Internal Medicine Sub-Internship Clerkship Syllabus Academic Year 2024-2025

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DEPARTMENT OF MEDICINE KECK SCHOOL OF MEDICINE OF USC



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Introduction

Welcome to the Internal Medicine Sub-Internship! We hope that you will find the following four weeks of Internal Medicine both fun and educational.

Senior Medical Students will work directly with attending physicians and residents to provide patient care in an inpatient, sub-internship experience. Your experience on the Internal Medicine Sub-Internship will be directly proportional to the energy and interest that you invest. You must attend all student lectures and conferences, be an integral member of your Medicine team, and perform in-depth investigations and research about your patient's medical problems. Students are expected to perform and carry a patient load at a level nearly equivalent to that of an Internal Medicine Intern. The Internal Medicine Sub-Internship is designed to prepare students for the challenges and rigors of the intern year.

We hope that you will enjoy this learning opportunity and will find gratifying the profound contributions that you can make to your patient's care.

Please note that you are responsible for knowing and following the <u>Keck School of Medicine Student Policies.</u>

Internal Medicine Sub-Internship Goals

A variety of presentations and experiential learning opportunities are designed to introduce the students to the following topics/skills under the supervision and guidance of residents and faculty:

- 1. Caring for diverse adult inpatients in a variety of clinical settings.
- 2. Admitting and cross-covering patients.
- 3. Writing orders, prescriptions, and discharge summaries.
- 4. Effectively communicating with patients by:
 - a. Using lay terms appropriate to the patient's level of understanding.
 - b. Recognizing and managing denial and grief.
 - c. Communicating abnormal results and "bad news" to patients in a sensitive manner.
 - d. Discussing end-of-life issues with attention to the patient's wishes and needs.
 - e. Providing concise daily updates for patients and families regarding hospital courses and rationales for ongoing or new treatment plans.
- 5. Identifying alternatives in difficult ethical choices, analyzing conflicting considerations, and executing a course of action that considers the ethical complexities.
- 6. Recognizing the potential conflicts between patient expectations and medically appropriate care.
- 7. Applying the concepts surrounding advance directives in patient care activities.
- 8. Applying the concepts surrounding informed consent in patient care activities.
- 9. Preparing concise, evidence-based, write-ups on clinical diagnoses.
- 10. Conducting continual self-evaluation and life-long learning.
- 11. Recognizing the importance of systems especially interprofessional collaboration in delivering high-quality patient care.
- 12. Adequately assessing the limits of his/her medical knowledge concerning the patient problems encountered.
- 13. Actively incorporating formative feedback and evaluation into his/her daily practice.
- 14. Demonstrate a commitment to caring for all patients, regardless of gender, race, socioeconomic status, intellect, sexual orientation, ability to pay, or cultural background.
- 15. Identify patients whose illnesses may put the community at risk.



Internal Medicine Sub-Internship Learning Objectives

The clerkship objectives support the achievement of the KSOM Educational Program Objectives: https://medstudent.usc.edu/academics/ksom-educational-program-objectives/. Note that the professional attributes expected of a medical student are associated with Objectives P1-P6 in the KSOM Educational Program Objectives.

What follows are the specific objectives for the Internal Medicine Sub-internship. By the end of the Internal Medicine Sub-Internship Clerkship, the medical student will be able to, in real or simulated patient care settings:

	Clerkship Objectives	KSOM Educational Program Objectives
1.	Apply advanced basic science and clinical knowledge to the clinical data and develop comprehensive differential diagnoses.	KP1, KP2
2.	Accurately gather information to develop prioritized differential diagnoses and be able to design an appropriate evidence-based diagnostic and therapeutic plan. Be able to update your plan in real time as results return.	PC5, PC7, PC9
3.	Write complete, concise, and evidence-based daily progress notes using the SOAP format.	PC4, KP5, ICS4
4.	Participate in caring for common inpatient cross-cover and emergency scenarios.	PC5, PC7, SBP3, PPD1
5.	Accurately describe the indications and contraindications for common procedures in internal medicine.	PC6
6.	Accurately interpret common laboratory and diagnostic tests: EKG, CXR, UA, blood chemistries, CBC, peripheral blood smear, ABG, cell counts, and chemistries of spinal, pleural, joint or ascitic fluids.	PC6, KP3
7.	Design appropriate, evidence-based, cost-effective diagnostic and treatment plans.	PC5, PC7, PC9
8.	Perform concise, complete, and well-organized verbal case presentations.	PC4
9.	Communicate effectively with patients and their families and develop close and therapeutic medical student-patient relationships with progressively increasing independence.	ICS1
10.	Work effectively and harmoniously with colleagues, nursing staff, allied health personnel, and physicians.	IC1, ICS2, ICS3
11.	Participate in discussions with ancillary services and community resources, and propose appropriate discharge plans to optimize patient care.	SBP2, IC2

12. Effectively use the medical literature, computer-based searching tools, and other evidence-based informational resources in the care of patients.	PBLI4
13. Act professionally with compassion, integrity, and respect in all interactions with patients, families, faculty, colleagues, and staff.	P1, ICS5
14. Carry out responsibilities in a timely manner.	P2
15. Behave ethically in caring for patients and in relating to patients' families and others involved in patient care.	Р3
16. Ensure confidentiality and comply with all relevant laws, policies, and regulations.	Р7
17. Identify strengths, deficiencies, and limits in one's own knowledge and behaviors and engage in appropriate help-seeking behavior including soliciting and incorporating feedback.	PBLI1, PBLI2, PBLI3

Clerkship Structure

During the Internal Medicine Sub-Internship, you will become a member of an inpatient wards team. Teams at LA General Medical Center, Keck Hospital, and Kaiser Hospital will have multiple medical students, residents, and an attending physician. Teams at Verdugo Hills Hospital consist of a Sub-Intern and an attending physician. One of the resident's primary responsibilities is teaching and supervising medical students. Your resident/attending will select appropriate patients for you to manage and aid you in fulfilling the goals covered in the Clerkship Objectives (see link above). It is important to remember that an attending or resident must countersign all histories and physicals, orders, progress notes, and discharge summaries. Students will have the ability to work on two different shift schedules, Day-Shift and Swing-Shift, while on service.

Wellness Day- On the second Friday of the Clerkship, students will have the afternoon off (1/2 day off) for Wellness.

Clerkship Site Descriptions

Clerkship site descriptions can be viewed at the following website: https://medstudent.usc.edu/clerkship-site-descriptions/

Clinical Learning Activities

A. Schedule Overview

Time Schedule:	Conference/Activity
6:30 - 7:00 am	Pre-Rounds on Patients
7:00 – 8:00 am	Work Rounds with Team
8:00 – 9:00 am	Morning Report
9:30 – 11:30 am	Teaching Rounds
12:00 – 1:00 pm	Lunch
1:00 – 4:00 pm	Discharge Planning & Management Rounds
1:00 – 4:00 pm	Student Curriculum (TBD)
6:30 am – 5:30 pm	Clerkship Day-Shift Work Schedule
4:00 pm-12:00 am	Clerkship Swing-Shift Work Schedule

Students are expected to admit patients daily. Students are expected to remain with their residents daily from either 6:30 am to 5:30-6 pm or 5:30 pm to 12 am (Midnight). You will return the next day prepared to pre-round on your patients. Remember that your supervising resident **must** countersign all of your work via computer. You are relieved of all clinical responsibilities on the last Wednesday of the rotation. Students on swing shift will meet with a Clerkship Director at 4pm Monday, Tuesday, and Wednesday for small group teaching.

Attendances at all sessions are mandatory unless otherwise stated.

- B. Work Rounds The entire team will see the team's established patients. You should be prepared to present your patients and discuss your findings with your resident. Work rounds provide an opportunity to determine and implement the plans you wish to carry out for the day: which lab studies need to be drawn, which diagnostic studies need to be scheduled, which lab results need to be checked, which films or scans need to be reviewed, which consults need to be called and which therapies to continue or change.
- C. **Teaching Rounds** All admissions and established patients with new problems will be reviewed at the bedside by your attending faculty. During the last one-half hour of teaching rounds, house officers or medical students may give didactic presentations on medical topics relevant to the team's activities.
- D. **Sign-Outs** It is imperative that you sign out your patients to the physician responsible for the care of your patients when you are outside the hospital. The IPASS method for signouts will be used, and a mnemonic sign-out card will be provided to you while on service. You must communicate directly with this physician in person. Please do your sign-outs in conjunction with your residents.
- E. **Procedures** Your resident is expected to instruct and supervise you in all procedures you may need to learn. Anyone who feels uncomfortable with a procedure (thoracentesis, paracentesis, central line replacements, etc.) should express their discomfort.
- F. **Didactics** Students will be given lectures on typical cross-cover and emergency scenarios. Internal Medicine Hospitalist Faculty will run workshops on the following:
 - Workshop Topics Include:
 - o Seizures
 - o Dyspnea
 - o Fever
 - o SIRS/Sepsis
 - o Chest Pain
 - o Tachycardia
 - o Altered Mental Status
 - o IV Fluid Management
- G. Pain Management Palliative Care faculty review various approaches to pain management.
- H. Goldstein Morning Report Monday and Thursday, 8:00-9:00 am, Inpatient Tower-Conference Room B or Virtual. Residents present and discuss cases recently admitted to the Internal Medicine Service. This is an excellent conference for observing clinical problem-solving. A wide array of medical problems are discussed, and faculty representatives from the Department of Medicine are present for expert advice.

I. Faculty Mentor Rounds – (*Timing at the discretion of the faculty attending*.) The team's attending spends 1-2 hours per week with the medical students reviewing clinically based topics. Topics include medical documentation, physical examination, critical thinking, and patient management.

Required Assignments

- **A.** Evidence-Based Write-Ups- During the clerkship, each student will submit two evidence-based write-ups for review by the faculty attending. Both write-ups are due simultaneously, in duplicate, on the third Monday of the rotation. One copy of each write-up will be uploaded to Elentra. The duplicate copy is presented at your mentor session. Both write-ups should be typed and include evidenced-based summaries, including references. Students who present for the Student Afternoon Reports can submit that PowerPoint as one of the required write-ups. *Please see the attached Sample Write-Ups located in your Orientation packet for the required format.*
- **B.** Clinical Inquiry and Simple Cases (CI)- The CI features aspects of the Case-Based Curriculum used at Keck School of Medicine (KSOM). You will have a computerized quiz based on your workshops worth 15% of your grade.

Required Clinical Experiences

In the clinical setting, students are expected to acquire primary responsibility for and log at least one patient with each of the Required Clinical Experiences.

Log all patient encounters for each Required Clinical Experiences listed below in the corresponding diagnosis folder in MedOasis. For each encounter, log the level of responsibility that you provided:

- Participated: You assisted or performed direct patient care responsibilities under direct or indirect supervision.
- Observed: You watched or discussed a patient's care, but did not have an active role in their care.
- Simulated: You completed an assigned activity through high-fidelity simulation, virtual case scenarios (e.g., Aquifer), or other simulated means.

Logging all of your Required Clinical Experiences for a rotation allows KSOM to ensure comparable student experiences across clinical sites. Failure to log Required Clinical Experiences will result in a reduction in your overall clerkship score (see Student Assessment section of clerkship manual). Please note that each patient can only be used to log a single Required Clinical Experience (even if they have multiple applicable conditions).

Please note that your logs will be reviewed at your mid-clerkship feedback session. It is your responsibility to ensure you have completed all Required Clinical Experiences by the end of the rotation. If you have not logged at least 1 encounter for each Required Clinical Experience by the end of the 3rd week of the rotation, please reach out to the Clerkship Directors for further guidance.

Required Clinical Experiences:

- 1. Chest Pain
- 2. Pain Management
- 3. Sepsis
- 4. Renal Failure
- 5. Dyspnea



Note: Students must have all of their Required Clinical Experiences completed on MedOasis by <u>5:00</u> pm on the third (3rd) Friday of the rotation.

Learning Resources

A. Syllabus and Text – There is no required textbook. However, Andreoli and Carpenter's Cecil Essentials of Medicine 10th Edition is a great reference text. E-book available through Norris Medical Library. Requires USC network connection. Link: http://web-app.usc.edu/eresources/hsl/gateways/30681.php (click on "Access this resource").

B. Secure Storage, Study, and Relaxation Space

This information can be found on the website: https://medstudent.usc.edu/clerkship-sites-study-storage-and-relaxation-space/

Student Assessment

Evaluation and Grading

All clerkship activities, assignments, and evaluations are required and must be completed before you receive your final grade:

	Graded Component	Weight		
1. Clinical P	reformance (completed by your preceptor/resident)	55%		
	ternal Medicine Advanced Clinical Exam	25%		
Note: minimum score required to pass exam = 63. 3. Clinical inquiry quiz		15%		
		1370		
4. Profession	nal Accountability (one point will be given for each of the			
following):				
Logging A	LL Required Clinical Experience cases per clerkship stated			
deadline.				
Completing	g ALL administrative tasks (e.g. evaluations) of clerkship on	5%		
time.		370		
Completing	g ALL assignments on time and to satisfaction.			
Being pres	ent at ALL required activities of the clerkship.			
Respondin	g to all communications from the clerkship leadership within 48			
hours.				
5. Other:		Satisfactory		
		completion required		
a. Completion	n of all Required Clinical Experiences	$\sqrt{}$		
b. Mid-Rotat	ion Feedback/Goals			
c. Two Evide	ence-Based write-ups or PowerPoint Presentations	V		

The final clerkship grade is determined by your overall score, rounded to the nearest whole number, and students must also achieve a minimum NBME score for a final grade of Pass, High Pass or Honors:

Internal Medicine Sub-I				
	Overall Score cut off for each grade	Minimum NBME Subject Exam Score for		
		Grade of Pass, High Pass or Honors		
Honors	94+	63		
High Pass	77 - 93			
Pass	69 - 76			
Fail	68 or below			

Eligibility Criteria for Faculty and Resident Supervisors to Submit an Evaluation of Student Performance: All attendings and residents who are scheduled with a student for a minimum of 4 days. At least one attending evaluation is required to generate a grade. KSOM health professionals who provide health and psychiatric/psychological services to a medical student cannot be involved in the academic assessment or promotion of the medical student receiving those services. Please see the Supervision of Student Performance by Healthcare Providers policy for more information.

NBME Subject Exam Logistics: The NBME subject exam will be administered on Friday of Week 4 of the rotation.

Mid-Rotation Feedback: Mid-Rotation feedback enables students to assess their progress to date and to develop goals for growth and improvement over the remainder of the rotation. It also helps to ensure that the students can learn from and improve from practice; the supervising faculty/residents and the students must participate in a mid-rotation feedback exercise. The student will complete a self-evaluation, provide comments, and identify learning goals they would like to accomplish before the end of the clerkship. Students are responsible for giving the attending the feedback form and arranging a time to receive individual feedback. The mid-rotation feedback form is submitted in Elentra.

Passing the Clerkship: To receive a passing grade (Pass, High Pass, or Honor) for the clerkship, students must demonstrate minimum competence based on their 1) overall clerkship performance; 2) the NBME subject exam performance; 3) the satisfactory completion of all required activities; and 4) the absence of unprofessional behaviors as outlined in the student handbook. Note: Unexcused absence or other unprofessional conduct will preclude a final grade of Honors regardless of the overall performance score.

- 1. Students who do not pass the NBME subject exam on their first attempt will be ineligible for Honors
- 2. Students who pass the retake exam (second attempt) are ineligible for Honors and will receive a grade of Pass (P) or High Pass (HP) based on their overall performance.
- 3. Students who fail the retake exam (second attempt) will continue to have a grade of Incomplete (I) noted on their transcript for that clerkship and will be required to sit for a second retake (third attempt) of the NBME subject exam.
- 4. Students who pass the second retake exam (third attempt) are ineligible for a grade of HP or Honors and will receive a grade of "Pass" for the clerkship.
- 5. Students who fail the second retake exam (third attempt) will receive a grade of "Fail" (F) for the clerkship and must repeat the clerkship.

Fail: A grade of a fail may be given in the following situations: 1) failure to demonstrate minimum competence based on overall clerkship performance, 2) inability to pass the NBME on three attempts, 3) any unprofessional behavior as outlined in the student handbook, 4) failure to resolve a grade of incomplete.

Incomplete: An **Incomplete** is not a final grade, but a designation used if a student has been excused from meeting a clerkship deadline. Designations of "**Incomplete**" will be assigned to students who do not complete any required clerkship component. Designations of "**Incomplete**" will be assigned to any student who has not achieved the minimum NBME Subject Exam score set for passing the clerkship on their first and second attempts.

Policies and Procedures

Please note that you are responsible for knowing and following the Keck School of Medicine Student Policies (http://medweb.usc.edu/policies/).

EHR Access and Emergency Protocols

Contact Student Affairs

If you have an urgent issue that requires assistance, you may contact the Office of Student Affairs for assistance at 323-442-2553. You can call this number after hours and be connected to the Dean on call.

Clerkship Director/MSE/Site Director/Coordinator

You can also reach out to the Clerkship Director, Medical Student Educator or Site Director for assistance.

Needlestick and Exposure Protocol

Call **During Business Hours: 213-740-9355 (WELL); After Hours:** (323) 442-7900. Please leave a voicemail. There is a provider available 24/7 who will return your call. More information can be found at https://engemannshc.usc.edu/bloodborne-pathogen-exposure/.

Additional information on emergency procedures can be found at:

https://medstudent.usc.edu/emergency/

Policies

Mistreatment

The Keck School of Medicine (KSOM) is committed to maintaining and promoting a respectful learning environment for all members of the Keck community. KSOM has as zero tolerance policy for mistreatment. For more details on what constitutes mistreatment and how to report it, please review here.
To report mistreatment, access MedOasis through http://my.usc.edu/ and select the MedOasis Widget. The mistreatment report form is located in the announcement box at the top of your MedOasis home page.

Code of Professional Behavior

Students are expected to adhere to the Code of Professional Behavior in all settings by demonstrating honesty and integrity, responsibility, reliability, and accountability as well as respect for all patients, peers, faculty, and staff. For a detailed description of various dimensions of professionalism, please review here.

Clerkship Evaluation

We rely on your thoughtful and constructive feedback to continually improve the curricula and instruction. Completing evaluations is a professional expectation of medical students' professional responsibility. Please refer to the <u>Evaluation Completion Policy</u>.



Grade Appeals

Information about appealing a grade or evaluation can be found in the <u>Evaluation and Grade Appeal</u> <u>Policy</u>. Evaluation and grade appeals have timelines and requirements.

HIPAA Privacy Regulation

Please note that HIPAA privacy regulations are always in effect in all clinical settings. Individual practitioners (including medical students) are held personally responsible for violations of HIPAA regulations which may result in financial and other penalties. You have previously completed a HIPAA training on Trojan Learn and have access to the training modules if you wish to review them. You can also find additional information by visiting here.

Medical Student Supervision Policy

Students must have an identified faculty supervisor at all times. Students may be directly or indirectly supervised by faculty members and/or residents and, when indirectly supervised, direct supervision must be immediately available at all times by a faculty member or resident. Please review the Medical Student Supervision Policy for more information.

Medical Student Time Requirements

Student hours include the following limits: a maximum of 28 consecutive hours in the hospital and a maximum of 80 hours per week averaged over four weeks. Students receive at least one day off per week. Refer to your individual calendar. Please review the Medical Student Time Requirements for Clinical and Education Activities Policy for more information.

Code of Conduct in Faculty-Student Relationship

The <u>faculty code of conduct</u> includes language about the standard of conduct in the faculty-student relationship.

Assessment and Supervision of Student Performance by Healthcare Providers

KSOM health professionals who provide health and psychiatric/psychological services to a medical student cannot be involved in the academic assessment or promotion of the medical student receiving those services. See policy here.

Attendance

It is the responsibility of the student to communicate with the curriculum office regarding absences from required events that result from anticipated conflicts, personal emergencies or unforeseen events. Please review the KSOM attendance policy for more details.

Requesting Time Off

Students requesting an excused absence for one or more missed classes, or who need to seek a leave of absence, are instructed to submit the appropriate form, which can be found here: https://medstudent.usc.edu/forms/

Access to Health Care Services

Students are excused from classes or clinical activities to access needed healthcare services. Please review the <u>Students Needing Access to Healthcare Policy</u>.

Computer-based Examination Administration

Students are required to bring fully charged laptops and chargers to participate in all pre-clerkship course examinations that are administered electronically. No additional items (cell phones, purses, notes, etc.) are allowed in the examination area and their presence in the examination area might result in a grade of fail

for the course. For more information on the administration of computer-based examinations, please review here.

Diversity

The Keck School of Medicine (KSOM) is committed to creating a culture that promotes and celebrates diversity and inclusion at all levels of the institution. The diversity policy is here.

Dress Code

Grading Policy

The KSOM Grading Policies can be found <u>here</u>.

Examination Retake Policy

KSOM permits students to retake examinations under certain circumstances. Students retaking examinations are required to work with LEAD (see Additional Resources below) in preparation. The Examination Retake Policy is here.

Additional Resources

Office of Student Accessibility Services (OSAS)

OSAS provides support services and accommodations necessary to enable students with disabilities to develop their maximum potential by making their education accessible while having the dignity to work independently. For more information, please review https://osas.usc.edu/.

Learning Enhancement and Academic Development (LEAD)

The Learning Enhancement and Academic Development provides an array of services and resources to help medical students master the curriculum. More information about LEAD can be found here. Students may also contact Dr. Ranna Nash or Dr. Melissa Lopez at Keck Learning Enhancement and Academic Development (LEAD) at Ranna.Nash@med.usc.edu or lopezms@usc.edu.

Emergency Procedures and Preparedness

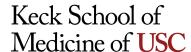
The Keck School of Medicine has emergency procedures and a preparedness plan. Visit this site to find out more, including whom to reach in an emergency: https://medstudent.usc.edu/emergency/

Right to Inspect Student Records

According to the Family Educational Rights and Privacy Act (FERPA), students have a right to inspect their educational records within 45 days of the request and to request corrections. For information on the review and challenge of student records, as well as general information about FERPA, visit: https://arr.usc.edu/students/ferpa/

Wellness Day Policy

Wellness days are mandatory and are incorporated into clerkship schedules to provide students with an opportunity to attend to their personal well-being. Students are released from clinical duties one full day for each 6-week clerkship and 1/2 day for each 4-week clerkship. The timing of wellness days can be found here: https://medstudent.usc.edu/academics/curriculum/wellness-days/.



Essential Technical Standards Policy

All students admitted to and enrolled in the Keck School of Medicine M.D. program must meet and continue to meet throughout their enrollment, the Essential Technical Standards (Standards) set forth in this policy:

 $\underline{https://medstudent.usc.edu/faculty-staff-information/keck-school-of-medicine-md-student-essential-\underline{technical-standards-policy/}$

Timeliness of Grades Policy

The Keck School of Medicine requires timely reporting of final grades:

 $\underline{https://medstudent.usc.edu/faculty-staff-information/keck-school-of-medicine-md-student-final-grade-submission-and-reporting-policy/$