Lectures – PowerPoints available on the UICOMP Dept. of Surgery website

**NOTE: CONTACT FOR ELECTIVE ASSIGNMENT**

UICOM-P, Department of Surgery: Dawneva Sasse (309) 655-2383.
NARRATIVE DESCRIPTION

This course is available to students with an interest in breast surgical oncology. The course will emphasize the multi-disciplinary approach to the breast patient. The operative and outpatient experience will focus on breast disease. The student will be expected to formulate pre-operative work-ups, stage malignancies, and give post-operative care.

OBJECTIVES Upon completion of this elective, the student will be able to:

1. Discuss breast cancer treatment options.
2. Identify the multi-disciplinary approach to breast oncology patients.
3. Recognize adjunct treatments used for breast cancer patients.
4. Increase surgical skills learned during the third-year clerkship.
5. The student is responsible for a report on the breast topic of their choice at the end of the rotation.

METHOD OF EVALUATION The faculty will base their evaluation on:

1. Informational daily discussions with student by preceptor on rounds, in surgery and in the outpatient setting.
2. Completion of Standard Clinical Evaluation Form by preceptor.

REQUIRED READING

Reading assignments will be made during the elective.

NOTE: CONTACT FOR ELECTIVE ASSIGNMENT

UICOM-P, Department of Surgery: Dawneva Sasse (309) 655-2383.
SURGICAL RESIDENCY PREPAREDNESS PRACTICUM (ELEC 157)

Course Director
Charles Aprahamian, M.D.

Address
UICOMP Dept. of Surgery
OSF North Bldg., 2nd Flr.
624 N.E. Glen Oak Ave.
Peoria, IL 61603
309-655-4775
Fax: 309-655-3630
(contact Linda Conlee)

Coordinator
Dawneva Sasse
309-655-2383
dsasse@uic.edu

Prerequisites
Completion of Phase 2
Committed to surgery

Location
Jump Simulation and Education Center

Dates Available
Block 11b

Dates Not Available
Only available in Block 11b

Duration in Weeks
2

Hours/Week
40

Lectures/Seminars
Yes

Lab
Yes

Outpatient
No

Inpatient
No

House Staff
Yes

Night Call
No

Weekends
No

No. of Students
4 minimum
8 maximum

Optimizer
Yes

Pathways
No

Visiting Students
No

NARRATIVE DESCRIPTION

SURGPREP – Surgical Residency Preparedness Practicum – This course is particularly focused on the student who has committed to a career in surgical specialties. It is structured, supervised training in basic surgical skills such as dissection, suturing, knot tying, laparoscopy, etc., and procedures such as biopsy techniques, chest tube insertion, central line insertion, and tracheostomy. Eighteen modules instructed by UICOMP General Surgery faculty and senior residents. Monday through Friday, 8:00 a.m. to 4:00 p.m. daily.

OBJECTIVES
Upon completion of this elective, the student will be able to:

1. Demonstrate verified improvement in the quality in performing basic surgical skills.
2. Demonstrate verified improvement in the efficiency in performing basic surgical skills.
3. Demonstrate the ability to perform simulated basic surgical procedures such as chest tube insertion, central line placement, etc.

METHOD OF EVALUATION

Students will be evaluated based on demonstration of skills taught during every module by the respective instructor and an end-summary evaluation will be completed by the course director.

REQUIRED READINGS


Book chapter handouts on laparoscopic surgery:
Methods of Creating a Pneumoperitoneum by Robert J. Fitzgibbons, Jr, M.D., and Robert E. Marsh
Electrosurgery and Ultrasound for Cutting and Coagulating Tissue in Minimally Invasive Surgery by Joseph F. Amaral
Physiologic Consequence of Laparoscopic Surgery by Philip R. Schaurer
Suturing and Knot-Tying Techniques by Daniel B. Jones and Nathaniel J. Soper
Laparoscopic Suturing and Tissue Approximation by Zoltan Szabo

NOTE: CONTACT FOR ELECTIVE ASSIGNMENT

UICOM-P, Department of Surgery: Dawneva Sasse (309) 655-2383.
### UROLOGY (ELEC 683.1)

<table>
<thead>
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<th><strong>Coordinator</strong></th>
<th><strong>Prerequisites</strong></th>
<th><strong>Location</strong></th>
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<td>OSF Medical Group –</td>
<td>Dawneva Sasse</td>
<td>Completion of Phase 1</td>
<td>Office, SFMC</td>
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<tr>
<td>Urology</td>
<td>309-655-2383</td>
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<td>Illinois Medical</td>
<td><a href="mailto:dsasse@uic.edu">dsasse@uic.edu</a></td>
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<td>Center</td>
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<th><strong>Dates Available</strong></th>
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<th><strong>Duration in Weeks</strong></th>
<th><strong>Hours/Week</strong></th>
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<td>All year except</td>
<td>Winter Break</td>
<td>2-4</td>
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<td>Winter Break</td>
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<th><strong>House Staff</strong></th>
<th><strong>Night Call</strong></th>
<th><strong>Weekends</strong></th>
<th><strong>No. of Students</strong></th>
<th><strong>Optimizer</strong></th>
<th><strong>Pathways</strong></th>
<th><strong>Visiting Students</strong></th>
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<td>Yes</td>
<td>Medical Pathway – Core Specialty Care</td>
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**Narrative Description**

The course will acquaint the student with the practice of urology, including a significant amount of nephrology and general medicine. Basic surgery skills, as well as operative techniques, will be included. Outpatient office exposure will be an integral portion of the program. The experience will also include useful techniques in an outpatient surgery center. The course will prepare the student for primary care practice or as a prelude to the surgical subspecialties. If the student has a strong interest in surgery, additional instruction in basic surgery skills will be offered.

**Objectives**

Upon completion of this elective, the student will be able to:

1. Obtain a urological history and perform a urological physical examination.
2. Develop basic skills of seeing patients at the urological center.
3. Develop basic skills required for pre-operative and post-operative assessment.
4. Acquire technical expertise and develop technical skills at the surgery center.
5. Perform simple and difficult catheterizations.
6. Evaluate urological consultations.

**Method of Evaluation**

The faculty will base their evaluation on:

1. Ongoing observance of the student.
2. Completion of Standard Clinical Evaluation Form by preceptor and discussion with student.

**Required Reading**

Reading assignments will be made during the elective.

**Note: Contact for Elective Assignment**

UICOM-P, Department of Surgery: Dawneva Sasse (309) 655-2383.
UROLOGY  
(ELEC 683.2)

| **Address** | Midwest Urological Group  
7309 N. Knoxville Peoria, IL 61614  
309-683-0680 |
|-------------|---------------------------------|
| **Coordinator** | Dawneva Sasse  
309-655-2383  
dsasse@uic.edu |
| **Prerequisites** | Completion of Phase 1  
UnityPoint Orientation |
| **Dates Available** | All year except as noted. |
| **Dates Not Available** | Blocks 1-3a  
Winter Break |
| **Duration in Weeks** | 2-4  
(4 weeks must be consecutive) |
| **Location** | UPH |
| **Lectures/Seminars** | No |
| **Lab** | Yes |
| **Outpatient** | Yes |
| **Inpatient** | Yes |
| **House Staff** | No |
| **Night Call** | No |
| **Weekends** | No |
| **No. of Students** | 1 |
| **Optimizer** | Yes |
| **Pathways** | Medical Pathway – Core Specialty Care |
| **Visiting Students** | No |

**Course Director**  
J. Banno, M.D.

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**Address**  
Midwest Urological Group  
7309 N. Knoxville Peoria, IL 61614  
309-683-0680

**Coordinator**  
Dawneva Sasse  
309-655-2383  
dsasse@uic.edu

**Prerequisites**  
Completion of Phase 1  
UnityPoint Orientation

**Dates Available**  
All year except as noted.

**Dates Not Available**  
Blocks 1-3a  
Winter Break

**Duration in Weeks**  
2-4  
(4 weeks must be consecutive)

**Location**  
UPH

**Lectures/Seminars**  
No

**Lab**  
Yes

**Outpatient**  
Yes

**Inpatient**  
Yes

**House Staff**  
No

**Night Call**  
No

**Weekends**  
No

**No. of Students**  
1

**Optimizer**  
Yes

**Pathways**  
Medical Pathway – Core Specialty Care

**Visiting Students**  
No

*Students planning to take the four-week elective course must take this over four consecutive weeks.*

**NARRATIVE DESCRIPTION**

This course is available to any student wishing to learn more about urology. Although a small sub-specialty, the field of urology includes the treatment of many conditions seen in clinical practice. Included in this field is the treatment of urinary tract infection. This course will include both medical and surgical treatment of urologic problems. The student will work closely with the attending urologists and their patients that are treated at the Methodist Medical Center. Teaching will be individualized on a patient-by-patient basis. While working with the urologist, the student will gain some hands-on experience with the anatomy, pathophysiology, treatment and prognosis of these illnesses.

**OBJECTIVES**  
Upon completion of this elective, the student will be able to:

1. Recognize the anatomy and pathophysiology of the urinary tract and how it relates to urologic illnesses.
2. Administer general urologic examinations and identify special diagnostic techniques, including uroradiology, cystourethrography, and urodynamic evaluations.
3. Describe neuromuscular dysfunction of the lower urinary tract and evaluate and manage urinary incontinence.
4. Recognize physiology of erection and pathophysiology of impotence.
5. Identify the pathophysiology and treatment of urolithiasis.
6. Develop manual skills and dexterity in basic urologic manipulations such as urethral catheterization and prostatic massage.

**METHOD OF EVALUATION**  
The faculty will base their evaluation on:

1. Informal discussions with student by attending urologist.
2. Completion of Standard Clinical Evaluation Form by attending urologist.

**REQUIRED READING**

Reading assignments will be made during the elective.

**NOTE: CONTACT FOR ELECTIVE ASSIGNMENT**

UICOM-P, Department of Surgery: Dawneva Sasse (309) 655-2383.
NARRATIVE DESCRIPTION

Vascular and Endovascular Surgery offers an exciting rotation in the care and management of all facets of vascular disease, including arterial, venous and lymphatic diseases for the student considering a career in Vascular and Endovascular Surgery. The student will function at the level of a sub-intern and will have his/her own patients to follow.

OBJECTIVES Upon completion of this elective, the student will be able to:

1. Develop skills in logical evaluation and treatment of vascular patients;
2. Understand basic vascular physiology;
3. Understand fundamental principles of complex vascular diseases;
4. Understand basic vascular decision making as it pertains to carotid disease, aortic disease, peripheral vascular disease, venous diseases and lymphatics;
5. Be able to discuss outcomes of basic vascular interventions and surgical procedures.

METHOD OF EVALUATION The faculty will base their evaluation on:

1. Daily presentation of patients;
2. Daily progress notes;
3. One prepared lecture during the month – topic to be chosen after first week of rotation;
4. Nursing staff evaluations and resident staff evaluations;
5. Completion of Standard Clinical Evaluation Form by preceptor.

REQUIRED READING:

*Current Diagnosis & Treatment in Vascular Surgery* - Richard H. Dean, James S. T. Yao, David C. Brewster (provided during elective)
*Anatomic Exposures in Vascular Surgery* – R. James Valentine, Gary G. Wind (provided during elective)
*Current Therapy in Vascular Surgery* – Calvin B., MD, Ernest, James C., MD, Stanley (provided during elective)

NOTE: CONTACT FOR ELECTIVE ASSIGNMENT

UICOM-P, Department of Surgery: Dawneva Sasse (309) 655-2383.