NOTE:

Information contained herein is for informational purposes only and is subject to change without notice.
# Table of Contents

## Introduction

### Emergency Medicine
Advanced Emergency Medicine (Vincent)

## Family & Community Medicine
Family Medicine – Maternal/Newborn (Wynn)
Family Medicine – UICOM-P/UPH (Wynn)
Family Medicine Sub-Internship (Wynn)

## Health Sciences Education and Pathology
Anatomical & Clinical Pathology (Kasper)
Dermatology (Kentosh)
Forensic Pathology (Denton)

## Internal Medicine
Cardiovascular Diseases (Mungree)
Critical Care Medicine (Taneja)
Gastroenterology (Balouch)
Geriatrics (Lindahl)
Hematology and Oncology (Veeder)
Infectious Diseases (Lin)
Inpatient Hospice Home (Deters)
Medicine Sub-Internship (Yadav, Bansal)
Nephrology (Horinek)
Outpatient (Bansal, Yadav)
Palliative Care (Kamell, Irshad)
Pulmonary Medicine (Taneja, Karamchandani)
Survey of Medical Informatics (Johnson, etc.)

## Neurology
Neuro-Ophthalmology (Hassanzadah)
Sleep Disorders (Zallek)

## Neurosurgery
Neurological Surgery (Tracy)

## Obstetrics and Gynecology
Gynecologic Oncology (Byler-Dann)
Maternal-Fetal Medicine (Meints)

## Pediatrics
Neonatology (Javed)
Pediatric Hematology/Oncology (Libes)
Pediatric Intensive Care Unit (Swayamkapula, Hafzalah)
Pediatrics Sub-Internship (Shaikh)

## Physical and Rehabilitation Medicine
Rehabilitation Medicine (Snyder)

## Psychiatry and Behavioral Medicine
Special Studies in Psychiatry (Bruce)

## Radiology
Vascular and Interventional Radiology (Brady, Swischuk)

## Surgery
Advanced General Surgery (Orcutt)
Advanced Thoracic Surgery (Anderson)
GI Surgery (Bonello, Fischer)
Pediatric Surgery (Aprahamian)
Surgery Sub-Internship (Marshall, Tsoraides, Anderson)
Surgical Critical Care/Trauma (Evans, Anderson, Marshall)
INTRODUCTION
UNIVERSITY OF ILLINOIS
COLLEGE OF MEDICINE AT PEORIA
(UICOM-P)
VISITING STUDENT ELECTIVE EXPERIENCES
INTRODUCTION

Medical students from other medical schools who are in their final year may participate in fourth-year electives at the University of Illinois College of Medicine at Peoria. Eligible students may apply for a maximum of 8 weeks of elective experience at UICOM-P.

There is no application fee from UICOM-P for students from domestic schools to enroll in electives at the University of Illinois College of Medicine at Peoria. International students pay no tuition, but must pay the $300 application fee, which is non-refundable. A student must provide their own lab coat. Cafeteria meals are available at no cost when enrolled in an elective at OSF Saint Francis Medical Center.

We are not able to offer housing to our visiting students at this time. Upon request, a list of optional housing can be forwarded to the visiting student. Be aware that the housing information has been gathered from various sources that have used them in the past, and is provided only for the convenience of the visiting student – UICOMP has no other information about these housing options and has no affiliation with them.

No student will be assured placement prior to UICOM-P receiving all application components and elective rotation availability is confirmed. Please note: elective rotation availability is subject to change.

ELIGIBILITY

In order to apply for a fourth-year elective at the University of Illinois College of Medicine at Peoria, visiting medical students must:

- Be in their final year of medical school at the start of the requesting elective.
- Attend one of the following: (1) medical schools accredited by LCME (Liaison Committee on Medical Education), (2) medical schools accredited by AOA (American Osteopathic Association), or (3) international medical schools with an affiliation agreement with the University of Illinois.
- Be in good academic standing at the start of the elective. (If not submitting an application through VSAS, home school must provide letter of good standing.)
- Complete all core clerkships prior to the start of the elective.
- Complete prerequisites (or equivalent) listed for the desired course prior to participating in the elective.

ADDITIONAL REQUIREMENTS

Verification of the following must be provided by the home school (via VSAS or documentation) or the student (via documentation):

- Current certification in CPR (must be within two years of requested rotation dates).
- A current health insurance policy.
- Medical liability/malpractice insurance meeting the minimum requirements of $1,000,000 per occurrence and $3,000,000 aggregate.

THE UNIVERSITY OF ILLINOIS COLLEGE OF MEDICINE AT PEORIA OFFERS:

- Two major teaching hospitals: Unity Point – Methodist and OSF Saint Francis Medical Center, with state-of-the-art technology and a 75+ year tradition of medical education.
- An extensive network of ambulatory centers and clinics.
- Strong undergraduate and graduate medical education with approximately 200 medical students (M1, M2, M3, M4), 11 residency programs, and 7 fellowships with more than 279 residents and fellows.

The College of Medicine, its undergraduate teaching programs, and its residencies are proud to be part of a dynamic and sophisticated downstate medical center. We are pleased to learn of your interest in Peoria. Please let us know of your interests and if you have any questions.
VSAS

REQUIRED FORMS

Supplemental documentation that must be uploaded to VSAS by the student or the home school in order for an application to be deemed complete and ready for eligibility review and potential scheduling:

- **Supplemental Form for VSAS Applicants** – This form requires the student’s home school to complete Section II; the student will complete Section I. The students’ home school must verify on this form that the Universal Precautions and HIPAA training have been completed by the student within one year of the requested rotation dates. If this training is not provided by the student’s home school, the student must obtain the training and upload the certificates of completion to VSAS.

- **AAMC Standardized Immunization Form** – This form must be completed and signed by the student’s health care provider or institutional designee. Documentation as described on the form must be provided to UICOMP upon acceptance to an elective. Students may be contacted by Chris Menke if further documentation is needed. Please note that a student’s home school’s record is not accepted as proof of immunity.

- **USMLE Step Score Report or COMLEX Score Report** – Please note that the Emergency Medicine and Surgery Departments will only accept USMLE Step 1 or 2 score reports and will not accept only a COMLEX score report.

- **Home school evaluation form** – This must be given to the Department Coordinator by the first day of the student’s scheduled rotation.

SCHEDULING

Once an application has been completed and marked as eligible on VSAS, that information is then provided to the individual departments for determination if there is space available for a student to attend the elective at the specified time. **Students will not be scheduled less than 30 days prior to the start of an elective rotation.** This time is required so that all mandatory forms, immunization compliance review, hospital access requests, and preceptor scheduling can be completed prior to a student’s arrival. It is also requested that if there needs to be a change in the scheduled elective rotation, or a cancellation thereof, that notification be given 30 days prior to the start so that all appropriate parties may be duly notified and other student requests potentially granted.

Elective rotation offers will be sent directly to students through the VSAS system. An offer is valid for seven (7) days, after which point it expires.

Once an offer is accepted, additional documentation will be forwarded with the expectation that the student will complete the documentation and return it within one week in order to be officially accepted for the rotation. Upon receipt of the completed documentation from the student, an official acceptance letter will then be sent via email from the visiting student coordinator with relevant documents attached thereto.

**NON-VSAS DOMESTIC STUDENTS**

Not all home schools utilize VSAS for students to arrange away rotations. Domestic students attending schools that have an affiliation agreement with the University of Illinois are eligible to apply for electives in Peoria. In addition to submitting documentation of all items listed under Eligibility and Additional Requirements (see above), they must also submit the following:

**REQUIRED FORMS**

Supplemental documentation that must be submitted to the visiting student coordinator by the student and/or the home school in order for an application to be deemed complete and ready for eligibility review and potential scheduling:

- **Application Packet for Non-VSAS and International Students** – This form includes a checklist of required information and forms. The student’s home school is required to complete Section II on page 6; the student will complete Section I. The students’ home school must verify on this form that the Universal Precautions and HIPAA training have been completed by the student within one year of the requested rotation dates. If this training is not provided by the student’s home school, the student must obtain the training and send the certificates of completion to the visiting student coordinator.

- **AAMC Standardized Immunization Form** – This form must be completed and signed by the student’s health care provider or institutional designee. Documentation as described on the form must be provided to UICOMP upon acceptance to an elective. Students may be contacted by Chris Menke if further documentation is needed. Please note that a student’s home school’s record is not accepted as proof of immunity.

- **USMLE Step Score Report or COMLEX Score Report** – Please note that the Emergency Medicine and Surgery Departments will only accept USMLE Step 1 or 2 score reports and will not accept only a COMLEX score report.

- **Home school evaluation form** – This must be given to the Department Coordinator by the first day of the student’s scheduled rotation.
INTERNATIONAL STUDENTS

Only international students attending schools that have an affiliation agreement with the University of Illinois are eligible to apply for electives in Peoria. Only the OB/Gyn and Pathology departments are accepting applications from international students, and those are based upon elective rotation availability, which is very subject to change. Before completing an application and submitting the fee, please contact Tammy Livingston (tlliving@uic.edu) to determine if there is a spot available. If a spot has been found for a rotation, please allow at least 90 days for your application to be processed.

REQUIRED FORMS

Supplemental documentation that must be included in the application packet:

- **Application Packet for Non-VSAS and International Students** – This form includes a checklist of required information and forms. The student’s home school is required to complete Section II on page 6; the student will complete Section I. The students’ home school must verify on this form that the Universal Precautions and HIPAA training have been completed by the student within one year of the requested rotation dates. If this training is not provided by the student’s home school, the student must obtain the training and send the certificates of completion to the visiting student coordinator.

- **AAMC Standardized Immunization Form** – This form must be completed and signed by the student’s health care provider or institutional designee. Documentation as described on the form must be provided to UICOMP upon acceptance to an elective. Students may be contacted by Chris Menke if further documentation is needed. Please note that a student’s home school’s record is not accepted as proof of immunity.

- **USMLE Step Score Report or COMLEX Score Report** - Please note that the Emergency Medicine and Surgery Departments will only accept USMLE Step 1 or 2 score reports and will not accept only a COMLEX score report.

- **Home school evaluation form** – This must be given to the Department Coordinator by the first day of the student’s scheduled rotation.

In addition to meeting the Eligibility and Additional Requirements as listed above, international students must also provide the following:

- Submit a $300 non-refundable application fee for each elective requested. Please send payment in the form of money order, traveler’s check, or cashier’s check, made payable to the University of Illinois. Payment must be in U.S. dollars. Do not send currency.

- Obtain all appropriate visas, paperwork, etc.

Send all required paperwork to:

Tammy L. Livingston  
Office of Academic Affairs  
University of Illinois College of Medicine at Peoria  
1 Illini Drive  
Peoria, IL 61605  
tlliving@uic.edu
# University of Illinois
College of Medicine at Peoria

**M4 (Phase 3) Calendar**
Class of 2021 (AY 2020-2021)

<table>
<thead>
<tr>
<th>Dates by Week</th>
<th>58 weeks</th>
<th>Term Dates</th>
</tr>
</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></td>
</tr>
<tr>
<td>05/11/20-05/15/20</td>
<td>Block 2a</td>
<td></td>
</tr>
<tr>
<td>05/18/20-05/22/20</td>
<td>Block 2b</td>
<td></td>
</tr>
<tr>
<td>05/25/20-05/29/20</td>
<td>Block 3a</td>
<td></td>
</tr>
<tr>
<td>06/01/20-06/05/20</td>
<td>Block 3b</td>
<td></td>
</tr>
<tr>
<td>06/08/20-06/12/20</td>
<td>Block 4a</td>
<td></td>
</tr>
<tr>
<td>06/15/20-06/19/20</td>
<td>Block 4b</td>
<td></td>
</tr>
<tr>
<td>06/22/20-06/26/20</td>
<td>Block 5a</td>
<td>Fall 8/17-12/14</td>
</tr>
<tr>
<td>06/29/20-07/03/20</td>
<td>Block 5b</td>
<td></td>
</tr>
<tr>
<td>07/06/20-07/10/20</td>
<td>Block 6a</td>
<td></td>
</tr>
<tr>
<td>07/13/20-07/17/20</td>
<td>Block 6b</td>
<td></td>
</tr>
<tr>
<td>07/20/20-07/24/20</td>
<td>Block 7a</td>
<td></td>
</tr>
<tr>
<td>07/27/20-07/31/20</td>
<td>Block 7b</td>
<td></td>
</tr>
<tr>
<td>08/03/20-08/07/20</td>
<td>Block 8a</td>
<td></td>
</tr>
<tr>
<td>08/10/20-08/14/20</td>
<td>Block 8b</td>
<td></td>
</tr>
<tr>
<td>08/17/20-08/21/20</td>
<td>Block 9a</td>
<td></td>
</tr>
<tr>
<td>08/24/20-08/28/20</td>
<td>Block 9b</td>
<td></td>
</tr>
<tr>
<td>08/31/20-09/04/20</td>
<td>Block 10a</td>
<td></td>
</tr>
<tr>
<td>09/07/20-09/11/20</td>
<td>Block 10b</td>
<td></td>
</tr>
<tr>
<td>09/14/20-09/18/20</td>
<td>Block 11a</td>
<td></td>
</tr>
<tr>
<td>09/21/20-09/25/20</td>
<td>Block 11b</td>
<td></td>
</tr>
<tr>
<td>09/28/20-10/02/20</td>
<td>Block 12a</td>
<td></td>
</tr>
<tr>
<td>10/05/20-10/09/20</td>
<td>Block 12b</td>
<td></td>
</tr>
<tr>
<td>10/12/20-10/16/20</td>
<td>Fall Break *</td>
<td></td>
</tr>
<tr>
<td>10/19/20-10/23/20</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10/26/20-10/30/20</td>
<td>Block 7a</td>
<td></td>
</tr>
<tr>
<td>11/02/20-11/06/20</td>
<td>Block 7b</td>
<td></td>
</tr>
<tr>
<td>11/09/20-11/13/20</td>
<td>Block 8a</td>
<td></td>
</tr>
<tr>
<td>11/16/20-11/20/20</td>
<td>Block 8b</td>
<td></td>
</tr>
<tr>
<td>11/30/20-12/04/20</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12/07/20-12/11/20</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12/14/20-12/18/20</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12/21/20-12/25/20</td>
<td>Winter Break **</td>
<td></td>
</tr>
<tr>
<td>12/28/20-01/01/21</td>
<td></td>
<td></td>
</tr>
<tr>
<td>01/04/21-01/08/21</td>
<td>Block 9a</td>
<td></td>
</tr>
<tr>
<td>01/11/21-01/15/21</td>
<td>Block 9b</td>
<td></td>
</tr>
<tr>
<td>01/18/21-01/22/21</td>
<td>Block 10a</td>
<td></td>
</tr>
<tr>
<td>01/25/21-01/29/21</td>
<td>Block 10b</td>
<td></td>
</tr>
<tr>
<td>02/01/21-02/05/21</td>
<td>Block 11a</td>
<td></td>
</tr>
<tr>
<td>02/08/21-02/12/21</td>
<td>Block 11b</td>
<td></td>
</tr>
<tr>
<td>02/15/21-02/19/21</td>
<td>Block 12a</td>
<td></td>
</tr>
<tr>
<td>02/22/21-02/26/21</td>
<td>Block 12b</td>
<td></td>
</tr>
<tr>
<td>03/01/21-03/05/21</td>
<td>Block 11a</td>
<td></td>
</tr>
<tr>
<td>03/08/21-03/12/21</td>
<td>Block 11b</td>
<td></td>
</tr>
<tr>
<td>03/15/21-03/19/21</td>
<td>Block 12a</td>
<td></td>
</tr>
<tr>
<td>03/22/21-03/26/21</td>
<td>Block 12b</td>
<td></td>
</tr>
<tr>
<td>03/29/21-04/02/21</td>
<td></td>
<td></td>
</tr>
<tr>
<td>04/05/21-04/09/21</td>
<td></td>
<td></td>
</tr>
<tr>
<td>04/12/21-04/16/21</td>
<td></td>
<td></td>
</tr>
<tr>
<td>04/19/21-04/23/21</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

* Some courses available.
** No courses available during this time.
Department of Emergency Medicine
ADVANCED EMERGENCY MEDICINE (ELEC 603)

<table>
<thead>
<tr>
<th>Location</th>
<th>Dates Available</th>
<th>Dates Not Available</th>
</tr>
</thead>
<tbody>
<tr>
<td>SFMC E.D.</td>
<td>Blocks 1-7 With Director Approval</td>
<td>Blocks 8-12 Winter Break</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Lectures/Seminars</th>
<th>Hours/Week</th>
<th>Duration in Weeks</th>
</tr>
</thead>
<tbody>
<tr>
<td>5 Hours Weekly &amp; 4 hours of didactics</td>
<td>40-48</td>
<td>4</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Lab</th>
<th>Outpatient</th>
<th>Inpatient</th>
</tr>
</thead>
<tbody>
<tr>
<td>Simulation Lab</td>
<td>100%</td>
<td>No</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>House Staff</th>
<th>Night Call</th>
<th>Weekends</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>Night Shift (3)</td>
<td>Yes (2/4)</td>
</tr>
</tbody>
</table>

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.
DEPARTMENT OF
FAMILY &
COMMUNITY
MEDICINE
Family Medicine – Maternal/Newborn
(ELEC 194)

<table>
<thead>
<tr>
<th>Location</th>
<th>Dates Available</th>
<th>Dates Not Available</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family Medical Center</td>
<td>Only available per direct request</td>
<td>Blocks 1, 2, 4b-7a, &amp; Winter Break</td>
</tr>
<tr>
<td>815 Main Street</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Peoria, IL 61602</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Lectures/Seminars</th>
<th>Hours/Week</th>
<th>Duration in Weeks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>40 – 60</td>
<td>2 or 4</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Lab</th>
<th>Outpatient</th>
<th>Inpatient</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>House Staff</th>
<th>Night Call</th>
<th>Weekends</th>
</tr>
</thead>
<tbody>
<tr>
<td>UnityPoint Health Methodist</td>
<td>No</td>
<td>No</td>
</tr>
</tbody>
</table>

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)

<table>
<thead>
<tr>
<th>Location</th>
<th>Dates Available</th>
<th>Dates Not Available</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family Medical Center</td>
<td>Only available per direct request</td>
<td>Blocks 1, 2, 4-7, &amp; Winter Break</td>
</tr>
<tr>
<td>815 Main Street</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Peoria, IL 61602</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Lectures/Seminars</th>
<th>Hours/Week</th>
<th>Duration in Weeks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>40 - 50</td>
<td>4</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Lab</th>
<th>Outpatient</th>
<th>Inpatient</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>House Staff</th>
<th>Night Call</th>
<th>Weekends</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>No</td>
<td>No</td>
</tr>
</tbody>
</table>

**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.
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
Department of Health Sciences Education
ANATOMICAL & CLINICAL PATHOLOGY
(ELEC 645)

<table>
<thead>
<tr>
<th>Location</th>
<th>Dates Available</th>
<th>Dates Not Available</th>
</tr>
</thead>
<tbody>
<tr>
<td>UPH – Methodist - Lab 221 N. E. Glen Oak 309-672-4918</td>
<td>Blocks 1-6, 9-13 Fall Break (with prior approval)</td>
<td>Blocks 7-8 Winter Break</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Lectures/Seminars</th>
<th>Hours/Week</th>
<th>Duration in Weeks</th>
</tr>
</thead>
<tbody>
<tr>
<td>No</td>
<td>40</td>
<td>4 weeks only</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Lab</th>
<th>Outpatient</th>
<th>Inpatient</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>House Staff</th>
<th>Night Call</th>
<th>Weekends</th>
</tr>
</thead>
<tbody>
<tr>
<td>No</td>
<td>No</td>
<td>No</td>
</tr>
</tbody>
</table>

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 cytologic 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 cytoligicsamples.
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.
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](http://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
Forensic Pathology  
ELEC 835

| Location                                                                 | Dates Available   | Dates Not Available |
|                                                                        |                   |                    |
| McLean Co. Coroner's Office, Bloomington, IL & Peoria Co. Coroner's Office, Peoria, IL | All year except Winter Break | Winter Break |

<table>
<thead>
<tr>
<th>Lectures/Seminars</th>
<th>Hours/Week</th>
<th>Duration in Weeks</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
<td>40</td>
<td>2-4</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Lab</th>
<th>Outpatient</th>
<th>Inpatient</th>
</tr>
</thead>
<tbody>
<tr>
<td>Morgue Autopsy Work</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Full time</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Housestaff</th>
<th>Night Call</th>
<th>Weekends</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
<td>none</td>
<td>Yes, if necessary</td>
</tr>
</tbody>
</table>

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
Department of Internal Medicine
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
<table>
<thead>
<tr>
<th><strong>Location</strong></th>
<th><strong>Date Available</strong></th>
<th><strong>Dates Not Available</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>MICU 4th Floor, Gerlach SFMC</td>
<td>Blocks 1-2, 5-12, Fall Break</td>
<td>Blocks 3, 4, Winter Break</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Lectures/Seminars</strong></th>
<th><strong>Hours/Week</strong></th>
<th><strong>Duration in Weeks</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>No</td>
<td>Approximately 50</td>
<td>4</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Lab</strong></th>
<th><strong>Outpatient</strong></th>
<th><strong>Inpatient</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>No</td>
<td>No</td>
<td>Yes</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>House Staff</strong></th>
<th><strong>Night Call</strong></th>
<th><strong>Weekends</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>Yes, every 8th night</td>
<td>Yes, every 3rd</td>
</tr>
</tbody>
</table>

**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
GASTROENTEROLOGY  
(ELEC 614)

<table>
<thead>
<tr>
<th>Location</th>
<th>Dates Available</th>
<th>Dates Not Available</th>
</tr>
</thead>
<tbody>
<tr>
<td>OSF Medical Group</td>
<td>All year except Winter Break</td>
<td>Winter Break</td>
</tr>
<tr>
<td>Gastroenterology</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5105 N. Glen Park Place</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Lectures/Seminars</th>
<th>Hours/Week</th>
<th>Duration in Weeks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>30-40</td>
<td>4</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Lab</th>
<th>Outpatient</th>
<th>Inpatient</th>
</tr>
</thead>
<tbody>
<tr>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>House Staff</th>
<th>Night Call</th>
<th>Weekends</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes (residents and fellows)</td>
<td>No</td>
<td>No</td>
</tr>
</tbody>
</table>

NARRATIVE DESCRIPTION

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.
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.
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.
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.
**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
MEDICINE SUB-INTERNSHIP
(ELEC 899)

<table>
<thead>
<tr>
<th>Location</th>
<th>Dates Available</th>
<th>Dates Not Available</th>
</tr>
</thead>
<tbody>
<tr>
<td>530 N.E. Glen Oak Avenue</td>
<td>All year except as noted</td>
<td>Fall Break Winter Break</td>
</tr>
<tr>
<td>Peoria, Illinois 61637</td>
<td></td>
<td>Block XI</td>
</tr>
<tr>
<td>Department of Internal</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Medicine, North Building</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Lectures/Seminars</th>
<th>Hours/Week</th>
<th>Duration in Weeks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>Variable (usually 40-60 hr per week)</td>
<td>4 weeks</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Lab</th>
<th>Outpatient experience</th>
<th>Inpatient</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
<td>None</td>
<td>Yes</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>House Staff</th>
<th>Night Call</th>
<th>Weekends</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes (work with senior IM or M/P resident)</td>
<td>5 consecutive nights from 7pm-7am during the 2nd</td>
<td>Yes (3-4 weekend days per 4 weeks)</td>
</tr>
</tbody>
</table>

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&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.
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
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.
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 Neurology
**NEURO-OPHTHALMOLOGY ELECTIVE**
(ELEC 240)

<table>
<thead>
<tr>
<th>Location</th>
<th>Dates Available</th>
<th>Location</th>
<th>Dates Available</th>
</tr>
</thead>
<tbody>
<tr>
<td>Neuro-ophthalmology clinic 530 N.E. Glen Oak</td>
<td>Based on availability. By request only, <strong>Only 1 day absent allowed for 2-week rotation</strong></td>
<td>Neuro-ophthalmology clinic 530 N.E. Glen Oak</td>
<td>Fall Break Winter Break</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Lectures/Seminars</th>
<th>Hours/Week</th>
<th>Duration in Weeks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Friday Noon Conference</td>
<td>40</td>
<td>2 weeks 4 weeks w/ dept. approval</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Lab</th>
<th>Inpatient</th>
</tr>
</thead>
<tbody>
<tr>
<td>Give 10 minute presentation</td>
<td>100%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>House Staff</th>
<th>Night Call</th>
<th>Weekends</th>
</tr>
</thead>
<tbody>
<tr>
<td>No</td>
<td>No</td>
<td>No</td>
</tr>
</tbody>
</table>

*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
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.

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:

Department of Neurosurgery
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
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 subspecialist 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.
NARRATIVE DESCRIPTION

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.
Department of Pediatrics
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.
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 also will 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.

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.
PEDIATRIC INTENSIVE CARE UNIT
(ELEC 689)

<table>
<thead>
<tr>
<th>Location</th>
<th>Dates Available</th>
<th>Dates Not Available</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pediatric Intensive Care Unit at CHOI OSF SFMC</td>
<td>All year except Winter Break</td>
<td>Winter Break</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Lectures/Seminars</th>
<th>Hours/Week</th>
<th>Duration in Weeks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>50</td>
<td>2-4</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Lab</th>
<th>Outpatient</th>
<th>Inpatient</th>
</tr>
</thead>
<tbody>
<tr>
<td>No</td>
<td>No</td>
<td>Yes</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>House Staff</th>
<th>Night Call</th>
<th>Weekends</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>Optional</td>
<td>Optional</td>
</tr>
</tbody>
</table>

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

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.
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](http://www.comsep.org/Curriculum/pdfs/COMSEP-APPDF.pdf)
Department of Physical & Rehabilitation Medicine
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
SPECIAL STUDIES IN PSYCHIATRY
(ELEC 857)

<table>
<thead>
<tr>
<th>Location</th>
<th>Dates Available</th>
<th>Dates Not Available</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unity Point Health- Methodist 221 N.E. Glen Oak Ave., W717 Peoria, IL 61602</td>
<td>Per arrangement</td>
<td>Per arrangement Winter Break</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Lectures/Seminars</th>
<th>Hours/Week</th>
<th>Duration in Weeks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>40</td>
<td>2-4</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Lab</th>
<th>Outpatient</th>
<th>Inpatient</th>
</tr>
</thead>
<tbody>
<tr>
<td>No</td>
<td>Possibly</td>
<td>Possibly</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>House Staff</th>
<th>Night Call</th>
<th>Weekends</th>
</tr>
</thead>
<tbody>
<tr>
<td>Possibly</td>
<td>Possibly</td>
<td>Possibly</td>
</tr>
</tbody>
</table>

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
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
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.
ADVANCED THORACIC SURGERY  
(ELEC 932)  

<table>
<thead>
<tr>
<th>Location</th>
<th>Dates Available</th>
<th>Dates Not Available</th>
<th>Lectures/Seminars</th>
<th>Hours/Week</th>
<th>Duration in Weeks</th>
<th>Lab</th>
<th>Outpatient</th>
<th>Inpatient</th>
<th>Hours/Week</th>
<th>Duration in Weeks</th>
</tr>
</thead>
</table>
| Illinois Medical Center  
1001 Main St., 3rd Flr.  
Peoria, IL 61606  
309-495-0200 | All year except Winter Break | Winter Break | All scheduled general surgery conferences | 40-50 | 4 | No | Yes | Yes | Night Call | No |

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

_Esophageal Surgery, Esophageal Cancer_, textbook by Griffith Pearson. Chapter 37, History, Anti-reflux Surgery. The course director has the above textbooks.
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.
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.
**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.
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*, Bartlett
3. *Surgical Critical Care*, Weigelt and Lewis