

KU PEDIATRIC SUBINTERNSHIP CURRICULUM

Adapted from the COMSEP/APPD Curriculum

Fourth-Year Medical Student Patient Care Principles

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.

Expectations for the rotation:

You are expected to perform at the level of an Intern and will be evaluated accordingly. You will write orders but they will need to be co-signed by the senior resident. The Sub-internship student is permitted to assume the same responsibility to that of an intern for inpatient management after discussion with your senior resident which includes the following:

- Conduct and record complete patient histories and physical examinations.
- Write patient care orders.
- Observe hospital policies and protocols.
- Perform or assist with medical procedures as available
 - Nasopharyngeal suction
 - Aerosol breathing treatment
 - IV start
 - Lab draw
 - Straight bladder catheterization
 - Lumbar puncture
 - NG tube placement
- Follow the patient's progress and record daily progress notes.
- Communicate with the patient and/or patient's family.

- Research problems and conduct textbook and literature review on case subjects and communicate findings to attending physician, residents and students.
- Resolve problems and questions from nursing and ancillary services, after discussion with your senior resident.
- Notify and consult with the attending physician on all significant management decisions.

Duties:

- You will perform complete history and physicals and assist with admissions between 7:00am and 5:00pm. History and physicals should be on the chart before you leave the hospital on the day of admission.
- You will care for 3 to 6 pediatric patients. This means knowing patient illness, pathophysiology, labs, seeing patients and parents each day, writing daily progress notes, and being prepared to present patients on rounds.
- Round with the attending and residents on your patients as well as those of the team.
- Be immediately available in the hospital to actively participate in patient care duties. Please let resident know where you are during the day so he/she can contact you regarding admissions and other patient activities.
- You will be required to take a total of 4 night or weekend calls, similar to our 3rd years' obligations:
 - Call is from 5 PM until 11:00 PM on weekdays and from rounds until 5 PM (Dayshift resident's checkout) on weekends.
 - Students will be excused at that time, after pertinent clinical duties are finished.
 - Students may stay longer if further learning opportunities are anticipated
 - The 4th year student will be able to schedule their call, with the IPSR's help, keeping in mind other students' needs.
- You will be expected to work half of the total weekend days during the 4 weeks, and can schedule those with the IPSR's input to help with planning for overall coverage.
- MS-4 students on Sub-I are expected to log their patients. Be sure to do this at least bi-weekly while on rotation.

Learning Objectives:

1. Patient Care

Provide patient care that is compassionate, appropriate and effective for the treatment of health problems

- 1.1** Independently collect both focused and comprehensive, developmentally appropriate patient histories
- 1.2** Independently perform both focused and comprehensive, developmentally appropriate physical examinations
- 1.3** Synthesize information to formulate a differential and primary diagnosis
- 1.4** Develop a prioritized and inclusive problem list
- 1.5** Identify the reason for the patient's admission
- 1.6** Summarize interval patient information and rationale for ongoing clinical management

- 1.7 Recognize patients requiring immediate attention by supervising physician
- 1.8 Suggest appropriate diagnostic tests for the patient's chief complaint and other medical problems
- 1.9 Modify the primary diagnosis based upon interpretation of diagnostic studies
- 1.10 Demonstrate family-centered approach to patient care (e.g., incorporating patient and family perspectives into the management plan)
- 1.11 Develop a prioritized management plan with the health care team and describe a rationale for the clinical plan
- 1.12 Identify patient discharge needs and include in daily plan
- 1.13 Manage time effectively in completing patient care tasks
- 1.14 Identify relevant clinical information necessary for hand-overs
- 1.15 Reassess patients continuously (e.g., when assuming care, throughout the day and throughout the hospital course)
- 1.17 Formulate appropriate orders
- 1.18 Prepare prescriptions
- 1.19 Practice appropriate infection control measures while caring for patients
- 1.20 Recognize how clinical uncertainty affects patient care

2. Medical Knowledge

Demonstrate sufficient knowledge to provide patient care with appropriate supervision

- 2.1 Describe the epidemiology, pathophysiology, and clinical findings of common pediatric conditions that require hospitalization [prerequisite; see COMSEP Clerkship curriculum]
- 2.2 Describe the diagnostic evaluation and management of hospitalized patients with the following conditions:
 - Abdominal pain or distention
 - Altered mental status (e.g., irritability, lethargy, seizure)
 - Fluid, electrolyte and acid-base disturbances
 - Fever (including in immuno-compromised patients)
 - Musculoskeletal pain or swelling
 - Respiratory distress
- 2.3 Describe how age and development influence clinical findings and epidemiology of common pediatric conditions
- 2.4 Identify criteria for admission and discharge from the hospital
- 2.5 Recognize variations in common laboratory findings and vital signs, e.g.,
 - Heart Rate, Respiratory Rate, Blood Pressure
 - BUN and creatinine
 - Cerebrospinal fluid
 - Complete blood count and differential
 - Chest x-ray
- 2.6 Describe the signs and symptoms that suggest deterioration (including signs of shock and respiratory failure) or improvement of a patient's clinical condition
- 2.7 Describe the impact of chronic illness on a patient's clinical findings and management

- 2.8** Describe principles of pain assessment and management
- 2.9** List drugs of choice and rationale for their use in common pediatric illnesses
- 2.10** Calculate doses of medication based on age, weight, body surface area, and diagnosis
- 2.11** Identify contraindications to therapeutic drug use in children of different ages and/or diagnoses
- 2.12** Calculate fluid and electrolyte requirements for children based on weight, caloric expenditure, diagnosis, and fluid status
- 2.13** Describe the elements of informed consent
- 2.14** Describe the indications, contraindications, risks and benefits of the following procedures:
 - Arterial puncture
 - Intravenous catheter insertion
 - Lumbar puncture
 - Nasogastric tube insertion
 - Urethral catheterization
 - Venipuncture
- 2.15** List the indications for emergency vascular access
- 2.16** Recognize opportunities for preventive services in hospitalized patients

3. Interpersonal and Communication Skills

Demonstrate interpersonal and written communication skills that result in effective information exchange and collaboration with patients, their families, and all members of the health care team

- 3.1** Communicate effectively with patients and families across a broad range of socioeconomic and cultural backgrounds
- 3.2** Demonstrate relationship building skills in each clinical encounter and inter-professional exchange
- 3.3** Gather patient information using active verbal and non-verbal listening skills, clarifying and summarizing statements, and open-ended and closed-ended questions within a structured format
- 3.4** Elicit and recognize the perspectives and needs of families and provide care for patients within their social and cultural context
- 3.5** Share information with the patient and family in a way that facilitates their understanding
- 3.6** Include the family in the decision-making process to the extent they desire
- 3.7** Provide education and patient instructions to patients and families, using written or visual methods, taking into account their health literacy level
- 3.8** Recognize the situations in which interpreter services are needed and demonstrate how to use these services effectively
- 3.9** Identify one's own reactions to patients and families, recognize when these reactions interfere with effective communication, and manage these reactions properly
- 3.10** Communicate patient information accurately and efficiently to all health care team members, including the primary care provider

- 3.11** Deliver organized, appropriately focused, and accurate oral patient presentations
- 3.12** Convey concise, pertinent information at the time of hand-offs
- 3.13** Frame a question for a consultant and communicate the patient information and clinical question effectively
- 3.14** Write organized, appropriately focused, and accurate patient notes, including admission, progress, cross-cover, and discharge notes and summaries

4. Professionalism

Demonstrate a commitment to accountability, excellence in practice, adherence to ethical principles, humanism, altruism, and sensitivity to diversity

- 4.1** Demonstrate personal accountability to patients, colleagues and staff, in order to provide the best patient care
- 4.2** Demonstrate integrity, compassion, respect, altruism, and empathy when interacting with all members of the health care team, patients and their families
- 4.3** Demonstrate a humanistic, family-centered approach to the care of the patient
 - Identify the perspectives of patients, families, self and other healthcare team members
 - Analyze how perspectives may conflict and converge
 - Demonstrate altruism in negotiating a plan of care
- 4.4** Provide culturally effective care
 - Identify the important role of culture in the care of each patient
 - Demonstrate a patient-based approach to cultural competence
 - Elicit the cultural factors that may influence care of the patient
 - Recognize how one's own beliefs affect patient care
- 4.5** Demonstrate punctuality and ability to complete patient care tasks efficiently
- 4.6** Adhere to institutional guidelines, including those regarding attire, language, documentation, and confidentiality
- 4.7** Maintain appropriate professional boundaries with patients, families, and staff
- 4.8.** Recognize the impact of stress, fatigue, and illness on learning and performance
- 4.9** Recognize and appropriately act on unprofessional behavior demonstrated by others

5. Practice-Based Learning and Improvement

Use evidence based medicine and self-directed learning in the care of patients and education of others.

- 5.1** Demonstrate self-directed learning in daily practice
 - Identify strengths, deficiencies, and limits in one's knowledge and clinical skills through self-evaluation
 - Acknowledge own uncertainty
 - Develop a plan for improvement
 - Perform appropriate learning activities
- 5.2** Improve one's own practice by soliciting and incorporating feedback
- 5.3** Demonstrate evidence-based clinical practice
 - Access appropriate resources to answer clinical questions
 - Critically appraise relevant literature

- Incorporate evidence from the literature into patient care
- 5.4** Use information technology to optimize learning
- 5.5** Participate in the education of patients, families, and the health care team

6. Systems-Based Practice

Strive to provide high-quality health care and advocate for patients within the context of the health care system.

- 6.1** Demonstrate the appropriate utilization of consultants, including social workers, nutritionist, and physical therapists, during hospitalization
- 6.2** Recognize, address, and work to prevent errors and near-misses
- 6.3** Recognize the role of systems solutions in improving patient safety
- 6.4** Coordinate transition from inpatient to home care
 - Identify medical needs (e.g., medications, nutrition, activity, and equipment)
 - Arrange follow-up care (e.g., medical home/primary care, special services, support networks, subspecialty care)
- 6.4** Recognize the impact of health insurance status on patient care and availability of services
- 6.5** Recognize the existence of health care disparities and their impact on patient care

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Electronic Resources:

- CDIM Internal Medicine Subinternship Curriculum.
<http://www.im.org/Resources/Education/Students/Learning/CDIMsubinternshipCurriculum/Pages/default.aspx>
- Family Medicine Curricular Resource Project Post Clerkship Training Resource.
<http://www.fmdrl.org/index.cfm?event=c.getAttachment&riid=197>.