Course Description

Welcome to the Medicine Clerkship! The next eight weeks of your medical school career will be both challenging and immensely rewarding. By immersing yourself in the care of acutely ill patients, with the guidance of expert faculty and resident educators, you will emerge after these short weeks with the core skills that will make you a successful resident and future physician. And, we hope that we can show you the excitement of a life as an internist.

Junior medicine is composed of two 4-week components at two sites: NMH and the Jesse Brown VA. Every student will spend at least 4 weeks at NMH; some will go to the VA for a month while others will be at NMH for 2 months (on two separate teams). The focus of junior medicine is the care of hospitalized patients with complex medical and psychosocial problems. You will take a complete history, conduct a thorough and accurate physical exam, take into consideration complex psycho-social issues, formulate a problem list, construct a relevant differential diagnosis, and along with your team begin to manage the daily details of the care of your patients.

We consider our students to be integral parts of the ward team. Year in and year out, students say (and we agree) that the best learning experience is to take an H&P 1-on-1 with a patient, develop an independent assessment and plan, and get feedback from your teachers. Thus, the majority of your time will be spent on the wards, caring for patients. To supplement this core aspect of your teaching, we have a number of additional requirements, including weekly conferences, physical examination rounds, and meetings with your Site Director faculty liaison to discuss your performance.

In addition to the above activities, students will be responsible for completing and actively maintain their online clerkship log to ensure they are completing the clinical requirements of the clerkship; they will also take the end of rotation Objective Structured Clinical Examination (OSCE) and the NBME Subject Examination at the end of the clerkship.

Objectives

The Phase 2 Medicine Clerkship will provide the foundation of knowledge and skills which you will need in internal medicine, regardless of the specialty you decide to enter.

During this eight-week clerkship, we will assist you in achieving the following important goals. We do not expect mastery of all goals listed but through efficient use of your time good progress will be made in attaining these goals.

Goal 1: Perform comprehensive and targeted patient histories, documented efficiently in the medical record (EPA 1, EPA 2, EPA 5, EPA 7) (PCMC-1; PCMC-3; ECIS-1; ECIS-2; PCMC-5)

Curriculum
Faculty and residents will teach students the important and unique components of the diagnostic and therapeutic process in internal medicine and how to document these findings.
Benchmark
Students will complete a total of 16 H&Ps, documented in the clerk log.

Assessment
At least two of these H&Ps will be reviewed and critiqued by medicine faculty, though faculty and residents will read and review student notes on an ongoing basis during the clerkship.

**Goal 2: Perform complete internal medicine-specific physical examinations, documented efficiently in the medical record. (EPA 1, EPA5) (PCMC-2)**

Curriculum
It is expected that all students should demonstrate proficiency with the core physical examination techniques during the clerkship. These skills have been previously introduced and practiced during Phase 1. Students will be supervised when necessary.

Benchmark
Students will complete a total of 16 H&Ps, documented in the clerk log. Students will participate in physical examination rounds with a faculty preceptor. Finally, students will be directly observed and given feedback on their history and examination skills.

Assessment
At least two of these H&Ps will be reviewed and critiqued by medicine faculty, though faculty will perform and verify student exam findings on each patient. Evaluators will complete 4 mobile observations on each student during the clerkship, one of which relating to EPA1: History and/or Physical Examination.

**Goal 3: Acquire knowledge about Internal Medicine conditions and diseases. (EPA 2, EPA 7) (MKS-1a-f; MKS-3a-b; PBMR-1; PBMR-2; CLQI-3)**

Curriculum
Students will learn about each of the knowledge objectives. This list of required objectives aligns with the Alliance for Academic Internal Medicine objectives and is available on Canvas (https://canvas.northwestern.edu/). In addition, students will practice constructing clinical questions and answering them by retrieving and analyzing the pertinent medical literature.

Benchmark

1. Students will actively participate in the evaluation and care of patients presenting with a variety of medical concerns or needs.
2. Students will participate in scheduled conferences, including case-based discussions and didactic sessions.
3. Students will participate in an interdisciplinary conference collaborating with physical therapy focused on mobility assessment in hospitalized patients
4. Students will participate in a conference focused on identifying, discussing, and analyzing ethical issues specific to internal medicine.
Assessment

1. Students will document all relevant patient encounters in the online clerkship log.
2. If the student has not been actively involved with an actual patient in each of the assigned clerk log categories by the end of the last week of the clerkship, the student will fulfill the requirement by utilizing alternative methods including Stanford 25 material and Aquifer cases.
3. Students will demonstrate their acquisition of knowledge by successful completion and passage of the NBME Subject Examination in Internal Medicine (minimum score in the 10\textsuperscript{th} percentile nationally).
4. Students will identify and submit a brief description of an ethical dilemma they encountered during their clerkship for online and in-person discussion.
5. Students will be evaluated specifically on their ability to search and analyze the literature using CPA forms (EPA 7).

Goal 4: Demonstrate effective interpersonal communications skills (EPA 6, EPA 9) and advocate on behalf of patients. (ECIS-1; ECIS-3; ECIS-4; PCMC-6; CES-1; CES-2)

Curriculum
Faculty and residents will model appropriate behavior. Students will:

- Establish rapport with patients.
- Work cooperatively with others.
- Establish sufficient visibility and rapport with residents, fellows and attendings to be fairly evaluated.
- Communicate in a way patients understand by avoiding medical jargon and checking back for understanding.
- Contribute information effectively to the team in a clear and timely manner.
- Demonstrate knowledge of and identify social barriers to care; link patients to resources to addressing these barriers.

Assessment
Students will be evaluated specifically on these interpersonal skills through the use of the CPA forms (Professionalism domains and EPA 9). Students will request evaluations from nurses. This evaluation will be reflected in the Final Grade Narrative.

Goal 5: Demonstrate appropriate professional characteristics (EPA 9). (PBMR-3; PBMR-5; PBMR-6; PBMR-7; SATBC-2a-b; CLQI-1a-b; CLQI-2)

Curriculum
Faculty will model appropriate behavior. Students will:

- Demonstrate dependability, truthfulness and integrity.
- Participate actively in learning opportunities and work assignments.
• Acknowledge and demonstrate awareness of own limitations.
• Take initiative for their own learning and patient care.
• Remain open to feedback and implement it.
• Treat all patients with respect and compassion.
• Protect patient confidentiality.
• Students participating in patient care activities are expected to present a professional image in both conduct and attire, including the following:
  o Personal cleanliness
  o Attire appropriate to professional environment
  o Clean white coat
  o Jade green scrubs only in the proper locations, covered when appropriate and never worn outside the hospital
• Professional conduct also includes the following:
  o Charting is to be completed in a timely manner
  o Do not remove hard copies of medical records from the hospital
  o Do not discuss patients in public places
  o Do not argue diagnoses or management plans in front of patients
  o Arrive for clinics on time and well prepared

Assessment

Students will be evaluated specifically on these interpersonal skills and this evaluation will be reflected in the Clinical Performance Assessment (EPA 9 and Professionalism Domains). Students will complete a course evaluation at the end of the clerkship. Feedback will be incorporated into the Final Grade Narrative where appropriate.