M4 REQUIREMENTS & ELECTIVES CATALOG

DRAFT 2022-2023

UNIVERSITY OF ILLINOIS COLLEGE OF MEDICINE AT PEORIA
Department of Cancer Biology & Pharmacology

Chair: Marcelo Bento Soares, Ph.D.

Schedule Change Authorizations:
Christina Constantinidou  cconstan@uic.edu
ONLINE
Compassion, Resilience and Emotional Awareness Training for Healthcare Professionals - "CREATE"
(ELEC 517)

Course Director
Marcelo Bento Soares, Ph.D.

Address
One Illini Drive

Phone/Coordinator
Christina Constantinidou
ccconstan@uic.edu
(309) 680-8628

Location
UICOMP

Prerequisites
Completion of Phase 1

Dates Available
Blocks 1b, 5a, Fall Break, 8b and 11b

Dates Not Available
All other blocks
Fall Break
Winter Break

Duration in Weeks
2 weeks

Hours/Week
40 hours/week

Lectures/Seminars
Didactic lectures, reflective writing, group exercises, meditation

Lab
No

Outpatient
No

Inpatient
No

House Staff
No

Night Call
No

Weekends
No

No. of Students
Minimum of 6
Maximum of 30

Optimizer
No

Visiting Students
No

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

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

The course will be offered virtually, via zoom, to enable participation by students from all campuses. There will be zoom sessions every morning, and daily assignments for the afternoon, which will include reading of research papers, watching videos, and listening to guided meditation practices and interviews.

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

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

METHOD OF EVALUATION
Students will be expected to maintain a record of their daily practice (meditation or reflective writing), and they will be provided with a rubric to be utilized for systematic assessment of the quality of each practice. In addition, evaluation will be based on class participation and on students’ presentations of their assigned research papers.

REQUIRED READING
Reading materials will be provided during the course for discussions in class. No reading prior to attending the course is required.
Compassion, Resilience and Emotional Awareness Training for Healthcare Professionals - "CREATE" (ELEC 450)

Address
One Illini Drive

Phone/Coordinator
Christina Constantidou
ccconstan@uic.edu
(309) 680-8628

Prerequisites
Completion of Phase 2

Location
UICOMP

IN-PERSON

Dates Available
2b

Dates Not Available
All other blocks
Fall Break
Winter Break

Duration in Weeks
2 weeks

Hours/Week
40 hours/week

Lectures/Seminars
Didactic lectures, reflective writing, group exercises, meditation

Lab
No

Outpatient
Yes/Homeless Mobile Clinic
½ day on week 1
½ day on week 2

Inpatient
No

No. of Students
Minimum of 6
Maximum of 30

House Staff
No

Night Call
No

Weekends
No

Optimizer
No

Visiting Students
No

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

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

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

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

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

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

Course Directors
S. Asuthkar¹, K. Fukuchi², K. Velpula³, S. Malchenko⁴, K. Veeravalli⁵, E. Zakharian⁶

Address
UICOMP

Phone
309-671-3414

Prerequisites
Completion of Phase 2
Previous lab experience

Location
Cancer Biology & Pharmacology Department

Dates Available
Flexible

Dates Not Available
Winter Break

Duration in Weeks
4-8

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

Lectures/Seminars
Yes

Lab
Yes

Outpatient
N/A

Inpatient
N/A

House Staff
N/A

Night Call
N/A

Weekends
Possible

No. of Students
Variable

Optimizer
No

Pathways
No

Visiting Students
No

NARRATIVE DESCRIPTION

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

RESEARCH AREAS

- Alzheimer’s disease²
- Alzheimer’s disease and brain metabolism²
- Innate Immunity in Alzheimer’s Disease²
- Alzheimer’s immunotherapy²
- Brain tumor animal modeling¹,⁴
- Endogenous regulation of inflammatory pain; role of oxytocin on TRPV1⁶
- Epigenetic aberrations including DNA methylation, histone modifications, chromatin remodeling & non-coding cancer¹
- Immuno-metabolic targeting in glioblastoma and medulloblastoma³
- Introduction to basic and translation research methods in CNS tumors¹
- Neuroprotection & neurological recovery after gene therapy in ischemic stroke⁵
- Metabolic targeting of glioblastoma³
- Neuroprotection & neurological recovery after stem cell therapy in ischemic stroke⁶
- Nervous system tumors⁴Neural stem cells (radial glia)⁴
- Pain perception: nociceptors⁶
- Pain-sensing TRP channels⁶
- Pluripotent stem cells⁴
- Role of immune checkpoints in tumor microenvironment & novel immunotherapy approaches to treat cancer¹
- Role of TRPM8 in prostate cancer⁶
- Role of testosterone-receptor TRPM8 in sexual and social behaviors⁵

OBJECTIVES

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

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

METHOD OF EVALUATION

The faculty will base their evaluation on:

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

Chair: Marc Squillante, D.O.

Schedule Change Authorizations:
- Clinical Simulation
- Introduction to Emergency Medicine
- Advanced Emergency Medicine

Christie Perry (cperry09@uic.edu)
CLINICAL SIMULATION (ELEC 272)  

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<th>Coordinator</th>
<th>Prerequisites</th>
<th>Location</th>
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</thead>
<tbody>
<tr>
<td>1306 N. Berkeley Ave. Peoria, IL</td>
<td>Christie Perry 309-655-6998 <a href="mailto:cperry09@uic.edu">cperry09@uic.edu</a></td>
<td>Completion of Phase 2</td>
<td>Jump Trading Simulation &amp; Education Center</td>
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<th>Duration in Weeks</th>
<th>Hours/Week</th>
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<th>Lab</th>
<th>Outpatient</th>
<th>Inpatient</th>
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<td>1 per week</td>
<td>Simulation and Innovations</td>
<td>Non-clinical</td>
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<th>Weekends</th>
<th>No. of Students</th>
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<th>Visiting Students</th>
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<td>No</td>
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NARRATIVE DESCRIPTION

This is a non-clinical elective in clinical simulation. The Jump Trading Simulation and Education Center provides an outstanding opportunity for students interested in academic careers to participate in the use of simulation technology to improve patient safety, quality, and to reduce healthcare costs.

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

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

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

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

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

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

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

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

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

**COURSE DIRECTOR**
Lee Raube, D.O.

<table>
<thead>
<tr>
<th>Address</th>
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<th>Prerequisites</th>
<th>Location</th>
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<tr>
<td>SFMC</td>
<td>Christie Perry</td>
<td>Completion of Phase 1</td>
<td>SFMC, ED</td>
</tr>
<tr>
<td></td>
<td>309-655-6998</td>
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<tr>
<td></td>
<td><a href="mailto:cperry09@uic.edu">cperry09@uic.edu</a></td>
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<th>Duration in Weeks</th>
<th>Hour/Week</th>
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<td>All year except as noted.</td>
<td>Blocks 3 &amp; 4 Fall Break Winter Break</td>
<td>4</td>
<td>40</td>
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<td>5 Hours Weekly</td>
<td>Occasional during conference</td>
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<th>House Staff</th>
<th>Night Call</th>
<th>Weekends</th>
<th>No. of Students</th>
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<tr>
<td>Yes</td>
<td>Optional</td>
<td>Yes</td>
<td>4 UICOMP Students</td>
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<tr>
<th>Optimizer</th>
<th>Visiting Students</th>
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<td>Yes</td>
<td>No</td>
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## Narrative Description

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

## Objectives

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

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

## Method of Evaluation

The faculty will base their evaluation on:

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

## Required Reading

Reading assigned during elective.

**Note: Contact for Elective Assignment**

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

<table>
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<tr>
<th>Address</th>
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<th>Prerequisites</th>
<th>Location</th>
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| SFMC    | Christie Perry  
309-655-6998  
cperry09@uic.edu | Completion of Phase 2 | SFMC  
E.D. |

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<th>Dates Available</th>
<th>Dates Not Available</th>
<th>Prerequisites</th>
<th>Location</th>
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| Blocks 1-7      | Blocks 8-12          | Completion of Phase 2 | SFMC  
E.D. |
| With Director Approval | Fall Break Winter Break | | |

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<th>Lab</th>
<th>Outpatient</th>
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<tr>
<td>5 Hours Weekly &amp; 4 hours of didactics</td>
<td>Simulation Lab</td>
<td>100%</td>
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<td>Night Shift (3)</td>
<td>Yes (2/4)</td>
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<th>Optimizer</th>
<th>Visiting Students</th>
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<td>No</td>
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**NARRATIVE DESCRIPTION**

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

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

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

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

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

**NOTE: CONTACT FOR ELECTIVE ASSIGNMENT**

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

Chair: Kelvin Wynn, M.D.

Schedule Change Authorization:
Jodi Frasure (jfrasure@uic.edu)
Family Medicine – Maternal/Newborn (ELEC 194) | Course Director
---|---
Address | Elizabeth Gabel, MD
Family Medical Center | Location
815 Main Street | UnityPoint Health Methodist / UICOMP
Peoria, IL 61602 | Family Medicine Residency
Coordinator |
Jodi Frasure | Prerequisites
(309) 672-4593 | Completion of Phase 2
jfrasure@uic.edu |
Dates Available | Duration in Weeks
Only available | 2 or 4
per direct request | Hours/Week
| 40 – 60
Dates Not Available | No
Blocks 1a-3a, 5b-8b | Inpatient
& Winter Break | Yes
Lectures/Seminars | Lab
Yes | Outpatient
No | No. of Students

Visiting Students

Yes

House Staff | Night Call
UnityPoint Health Methodist | No
| Weekends
No | A maximum of 1 student per any

Family Medicine elective per block

Optimizer | No

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)**

**Address**
Family Medical Center
815 Main Street
Peoria, IL 61602

**Coordinator**
Jodi Frasure
(309) 672-4593
jfrasure@uic.edu

**Prerequisites**
Completion of Phase 2

**Location**
UnityPoint Health Methodist / UICOMP Family Medicine Residency

<table>
<thead>
<tr>
<th>Dates Available</th>
<th>Dates Not Available</th>
<th>Duration in Weeks</th>
<th>Hours/Week</th>
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<td>Only available per direct request</td>
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<td>4</td>
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<tr>
<td>Yes</td>
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<td>No</td>
<td>A maximum of 1 student per any Family Medicine elective per block</td>
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<table>
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<tr>
<th>Optimizer</th>
<th>Visiting Students</th>
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**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.
4. Perform a comprehensive, yet pertinent history and physical.
5. Develop a comprehensive assessment of the patient’s presenting problem.
6. Develop a “whole person” approach to patient care that focuses on the patient’s physical, emotional, psychological and spiritual health.
7. Demonstrate good interpersonal skills.
8. Employ skills as a member of the health care team.
9. Describe the influences and importance of the family, community, occupation and psychological factors on patient care.

**METHOD OF EVALUATION:** The faculty will base their evaluation on:
1. The Standard Clinical Evaluation Form.
2. Daily observation.
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 AIDS:
Visual Dx https://www.visualdx.com
Dyna Med https://dynamed.com/home/about
### INTERNATIONAL FAMILY MEDICINE (ELEC 824.5)

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

<table>
<thead>
<tr>
<th><strong>Dates Available</strong></th>
<th><strong>Dates Not Available</strong></th>
<th><strong>Duration in Weeks</strong></th>
<th><strong>Hours/Week</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>All year</td>
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<td>4-8</td>
<td>40 - 50</td>
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<table>
<thead>
<tr>
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<th><strong>Lab</strong></th>
<th><strong>Outpatient</strong></th>
<th><strong>Inpatient</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Varies by site</td>
<td>Varies by site</td>
<td>Yes</td>
<td>Varies by site</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>House Staff</strong></th>
<th><strong>Night Call</strong></th>
<th><strong>Weekends</strong></th>
<th><strong>No. of Students</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>No</td>
<td>Varies by site</td>
<td>Varies by site</td>
<td>1 - 2 per site</td>
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</table>

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

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

### NARRATIVE DESCRIPTION:

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

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

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

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

### OBJECTIVES:

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

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

### METHOD OF EVALUATION:

The faculty will base their evaluation on:

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

Chair: Meenakshy Aiyer, M.D.

Schedule Change Authorizations:

Debby Tucker (dtucker3@uic.edu)
| **ADVANCED ANATOMY**  
| (ELEC 342) |
| **Address**  
| UICOMP  
| 1 Illini Drive  
| Peoria, IL |
| **Coordinator**  
| Debby Tucker  
| 309-680-8641  
| dtucker3@uic.edu |
| **Prerequisites**  
| Completion of Phase 2 |
| **Location**  
| UICOMP  
| JUMP  
| OSF |
| **Dates Available**  
| All year except Winter Break |
| **Dates Not Available**  
| Winter Break |
| **Duration in Weeks**  
| 4 |
| **Hours/Week**  
| 40 |
| **Lectures/Seminars**  
| N/A |
| **Lab**  
| Yes |
| **Outpatient**  
| N/A |
| **Inpatient**  
| N/A |
| **House Staff**  
| Yes |
| **Night Call**  
| No |
| **Weekends**  
| No |
| **No. of Students**  
| 6 |
| **Optimizer**  
| Yes |
| **Visiting Students**  
| No |

**NARRATIVE DESCRIPTION**

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

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

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

**METHOD OF EVALUATION**

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

**REQUIRED READING**

Relevant sections of Anatomy textbook for Phase 1
NARRATIVE DESCRIPTION

Recent UICOMP experimental success with 3D modeling for complex surgical planning forms the basis for this elective. Accurate 3D mental interpretation, identification, and diagnosis from 2D medical imaging of anatomical structures remains a leading cause in misdiagnosis and surgical error. This elective provides an opportunity for the student to gain hands-on experience developing anatomical location, identification, and dissection skills as well as demonstrating application of 2D anatomical imaging information to a 3D model.

Experienced surgeons who face complex surgical procedures champion the benefits of converting 3D DICOM datasets into 3D models for pre-surgical analysis. Surgeon’s who face a complex congenital heart surgery or complex surgical oncology case will acquire a 3D imaging dataset, then working with radiology, they will generate a 3D model of the case. Once the 3D model is created they will then interact with the 3D model (physical 3D print or VR digital 3D model) to generate an improved mental representation of the surgical case or even practice a simulated surgery procedure with the model prior to repair. The surgeons will then create an informational module for patient education or clinical vignette for medical education. This elective aims to mirror this real world work-flow to introduce these new standard of care concepts to the learner while providing a deeper understanding of the anatomy chosen by the learner.

This elective provides the learner with an opportunity to dive deep into specialty specific anatomy through cadaveric anatomic dissection, radiologic diagnostic interpretation, 3D model generation from 3D DICOM datasets, followed by a case presentation project.

Prior to the start of the elective (2 weeks, minimum), the learner is expected to communicate with the anatomy lab, the desired target anatomy so preparations can be made for the start of the elective. The elective is broken up into 3 broad phases. The first phase is hands on dissection coordinated within the anatomy lab. The second phase is a combination of both radiologic image review as well as 3D model generation. Working with radiology, the learner will shadow a radiology sub-specialist in the target specialty. This time will be utilized to gain a summary knowledge of imaging modalities useful to the specialty as well as identification of a sufficient 3D DICOM dataset by which to generate the 3D model. The learner will then transition to the process of creating the 3D model from the 3D DICOM dataset. This involves utilizing medical oriented CAD software, (for which training and support will be provided.) The third and final phase of the elective involves creating a peer educational project utilizing a 3D technology of the learner’s choosing.

Successful completion of the elective should result in:
1. Deeper knowledge of the targeted anatomy through dissection and radiological review
2. Broad awareness and utility of imaging methods for targeted anatomy
3. Exposure to the process of segmentation in the building of 3D models
4. Awareness of the different types of 3D technology and how 3D modeling aids in the surgical planning of complex procedures
5. Broad understanding of how 3D modeling fits into good instructional design
OBJECTIVES  At the end of this rotation, the student will be able to:

1. Identify, describe, and apply cadaveric anatomic structures and function
2. Develop enhanced dissection skills
3. Compare radiologic anatomy to cadaveric anatomic relationships to enhance understanding of disease processes
4. Describe decision making process for when 3D modeling should be considered for medical decision making
5. Demonstrate basic 3D modeling creation skills with CAD software
6. List various 3D technologies and benefits and limitations of each (as they relate to medical decision making)
7. Exhibit proper integration of 3D modeling into medical education format

A DICOM file is an image saved in the Digital Imaging and Communications in Medicine (DICOM) format.

REQUIRED READING

Relevant sections of Anatomy textbook for Phase 1
Book Chapter: 3D Modeling: The Next Imaging Modality; Dr. Bramlet 2021

METHOD OF EVALUATION

Evaluation will be broken up into the 3 phases of the elective. Feedback of current performance will be provided at the end of each phase.
<table>
<thead>
<tr>
<th>Planning and Preparation</th>
<th>Outstanding 5.0</th>
<th>Advanced 4.0</th>
<th>Proficient 3.0</th>
<th>Unsatisfactory 2.0</th>
<th>Incomplete</th>
<th>Insufficient Information 0.0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Identify and Justify topic selection</td>
<td>Topic and justification involve creative application of topic</td>
<td>Topic and justification identify application beyond course</td>
<td>Topic and justification submitted on time</td>
<td>No topic selected / missing justification for topic</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Create list of objectives</td>
<td>List of objectives demonstrate deeper research into topic</td>
<td>List of objectives parallel and complement UICOMP anatomy curriculum objectives</td>
<td>List of objectives complete and submitted on time</td>
<td>No objectives created or do are missing clear outcomes and measureable activity</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Create Outline for project</td>
<td>Outline includes subtopics to stimulate broader thought and application of content</td>
<td>Outline provides supportive, logical progression and no content errors</td>
<td>Outline complete and submitted on time</td>
<td>No outline created or outline has significant missing parts</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Anatomic Dissection and Gross Lab</th>
<th>Outstanding 5.0</th>
<th>Advanced 4.0</th>
<th>Proficient 3.0</th>
<th>Unsatisfactory 2.0</th>
<th>Incomplete</th>
<th>Insufficient Information 0.0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Structure identification list</td>
<td>List is thorough and complete including a justification for identification and written so the procedure is repeatable by future learners</td>
<td>List is given with logical order for dissection and identification</td>
<td>List is given on time and complete</td>
<td>No list created or the list is missing relevant structures.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dissection and identification</td>
<td>Student performed dissection with minimal extra damage to surrounding tissue, near surgical efficiency and accuracy, with 100% of structures listed without help. captured all steps with photographs</td>
<td>Student completed dissection and identified 90% of listed structures. Also identified other visible structures while vocally describing their process during the procedure. Relevant photographs were taken</td>
<td>Student demonstrated basic dissection skills and identified 80% of listed structures without help</td>
<td>Student dissection skills need improvement. Student needed assistance throughout procedure to identify most structures. Many structures were carelessly damaged.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Overall performance</td>
<td>Student was completely engaged in the dissection. They followed the prepared plan, adaptable to facilitator directions, and followed ALL necessary safety and lab</td>
<td>The student was engaged most of the time during the dissection. They followed most directions and necessary procedures. ALL safety rules were followed</td>
<td>The student was on time and demonstrated respect for the donor throughout the procedure. They identified most structures without help. They followed ALL procedures</td>
<td>The student was off task or disengaged for most of the dissection and/or did not follow directions, completed steps of the procedure out of order and / or did not</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Radiology and Segmentation</td>
<td>Outstanding 5.0</td>
<td>Advanced 4.0</td>
<td>Proficient 3.0</td>
<td>Unsatisfactory 2.0</td>
<td>Incomplete</td>
<td>Insufficient Information 0.0</td>
</tr>
<tr>
<td>----------------------------</td>
<td>-----------------</td>
<td>--------------</td>
<td>----------------</td>
<td>-------------------</td>
<td>------------</td>
<td>-----------------------------</td>
</tr>
<tr>
<td>Engagement with Radiology</td>
<td>Pre-reading for shadow experience</td>
<td>On time and present for the shadow experience</td>
<td>Missing more shadow experience than being present</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Selection of DICOM dataset for complex 3D problem</td>
<td>DICOM shows target anatomy perfectly, or two DICOM datasets utilized to generate new model</td>
<td>DICOM demonstrates anatomy, but different modality would have been ideal</td>
<td>DICOM can generate some but not all anatomy</td>
<td>No DICOM selected or incomplete segments</td>
<td></td>
<td></td>
</tr>
<tr>
<td>QA of 3D Digital Model</td>
<td>QA process complete on first and final review</td>
<td>QA process requires 1 pass</td>
<td>QA process requires 2 passes</td>
<td>QA not performed</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Quality of 3D digital model</td>
<td>Complex multi-segmented model of complex anatomy, or model derived from multiple images</td>
<td>Good model with multiple segments</td>
<td>Model consists of 1 or 2 &quot;easy to segment&quot; components i.e. bone and contrast</td>
<td>No model generated</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Educational Project</th>
<th>Outstanding 5.0</th>
<th>Advanced 4.0</th>
<th>Proficient 3.0</th>
<th>Unsatisfactory 2.0</th>
<th>Incomplete 1.0</th>
<th>Insufficient Information 0.0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Demonstrates understanding of 3D model's benefit in education and training</td>
<td>Utilizes 3D technology that conveys complexity of 3D model</td>
<td>Utilizes 2D technology that conveys complexity of 3D model through movement</td>
<td>Utilizes 2D technology that shows 3D model, but does not utilize movement</td>
<td>No Project or Project made now attempt to incorporate 3D model</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Quality of content</td>
<td>High quality project that not only conveys key concepts to target learner, but also demonstrates advanced anatomy knowledge</td>
<td>High quality project that conveys key concepts to target learner</td>
<td>Average quality project that struggles to clearly educate the target learner</td>
<td>No Project / Poor Quality project</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Depth of content</td>
<td>Learner demonstrates excellent understanding of targeted anatomy by linking dissection, radiographs and 3D model within project details.</td>
<td>Learner demonstrates advanced understanding of targeted anatomy.</td>
<td>Learner demonstrates successful completion of their project objectives.</td>
<td>No project or project did not reflect or address objectives</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| **ANATOMICAL & CLINICAL PATHOLOGY** (ELEC 645) | **Course Director**  
Lori Racsa, M.D. |
|---|---|
| **Address** | **Coordinator**  
Debby Tucker  
309-680-8641  
dtucker3@uic.edu |
| **Dates Available** | **Dates Not Available**  
Blocks 1-6, 9-13  
Fall Break (with prior approval)  
Blocks 7-8  
Winter Break |
| **Duration in Weeks** | **Location**  
4 weeks only  
UPH – Methodist - Lab |
| **Lectures/Seminars** | **Lab**  
No  
Yes |
| **Outpatient** | **Inpatient**  
No  
Yes |
| **House Staff** | **Night Call**  
No  
No |
| **Weekends** | **No. of Students**  
No  
1 |
| **Optimizer** | **Visiting Students**  
Yes  
Yes |

**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 cytologic samples.
8. Describe some of the common pathologic specimens seen in surgical pathology.
9. Differentiate between benign and malignant tissues and cells by listing identified criteria.
10. Recognize the indications for and uses of frozen sections in surgical pathology.
11. Research a pathology topic and make a presentation.

**Method of Evaluation**

The faculty will base their evaluation on:

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

**Required Reading**

None at this time.
COMMUNITY HEALTH  
(ELEC 423.1)  

Co-directors: Ms. Angela O’Bryant & Dr. Mary Stapel

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

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

**Prerequisites**  
Completed Phase 1

**Location**  
Central Illinois FRIENDS

<table>
<thead>
<tr>
<th>Dates Available</th>
<th>Dates Not Available</th>
<th>Duration in Weeks</th>
<th>Hours/Week</th>
<th>Lectures/Seminars</th>
<th>Lab</th>
<th>Outpatient</th>
<th>Inpatient</th>
<th>House Staff</th>
<th>Night Call</th>
<th>Weekends</th>
<th>No. of Students</th>
</tr>
</thead>
<tbody>
<tr>
<td>Available except block 8 and Winter Break</td>
<td>Block 8 and Winter Break</td>
<td>2</td>
<td>32 hours/week</td>
<td></td>
<td>no</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2 students</td>
</tr>
</tbody>
</table>

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

**NARRATIVE DESCRIPTION**

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

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

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

**OBJECTIVES**

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

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

**METHOD OF EVALUATION**

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

Reading assigned prior to or during elective:

- A Framework for Educating Health Professionals to Address the Social Determinants of Health: Chapter 2
- Windshield Survey document (resource to be provided)
- Tri-County Community Health Needs Assessment (CHNA) Community Health Improvement Plan
- Online phlebotomy module (if review needed)
- Other articles and training modules assigned depending on location of Elective
COMMUNITY HEALTH
(ELEC 423.2)

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

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

Prerequisites
Completed Phase 1

Location
Faith Community Nurses of OSF

Dates Available
Upon Approval

Dates Not Available
Winter Break

Duration in Weeks
2

Hours/Week
32 hours/week

Lectures/Seminars
With prior notice

Lab
no

Outpatient
Yes

Inpatient
No

House Staff
No

Night Call
No

Weekends
Varies

No. of Students
2 students

Optimizer
Yes

Visiting Students
No

NARRATIVE DESCRIPTION

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

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

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

OBJECTIVES

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

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

METHOD OF EVALUATION

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

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

RECOMMENDED READING


Recommended readings:

- Fitzpatrick's Color Atlas and Synopsis of Clinical Dermatology
- DermAtlas by John Hopkins
- DermPath Tutor: University of Iowa
- Skin Disease Diagnosis and Treatment, Thomas Habif
NARRATIVE DESCRIPTION

Students will follow Board certified Forensic Pathologists through a very busy consultant private practice serving Illinois Coroners in central Illinois in Bloomington and Peoria autopsy facilities. The student will review the investigation circumstances of the death; participate in pre-autopsy interactions with police, coroner, deputy coroners, and assist in performing the autopsies in individuals who suffer sudden unexpected death, most commonly of traumatic nature, involving natural, accidental, and suicidal means. The student will view but not assist in homicidal autopsies. The student will choose one of their autopsies to prepare a final report discussing the forensic aspects of the investigation, autopsy, ancillary studies, and determining the cause and manner of death. The paper may be submitted as a case report to a forensic pathology or sciences journal and will be appropriately referenced and researched.

OBJECTIVES

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

1. Describe 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. Discuss the pathophysiology of the death of the individual under investigation and postmortem examination.
3. Describe 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. Describe 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 of the deceased or not.

METHOD OF EVALUATION

The faculty will base their evaluation on:

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

REQUIRED READING:

Selected Topics as assigned related to the relevant daily casework from MedScape Forensic Pathology Section at https://emedicine.medscape.com/pathology#forensic
NEUROPATHOLOGY  
(ELEC 767)  
Course Director  
Sarah Bach, M.D.

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

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

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

**METHOD OF EVALUATION** The faculty will base their evaluation on:
1. Individual discussions with the student.
2. Observation and daily contact with student.
3. Quizzes, PowerPoint presentation, and final exam.

**REQUIRED READING**
None at this time.
### PHARMACOLOGY BASIC SCIENCE - ONLINE  
(ELEC 508)

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<tr>
<td>Dept. of HSE &amp; Pathology</td>
<td>309-680-8641</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 Illini Dr.</td>
<td><a href="mailto:dtucker3@uic.edu">dtucker3@uic.edu</a></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Peoria, IL 61605</td>
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### NARRATIVE DESCRIPTION

This online elective is designed to reinforce the fundamental principles of pharmacology in M3 and M4 years. It will allow the students to integrate the scientific basis of pharmacotherapy with clinical experiences. Along with the core concepts of pharmacology, selected chemotherapeutic agents including antibacterial, antivirals, and antifungals will be covered in depth. Each student is required to actively participate in small group discussions during synchronous online sessions. In addition, students are expected to complete asynchronous online learning modules, required reading, and practice pharmacology questions in USMLE format. Each student will be required to submit a written assignment every week and a presentation at the end of the elective.

### OBJECTIVES

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

1. Explain the rationale use of drugs based on pharmacokinetic and pharmacodynamic principles.
2. Describe mechanism of action of major antimicrobials and mechanisms of antibacterial resistance.
3. Compare the therapeutic uses of major classes of antimicrobial agents.
4. Explain the advantages and disadvantages of combination antimicrobial therapy.
5. Calculate antimicrobial dosing based on drug levels and pharmacokinetic parameters.
6. Predict adverse effects, drug interactions, and contraindications of drugs.
7. Apply fundamental principles of pharmacology in the design of rational therapeutic regimens for patients.
8. Improve communication and presentation skills.

### METHOD OF EVALUATION

1. Weekly written assignments
2. Weekly quizzes
3. Presentation (Max 20 slides)
4. Participation in small group activities

### REQUIRED READING

### QUALITY AND SAFETY (ELEC 436)

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<td>Completion of IHI Open School QI and PS modules</td>
<td>OSF Healthcare or Unity Point Health</td>
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<tr>
<td>1 Illini Dr.</td>
<td>309-680-8641</td>
<td></td>
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<tr>
<td>Peoria, IL 61605</td>
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### NARRATIVE DESCRIPTION

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

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

### OBJECTIVES

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

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

### METHOD OF EVALUATION

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

### REQUIRED READING

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

Department Chair: Teresa Lynch, M.D.

*Schedule Change Authorizations:*
# CARDIOVASCULAR DISEASES  
[](ELEC 608.1)  

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<tr>
<td>OSFHealthcare Cardiovascular Institute 5405 N Knoxville 309-691-4410</td>
<td>TBA 309-655-7733</td>
<td>Phase 2 Medicine Clerkship</td>
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## NARRATIVE DESCRIPTION

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

## OBJECTIVES

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

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

## METHOD OF EVALUATION

The faculty will base their evaluation on:

1. Daily rounds and student presentations.
2. Standard Clinical Evaluation Form
### CLINICAL MICROBIOLOGY

**Address**
OSF System Lab  
1224N. Berkeley Ave.  
Peoria, IL 61603

**Coordinator**
TBA  
309-655-7733

**Prerequisites**
Passing score on USMLE  
Step 1 Exam

**Location**
OSF System Lab OSF  
Saint Francis Medical Center

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Thurs: 1:30PM – 3:30PM | Yes | No | Yes |

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

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

**METHOD OF EVALUATION**

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

**REQUIRED READING**


http://www.idsociety.org/Guidelines/Patient_Care/IDSA_Practice_Guidelines/Laboratory_Diagnosis_of_Infectious_Disease/

**OPTIONAL**

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

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

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

METHOD OF EVALUATION The faculty will base their evaluation on:

1. Interactive rounds with assigned residents and attending staff.
2. Standard Clinical Evaluation Form
### 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 special interest in inflammatory bowel disease, motility & chronic viral hepatitis.

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

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

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

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

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

Course Director  
Larry Lindahl, M.D.

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<th>Duration in Weeks</th>
<th>Hours/Week</th>
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<tr>
<td>All year except</td>
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<td>2 or 4 Weeks</td>
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<th>Lab</th>
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<th>Inpatient</th>
<th>House Staff</th>
<th>Night Call</th>
<th>Weekends</th>
<th>No. of Students</th>
<th>Optimizer</th>
<th>Visiting Students</th>
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<tr>
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<td>No</td>
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NARRATIVE DESCRIPTION

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

OBJECTIVES

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

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

METHOD OF EVALUATION

The faculty will base their evaluation on:

1. The student skills will be assessed primarily by the attending physician based on the performance of the above tasks.
<table>
<thead>
<tr>
<th>Address</th>
<th>Coordinator</th>
<th>Prerequisites</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>One Illini Drive</td>
<td>TBA</td>
<td>Passing of Step One exam &amp; completion of one clinical clerkship</td>
<td>UICOM</td>
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<tr>
<td>Peoria, IL</td>
<td>309-655-7733</td>
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<th>Duration in Weeks</th>
<th>Hours/Week</th>
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<tr>
<td>Blocks 3b-12a, except as noted.</td>
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<th>Night Call</th>
<th>Weekends</th>
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</tr>
</thead>
<tbody>
<tr>
<td>No</td>
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<td>3 min; max 12</td>
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<tbody>
<tr>
<td>Yes</td>
<td>No</td>
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**NARRATIVE DESCRIPTION**

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

**OBJECTIVES** Upon successful completion of this course, students will be able to:
1. Describe the benefits and tenets of health humanities from various perspectives and applications.
2. Analyze and appraise different modalities of health humanities including writing, music, film, and the visual arts.
3. Create an artistic or analytic project in response to a healthcare challenge students identify.

**METHOD OF EVALUATION**

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

**REQUIRED COURSE MATERIALS**


ADDITIONAL RESOURCES (OPTIONAL)

HEMATOLOGY AND ONCOLOGY  
(ELEC 804)  

| **Address** | 8940 N. Wood Sage  
Peoria, IL 61615 |
| **Coordinator** | TBA  
309-655-7733 |
| **Prerequisites** | Completion of Phase 2 |
| **Location** | SFMC, MMCI |
| **Dates Available** | All year except Winter Break |
| **Dates Not Available** | Winter Break |
| **Duration in Weeks** | 4 |
| **Hours/Week** | 30-40 |
| **Lectures/Seminars** | No |
| **Lab** | Yes |
| **Outpatient** | Yes |
| **Inpatient** | Yes (optional) |
| **House Staff** | 1 Resident |
| **Night Call** | No |
| **Weekends** | No |
| **No. of Students** | 1 |
| **Optimizer** | Yes |
| **Visiting Students** | Yes |

NARRATIVE DESCRIPTION

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

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

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

METHOD OF EVALUATION  
The faculty will base their evaluation on:

1. Student’s level of competence will be ascertained by daily contact with the attending physician and during ward rounds, lectures, and conferences.
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. Students will not be seeing any COVID-19 patients and will have minimal or no contact with them. They will be required to wear masks and other appropriate PPE’s during their encounter with non-COVID patients.

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.

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.
INPATIENT HOSPICE HOME
(ELEC 334)

<table>
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<tr>
<th>Address</th>
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<th>Prerequisites</th>
<th>Location</th>
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<tbody>
<tr>
<td>8630 IL-91</td>
<td>TBA</td>
<td>Completion of Core Clerkships</td>
<td>Owens Hospice Home</td>
</tr>
<tr>
<td>Peoria, IL 61615</td>
<td>309-655-7733</td>
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NARRATIVE DESCRIPTION
Students have a brief encounter with the Owens Hospice Home during their M3 internal medical core clerkship. This elective is offered for students who are interested in a more in-depth experience with hospice care, particularly inpatient hospice care. The elective will occur at Owens Hospice Home under the guidance of the Medical Staff at Owens, and the student will assist in the care of patients transferred to the home for holistic, interdisciplinary, complex hospice care.

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

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

Direct observation.

REQUIRED READING
To be assigned by course director
### MEDICINE SUB-INTERNSHIP (ELEC 899)

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<tr>
<td>530 N.E. Glen Oak Avenue Peoria, Illinois 61637 Department of Internal Medicine, North Building SFNB #5683</td>
<td>TBA 309-655-7733</td>
<td>Completion of Phase 2 Clerkships</td>
<td>OSF SFMC Hospital Peoria Illinois</td>
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<th>Night Call</th>
<th>Weekends</th>
<th>No. of Students</th>
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<tbody>
<tr>
<td>Yes (work with senior IM or M/P resident)</td>
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<td>Yes (2-3 weekend days per 4 weeks)</td>
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<tr>
<th>Optimizer</th>
<th>Visiting Students</th>
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<tr>
<td>Yes</td>
<td>Yes</td>
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### 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/hand-off) including patient education/prevention. This rotation will help fourth year medical students develop skills to practice and function at a level of Medicine Intern in an inpatient setting. It will also help the students critically utilize principles of evidence-based medicine in their daily management of patients.

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

### OBJECTIVES:

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

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

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

DAYS OFF

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

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 sent 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.
NEPHROLOGY
(ELEC 621)

Course Director
Anthony Horinek, M.D.

Address
420 NE Glen Oak Ave
Peoria, IL

Coordinator
TBA
309-655-7733

Prerequisites
Phase 2 Medicine Clerkship

Location
SFMC

Dates Available
All year except Winter Break

Dates Not Available
Winter Break

Duration in Weeks
4 Minimum
No 2-week rotations

Hours/Week
40

Lectures/Seminars
Yes
Lab
No

Outpatient
Optional
Inpatient
Yes

House Staff
Yes
Night Call
No

Weekends
No

No. of Students
1

Optimizer
Yes
Visiting Students
Yes

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 renal lithiasis.
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.
<table>
<thead>
<tr>
<th>OUTPATIENT – SAINT FRANCIS MEDICAL CENTER and VARIOUS OTHER LOCATIONS (ELEC 426)</th>
<th>Course Directors</th>
</tr>
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<tbody>
<tr>
<td><strong>Address</strong></td>
<td>Saurabih Bansai MD</td>
</tr>
<tr>
<td>Department of Medicine</td>
<td>Manajyoti Yadav MD</td>
</tr>
<tr>
<td>530 NE Glen Oak Avenue</td>
<td></td>
</tr>
<tr>
<td>Peoria Illinois -61637</td>
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<td><strong>Coordinator</strong></td>
<td><strong>Prerequisites</strong></td>
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<td><strong>Dates Available</strong></td>
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<td>Blocks 3b – 12b</td>
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<td>except Winter Break</td>
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<td><strong>Lectures/Seminars</strong></td>
<td><strong>Lab</strong></td>
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<td>See attached</td>
<td>May involve outpatient lab observation experience as directed by the preceptor</td>
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<td><strong>Night Call</strong></td>
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<tr>
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<td>None</td>
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<tr>
<td><strong>Optimizer</strong></td>
<td><strong>Visiting Students</strong></td>
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<td>Yes</td>
<td>No</td>
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**NARRATIVE DESCRIPTION**

Welcome to the outpatient practice of medicine! Not long ago, it was routine to admit patients with new onset diabetes or hypertension, abdominal pain, change in bowel habits or many other common medical problems.

Today, many such patients are evaluated, referred for testing and treated without ever seeing a hospital bed. Physicians in practice have easily adjusted to this change. But our educational system for medical students is lagging behind. While much can be learned from sick, complicated hospitalized patients, students on an inpatient rotation never see many day to day common medical problems. During the Medicine Outpatient Experience, as a student, you will have a chance to evaluate varied common medical problems. You will also get multiple opportunities to see how complex medical problems interact with each other and how they are managed comprehensively in an outpatient setting. This will complement and build your skills needed on the inpatient rotation as well as help you build skills for future use necessary to work in an outpatient practice.

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

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

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

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

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<tr>
<th>Week 1</th>
<th>Monday</th>
<th>Tuesday</th>
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<td>Lecture with Dr Luetkemeyer</td>
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### Outpatient Rotation

- All Clinic Assignments with no housing are scheduled for Monday Mornings (exceptions noted) and full day shifts Tuesday – Friday. For most clinic assignments, be prepared to drive daily!
- Your attendance at every Monday afternoon lecture is mandatory while you are on Outpatient Rotation, regardless of Clinic Assignment.
PALLIATIVE MEDICINE  
(ELEC 294)  

Course Director  
Dr. James Adams

<table>
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<td>Completion of core clerkships</td>
<td>SFMC</td>
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NARRATIVE DESCRIPTION

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 medicine 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 medicine service, as well as 2 days of experience in the outpatient clinic and telemedicine.

1. Patient Care
   a. Assess patient and families’ understanding of their situation, diagnoses, and prognosis, and utilize effective strategies to communicate these.
   b. Determine and describe appropriate goal-based options available to various seriously ill patients and assist families in coming to a decision.
   c. Assess decision making capacity, and roles of HCDPOA agents and proxies in medical decision-making
   d. Perform a multidimensional evaluation of various pain syndromes and propose reasonable and appropriate multimodal pain treatment for each.
   e. 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. Based Practice
   a. 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.
   b. Gain proficiency in discharge planning of complex patients with multiple medical needs
   c. 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
   d. Describe the indications, roles, timing, and evidence for both hospice and palliative medicine/care involvement.

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

4. Professionalism
   a. Explain why skilled communication, empathy, and excellent pain and symptom management are critically important to performing excellent holistic medical care.
   b. 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
   a. Develop and utilize effective strategies to establish rapport, assess understanding and communicate difficult information including bad news.
   b. 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.
   c. Determine goals of care through in-depth discussion with patients and family members.
   d. Liaison between services as a member of the palliative medicine team in order to balance the needs of the patient and family with the goals of the care teams.
   e. Communicate with other consultants and primary inpatient teams.

6. Medical Knowledge
   a. Apply basic medicine concepts learned in third and fourth year to complex medical scenarios.
   b. 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.
   c. 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:
   Direct observation

REQUIRED READING/ASSIGNMENTS:
To be assigned by the course director.
PULMONARY MEDICINE - SAINT FRANCIS MEDICAL CENTER/UNITY POINT-METHODIST (ELEC 625)

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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.
# NARRATIVE DESCRIPTION

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

## OBJECTIVES

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

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

## METHOD OF EVALUATION

The faculty will base their evaluation on:

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

## REQUIRED READING

Readings are available on the Blackboard course site.
**NARRATIVE DESCRIPTION**

This is a two-week rotation aimed for medical students interested in consultative medicine, bedside procedures, and point-of-care ultrasound used diagnostically and procedurally. It will give students the opportunity to be part of a team functioning as medical and periproductive medicine consultants. Students will also have the opportunity to practice consultative inpatient general medicine, procedural skills, and point-of-care ultrasound (POCUS) techniques to complement their bedside physical exam skills. Education will occur with bedside teaching, case discussions, simulation lab, online modules, and didactics. The student will have the ability to gain hands on experience helping with and potentially performing procedures in the JUMP simulation lab and medical ward.

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

1. Effectively communicate and collaborate with the referring primary services to best address the needs of the patients.
2. Evaluate and manage common consultative medicine topics include but are not limited to diabetes mellitus, VTE, hypertension, acute renal failure, fever, atrial fibrillation, decompensated heart failure, chest pain, shortness of breath.
3. Become proficient in assessing and managing patients in perioperative period in cooperation with surgical and non-internal medicine specialties.
4. Perform a pulmonary perioperative risk assessment and discuss strategies to reduce risk of pulmonary perioperative risks.
5. Perform a cardiac perioperative risk assessment for patient undergoing non cardiac surgery and strategies to reduce risk of perioperative cardiac events.
6. Describe medication management, antiplatelet therapy, and bridging of anticoagulation in the perioperative period.
7. Perform perioperative evaluation and management of endocrine diseases (diabetes mellitus, thyroid disease, adrenal insufficiency).
8. Perform perioperative evaluation and management of patients with kidney disease.
9. Perform perioperative evaluation and management of patients with liver disease.
10. Demonstrate improved competency in point-of-care ultrasound through interpretation, acquisition, or integration of ultrasound images.
11. Understand clinical indications and contraindications for central venous line placement, peripheral IV placement, arterial lines, paracentesis, thoracentesis, lumbar puncture, joint injection/aspiration, NG tube placement, peripheral venous line placement.

**METHOD OF EVALUATION**

M4 standardized evaluation form on E-Value completed by attending faculty based on the participation in the elective and ultrasound-based evaluation competency at the bedside.

Additionally, there will be daily feedback on procedural skills and debriefing after each consult and procedure.

**REQUIRED READING AND VIDEOS**

- Self-directed learning with completion of selected Society of Hospital Medicine (SHM) consult curriculum modules and completion of Procedure Consult modules.
- Use of “American College of Physicians ACP for Internal Medicine Ultrasound Modules” and “Sonosite Institute for POCUS” modules for skill development.
- NEJM Video modules on Thoracentesis, Paracentesis, Lumbar Puncture, Ultrasound-guided Internal Jugular Vein Cannulation, knee/ankle/wrist/shoulder arthrocentesis, and skin biopsy.
This is a mandatory, two week clinical skills course (i.e. bedside manner, sign out and transfer of care, admission and discharge preparation, medication reconciliation etc.) designed to prepare the student for residency. Both general and discipline specific instruction will be provided. The goal of the course is to provide a framework that allows the student to “hit the ground running” in residency with a skillset that is applicable regardless of institution or field of training. The course will employ didactic instruction, small group discussion, role modeling and role playing, procedural technique instruction and standardized patient encounters with real time feedback on student performance.

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

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

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

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

**REQUIRED READING:**
To be assigned by course directors.
Department of Medicine-Pediatrics

Program Director: Matthew Mischler, M.D.

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

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| Peoria, IL  
Bloomington, IL  
Canton, IL  
Chillicothe, IL  
Farmington, IL  
Havana, IL  
Washington, IL | Erin Driscoll  
309-655-3863  
erind@uic.edu | Phase 2 Combined Medicine & Pediatrics Clerkships | Varies |

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NARRATIVE DESCRIPTION

The student will work with Med-Peds physicians in Central Illinois. The student will participate in the practice of general Internal Medicine and Pediatrics outpatient.

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

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

METHOD OF EVALUATION

The faculty will base their evaluation on Standard Clinical Evaluation Form

REQUIRED READING

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

Harrison's Principles of Internal Medicine or Cecil's Essentials of Medicine,  
SUMMER CAMP FOR KIDS WITH DIABETES (ELEC 860)

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NARRATIVE DESCRIPTION

Camp Granada is a week-long summer camp for kids ages 8 - 16 who have diabetes. Active participation in all camp activities will give each medical student valuable first hand experiences in the acute and chronic management of insulin-dependent diabetes, with emphasis on interplay between physical activity, diet, and insulin dosage. Close supervision by a competent and experienced medical staff provides the background for a variety of recreational and educational activities for campers during the week.

The two-week rotation for qualified medical students consists of one week of orientation and preparation, followed by the week at camp itself (which begins on Saturday). Students are required to attend all scheduled didactic and planning sessions during the week of orientation. Introductory lectures will include Camp Orientation, Medical Concepts of Diabetes Management and Treatment (glucose monitoring, shots, and insulin pumps), Survey of Camp Medical Guidelines, Procedural Skills in Diabetes Management, and Dietetic Concepts of Diabetes Management (food exchanges and carbohydrate counting).

At camp, students will serve as live-in "cabin clinicians" for approximately 150 children with diabetes (6-10 per clinician), providing direct supervision and care to assigned campers in the cabins. The extensive Camp Staff Manual and additional handouts will serve as the text for the course and as a reference while at camp.

Students who wish to take USMLE Step 2 during this elective are encouraged to schedule that examination for the Friday in the first week of the elective.

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

1. Monitor campers’ blood sugars on a daily basis.
2. Maintain accurate medical records for each assigned patient.
3. Adjust daily insulin doses.
4. Treat acute medical problems in children with diabetes, including hyper- and hypoglycemia.
5. Provide first aid to campers.
6. Identify the basic principles by which diet, exercise, insulin, and psychosocial issues influence blood sugar control.
7. Communicate effectively in educating patients with a chronic illness.
8. Participate as part of a multidisciplinary healthcare team.

METHOD OF EVALUATION The faculty will base their evaluation on:

1. Students will be evaluated by assigned attending physicians based on daily observation of patient care, patient education, collaboration with assigned cabin teams, and medical decision-making.
2. Completion of Standard Clinical Evaluation Form by preceptor and discussion with student.
Department of Neurology

Program Director: Jorge C. Kattah, M.D.

Schedule Change Authorizations:
Charlotte Bess (cobess@uic.edu)
NARRATIVE DESCRIPTION

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

OBJECTIVES

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

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

METHOD OF EVALUATION

The faculty will base their evaluation on:

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

REQUIRED READING

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

<table>
<thead>
<tr>
<th>Address</th>
<th>Coordinator</th>
<th>Prerequisites</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>5405 N. Knoxville Avenue Peoria (OSF Cardiovascular Institute building)</td>
<td>Charlotte Bess 309-655-7999 <a href="mailto:cobess@uic.edu">cobess@uic.edu</a></td>
<td>Pre-approval from course director</td>
<td>OSF Sleep 5405 N. Knoxville Avenue Peoria</td>
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<td>2-4</td>
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<tr>
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<td>*See below</td>
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<table>
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<th>Visiting Students</th>
</tr>
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<tbody>
<tr>
<td>No</td>
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</table>

*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, OSF Sleep Peoria conducts over 4,000 sleep studies and over 8,000 office visits. 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

Head: Jeff Klopfenstein, M.D.

Schedule Change Authorizations:
Charlotte Bess (cobess@uic.edu)
NEUROLOGICAL SURGERY
(ELEC 694)

Address
SFMC

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

Prerequisites
None

Location
SFMC

Dates Available
All blocks except Winter Break

Dates Not Available
Winter Break

Duration in Weeks
2-4

Hours/Week
40

Lectures/Seminars
Discussion

Lab
No

Outpatient
Yes

Inpatient
Yes

House Staff
Yes

Night Call
Night Float
2-3 times per month

Weekends
Yes

No. of Students
6

Optimizer
Yes

Visiting Students
Yes

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 aneurysms.
7. Examine, diagnose, and outline the treatment of the common ischemic and hemorrhage brain syndromes and discuss.
8. Their management.
9. Become knowledgeable concerning requirements for the intraoperative management of spinal and cranial disease in terms of the basic operative experiences.
10. 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 workups with care outlines and/or a 10-15-minute PowerPoint presentation at one of the morning conferences will represent 25% of the grade.
2. Performance on daily work rounds with the attendings and residents will represent approximately 50% of the grade.
3. A Shelf test is given at the end of the four-week rotation. The scope of the test includes the material presented in the first- and second-year clinical neuroscience course and will represent 25% of the final grade.

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

Chair: Stephen Thompson, M.D.

Schedule Change Authorizations:
Paige Doering (pdoering@uic.edu)
NARRATIVE DESCRIPTION

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

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

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

EXPECTATIONS OF THE STUDENT  
The student is expected to:

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

EDUCATIONAL OPPORTUNITIES

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

REQUIRED READING

As assigned by the resident and/or attending physician.
Reference Text: Clinical Gynecologic Oncology, Disaia.
STUDENT EVALUATION

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

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

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

**OBJECTIVES**

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

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

**METHOD OF EVALUATION**

The faculty will base their evaluation on:

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

**REQUIRED READINGS**

As assigned.

## MINIMALLY INVASIVE GYNECOLOGIC SURGERY AND UROGYNECOLOGY
(ELEC 435)

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<tbody>
<tr>
<td>530 NE Glen Oak Ave, Peoria, IL 61637</td>
<td>Paige Doering 309-624-5592 <a href="mailto:pdoering@uic.edu">pdoering@uic.edu</a></td>
<td>Completion of Phase 2</td>
<td>OSF Medical Center / Unity Point Hospital Methodist / Illinois Medical Center</td>
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<th>Night Call</th>
<th>Weekends</th>
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### NARRATIVE DESCRIPTION

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

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

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

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

### OBJECTIVES

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

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

M4 standardized evaluation form completed by course director

REQUIRED READING

1. Diagnosis of Abnormal Uterine Bleeding in Reproductive-Aged Women – Practice Bulletin # 128
4. Pelvic Organ Prolapse. Practice Bulletin Number 185, November 2017
5. Urinary Incontinence in Women Practice Bulletin Number 155, November 2015
## OB-GYN Sub-Internship (ELEC 509)

<table>
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<th>Address</th>
<th>Coordinator</th>
<th>Prerequisites</th>
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<tbody>
<tr>
<td>530 NE Glen Oak Ave. Peoria, IL</td>
<td>Paige Doering 309-624-5592 <a href="mailto:pdoering@uic.edu">pdoering@uic.edu</a></td>
<td>Phase 2 OB-GYN clerkship</td>
<td>OSF SFMC</td>
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### NARRATIVE DESCRIPTION

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

### OBJECTIVES

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

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

### METHOD OF EVALUATION

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

### REQUIRED READING

At direction of course director and faculty.
Department of Pediatrics

Program Director: Manu R. Sood, M.D.

Schedule Change Authorizations:
Brandon Beekman (bbeekman@uic.edu)
### NARRATIVE DESCRIPTION

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

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

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

### METHOD OF EVALUATION

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

### REQUIRED READING

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

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

1. Describe the socioecological model of childhood obesity
2. Identify co-morbidities of childhood obesity and describe management strategies
3. Demonstrate patient-centered approach to lifestyle management
4. Describe how social determinants of health, genetic and epigenetic changes contribute to childhood obesity and its related co-morbidities

METHOD OF EVALUATION

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

- Direct observation and feedback of motivational interviewing skills and clinical care
- Preceptor/student case-based discussions with reflection
- Completion of standard clinical evaluation form by preceptor

REQUIRED READING

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

RECOMMENDED READING

• https://ihcw.aap.org/Documents/Assessment%20%20and%20Management%20of%20Childhood%20Obesity%20Algorithm_FINAL.pdf
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.
NEWBORN NURSERY  
(ELEC 437)

Address  
530 NE Glen Oak Ave.  
Peoria, IL

Coordinator  
Brandon Beekman  
309-655-2587  
bbeekman@uic.edu

Prerequisites  
Phase 2 Pediatric Clerkship

Location  
Resident’s work room  
#5354  
5th floor main house

Dates Available  
All year except Winter Break

Dates Not Available  
Winter Break

Duration in Weeks  
2

Hours/Week  
40

Lectures/Seminars  
Yes

Lab  
No

Outpatient  
No

Inpatient  
Yes

House Staff  
Yes

Night Call  
No

Weekends  
No

No. of Students  
1

Optimizer  
Yes

Visiting Students  
No

NARRATIVE DESCRIPTION

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

IN SUMMATION:

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

METHOD OF EVALUATION

M4 standardized evaluation through MedHub E*Value, completed by attending based on the participation in Newborn Nursery morning rounds and daily activity. M4 students will also complete an evaluation for the attending and the rotation.
NARRATIVE DESCRIPTION
The student will have the opportunity to examine pediatric outpatients with a variety of congenital and acquired heart conditions. Self-instructional materials will be used to assist the student in learning the principles of cardiac examination, the hemodynamics of certain congenital heart lesions and pediatric electrocardiograms. The student will examine preoperative patients and will observe cardiac catheterizations as part of this experience. The student will engage in some independent study during the course.

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

Medical Knowledge
1. Discuss the pathophysiology of the following aspects of the cardiovascular system:
   - Genetics
   - Fetal circulation
   - Pulmonary vascular resistance
   - Hemodynamics
2. Describe the indications, limitations, complications of diagnostic techniques used in the assessment of congenital heart disease.
   - Electrocardiography
   - Echocardiography
   - Cardiac catheterization
3. Broad classification of congenital heart disease
   - Discuss various types of congenital heart disease
   - Recognize potential congenital heart disease
   - Recognize normal vs. abnormal ECG’s
   - Be familiar with chest x-ray interpretation as applied to CHD
4. Describe the diagnosis and treatment of the newborn with cyanotic heart disease
   - Define cyanosis
   - Differentiate between cyanosis secondary to cardiac disease vs. pulmonary disease
   - Discuss stabilization of the newborn with cyanotic disease
5. Discuss the diagnosis and treatment of congestive heart failure
6. Discuss the clinical course of the 8 most common congenital heart defects and their surgical intervention.
7. Diagnose and manage dysrhythmias.
8. Diagnose and manage cardiorespiratory emergencies including:
   - Shock
   - Cardiac arrest
   - Pericardial tamponade
9. Diagnosis and appropriate management of endocarditis.
10. Discuss risk factors for cardiovascular disease.
11. Assess cardiovascular fitness.
12. Describe the approach to common cardiac related symptoms.
13. Discuss the clinical aspects, diagnosis, treatment, and prevention of rheumatic fever.
14. Discuss the clinical aspects, diagnosis, and treatment of Kawasaki disease.

**Practice-based learning and improvement**

1. Apply medical literature to the evaluation and treatment of the above cardiac-related conditions, including but not limited to:
   - The evaluation of infective endocarditis
   - The decision to treat Kawasaki disease
   - The need for evaluation of heart murmurs in children
   - The need for exercise testing
2. Gain experience with resident and medical student teaching

**Interpersonal skills and communication**

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

**Professionalism**

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

**Systems-based practice**

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

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

2. Written evaluation developed by the attending pediatric cardiologist.
3. Use of the Standard Clinical Evaluation Form by preceptor and discussion with student.
OBJECTIVES
families.
As many endocrine disorders are life
The
and mineral disturbances, hypoglycemia, and other disorders relating to the adrenal, parathyroid, thyroid, and pituitary
glands. The inpatient side offers exposure to acute endocrine complications, such as DKA, hypo and hypercalcemia, hypoglycemia, etc. As many endocrine disorders are life-long, pediatric endocrinologists establish long-term care partnerships with patients and their families.

NARRATIVE DESCRIPTION
Students can attend endocrine and diabetes outpatient clinics, as well as inpatient consults with pediatric endocrinologists. The wreath of care occurs in the outpatient setting. Students will be exposed to several pathologies from newborn to early college ages, including Type 1 and Type 2 diabetes, growth disorders, pubertal abnormalities, obesity, differences of sex development, bone and mineral disturbances, hypoglycemia, and other disorders relating to the adrenal, parathyroid, thyroid, and pituitary glands. The inpatient side offers exposure to acute endocrine complications, such as DKA, hypo and hypercalcemia, hypoglycemia, etc. As many endocrine disorders are life-long, pediatric endocrinologists establish long-term care partnerships with patients and their families.

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

1. To familiarize the student with the etiology and presentation of endocrine disorders and their management in both the outpatient clinics and inpatient services.

2. To instruct the medical student on the practical aspects of diabetes mellitus management.

3. Growth Differentiate between normal, physiologic deviations from normal and pathologic findings related to endocrinology
   a. Puberty: Recognize the stages of sexual development (sexual maturation rate) using the Tanner staging method among boys and girls
   b. Thyroid: Understand the general pediatrician’s role in the diagnosis and management of thyroid dysfunction in patients with congenital and acquired hypothyroidism, autoimmunity, hyperthyroidism, thyroid masses, and tumor
   c. Bone and mineral disorders: Understand the role of parathyroid hormone in calcium, phosphorus, and skeletal homeostasis
   d. Diabetes: Identification, diagnosis and treatment of uncomplicated and complicated type 1 and type 2 Diabetes Mellitus
   e. Disorders of sex differentiation: Understand the role of the pediatrician in recognizing normal vs. abnormal anatomy of the external genitalia, identification of most common causes of ambiguity, diagnosis, genetic and molecular basis, and treatment.
   f. The role of the pediatrician in identifying individuals at risk for the development of endocrine dysfunction (for example, obesity complications, growth deceleration, bone health, diabetes mellitus chronic complications)
   g. Adrenal: Identify patients with cortisol deficiency and management of adrenal crisis

4. Learn about tools to identify endocrine dysfunction (proper use of growth; length, weight and BMI charts, use of orchidometer in the assessment of sexual development, use of stadiometer for accurate height measurement, and interpretation of bone age and DXA scans
METHOD OF EVALUATION

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

REQUIRED READING

Students could benefit from reviewing the materials attached.
https://www.pedsendo.org/education_training/healthcare Providers/consensus_statements/index.cfm

Schedule

Monday Through Friday: 7:40-5 PM in Clinic
Friday afternoon – No patients. Division meeting between 2-3 pm. May present a case
No night shifts
No weekends
**NARRATIVE DESCRIPTION**

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

**OBJECTIVES**

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

**METHOD OF EVALUATION**

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

**REQUIRED READING**

Selected readings from various medical journals to be provided by the Course Director.
**NARRATIVE DESCRIPTION**

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

**OBJECTIVES**

**Patient Care**

The goals of this rotation are to provide the student with skills that enable him/her to:

1. Manage patients with common hematologic and oncologic problems.
2. Identify when subspecialty assistance for these problems is appropriate.
3. Function as a member of the multi-disciplinary team to optimize patient care.
4. Evaluate and support a patient with a malignancy in all phases of their disease.

**Medical Knowledge**

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

**Practice-Based Learning** The goals of this rotation are to allow the student to

1. Be exposed to a wide variety of hematologic and oncologic diseases through patient contact, case discussions, lectures, and self-directed individual readings.
2. Conduct literature searches and be encouraged to write articles on appropriate patient cases or medical topics.

**Interpersonal and Communication Skills** The rotating student will be trained in

1. Collaborating with members of the multi-disciplinary team while caring for children with chronic blood disorders or malignant conditions.
2. Guiding primary care physicians.
3. Consulting physicians and health care professionals as needed.
4. Maintain comprehensive, timely and legible records.

**Professionalism**

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, students 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 textbooks 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.
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<tr>
<td>OSF St. Francis Medical Center Children's Hospital of Illinois</td>
<td>Brandon Beekman 309-655-2587 <a href="mailto:bbeekman@uic.edu">bbeekman@uic.edu</a></td>
<td>Completion of Phase 2 Pediatrics Clerkship &amp; Pediatric Sub-Internship desirable</td>
<td>Pediatric Intensive Care Unit at CHOI OSF SFMC</td>
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**Dates Available**
- All year except Winter Break

**Dates Not Available**
- Winter Break

**Duration in Weeks**
- 2-4

**Hours/Week**
- 50

**Lectures/Seminars**
- Yes

**Lab**
- No

**Outpatient**
- No

**Inpatient**
- Yes

**House Staff**
- Yes

**Night Call**
- Optional

**Weekends**
- Optional

**No. of Students**
- 1

**Optimizer**
- Yes

**Visiting Students**
- Yes

**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**

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Familiarize with fluid-electrolytes, metabolic and renal disorders, trauma, nutrition, cardio-respiratory management, infection control

Recognize congenital anomalies presenting in critical care unit & communicate with family

Recognize isolated and multiple organ system failure & interact with team and family

Perform clinical assessment to formulate management plan for critically ill patient

Familiarize invasive and noninvasive techniques for monitoring and supporting pulmonary, cardiovascular functions

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

Understand the role of general pediatrician and the intensivist in perioperative management of surgical patients

**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.
PEDIATRIC SUB-INTERNSHIP (ELEC 875)

Coordinator
Brandon Beekman
309-655-2587
bbeekman@uic.edu

Prerequisites
Completion of Phase 2

Location
Children's Hospital of Illinois at SFMC

Address
SFMC

Dates Available
All year except as noted.

Dates Not Available
Block 11a (UICOMP M4 students only)
Winter Break

Duration in Weeks
4

Hours/Week
60-70 average

Lectures/Seminars
Yes

Lab
No

Outpatient
No

Inpatient
Yes

House Staff
Yes

Night Call
5 nights of night shift

Weekends
Yes

No. of Students
3

Optimizer
Yes

Visiting Students
Yes

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

More information about the new COMSEP curriculum can be obtained by visiting:
Department of Physical & Rehabilitation Medicine

Chair: Lisa Snyder, M.D.

Schedule Change Authorizations:
Amanda Franklin (aerwin@uic.edu)
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<td>Year round except as noted.</td>
<td>Blocks 8b &amp; 9a Winter Break</td>
<td>2 maximum</td>
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*NARRATIVE DESCRIPTION*

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

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

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

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

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

Chair: Ryan F. Finkenbine, M.D.

Schedule Change Authorizations:
Maureen Wolfe (maureenw@uic.edu)
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.

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

Chair: Sean Meagher, M.D.

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

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### NARRATIVE DESCRIPTION

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

### OBJECTIVES

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

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

### METHOD OF EVALUATION

The faculty will base their evaluation on:

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

### REQUIRED READING

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

This course provides a broad-based introduction to the world of medical imaging. Students will be required to either purchase a textbook (approximately $60.00) or access eBook online. They will be required to read the textbook in its entirety and will be tested on the material in the book as well as lecture content. A series of lectures will be presented to the students, in person or via Zoom. The student's grade will be based on tests that will be given during the elective.

Students may be encouraged to attend optional clinical rotations within the Dept. of Radiology at OSF Saint Francis Medical Center: fluoroscopy, plain films, neuroradiology, interventional radiology, nuclear medicine, body imaging, radiation oncology, and pediatric radiology. (If there is space available on the particular rotation requested)

### OBJECTIVES

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

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

### METHOD OF EVALUATION

The faculty will base their evaluation on:

1. Examinations.
2. Attendance required at all lectures unless prior approval obtained.
3. Completion of Standard Clinical Evaluation Form by preceptor and discussion with student, if warranted.

### REQUIRED READING

INTRODUCTION TO RADIATION ONCOLOGY
(ELEC 825)

Course Director
James L. McGee, M.D.

Address
Dept. of Radiology
UICOMP

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

Prerequisites
Completion of six months of Phase 2 and Surgery Clerkship

Location
Rad. Oncology
OSF SFMC
Forest Park
Peoria Cancer Center
Pekin Cancer Center

Dates Available
Blocks 1-6, 9b-12

Dates Not Available
Blocks 7a-9a
Fall Break
Winter Break

Duration in Weeks
2-4

Hours/Week
8:00-6:00 M
8:00-5:00 T-W
7:00-5:00 Th-F

Lectures/Seminars
Yes-Tumor Boards

Lab
No

Outpatient
Yes

Inpatient
Yes

House Staff
No

Night Call
No

Weekends
No

No. of Students
1

Optimizer
Yes

Visiting Students
No

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

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

Specific sessions will have required attendance:
1. Tumor Board Conferences as assigned.
2. Physics and Treatment Planning work sessions.
4. Radiation treatment delivery sessions.

OBJECTIVES Upon completion of this elective, the student will be able to:
1. Understand the clinical behavior of common cancers.
2. Describe the multi-modality management of cancer by disease site including initial cancer evaluation and ultimate treatment based on the results of staging.
3. Distinguish the fields of surgical, medical, and radiation oncology and their role in common malignancies.

METHOD OF EVALUATION The faculty will base their evaluation on:
1. Interaction in the clinical settings between the clinicians and the student.
2. Attendance at tumor boards.
3. Completion of Standard Clinical Evaluation Form by preceptor and discussion with student, if warranted.
4. Have an appreciation for cancer control and treatment guidelines. (NCCN)

REQUIRED READING
Readings will be tailored to individual student interests and career plans.
## VASCULAR AND INTERVENTIONAL RADIOLOGY (OSF SFMC)

<table>
<thead>
<tr>
<th>Course Director</th>
<th>Terry M. Brady, M.D.</th>
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<tbody>
<tr>
<td><strong>Address</strong></td>
<td>530 N.E. Glen Oak</td>
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<td></td>
<td>UICOMP</td>
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<tr>
<td><strong>Coordinator</strong></td>
<td>Deanna Silotto</td>
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<td>309-655-3230</td>
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<td></td>
<td><a href="mailto:dsilotto@uic.edu">dsilotto@uic.edu</a></td>
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<tr>
<td><strong>Prerequisites</strong></td>
<td>Completion of Phase 2</td>
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<tr>
<td><strong>Location</strong></td>
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<thead>
<tr>
<th><strong>Dates Available</strong></th>
<th>Blocks 1-7, 9b-12</th>
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<tbody>
<tr>
<td><strong>Dates Not Available</strong></td>
<td>Blocks 8-9a, Fall Break, Winter Break</td>
</tr>
<tr>
<td><strong>Duration in Weeks</strong></td>
<td>2-4</td>
</tr>
<tr>
<td><strong>Hours/Week</strong></td>
<td>40</td>
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<thead>
<tr>
<th><strong>Lectures/Seminars</strong></th>
<th>No</th>
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<tbody>
<tr>
<td><strong>Lab</strong></td>
<td>No</td>
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<tr>
<td><strong>Outpatient</strong></td>
<td>Yes</td>
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<tr>
<td><strong>Inpatient</strong></td>
<td>Yes</td>
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<tr>
<th><strong>House Staff</strong></th>
<th>Yes (Residents and Fellows)</th>
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<tr>
<td><strong>Night Call</strong></td>
<td>Optional</td>
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<td><strong>Weekends</strong></td>
<td>Optional</td>
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<tr>
<td><strong>No. of Students</strong></td>
<td>1-2</td>
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<tr>
<th><strong>Optimizer</strong></th>
<th>Yes</th>
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<tr>
<td><strong>Visiting Students</strong></td>
<td>Yes</td>
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### 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

Chair: Richard Anderson, M.D.

Schedule Change Authorizations:
Dawneva Sasse (dsasse@uic.edu)
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 and GI 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 given out at the start and during this elective.

NOTE: CONTACT FOR ELECTIVE ASSIGNMENT

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

Course Director
Richard C. Anderson, M.D.

Address
Illinois Medical Center
1001 Main St., Suite 107.
Peoria, IL 61606
309-308-0200

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

Prerequisites
Completion of Phase 2
UnityPoint Orientation

Location
SFMC & UPH

Dates Available
All year except Winter Break

Dates Not Available
Winter Break

Duration in Weeks
4

Hours/Week
40-50

Lectures/Seminars
All scheduled general surgery conferences

Lab
No

Outpatient
Yes

Inpatient
Yes

House Staff
When available

Night Call
No

Weekends
Yes

No. of Students
1

Optimizer
Yes

Visiting Students
Yes

NARRATIVE DESCRIPTION

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

OBJECTIVES

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

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

METHOD OF EVALUATION

The faculty will base their evaluation on:

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

REQUIRED READING/INFORMATION


The course director has the above textbooks.

NOTE: CONTACT FOR ELECTIVE ASSIGNMENT

UICOM-P, Department of Surgery: Dawneva Sasse (309) 655-2383.
| **ANESTHESIA/PAIN MANAGEMENT**  
| (ELEC 795) | **Course Director**  
| | Jocelyn McClain, M.D. |
| **Address** | **Coordinator**  
| Associated Anesthesiologists  
| Scheduling Office  
| OSF 3rd Floor Gerlach  
| 309-655-2156  
| Fax: 309-655-3951 | Dawneva Sasse  
| 309-655-2383  
| dsasse@uic.edu | **Prerequisites**  
| Completion of Phase 2 | **Location**  
| SFMC |
| **Dates Available**  
| All year except Winter Break | **Dates Not Available**  
| Winter Break | **Duration in Weeks**  
| 2-4 | **Hours/Week**  
| 40 |
| **Lectures/Seminars**  
| Yes | **Lab**  
| No | **Outpatient**  
| Yes | **Inpatient**  
| Yes |
| **House Staff**  
| No | **Night Call**  
| No | **Weekends**  
| No | **No. of Students**  
| 2 | **Visiting Students**  
| No |

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

**NARRATIVE DESCRIPTION**

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

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

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

**METHOD OF EVALUATION** The faculty will base their evaluation on student performance.

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

**REQUIRED READING**

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

**NOTE: CONTACT FOR ELECTIVE ASSIGNMENT**

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

Course Director
Steven Tsoraides, MD

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

Coordinator
Dawneva Slater
309-655-2383
dasasse@uic.edu

Prerequisites
Completion of Phase 2 Internal Medicine, Peds, and Surgery UnityPoint Orientation

Location
SFMC/UPH

Dates Available
All year except Winter Break

Dates Not Available
Winter Break

Duration in Weeks
2-4

Hours/Week
Approximately 40

Lectures/Seminars
Yes
One-on-one discussions

Lab
No

Outpatient
Yes

Inpatient
Yes

House Staff
When available

Night Call
Yes (variable)

Weekends
Yes (variable)

No. of Students
1

Optimizer
Yes

Visiting Students
Yes

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

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

1. Refine and increase medical and surgical diagnosis and treatment skills.
2. Demonstrate competency in preoperative, intraoperative and postoperative management of GI surgical patients.
3. Present a GI topic approved by Dr. Tsoraides.
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. Tsoraides will provide pertinent reading references at the start of this course.

NOTE: CONTACT FOR ELECTIVE ASSIGNMENT
UICOM-P, Department of Surgery: Dawneva Sasse (309) 655-2383.
OPHTHALMOLOGY
(ELEC 639.1)

Course Director
William I. Bond, M.D.

Address
6800 N. Knoxville, Peoria
725 S. 14th St., Pekin
309-692-2020

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

Prerequisites
Completion of Phase 1

Location
OSF
Pekin Hospital- UPH

Dates Available
All year except as noted.

Dates Not Available
Block 7b
Winter Break

Duration in Weeks
2-4

Hours/Week
35

Lectures/Seminars
Yes

Lab
No

Outpatient
Yes

Inpatient
Yes

No. of Students
1

House Staff
No

Night Call
No

Weekends
No

Optimier
Yes

Visiting Students
No

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

NARRATIVE DESCRIPTION

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

OBJECTIVES

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

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

METHOD OF EVALUATION

The faculty will base their evaluation on:

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

REQUIRED READING

Reading assignments will be made during the elective.

NOTE: CONTACT FOR ELECTIVE ASSIGNMENT

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

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

**OBJECTIVES**

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

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

**METHOD OF EVALUATION**

The faculty will base their evaluation on:

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

**REQUIRED READING**

Reading assignments will be made during the elective.

**NOTE: CONTACT FOR ELECTIVE ASSIGNMENT**

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

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

OBJECTIVES

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

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

METHOD OF EVALUATION

Dr. Akeson will base his evaluation on:

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

REQUIRED READING

Reading assignments will be made during the elective.

NOTE: CONTACT FOR ELECTIVE ASSIGNMENT

UICOM-P, Department of Surgery: Dawneva Sasse (309) 655-2383.
OTOLARYNGOLOGY  
(ELEC 643.2)  

Course Director  
James Geraghty, M.D.

Address  
Peoria Ear, Nose, & Throat  
7301 N. Knoxville  
Peoria, IL 61614  
309-589-5900

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

Dates Available  
All year except as noted.

Dates Not Available  
Blocks 1-2  
Winter Break

Prerequisites  
Completion of Phase 2  
UnityPoint Orientation

Location  
SFMC, UPH

Duration in Weeks  
2-4

Hours/Week  
40

Lectures/Seminars  
No

Lab  
No

Outpatient  
Yes

Inpatient  
Minimal

House Staff  
No

Night Call  
Optional

Weekends  
Optional

No. of Students  
1

Optimizer  
Yes

Visitng Students  
No

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

NARRATIVE DESCRIPTION

The course is designed to introduce the student to the field of otolaryngology and allow him/her to understand the basic clinical and pathologic conditions treated by this specialty. It will be conducted under the supervision of attending otolaryngologists in the office, hospital, and operating rooms of Saint Francis, Methodist and Proctor Hospitals.

OBJECTIVES

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

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

METHOD OF EVALUATION

The faculty will base their evaluation on:

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

RECOMMENDED READING

2. *Cumming’s Otolaryngology: Head & Neck Surgery*; Cumming’s, et al.

NOTE: CONTACT FOR ELECTIVE ASSIGNMENT

UICOM-P, Department of Surgery: Dawneva Sasse (309) 655-2383.
OTOLARYNGOLOGY
(ELEC 643.3)

Course Director
Guy J. Petruzzelli, MD, PhD, FACS, FSSO

Address
SFMC

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

Prerequisites
Completion of Phase 2
General Surgery Core Rotation

Location
SFMC

Dates Available
All year except as noted.

Dates Not Available
Blocks 1-2
Winter Break

Duration in Weeks
2-4

Hours/Week
40

Lectures/Seminars
No

Lab
No

Outpatient
Yes

Inpatient
Minimal

House Staff
No

Night Call
Optional

Weekends
Optional

No. of Students
1

Optimizer
Yes

Visiting Students
No

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

NARRATIVE DESCRIPTION

The course is designed to introduce the student to the field of otolaryngology and allow him/her to understand the basic clinical and pathologic conditions treated by this specialty. It will be conducted under the supervision of attending otolaryngologists in the office, hospital, and operating rooms of Saint Francis, Methodist and Proctor Hospitals.

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

1. Develop a detailed understanding of the surgical anatomy of the head neck and how that anatomy can be investigated by standard physical examination, office endoscopy, and cross-sectional imaging.
2. Understand the basic principles of a complete head neck examination including the fundamentals of audiology.
3. Develop a differential diagnosis and algorithm for the investigation and treatment of for common adult and pediatric Otolaryngology conditions including hearing loss, nasal obstruction, chronic otitis media, adenotonsillar hypertrophy neck mass, epistaxis, voice change, nodular thyroid disease, maxilla-facial or neck trauma, and swallowing disorders and recognize indication for referral to otolaryngology.
4. Recognize how complex congenital disorders affect normal pediatric development of hearing and speech acquisition.
5. Review the basic principles of cancer staging and cancer prevention as they relate to malignant tumors of the sinuses, nose, oral cavity, pharynx, and larynx, and describe the need for rehabilitation following laryngeal surgery.
6. Preview this field in order to make career decisions.

METHOD OF EVALUATION The faculty will base their evaluation on:

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

RECOMMENDED READING

1. Expert Guide to Otolaryngology; K. Calhoun
2. Essential Otolaryngology; KJ Lee
3. Cumming’s Otolaryngology: Head & Neck Surgery; Cumming’s, et al.

NOTE: CONTACT FOR ELECTIVE ASSIGNMENT

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

COURSE SCHEDULE

Week 1 (or Student A)
<table>
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<tr>
<th></th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
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<tbody>
<tr>
<td>Morning</td>
<td>Operating Room Milestone- Dr. Gootee</td>
<td>Outpatient Clinic Center for Health All staff</td>
<td>Operating Room Milestone-Dr. Zaboli</td>
<td>Operating Room Gerlach- Dr. Petruzzelli</td>
<td>8:00-9:00 AM Head &amp; Neck Tumor Board Operating Room Milestone- Dr. Kennedy</td>
</tr>
<tr>
<td>Afternoon</td>
<td>Operating Room Milestone- Dr. Gootee</td>
<td>Outpatient Clinic Center for Health All staff</td>
<td>Operating Room Milestone-Dr. Zaboli</td>
<td>Operating Room Gerlach- Dr. Petruzzelli</td>
<td>Operating Room Milestone- Dr. Kennedy</td>
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This course is particularly focused on the student who has developed interest in surgery involving infants from birth to adolescents.

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

**OBJECTIVES**

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

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

**METHOD OF EVALUATION**

The faculty will base their evaluation on:

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

**REQUIRED READINGS**

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

**NOTE: CONTACT FOR ELECTIVE ASSIGNMENT**

UICOM-P, Department of Surgery: Dawneva Sasse (309) 655-2383.
PLASTIC SURGERY (ELEC 656.1)  

Address  
Proctor Professional Building  
5401 N. Knoxville Av.  
Suite 412  
Peoria, IL 61614  
309-495-0077  

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

Prerequisites  
Completion of Phase 1 and Phase 2 Surgery Clerkship  
UnityPoint Orientation  

Location  
SFMC, UPH  

Dates Available  
All year except Winter Break  

Dates Not Available  
Winter Break  

Duration in Weeks  
2 or 4 consecutive  

Hours/Week  
40 (as needed)  

Lectures/Seminars  
No  

Lab  
No  

Outpatient  
Yes  

Inpatient  
Yes  

House Staff  
Occasionally  

Night Call  
Optional  

Weekends  
Optional  

No. of Students  
2  

Optimizer  
Yes  

Visiting Students  
No  

Course Director  
Eric Elwood, M.D.  

---

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

NARRATIVE DESCRIPTION

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

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

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

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

METHOD OF EVALUATION  
The faculty will base their evaluation on:

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

REQUIRED READINGS

Plastic Surgery by Grabb and Smith, (provided).

NOTE: CONTACT FOR ELECTIVE ASSIGNMENT

UICOM-P, Department of Surgery: Dawneva Sasse (309) 655-2383.
PLASTIC SURGERY  
(ELEC 656.2)  

<table>
<thead>
<tr>
<th>Address</th>
<th>Course Director</th>
</tr>
</thead>
</table>
| Illinois Medical Center  
1001 Main St., 3rd Flr.  
Peoria, IL 61606  
309-495-0250 | Babis Rammos, M.D. |

<table>
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<tr>
<th>Coordinator</th>
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<th>Location</th>
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</table>
| Dawneva Sasse  
309-655-2383  
dsasse@uic.edu | Completion of Phase 1  
and Phase 2 Surgery  
Clerkship  
UnityPoint Orientation | SFMC, UPH |

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

**NARRATIVE DESCRIPTION**

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

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

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

4. Describe and discuss the concept of Functional Restoration.
5. Explain principles of assessment and management of plastic surgical problems.

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

6. Fund of factual knowledge.
8. Ability to follow inpatients with an organized approach to inpatient care.
9. Ability to diagnose conditions seen in the office setting.

**REQUIRED READINGS**

*Plastic Surgery* by Grabb and Smith, (provided).

**NOTE: CONTACT FOR ELECTIVE ASSIGNMENT**

UICOM-P, Department of Surgery: Dawneva Sasse (309) 655-2383.
SURGERY SUB-INTERNSHIP
(ELEC 680)

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

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

Prerequisites
Completion of Phase 2
UnityPoint Orientation

Location
SFMC, UPH

Dates Available
All year except as noted.

Dates Not Available
Block 11
Winter Break

Duration in Weeks
4 weeks

Hours/Week
60-80

Lectures/Seminars
Yes

Lab
No

Outpatient
Yes

Inpatient
Yes

House Staff
Yes

Night Call
Optional

Weekends
Yes

No. of Students
2

Optimizer
Yes

Visiting Students
Yes

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 identify the time for appropriate medical consultation, (i.e. diabetes management, nephrology, cardiology, etc.) and make the necessary communication to request consultation, and be present for dialogue and instruction with the consultant and/or consulting service, and in this manner gain experience in the management of the medical needs of the patient. The student will continue to work with the medical consultant as well, to provide on-going comprehensive patient management. The student will participate in preoperative care, assist in surgery and participate in postoperative care, including interpretation and assessment of laboratory findings, imaging information, and other diagnostic tests. It is important to emphasize that the student should function as a Surgery PGY-1, and resident/attending supervision will ensure that all hospital policies of patient care are met. The student will be expected to participate in all of the educational activities of the Department of Surgery during the course of the student's sub-internship as well as an assigned Laparoscopic Skills Simulator Curriculum.

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

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

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

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

NOTE: CONTACT FOR ELECTIVE ASSIGNMENT
UICOM-P, Department of Surgery: Dawneva Sasse (309) 655-2383.
Surgical Critical Care/TRAUMA
(ELEC 682)

**Course Director**
Bradley Phillips, MD

<table>
<thead>
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<th>Location</th>
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<td>Dawneva Sasse</td>
<td>Completion of Phase 2</td>
<td>OSF - SICU</td>
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<tr>
<td>309-655-2383</td>
<td><a href="mailto:dsasse@uic.edu">dsasse@uic.edu</a></td>
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<th>Duration in Weeks</th>
<th>Hours/Week</th>
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<td>All year except Winter Break</td>
<td>Winter Break</td>
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<td>72: (6) 12-hr days</td>
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<th>Inpatient</th>
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<tbody>
<tr>
<td>Daily teaching rounds</td>
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</tr>
<tr>
<td>1 lecture every session in Critical Care</td>
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<td>Surgical &amp; Emergency Medicine</td>
<td>None</td>
<td>1 weekend day per week (either Sat or Sun)</td>
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<table>
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<th>Visiting Students</th>
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<tr>
<td>Yes</td>
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**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. *Surgical Critical Care*, Weigelt and Lewis

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

<table>
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<tr>
<th>Address</th>
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<th>Location</th>
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</table>
| UICOMP Dept. of Surgery  
624 N.E. Glen Oak Ave.  
North Bldg. 2nd Floor | Dawneva Sasse  
309-655-2383  
dsasse@uic.edu | *Completion of Phase 2 | UICOMP Dept. of Surgery offices |

<table>
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<tr>
<th>Optimizer</th>
<th>Visiting Students</th>
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<td>No</td>
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* Student must make an appointment to speak with Dr. Rammos prior to scheduling this elective to discuss project possibilities.

NARRATIVE DESCRIPTION

This course is available to students with a definite interest in surgery. The course will focus on research and not daily clinical activity. This is a general surgery research elective that covers a wide range of general surgery procedures. The student may participate in an ongoing research project or independent study assignments can be created or assigned. Topics of research could focus on treatment or outcomes related to general surgery, otolaryngology, orthopedics, urology ophthalmology or plastic surgery.

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

1. Design and carry out a study/chart review.
2. Understand and work within the requirements of the IRB.
3. Participate in CITI training.
4. Research databases and complete a comprehensive literature review.

METHOD OF EVALUATION  
Dr. Rammos will base his evaluation on:

1. Informational periodic discussions with student.
2. Final project outcome or progress.
3. Completion of Standard Clinical Evaluation Form.

REQUIRED READING

Research Training Lectures – PowerPoints available on the UICOMP Dept. of Surgery website

NOTE: CONTACT FOR ELECTIVE ASSIGNMENT

UICOM-P, Department of Surgery: Dawneva Sasse (309) 655-2383.
**BREAST SURGICAL ONCOLOGY**  
(ELEC 693.2)  

<table>
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<tbody>
<tr>
<td>Illinois Medical Center 1001 Main St. 3rd Flr. Peoria, IL 61606 309-495-0200</td>
<td>Dawneva Sasse 309-655-2383 <a href="mailto:dsasse@uic.edu">dsasse@uic.edu</a></td>
<td>Completion of Phase 2 UnityPoint Orientation</td>
<td>SFMC, UPH, CFH</td>
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<th>Duration in Weeks</th>
<th>Hours/Week</th>
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<th>Weekends</th>
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<th>Optimizer</th>
<th>Visiting Students</th>
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**Course Director**  
Denise Mammolito, M.D.

**NARRATIVE DESCRIPTION**  
This course is available to students with an interest in breast surgical oncology. The course will emphasize the multi-disciplinary approach to the breast patient. The operative and outpatient experience will focus on breast disease. The student will be expected to formulate pre-operative work-ups, stage malignancies, and give post-operative care.

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

1. Discuss breast cancer treatment options.
2. Identify the multi-disciplinary approach to breast oncology patients.
3. Recognize adjunct treatments used for breast cancer patients.
4. Increase surgical skills learned during the third-year clerkship.
5. The student is responsible for a report on the breast topic of their choice at the end of the rotation.

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

1. Informational daily discussions with student by preceptor on rounds, in surgery and in the outpatient setting.
2. Completion of Standard Clinical Evaluation Form by preceptor.

**REQUIRED READING**  
Reading assignments will be made during the elective.

**NOTE: CONTACT FOR ELECTIVE ASSIGNMENT**  
UICOM-P, Department of Surgery: Dawneva Sasse (309) 655-2383.
### SURGICAL RESIDENCY PREPAREDNESS PRACTICUM (ELEC 157)

<table>
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<th>Location</th>
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<tr>
<td>UICOMP Dept. of Surgery</td>
<td>Kathy Slater</td>
<td>Completion of Phase 2, Committed to surgery and surgery specialties.</td>
<td>Charles Aprahamian, M.D.</td>
<td>Jump Simulation and Education Center</td>
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### NARRATIVE DESCRIPTION

SURGPREP – Surgical Residency Preparedness Practicum – This course is particularly focused on the student who has committed to a career in surgical specialties. It is structured, supervised training in basic surgical skills such as dissection, suturing, knot tying, laparoscopy, etc., and procedures such as biopsy techniques, chest tube insertion, central line insertion, and tracheostomy. Eighteen modules instructed by UICOMP General Surgery faculty and senior residents. Monday through Friday, 8:00 a.m. to 4:00 p.m. daily.

### OBJECTIVES

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

1. Demonstrate verified improvement in the quality in performing basic surgical skills.
2. Demonstrate verified improvement in the efficiency in performing basic surgical skills.
3. Demonstrate the ability to perform simulated basic surgical procedures such as chest tube insertion, central line placement, etc.

### METHOD OF EVALUATION

Students will be evaluated based on demonstration of skills taught during every module by the respective instructor and an end-summary evaluation will be completed by the course director.

### REQUIRED READINGS


Book chapter handouts on laparoscopic surgery:
- *Methods of Creating a Pneumoperitoneum* by Robert J. Fitzgibbons, Jr, M.D., and Robert E. Marsh
- *Electrosurgery and Ultrasound for Cutting and Coagulating Tissue in Minimally Invasive Surgery* by Joseph F. Amaral
- *Physiologic Consequence of Laparoscopic Surgery* by Philip R. Schauer
- *Suturing and Knot-Typing Techniques* by Daniel B. Jones and Nathaniel J. Soper
- *Laparoscopic Suturing and Tissue Approximation* by Zoltan Szabo

### NOTE: CONTACT FOR ELECTIVE ASSIGNMENT

UICOMP-P, Department of Surgery: Kathy Slater (309) 655-2383.
<table>
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<tr>
<th><strong>Address</strong></th>
<th><strong>Coordinator</strong></th>
<th><strong>Prerequisites</strong></th>
<th><strong>Location</strong></th>
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<tbody>
<tr>
<td>OSF Medical Group – Urology Illinois Medical Center 1001 Main St., Ste. 400 Peoria IL 61606 309-208-6027</td>
<td>Dawneva Sasse 309-655-2383 <a href="mailto:dsasse@uic.edu">dsasse@uic.edu</a></td>
<td>Completion of Phase 1</td>
<td>Office, SFMC</td>
</tr>
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**Dates Available**
All year except Winter Break.

**Dates Not Available**
Winter Break

**Duration in Weeks**
2-4
(4 weeks must be consecutive)

**Hours/Week**
40

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

**NARRATIVE DESCRIPTION**

The course will acquaint the student with the practice of urology, including a significant amount of nephrology and general medicine. Basic surgery skills, as well as operative techniques, will be included. Outpatient office exposure will be an integral portion of the program. The experience will also include useful techniques in an outpatient surgery center. The course will prepare the student for primary care practice or as a prelude to the surgical subspecialties. If the student has a strong interest in surgery, additional instruction in basic surgery skills will be offered.

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

1. Obtain a urological history and perform a urological physical examination.
2. Develop basic skills of seeing patients at the urological center.
3. Develop basic skills required for pre-operative and post-operative assessment.
4. Acquire technical expertise and develop technical skills at the surgery center.
5. Perform simple and difficult catheterizations.
6. Evaluate urological consultations.

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

1. Ongoing observance of the student.
2. Completion of Standard Clinical Evaluation Form by preceptor and discussion with student.

**REQUIRED READING**

Reading assignments will be made during the elective.

**NOTE: CONTACT FOR ELECTIVE ASSIGNMENT**

UICOM-P, Department of Surgery: Dawneva Sasse (309) 655-2383.
**UROLOGY**  
(ELEC 683.2)  

| **Address**  
Midwest Urological Group  
7309 N. Knoxville  
Peoria, IL 61614  
309-683-0680 | **Coordinator**  
Dawneva Sasse  
309-655-2383  
dSasse@uic.edu | **Prerequisites**  
Completion of Phase 1  
UnityPoint Orientation | **Course Director**  
J. Banno, M.D. |
|---|---|---|---|
| **Dates Available**  
All year except as noted. | **Dates Not Available**  
Blocks 1-3a  
Winter Break | **Duration in Weeks**  
2-4  
(4 weeks must be consecutive) | **Location**  
UPH |
| **Lectures/Seminars**  
No | **Lab**  
Yes | **Outpatient**  
Yes | **Hours/Week**  
Per availability |
| **House Staff**  
No | **Night Call**  
No | **Weekends**  
No | **No. of Students**  
1 |
| **Optimizer**  
Yes | | | **Visiting Students**  
No |

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

**NARRATIVE DESCRIPTION**

This course is available to any student wishing to learn more about urology. Although a small sub-specialty, the field of urology includes the treatment of many conditions seen in clinical practice. Included in this field is the treatment of urinary tract infection. This course will include both medical and surgical treatment of urologic problems. The student will work closely with the attending urologists and their patients that are treated at the Methodist Medical Center. Teaching will be individualized on a patient-by-patient basis. While working with the urologist, the student will gain some hands-on experience with the anatomy, pathophysiology, treatment and prognosis of these illnesses.

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

1. Recognize the anatomy and pathophysiology of the urinary tract and how it relates to urologic illnesses.
2. Administer general urologic examinations and identify special diagnostic techniques, including uroradiology, cystourethrography, and urodynamic evaluations.
3. Describe neuromuscular dysfunction of the lower urinary tract and evaluate and manage urinary incontinence.
4. Recognize physiology of erection and pathophysiology of impotence.
5. Identify the pathophysiology and treatment of urolithiasis.
6. Develop manual skills and dexterity in basic urologic manipulations such as urethral catheterization and prostatic massage.

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

1. Informal discussions with student by attending urologist.
2. Completion of Standard Clinical Evaluation Form by attending urologist.

**REQUIRED READING**

Reading assignments will be made during the elective.

**NOTE: CONTACT FOR ELECTIVE ASSIGNMENT**

UICOM-P, Department of Surgery: Dawneva Sasse (309) 655-2383.
VASCULAR & ENDOVASCULAR SURGERY  
(ELEC 702.1)  

Course Director  
John Dooley, M.D.

Address  
Unity Point Health  
Vascular Services  
Methodist Atrium Building  
900 Main Street Suite 280  
Peoria Il 61602

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

Prerequisites  
Completion of Phase 2  
UnityPoint Orientation

Location  
UPH and OSF

Dates Available  
All Year except Winter Break

Dates Not Available  
Winter Break

Duration in Weeks  
4 minimum

Hours/Week  
40

Lectures/Seminars  
Daily teaching rounds  
(clinical ward rounds & lectures)  
Two formal lectures/week

Lab  
No

Outpatient  
Open

Inpatient  
Yes

House Staff  
Surgical House Staff  
Family Practice House Staff

Night Call  
(maximum 4 calls/month if desired)

Weekends  
Open

No. of Students  
1

Optimizer  
Yes

Visiting Students  
No

NARRATIVE DESCRIPTION

Vascular and Endovascular Surgery offers an exciting rotation in the care and management of all facets of vascular disease, including arterial, venous and lymphatic diseases for the student considering a career in Vascular and Endovascular Surgery. The student will function at the level of a sub-intern and will have his/her own patients to follow.

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

1. Develop skills in logical evaluation and treatment of vascular patients;
2. Understand basic vascular physiology;
3. Understand fundamental principles of complex vascular diseases;
4. Understand basic vascular decision making as it pertains to carotid disease, aortic disease, peripheral vascular disease, venous diseases and lymphatics;
5. Be able to discuss outcomes of basic vascular interventions and surgical procedures.

METHOD OF EVALUATION  
The faculty will base their evaluation on:

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

REQUIRED READING:

Current Diagnosis & Treatment in Vascular Surgery - Richard H. Dean, James S. T. Yao, David C. Brewster (provided during elective)
Anatomic Exposures in Vascular Surgery – R. James Valentine, Gary G. Wind (provided during elective)
Current Therapy in Vascular Surgery – Calvin B., MD, Ernest, James C., MD, Stanley (provided during elective)

NOTE: CONTACT FOR ELECTIVE ASSIGNMENT

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