# PRIMARY CARE

## UNIVERSITY MISSION STATEMENT
Rush University provides outstanding health sciences education and conducts impactful research in a culture of inclusion, focused on the promotion and preservation of the health and well-being of our diverse communities.

## Rush University [college]  
### Course Syllabus

<table>
<thead>
<tr>
<th>Course Number</th>
<th>RMD 701</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Course Title</strong></td>
<td>Core Clerkship: Primary Care</td>
</tr>
<tr>
<td><strong>Course Code</strong></td>
<td>WE: Web Enhanced: 100% of the instruction is offered in a traditional, face-to-face classroom environment with online resources</td>
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<tr>
<td>Credit Hours</td>
<td>4 credit hours</td>
</tr>
<tr>
<td>Clinical Practicum/ Clerkship Hours</td>
<td>4 weeks of credit</td>
</tr>
<tr>
<td>Term and Year</td>
<td>Summer 2020</td>
</tr>
<tr>
<td>Location (in-class sessions)</td>
<td>Combination of Inpatient Wards and Zoom sessions</td>
</tr>
</tbody>
</table>
| Course Coordinator/Course Director(s) Name and Contact Information | Clerkship Director: Rupel Dedhia, MD  
Office: 1018 Kellogg  
Telephone: 312 942-9854 |
| **Additional Course Faculty Information** |  
Associate Clerkship Director Kathleen Rowland, MD  
Office: 605 Kidston.  
Telephone: 312-942-9971.  
Pager: 85-3058  
Email: Kathleen_Rowland@Rush.edu  
Assistant Clerkship Director: Mitch Popovetsky, MD  
Email: Mitch_N_Popovetsky@rush.edu  
Core Faculty: Lindsay McCullough, MD  
Email: Lindsay_M_McCullough@rush.edu  
Clerkship Coordinator Cristina Beltran  
Office: 1032 Kellogg  
Telephone: 312 942-9971  
Fax: 312 942-5271  
Email: Cristina_Beltran@rush.edu |
| **Course Description** | Students will be imbedded in either a family medicine or internal medicine ambulatory office for four weeks. Students will independently evaluate, present and care for patients while working directly with attending preceptors. This will be a primarily outpatient experience and meant to immerse students in the primary care of patients on all levels including acute care, chronic illness care and preventive care. Curriculum will highlight the unique relationships and specialized patient care that occurs in this setting.  
Message from Clerkship Directors:  
Our job as your clerkship directors is to be your advocate, your teacher, and your |

evaluator. As your advocate, we want to encourage you to contact us anytime you have a problem or concern about the clerkship. We will generally see all of you each week during your rotation and can be reached via pager 24/7 Monday–Friday and some weekends. As your teachers we are in charge of organizing your curriculum and will frequently lead your student conferences. As your evaluators it will be our job to assess your performance on the clerkship and to complete a grade for each of you.

<table>
<thead>
<tr>
<th>Course Objectives</th>
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</thead>
<tbody>
<tr>
<td>At the completion of this course, the student will be able to:</td>
</tr>
<tr>
<td>1. Gather a focused history in a primary care setting (PRA-1a)</td>
</tr>
<tr>
<td>2. Perform a focused general physical examination in a primary care setting (PRA-1b)</td>
</tr>
<tr>
<td>3. Create a differential for patients in a primary care setting, focusing on the diagnoses in Required Clinical Experiences (PRA-2)</td>
</tr>
<tr>
<td>4. Formulate appropriate treatment plans based on diagnostic data, focusing on appropriate screening, risk reduction and health promotion strategies in the primary care setting (PRA-3a)</td>
</tr>
<tr>
<td>5. List indications, contraindications and describe procedural techniques performed in the primary care setting when applicable (PRA-3b)</td>
</tr>
<tr>
<td>6. Document a patient encounter (PRA-4a)</td>
</tr>
<tr>
<td>7. Present a patient encounter (PRA-4b)</td>
</tr>
<tr>
<td>8. Demonstrate comprehension of common diseases managed in the primary care setting (KNO-1)</td>
</tr>
<tr>
<td>9. Demonstrate effective communication with patients and families in the primary care setting (COM-1)</td>
</tr>
<tr>
<td>10. Identify the benefits of a physician’s continuity with patients and families to enhance a patient’s overall health (COM-2)</td>
</tr>
<tr>
<td>11. Work effectively with other healthcare colleagues in the primary care setting (COL-1)</td>
</tr>
<tr>
<td>12. Make a plan to address self-identified learning gaps. (EDU-1)</td>
</tr>
<tr>
<td>13. Use the medical literature to answer a clinical question related to screening in the primary care setting (SCH-1)</td>
</tr>
<tr>
<td>14. Identify the components of contextual care including family, community, culture, and barriers to access that influence patient understanding and care (ADV-1)</td>
</tr>
<tr>
<td>15. Apply the principles of primary, secondary, and tertiary prevention in the context of patient care (ADV-2)</td>
</tr>
<tr>
<td>16. Proactively complete patient care activities and submit course requirements in a timely manner (PRO-1)</td>
</tr>
<tr>
<td>17. Engage in a professional identity formation exercise as a means to engage in self-discovery one’s internal wellness (PRO-2)</td>
</tr>
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</table>

<table>
<thead>
<tr>
<th>Prerequisites</th>
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<tbody>
<tr>
<td>Successful completion of the M2 year, including the Clerkship Entrance OSCE. Must have passed clinical component of all previous M3 clerkships.</td>
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<table>
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<tr>
<th>Co-requisites</th>
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<tbody>
<tr>
<td>None</td>
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<table>
<thead>
<tr>
<th>Required Textbooks</th>
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</thead>
<tbody>
<tr>
<td>The recommended textbook for the Primary Care Clerkship is Symptom to Diagnosis – An Evidence-Based Guide by Scott Stern, Adam Cifu, and Diane Altkorn, 3rd Edition, Lange/McGraw Hill Education publishers. Required chapters include: Diagnostic Process (1) Screening and Health Maintenance (9) Abdominal Pain (27) Anemia (99) Back Pain (115) Chest Pain (143)</td>
</tr>
</tbody>
</table>
Cough, Fever, and Respiratory Infections (163)
Diabetes (199)
Dizziness (229)
Dysuria (277)
Edema (285)
Fatigue (18)
Headache (325)
Hypertension (365)
Joint Pain (435)
Rash (471)
Sore Throat (491)
Weight Loss, Unintentional (525)

There are also key articles that are required for specified small group sessions as indicated on Blackboard. As an example (please refer to Blackboard for the most updated list):

- For the Metabolic TBL:
  o "2014 Evidence-Based Guideline for the Management of High Blood Pressure in Adults Report from the Panel Members Appointed to the Eighth Joint National Committee (JNC 8)," P James, et al, JAMA. 2014; 311(5); 507-520.

- For the Periodic Health Examination:
  o "Health Maintenance in Women;" Riley, Margaret MD et al; Am Fam Physician. 2013 Jan 1; 87(1); 30-37.
  o "Adolescent Health Screening and Counseling; "Ham, Peter MD et al; Am Fam Physician. 2012 Dec 15; 86(12):1109-1116.

- For the Women’s Health session:

### Recommended Textbooks

Almost all students recommended reading around your patients! They suggested using UpToDate as a resource for this. Also, reviewing USPSTF screening guidelines.

- Resources commonly cited by high performing students
  - Family Medicine
  - Internal Medicine
  - Commonly cited:
    - Case Files: Family Medicine
    - Family Medicine Pretest
    - Step-Up to Medicine
    - USMLE World Qbank
    - AAFP online questions (see below)
  - Commonly cited:
    - USMLE World Qbank
    - AAFP Online questions
    - Step-Up to Medicine
    - Case Files: Family Medicine
    - Internal Medicine Pretest
  - Also mentioned:
    - Blueprints-Family Medicine
    - First Aid for Step 2 CK
    - Family Medicine Pretest
  - Also mentioned:
    - Family Medicine Pretest
    - “Pocket” Harrison’s
| **Recommended Websites** | American Academy of Family Physicians website with free membership for students - http://www.aafp.org/about/membership/join/student.html  
  Access to a great series of articles (improved links to the Core Topics)  
  Bank of MCQs  
  American College of Physicians website with free membership for students - http://www.acponline.org/membership/  
  In the Clinic (ITC) series has ambulatory topics and MCQs at the end - http://annals.org/intheclinic.aspx  
  Possibly Helpful Apps  
  AHRQePSS (free)  
  Type in gender/age etc. and get USPSTF recommendations  
  ACP IA (free)  
  ACP Immunization Advisor  
  Adult Immunizations  
  Shots Immunizations  
  CDC Vaccine Schedules for Adults (Austin Physician Products)  
  Adult Free  
  Pediatric Schedule $4.99  
  ASCVDRISK  
  Calculates the ACC/AHA 10 year risk  
  MKSAAP 9 questions podcast  
  https://soundcloud.com/mountainlion-2  
  www.Soundcloud.com (search Mountainlion-2 you will find the page these--and other--medical education podcasts) |
| **EReserves Information** | Professional dress is very important and is expected by your patients. Unless on call, attire should be “business casual,” and men should wear ties unless otherwise directed. No denim or sneakers should be worn. Open-toed shoes are prohibited in most clinical areas of the hospital; do not wear these.  
  When on call, students may be required to wear scrubs or the attire described above. Wearing of scrubs must follow the [Rush Scrub Policy](#).  
  You are required to wear your ID badges at all times. |
| **Required Equipment/ Uniform** | My Apps: [https://myapps.rush.edu/](https://myapps.rush.edu/)  
  Students are recommended to use My Apps, which is a virtual desktop where Office software, Rush Email, and secure storage is provided. Visit [https://rushuportal.learning.rush.edu/faq](https://rushuportal.learning.rush.edu/faq) for more information about the My Apps virtual environment. Students are also able to log into RULearning from MyApps.  
  Blackboard Login Page: [https://rulearning.rush.edu/](https://rulearning.rush.edu/)  
  Students are also able to access Blackboard via the University Portal.  
  Microsoft Office Suite: Word, Excel, and PowerPoint  
  If you do not already have the Microsoft Office software you can access the Suite through My Apps or download a copy of the Microsoft Office suite at a
reduced cost for Windows or Mac users: [https://rush.onthehub.com/](https://rush.onthehub.com/)

**Internet Browsers**
Students should have access to more than one browser, such as Internet Explorer, Chrome, Firefox or Safari. All browsers should be the most up-to-date version available. We recommend Chrome and Firefox for Blackboard.

**Adobe Acrobat Reader**
Students should have access to the most up-to-date Adobe Acrobat Reader.

<table>
<thead>
<tr>
<th>Internet Requirements</th>
<th>Students must have access to a high-speed internet connection when working off campus.</th>
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</thead>
</table>

## Clinical Responsibilities

**Clerkship Structure**
You will spend four weeks on the Primary Care Clerkship with four to five days each week in clinic returning to Rush on Wednesdays for your student small group sessions.

Orientation to your office site occurs on the first Monday of the rotation (**Contact the office to which you are assigned the week before your start date to determine when to begin on that first Monday***) with your general clerkship orientation occurring at Rush on the first Wednesday of the rotation.

You will sit for the NBME shelf examination on the final Friday of the rotation.

### First Day

<table>
<thead>
<tr>
<th>Required Didactic Sessions</th>
<th>See Blackboard for official schedule</th>
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<tbody>
<tr>
<td>1. Orientation</td>
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<tr>
<td>2. Preventative Health Examination</td>
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<td>3. ID Jeopardy</td>
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<td>4. Metabolic TBL</td>
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<td>5. Musculoskeletal Cases</td>
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<td>6. Cough</td>
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<td>7. Exam Review Session</td>
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<tr>
<td>8. Care of the Elderly Patient</td>
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<tr>
<td>9. Reflective Writing</td>
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<tr>
<td>10. Dermatology</td>
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<tr>
<td>11. Women’s Health</td>
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<tr>
<td>12. Men’s Health</td>
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<tr>
<td>13. Fatigue</td>
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<tr>
<td>14. Midterm Feedback</td>
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</tbody>
</table>

### On Call Responsibilities

none

**Clerkship Specific Documentation Expectations**

Documentation in the outpatient setting can be difficult given the time constraints of a busy practice. However, we believe that notes in the ambulatory setting is a skill unto itself that can be highly educational and provides physicians (and trainees) with the chance to organize thoughts, reflect, and research patients and apply that knowledge.
You are **required** to write a note on each of your required 14 OASIS encounters and should continue to write notes until you achieve all required all 14 patient encounters and 14 different specified diagnoses. Some sites have specific expectations regarding note writing and you should adhere to the local site standard as well even if it exceeds your quota. Aquifer/MedU Cases can be supplemented for a diagnosis not encountered in clinic.

Some sites will not allow medical student documentation to be placed within the medical record, but students should still record patient encounters in electronic format (i.e. a Word document using the templates provided on Blackboard) and submit these as part of your completed portfolio by posting to Blackboard. Your preceptor(s) should review your written work and give you feedback on its composition, accuracy, and form.

- Title your chart entries: “Medical Student Note”
- Include your title: “M3”
- Do not use any abbreviations for medications or Latin abbreviations (e.g.: TID, qd) [https://www.jointcommission.org/assets/1/18/dnu_list.pdf](https://www.jointcommission.org/assets/1/18/dnu_list.pdf)
- Use the patient’s initials and DOB (i.e. JK121289) instead of the entire name
- Make sure to document your clinical reasoning (see IDEA format) and preventive care when appropriate.

### Specific Site Information

| Vary per site, you will receive information from your site coordinator or director |

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### Required Clinical Experiences

[Please list the activities/assignments that make up the student’s grade as well as their value in points or percentage]

**CDs will fill out any changes from previous year!**

The schedule is designed to maximize your clinical and educational experience, as well as allow you ample time for additional reading and preparation, and therefore does not provide “buffer” or make-up time. Students should be present and punctual for all scheduled clinic sessions, rounds, and didactic sessions. Each student is assigned a clinical site and is expected to work regular weekday hours in that clinic as determined by your site director.

Some students may be required to attend weekend office hours.

| 1. Preventive Health Services / Periodic Health Examination | Must be a Full or Partial level of responsibility to fulfill requirement |
| 2. Chronic Disease Management | Full Participation: Student independently takes history, performs the physical examination, and/or performs the procedure with preceptor supervision. The student participates in the clinical reasoning process leading to a management plan. |
| 3. Counseling for behavioral change (i.e. diet, exercise, or tobacco use) | Partial Participation: Student takes part of the history, performs part of the physical exam, and/or assists during a procedure. The student participates in the clinical reasoning process leading to a management plan. |
| 4. Cardiovascular | |
| 5. Pulmonary | |
| 6. Endocrinology | |
| 7. Musculoskeletal | |
| 8. Ear, Nose, and Throat | |
| 9. Infectious Disease | |
| 10. Women’s Health | |
| 11. Mental Health | |
| 12. Gastroenterology | |
| 13. Genitourinary / Renal | |
| 14. Hematology / Oncology | |
# Summary of Evaluation Methods of Student Performance

## Clerkship Requirements

- NBME Shelf Exam (25% of final grade)
- Patient Write-Up (10% of final grade)
- Evidence based practice screening write-up (10% of final grade)
- Attending and Resident Evaluations (45% of final grade)
- Reflective writing submission (5% of final grade)
- OSCE (5% of final grade)
- 3 Assigned Medu/Aquifer Cases
- 2 Feedback Cards
- Mini-CEX
- OASIS Logs
- Midterm Feedback Session with Clerkship Director(s)
- Attendance at all clinical and non-clinical activities unless otherwise excused

## Patient Write-Up

### Objectives

- Choose one actual patient note from your clinical rotation to submit for evaluation.
- Document the history and physical examination
- Document your assessment and plan including a section on health care maintenance.

Create a rank ordered prioritized differential diagnosis for those problems that require it by completing the following steps termed the IDEA method.

- **I** Interpretive summary: Defined as providing a concise summary statement that uses semantic vocabulary to highlight the most important elements from the history, exam, and testing and to interpret and represent the patient’s main problem(s).
- **D** Differential diagnosis: Defined as offering at least three diagnostic possibilities, commits to what is most likely, and considers what is less likely or unlikely (yet important to consider).
- **E** Explain well: Defined as explaining the reasoning behind the lead diagnosis, including the epidemiology and key features and how these compare/contrast with the patient’s presentation.
- **A** Alternatives well considered: Defined as explaining the reasoning behind alternative diagnoses, including the epidemiology and key features and how these compare/contrast with the patient’s presentation.

- Written Plan: Defined as recommending individualized diagnostic and treatment plans for your patient that includes supporting clinical decision making for each problem.
- Document any chronic medical conditions with their associated plans.
- Be sure to include a health care maintenance session/anticipatory guidance section at the end

## EBP Write-Up

Students will be assigned to a group and provided with a screening question for which they must submit an Evidence-Based Practice write-up. It should pertain specifically to a decision made regarding a choice to screen or not screen for a particular disease (i.e. cancer screening).

- It should fit onto two sides of a sheet of paper in no less than 10 font with reasonable margins.
- You should develop a clinical question (PICO) demonstrating this by your choice of search strategy.
You should review at least three articles but choose a single article to appraise and list it in bibliographic format. The article should be an original research paper (not a review article or meta-analysis).

Please review the “Evidence-Based Practice Rush University Medical Center Medical Student Users Guide” for additional information (posted on Blackboard) as well as the “Screening Studies” presentation posted on Blackboard.

Please review the assignment instructions posted on Blackboard

There are 9 basic steps

Briefly describe the clinical scenario that prompted your investigation
  o Outline and define the patient population, intervention, comparison, and outcome of interest (PICO).
  o Bibliographic citation of the paper used
  o Describe the searching process including search engines, databases, MeSH terms, and strategies used. Remember that this should reflect your question and not simply be a broad search on a general topic.
  o Identify the type of study.
  o Provide an outline of the study design, discuss the population used, and summarize “table 1” which compares the characteristics of each group being compared.
  o Provide an outline of the study results. Describe statistical characteristics of the findings.
  o Address and list threats to validity and study weaknesses.
  o Apply or discuss the applicability of the study to your patient.

MedU/Aquifer Cases

We have incorporated the MedU/Aquifer platform as a supplement to your learning. It consists of the Simulated Internal Medicine Patient Learning Experience (SIMPLE) on-line case series. This is an exciting tool developed for third year medical students to utilize during their core clerkships. We believe that working through the cases in a thoughtful manner will enhance your learning, clinical skills, and knowledge base. You each are expected to complete three assigned cases prior to the end of the clerkship.

Please post proof of completion on Blackboard.

Access to MedU/Aquifer may be obtained by visiting: www.meduapp.com

Click on the link to register to get started. Please note that you must enter your rush email address with the suffix @rush.edu. For future reference, this login and password will also be used during the pediatrics clerkship to access the CLIPP cases and the surgery clerkship to access the WISEMD cases. If you have already completed IM or pediatrics and have a prior login, you may use it to access the case bank. Also, if you encounter technical difficulties with the cases, please follow the instructions on the website to email the MedU/Aquifer support team directly. Should you have any questions or problems, please contact the clerkship coordinator.

Reflective Writing Submission

Following the Reflective Writing Exercise workshop, typically held during the second week of the rotation, students are required to spend approximately 30 minutes reflecting on their experiences caring for patients and as a member of the health care team during the primary care clerkship. You should use the techniques taught during the workshop to write a reflection. This reflection will be uploaded to Blackboard by the Monday following the end of the clerkship, and will be a pass/fail component of the final clerkship grade.

Please spend about 30 minutes reflecting and writing on the prompt provided in class.

Perfectionism isn’t preferred, but legibility is. Lightly edit for clarity and comprehensibility. If you need to add a comma to make it politely readable, please do.
### Feedback Cards

You are expected to get a minimum of 2 feedback cards total for the rotation. Feedback can be based on a single encounter (e.g., a case presentation, physical examination, and counseling), we encourage you to ask your preceptor for feedback specific to your unique learning goals. You need to hand out and collect your feedback cards, and get verbal feedback about your performance along with the written feedback on the card. All feedback cards are to be returned to the clerkship coordinator by the last week and at least one card needs to be turned in prior to midterm feedback. Failure to turn in a completed feedback card will be considered unprofessional behavior and may result in failure of the clerkship. Feedback cards are not used as part of your final grade and are meant to be formative in nature but must be completed. Both you and your faculty will sign off on each card.

### Mini-CEX

The Mini-CEX is a focused clinical encounter between a medical student and a patient observed by an attending and followed by immediate feedback. It is important for students to be directly observed by preceptors and given feedback. The scope of the Mini-CEX should be limited given the time constraints of outpatient medicine and be comprised of a focused history and physical. You are encouraged to print off the form from Blackboard and hand it to your faculty. Please turn in your paper copy to the clerkship coordinator or submit an electronic copy to Blackboard. One Mini-CEX is required during the month. It is a pass/fail component of the clerkship.

### OASIS Logbooks

Students are expected to have a minimum of 14 encounters documented during this one month clerkship although most have far more. Additionally, there will be 14 required diagnoses that should be logged into OASIS (listed below). Please write the specific disease under the notes section within OASIS (i.e., for cardiovascular, note “hypertension”). As previously stated, a note is required for each of these 14 required encounters. Aquifer cases may be used in the event that a specific diagnosis is not encountered in the clinic.

1. Preventive Health Services / Periodic Health Examination
2. Chronic Disease Management
3. Counseling for Behavioral Change (i.e., Diet, Exercise, or Tobacco cessation)
4. Cardiovascular
5. Pulmonary
6. Endocrinology
7. Musculoskeletal
8. Ear, Nose, and Throat
9. Infectious Disease
10. Women’s Health
11. Mental Health
12. Gastroenterology
13. Genitourinary / Renal
14. Hematology / Oncology

### Grading Policies

<table>
<thead>
<tr>
<th>Course Grading Scale</th>
<th>Final course grades are determined using the allocation of credit for each assignment and exam listed within Course Content. The grading scale for the course</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Timeframe for Reporting Grades</strong></td>
<td>4 weeks from the last day of the clerkship experience, 2 week extension may be granted by OIME</td>
</tr>
<tr>
<td><strong>Assignment Submission</strong></td>
<td>All clerkship materials must be submitted by the last day of the clerkship (day of the NBME examination by 5pm) unless exception granted by clerkship leadership</td>
</tr>
<tr>
<td><strong>Late Assignments</strong></td>
<td>Any materials submitted after the deadline above will potentially affect professionalism and thus the final grade on the clerkship.</td>
</tr>
<tr>
<td><strong>Late Exams</strong></td>
<td>NBME shelf examination must be taken at the time scheduled by OIME unless otherwise approved – <a href="#">Link to NBME absence policy</a></td>
</tr>
<tr>
<td><strong>Attendance Expectations</strong></td>
<td>Link to <a href="#">Formal Attendance Policy</a></td>
</tr>
<tr>
<td><strong>Participation Expectations</strong></td>
<td>See Above</td>
</tr>
</tbody>
</table>

Place updated assessment table here

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**COURSE COMMUNICATION**

| Course Communication | All correspondence regarding the course should be sent to both the Clerkship Director (or designee) and the Clerkship Coordinator listed above. All requests for time off should go through the survey gizmo link [here](#). |
| **Timeframe for faculty response to students** | - Current clerkship Issues: 48 hours  
- Time off requests: 2 weeks  
- Grade reconsideration requests: 4 weeks |
| **Expectations for professional behavior/Netiquette** | See [RMC Professionalism policy in Common Core Syllabus](#)  
All students are expected to:  
65. Show respect for other students and the instructors in the class.  
66. Be sensitive to the fact that there will be cultural and linguistic backgrounds, as well as different political and religious beliefs.  
67. Express differences of opinion in a polite and rational way.  
68. Maintain an environment of constructive criticism when commenting on the work of other students or the course.  
69. Respect the privacy of other students.  
70. Use good grammar and spelling.  
71. Use salutations and titles in your messages. Formal titles (Dear Dr. Smith, Dear Professor, Dear Classmates) are always acceptable. It is also appropriate to end you note with a closing, (Thank you, Sincerely, Respectfully) when emailing students or faculty.  
72. Be sure to say please and thank you.  
73. Send only one message about a topic and wait for an answer. |
STRATEGIES FOR SUCCESS

How to Excel in Clinical Clerkships

- Practitioner
  - Take ownership of your patients. Know their pertinent data and lab and test results. Try to formulate a plan for their care.
  - Become an active member of your team.
  - Read specifically about your cases on a daily basis and ask informed questions about your patients during rounds.
  - Be available and enthusiastic when on call.
  - Practice your presentations so they are fluent, concise, complete, and dynamic.

- Medical Knowledge
  - Carry some reading material with you for “down time.”

- Professional
  - Manage stress by eating sensibly, exercising, getting sleep in your off hours, and confiding in family and friends.
  - Know your responsibilities, regardless of the setting.
  - Keep track of all of your patients, your course requirements
  - Turn things in on time!

- Scholar
  - Seek learning opportunities from every patient encounter.
  - Recognize that you are responsible for your own learning: the more you put into the experience, the more you will get out of it.
  - Display intellectual curiosity.
  - Use information-seeking skills to address any knowledge deficiencies.
  - Develop a reading plan (e.g., if a text has 24 chapters, try to read three chapters a week)

- Advocate
  - Identify opportunities to identify patient healthcare barriers and pursue options to help them overcome.
  - Evaluate the health care system and pay attention to societal factors that play a role in patient health

- Leader

- Collaborator
  - Take the time to learn from EVERYONE on the health care team: nurses, physical therapists, patient techs – they often have the most relevant and up to date patient information.

RESOURCES and SUPPORT

| Resources for Technology | If you need help with Blackboard, call the Help line at (312) 563-CLAS, option 2. The Blackboard help line is available 24/7/365. |
If you need help with access to your Rush computer account or software, call the Rush University Help desk at (312) 563-CLAS, option 4.

The Rush University Counseling Center offers free, confidential services to all currently enrolled Rush University students. The Center is staffed by clinical psychologists who can help you address a wide range of issues. For more information regarding the Center and its services call (312) 942-3687.

All students, including distance learners, have access to the Student Assistance Program at 1-800-292-2780.

The CAE provides holistic, targeted learning support for Rush University students. The services provided range from support in science, statistics, and writing to academic coaching.

All students, including distance learners, have access to the CAE Monday thru Thursday 9 a.m. to 4:00 p.m. Additional hours by appointment only.

The CAE is located in the Armour Academic Center, Room 588, Rush Library. Phone: (312) 563-1800. General inquiries: CAE@rush.edu

Students are responsible for following all Rush University policies and the policies that are specific to their college of admittance. Please refer to the Rush University Student Handbook and the relevant College Student Handbooks for more information. Selected policies are described below.

Rush University is committed to attracting and educating students who will help to make the health care profession representative of the national population, including individuals with disabilities. Part of Rush University’s mission is to promote diversity among its student population and to provide equal access to its facilities, programs, services and learning opportunities. In keeping with this mission, the University encourages students with disabilities to engage the Office of Student Accessibility Services as soon as they begin their program.

Students should contact Marie Ferro-Lusk, Manager, Office of Student Accessibility Services at Rush University, to engage in a confidential conversation about the process for requesting reasonable accommodations in the classroom and clinical settings. Accommodations are not provided retroactively at the University. Additional information can be found online at the Office of Student Accessibility website or by contacting the Office of Student Accessibility Services. In order to respect students’ privacy and ensure a thoughtful interactive discussion, students should not make accommodation requests to individual faculty members, lecturers, or course directors; instead, please contact:

Marie Ferro-Lusk, MBA, MSW, LSW
Director, Office of Student Accessibility Services
Armour Academic Center Suite 901
Phone: (312) 942-5237
Fax: (312) 942-2778
Email: marie_lusk@rush.edu
| **Honor Code and Academic Honesty** | Students are expected to abide by the Rush Honor Code relating to academic integrity throughout all aspects of this course, including all assignments and exams. As trusted health care professionals, we take the issue of academic integrity very seriously and expect that you will adhere to the highest standards of integrity at all times.

Rush University students and faculty belong to an academic community with high scholarly standards. As essential as academic honesty is to the relationship of trust fundamental to the educational process, academic dishonesty violates one of the most basic ethical principles of an academic community, and will result in sanctions imposed under the University’s disciplinary system. A partial list of academically dishonest behaviors that would subject a student to disciplinary action includes:

- **Cheating**: Using unauthorized material or unauthorized help from another person in any work submitted for academic credit.
- **Fabrication**: Inventing information or citations in an academic or clinical exercise.
- **Facilitating Academic Dishonesty**: Providing unauthorized material or information to another person.
- **Plagiarism**: Submitting the work of another person or persons, as one’s own without acknowledging the correct source.
- **Unauthorized Examination Behavior**: Conversing with another person, passing or receiving material to/from another person or temporarily leaving an examination site to visit an unauthorized site.

| **Intellectual Properties Protection** | All materials contained within this syllabus, course and course materials, whether in written form or presented through video or audio transmission, represent the intellectual property of faculty or Rush University Medical Center. Students are prohibited from sharing or transmitting content or materials through any media without express consent or permission of the copyright holder.

| **Prohibition against Harassment, Discrimination, and Sexual Misconduct Policy** | Click on link below to access the RUMC policy “Prohibition against Harassment, Discrimination, and Sexual Misconduct.” The procedure for reporting harassment, discrimination, and/or sexual misconduct is found on p. 3.