The following information provides an overview for the *Pediatric Intensive Care Sub-internship Course* Curriculum. All course information can also be found on the CANVAS learning management system for this course, including learning materials and requirements.

**Pediatric Intensive Care Sub-Internship Faculty & Staff Contact Information**

**Director**  
Angela Czaja, MD MSc  
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**Co-Director**  
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**Course Staff Contact**  
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**Course Coordinator**  
Michael Baca  
Phone: 720-777-4804; Email: [Michael.Baca@childrenscolorado.org](mailto:Michael.Baca@childrenscolorado.org)

**Training Site**  
Children’s Hospital Colorado  
13121 E. 16th Ave (Pediatric Intensive Care Unit – 3rd floor)
Disclaimer:

This handbook/syllabus does not constitute a contract, either expressed or implied, with the University of Colorado School of Medicine and the University reserves the right at any time to change, delete or add to any of the provisions at its sole discretion. Furthermore, the provisions of this document are designed by the University to serve as guidelines rather than absolute rules, and exceptions may be made on the basis of particular circumstances.
Welcome

Welcome to the online portal for your Pediatric Intensive Care Sub-Internship course. This inpatient clinical rotation is designed for medical students who are planning a residency in Pediatrics and to prepare him/her for internship. There is one distinct clinical site for this Sub-Internship, the Pediatric Intensive Care Unit (PICU) within the Children's Hospital Colorado (CHCO).

If you have questions or concerns about the rotation, please feel free to contact Dr. Czaja or Michael Baca (Sub-I Course Coordinator).

Rationale and Expectations

During the Pediatric Intensive Care Sub-internship, students are expected to advance their knowledge base and skills needed to provide medical care for critically ill infants and children within a quaternary care system. Furthermore, they will develop experience working with an inter-disciplinary team including advanced practice practitioners, nurses, respiratory therapists, pharmacists, dieticians, social workers and child life specialists.

It is expected that students will function more independently during their sub-internship than they did during their Phase III training, moving beyond observation and participation into the role of the primary provider. As interns do not rotate through the PICU at the Children’s Hospital of Colorado, students will be work closely with the second and third-year pediatric residents, and pediatric critical care fellows, in the care of their patients. They will be supervised by the pediatric critical care attendings/faculty, who rotate one week at a time. Students will gain independence through the month, such that, by the completion of the rotation, they should be able function at or near the level of a starting intern with respect to the objectives of the rotation.

Course Goals and Objectives

Core Goals

1. Provide patient care that is compassionate, appropriate and effective for the treatment of health problems.
2. Recommend and interpret common diagnostic tests and vital signs.
3. Provide complete, well-organized documentation of a clinical encounter.
4. Provide a complete, well-organized oral presentation of a pediatric patient.
5. Recognize a pediatric patient requiring urgent or emergent care and seek help appropriately.
6. Communicate effectively with patients, families and all members of the health care team.
7. Demonstrate professionalism by showing compassion, integrity and respect for others, responsiveness to patient needs
8. and accountability to course requirements.
9. Demonstrate the medical knowledge necessary to care for common pediatric conditions.
10. Provide high-quality care and advocate for patients within the context of the health care system.
11. Use evidence-based medicine and self-directed learning in the care of patients and education of others.
12. Develop the attitudes and skills necessary for self-reflection that leads to improvement in practice.

Link to Learning objectives: Pediatric Intensive Care Sub internship Goals and Objectives
Course format and timeline

Four weeks in length, this course is designed for students interested in further training in pediatrics, and for those interested in acquiring additional knowledge and skills in caring for critically ill children.

Attendance Policy (Required)


Recommended Resources

- Children’s Hospital Colorado Clinical and Research Library
- University of Colorado School of Medicine Health Sciences Library
- Up-to-date (online at My Children’s Colorado)
- PubMed (Online at My Children’s Colorado)
- Current Diagnosis and Treatment Pediatrics; section on critical care
- Rogers’ Handbook of Pediatric Intensive Care

Evaluations and Grading

Completion of the course and faculty/resident evaluations is vital to the ongoing improvement of the sub-internship. We take your suggestions for improvement very seriously. Furthermore, faculty and residents truly value your input on how to improve their teaching skills. Please be constructive in your evaluations. Faculty and residents receive a composite report of their evaluations annually and only if they receive 3 or more evaluations to maintain anonymity of students. **Note: all course evaluations must be completed within our online evaluation system, New Innovations, to receive your final grade for the Sub-Internship.**

All clinical evaluations are completed in New Innovations. Below are the instructions for access evaluations through this software.

- Here is the link to New Innovations: https://www.new-innov.com/login/ (links to an external site)
- The “Institution Login” should be already filled in as “CUGME” (all caps).
- Enter your username and password, which are both the same, unless you have logged in before and changed your password. It should be your first initial and last name (all lowercase). For example, Nancy Drew would be “ndrew” in both fields.
- Once you log in you will have the option to change your user name and/or your password by clicking on the “CHANGE PASSWORD” link on the menu bar
Overview of Grading
We follow the University of Colorado SOM Advanced Studies Elective Grading and Remediation Policy. Students are required to have at least 3 clinical evaluation forms completed, one of which must be completed by an attending physician. Students provide a list of evaluators to the Sub-Internship Coordinator who will create the evaluations in our electronic evaluation system, New Innovations.

Sub-Internship Withdrawal
The following procedure applies to both UCD SOM students and externs. Please note an extern’s home school has the right to change the grade.

- A student may unilaterally withdraw from a sub-internship when not eligible to drop an elective course by 5:00 PM on the seventh calendar day of the elective and receive a grade of Withdraw (W).
- After 5:00 PM on the seventh calendar day and prior to 5:00 PM on the last calendar day of the sub-internship, prior approval is required from the Director of the sub-internship before a student may withdraw. Approval or disapproval of the withdrawal is at the Sub-Internship Director’s discretion; the Sub-Internship Director will confer with the Sub-Internship Committee Chair prior to issuing the final decision.
  - The Sub-Internship Director may present the student with one or more of the following grade options:
    - Withdraw (W)
    - Incomplete (IP)
    - Another appropriate grade based on the student’s performance during the completed portion of the sub-internship, including Fail (F).
  - If there are extenuating circumstances, the Sub-Internship Director and Sub Internship Committee Chair may decide to refer the issue to the Sub-Internship Committee; this option will delay the final decision and affect the student. See section I.B.1 for grading options
- A student who leaves a sub-internship after seven days and fails to contact the Sub Internship Director will receive a grade of Fail (F).
- A student may not withdraw from a sub-internship after 5:00 PM on the last calendar day of the sub-internship.

The final grade is determined by the average of the clinical evaluations. Students must also successfully complete all of the project work by the final day of the rotation to pass the course.

Ultimately, the Sub-I Course Director reserves the right to assign the final grade (Honors, High Pass, Pass, or Fail) based on all the information available to him/her. There is no limitation on the number of honors assigned for the sub-internship.
Security, Student Safety, and Disaster Preparedness

Institutional emergency and disaster preparedness policies and plan are outlined in the “Emergency-Preparedness Quick-Reference Guide” for the Anschutz Medical Campus. The link is published in the Clinical Block Syllabus, posted on Canvas http://ucdenver.canvas.com, and located next to emergency phones (e.g., ED1 and 2) as well as many of the student lounge areas, small group rooms, and lecture halls. Colorado Springs Branch students located have similar policies and procedures provided by the branch.

Medical Student Policies and Procedures Manual “White Book” (http://www.ucdenver.edu/academics/colleges/medicalschool/education/studentaffairs/studentresources/Documents/StudentHandbook.pdf) publishes emergency information (section 4.1), “In an emergency, both the Office of Student Life (303-724-6407) and the Registrar’s Office (303-724-8053) will make reasonable efforts to contact a student or a student’s designated emergency contact.”

Emergency information is also found on the Student Life web site: http://www.ucdenver.edu/academics/colleges/medicalschool/education/studentaffairs/emergencies/Pages/Emergencies.aspx

Security, student safety, and disaster preparedness as well as relevant contact information for all core clinical sites will be provided to students at individual clerkship orientations and on the Canvas Phase III course location.

Hazard Exposure/Needle stick

Posted on Canvas for Pediatric Intensive Care Sub-Internship Course as well as delineated below.

At ALL clinical sites (exceptions below), if you experience a needle stick, sharp injury, blood/other body fluid exposure or any other hazardous exposure, immediately follow these steps:

1. Wash needlesticks/cuts with soap and water
2. Flush splashes to the nose, mouth, or skin with water
3. Irrigate eyes with clean water, saline, or sterile irrigants
4. Report the incident to your supervisor
5. Go to the nearest Emergency Room
6. Questions: Call UCH ID Clinic 720-848-0191

Exceptions:

- **University of Colorado Hospital**, 8-4pm, Monday-Friday, go to the Infectious Disease Clinic, 7th Floor. Phone: 720-848-0191. Use Emergency Room after hours.
- **Denver Health Medical Center**, 8-3:30pm, Monday-Friday, go to Occupational Health and Safety Center, 6th and Bannock, 4th floor. Phone: 303-436-7155. Use Emergency Room after hours.
- **Children’s Hospital of Colorado**, 7-4:30pm, Monday-Friday, go to Occupational Health Services, B260. Phone: 720-777-6577. Use Emergency Room after hours.
- **Veteran’s Affairs**, 8-4pm, Monday-Friday, go to Occupational Health 1055 Clermont St. Phone: 720-777-2330. Use Emergency Room after hours.
- **Memorial Hospital Colorado Springs**, 7:30-5pm, Monday-Friday, go to Occupational Health 175 S. Union Blvd STe. 315. Phone: 719-365-6840. Use Emergency Room after hours.
Next Steps:

1. The University of Colorado provides workers’ compensation coverage for students who have a needlestick, sharps injury, blood/other body fluid exposure or any other hazardous exposure.
2. University Risk Management is responsible for payment. Send bills to: University Risk Management, 1800 Grant Street, Ste. 700 Denver, CO 80203.
3. File a claim within 4 days with University Risk Management at www.cu.edu/risk/incident-procedure.
4. For follow-up on exposure, go to one of the Designated Medical Providers listed online.

Duty Hour Requirements

The CUSOM has developed a medical student “duty hours” policy based on the policy requirements for second year residents (e.g., PGY-2, R-2). The CUSOM duty hour policy for medical students applies to all clinical sites providing education to medical students. Students should contact the director when they are approaching duty hour limits, and discuss with the director about how to proceed including possible schedule adjustment at the clinical site.

- Students will not work more than 80 hours per week when averaged over four weeks.
- Students will have a minimum of one day in seven off, when averaged over four weeks.
- Students will not work more than 24 consecutive hours of scheduled participation during one period of time and no more than 4 additional hours to accomplish an effective transition of patient care.
- Students should have 8 hours free of duty between work shifts.
- After a 24-hour shift, students should have 14 hours free of duty.
- No more than every 3rd night on call

Duty hour activities include patient care and all required educational activities. Studying, reading and academic preparation do not count towards the work hour maximums. Travel time to rotations does not count as work hours.

Professionalism – Student Expectations

Academic Honesty Statement

Students are expected to adhere to the Honor Code of the University of Colorado School of Medicine which states that students must not lie, cheat, steal, take unfair advantage of others, nor tolerate students who engage in these behaviors. Please check the website for information on the Medical Student Honor Code. http://www.ucdenver.edu/academics/colleges/medicalschool/education/studentaffairs/AcademicLife/HonorCouncil/Pages/default.aspx

Students are also expected to:

- Contact the appropriate block faculty and student life for all voluntary and involuntary absences.
- Check email and Canvas regularly for communication about block activities and updates. Respond within 24 hours to all block emails requiring individual student response.
- Attend all block conferences and required events and arrive on time to these events.
Complete all required coursework and evaluation.
Use smart phones and electronic tables with discretion
Wear professional dress, in accordance with Children's Hospital Colorado policy.

Pediatric Standards for Professionals
A professional consistently transmits respect for patients/parents by his/her performance, behavior, attitude and appearance.

- Respect for privacy and confidentiality.
  - Knock on door before entering (mother’s) room.
  - Check with nurse if this is a good time to examine the patient.
  - Do not discuss patient information in a public area; including elevators, and cafeterias.
  - Keep noise levels low when patients are sleeping.
  - Patient confidentiality includes following HIPAA rules regarding appropriate accessing of patient files, including electronic files.

- Respect for self-autonomy and the right to be involved in care decisions.
  - All professionals introduce themselves to patient’s families and explain their role in the patient’s care.
  - All professionals wear name tags clearly identifying their names and roles.
  - Time is taken to assure family understanding, and informed consent, of medical decisions and progress.
  - Once a healing relationship is initiated a professional never abandons a patient.
  - A professional assures continuity of care by clearly documenting who will provide care after a patient is discharged from a hospital, and informing the patient of how that caregiver can be reached.
  - A professional responds promptly to phone messages and pages.
  - A professional is responsible for providing reliable coverage through colleagues when he/she is not available.

- Present a professional appearance.
  - All professionals shall comply with acceptable standards of dress as defined by the institutions in which they work.

- A professional consistently transmits respect for peers and co-workers.
  - Respect is demonstrated by effective communication.
    - Primary care providers will be informed of their patient’s admission, the hospital course, and discharge plans.
    - Consulting physicians will be given all data pertinent to providing a consultation.
    - Medical records will be kept legible and up to date; including dictating or electronically/writing discharge summaries within approved guidelines.
    - All non-medical professionals who are part of the care team will be kept informed of patient plans and progress.
    - Continuing verbal and written communication will be given to referring physicians.
    - By understanding a referring physician’s needs and concerns about their patients.
  - Respect is demonstrated for diversity of opinion, gender, and ethnicity.
    - The work environment must be free of harassment of any sort.
    - The opinions of all professionals involved in the care of patients must be respected.
A professional is responsible for his/her own education.
  - One must be a motivated self-directed learner
  - We must recognize the limits of our knowledge or skills and ask for help when appropriate.

**Reporting Issues of Professionalism of Others:**

The Office of Professionalism exists to provide faculty, residents, fellows and students a resource on campus to obtain a fair and equitable treatment for all matters. Under appropriate circumstances, the office can serve as an advocate for fair and equitable treatment for faculty, residents, fellows, and students and can facilitate safe reporting of mistreatment or abuse.

The Office is available to help faculty, residents, fellows, and students with all issues and concerns and provides consultations, short-term coaching, counseling, referrals, alternative dispute resolution and facilitation. The Office can also assist faculty, students, and staff members in preparation for various meetings and conversations.

The services of the Office of Professionalism are provided free of charge.

Contact the office by emailing Barry H. Rumack, MD at barry.rumack@ucdenver.edu or Josette Harris at Josette.harris@ucdenver.edu. For faster response, (no confidential information please) call 303-724-7854. Offsite and onsite visits are by appointment only. Building 500, 8th floor, room 8000C.

**Mistreatment**

If a student feels that he or she has been subject to mistreatment in the learning or clinical environment, there are a variety of options for reporting. We recognize that students may differ in how they want to address this issue, and we seek to provide a wide array of reporting options. Please check the website for information and reporting in regards to mistreatment vs. suboptimal learning. [http://www.ucdenver.edu/academics/colleges/medicalschool/facultyAffairs/Professionalism/Pages/DefinitionsExamples.aspx](http://www.ucdenver.edu/academics/colleges/medicalschool/facultyAffairs/Professionalism/Pages/DefinitionsExamples.aspx)

**Course Preparation Communication and responsibilities**

Drop/Add email notification is sent to programs 30 days prior to start of upcoming rotation
- Email notification will include all students currently registered for the entire academic year
- Any student wishing to drop after the 30-day notification will need course director approval
- CU students will begin rotations on May 8, 2017
- Visiting student rotations will begin July 3, 2017
- 2 week courses will not start until January of 2018

3 weeks prior to start of a current rotation, the student, the course director and coordinator are provided with a course preparation email
- Email will include course syllabus, hospital handbook and EMR affidavit
1st time rotators will need to complete EPIC modules and attend a practicum
Program coordinator needs to make sure rotation schedule is created in advance
Program coordinator should reach out to student to assist with excused absences
Holidays/Weekends are not guaranteed time off
Students are entitled to 2 days of excused absences.
Additional days need to be approved by Director of Medical Student Education, Dr. Jennifer Soep.
(jennifer.soep@childrenscolorado.org)

1 week prior to rotation, ALL Peds students will receive an orientation email with directions and parking instructions
At this point all schedules are confirmed and no student can be added to a roster without approval from course director and CHCO Training Coordinator, Andrea Reed
(andrea.reed@childrenscolorado.org)

On the 1st day of the rotation all students will attend a hospital orientation at 7:00 a.m.
1st time rotators will receive a badge, parking access and will need to attend EPIC practicum
Returning rotators are free to join their team at 7:30 a.m. (orientation is optional)
After EPIC practicum students will be introduced to program coordinator to receive instructions at approximately 10:30 a.m.
Student is introduced to team and begins rotation

Communicate the preferred methods of communication during your clerkship (email, Canvas, phone, etc.) including the 24-hour

Course Calendar: 2017-2018 4th Year Student Academic Calendar.pdf

Attire
Dress code guidelines are intended to assist staff members in meeting hospital standards. Guidelines follow business casual dress, with the primary focus on clean, neat, and professional appearance. Departments may establish additional dress code standards and procedures based on specific needs.
Please review the following:
- Clothing must be clean, unwrinkled, stain-free, properly fitting, and in good repair.
- Clothing must have a modest neckline.
- Skirt and dress length must be at or below the knee.
- Denim skirts and dresses (knee length) may be worn; overall appearance must be professional.
- Tailored capri pants (calf length) may be worn.
- Scrubs may be required in designated/sterile areas. If required, hospital furnished, freshly laundered scrubs must be put on upon arrival at work and may not be worn to/from the hospital.
- Uniforms may be required in designated areas. Uniforms must be maintained in good condition, clean, and worn as recommended by department manager.
- Lab coats and ties must be laundered regularly.
If clothing becomes contaminated with blood or other infectious material, remove clothing, place in a blue plastic linen bag, change into scrubs and take contaminated clothing to Materials Management. (See IC-001-A Bloodborne Pathogen Exposure Control Plan).

Assignments and Responsibilities

- All students will complete a Direct Communication Observation. The purpose of this assignment is to give you the opportunity to be observed performing advanced communication skills related to high value, cost-conscious medicine.

- All students will complete a Quality Improvement (QI) Project. This purpose of this assignment is to introduce you to a QI tool and develop a better understanding for how to provide higher value, high-quality medical care. By creating a Fishbone diagram, you will learn more about how to identify problems within the system, optimize healthcare delivery, and ultimately achieve the Institute for Healthcare Improvement’s (IHI) Triple Aim:
  1. Improving the patient experience of care (including quality and satisfaction);
  2. Improving the health of populations; and
  3. Reducing the per capita cost of health care.

- All students will complete the other assignments of the High Value, Cost-Conscious Medicine Curriculum (readings, online modules, reflective writing piece, and small group session).

- All students must have a Midpoint Feedback Session with an Attending by the end of week two. You should complete the midpoint feedback form with your supervisor and submit to the Phase IV Sub-I Coordinator (Michael Baca) by week 3 of your rotation.

- All students must complete faculty/fellow/resident and end-of-course evaluations.

Expectations for the Rotation

Sub-interns in the PICU are expected to take primary responsibility for 1-3 critically ill patients, working closely with other team members including pediatric residents, pediatric critical care fellows, PICU advanced practice practitioners and attendings. They should perform all tasks required to provide high-quality family-centered care, such as pre-rounding, presenting patients on rounds, following up on test results, communicating with other team members, subspecialists and family members, and ensuring adequate documentation within the electronic medical record system.

Given the nature of critical care, it is expected that the student discuss decision-making with another team member prior to implementation. Throughout the month, the degree of independence and level of responsibility should increase based on the student’s performance and acquisition of knowledge and skills. Students should attend all educational sessions within the PICU, including case conferences, fellow and resident didactic conferences. They are also welcome and encouraged to attend departmental
Sign-out and Rounds
It is expected that students will arrive at the hospital early enough in the morning to obtain overnight sign-out and to pre-round (gathering of data, examining the patient, speaking with bedside nursing, etc) on your patients prior to work rounds. The student should prepare to present their patients on rounds using the PICU rounding template (see subfolder within Canvas), with a goal of being thorough but concise. PICU rounds are multi-disciplinary, with residents, fellows, attendings, nurses, pharmacists, dieticians and respiratory therapists. They are also family-centered rounds, in that parents and families are invited to participate.

Overnight Call
It is expected that you will take overnight call during the rotation (approximately every 4-5 nights), with at least one weekend built in. The specific schedule should be discussed with the pediatric critical care fellow at the beginning of the rotation, to optimize the student’s learning experience. Planned voluntary absences from your sub-internship activity are generally not permitted, but unique circumstances may be discussed with your attending physician and the sub-internship Course Director. Generally speaking, you should not sign up for your sub-internship if you have other serious commitments to attend to during the four-week block.

Feedback
You are responsible for seeking feedback from your attendings, including suggestions about how to improve your performance. If you are having trouble getting adequate feedback on your performance, please contact the Course Director to help you.

Absences
If you have an illness or emergency, please contact your attending and/or resident as well as the sub-internship Course Coordinator (Mike Baca) prior to missing any time. He will notify the appropriate sub-internship directors.

Holidays
Days off are dependent on team call schedules. Sub-interns should not assume they will have all University holidays off. Please speak with your attending and supervising resident or fellow prior to the day in question.
Duty Hour Requirements

The CUSOM has developed a medical student “duty hours” policy based on the policy requirements for second year residents (e.g., PGY-2, R-2). The CUSOM duty hour policy for medical students applies to all clinical sites providing education to medical students.

Duty hour activities include patient care and all required educational activities. Studying, reading and academic preparation do not count towards the work hour maximums. Travel time to rotations does not count as work hours. The duty hour policy specifies that:

- Students will not work more than 80 hours per week when averaged over four
- Students will have a minimum of one day in seven off, when averaged over four weeks.
- Students will not work more than 24 consecutive hours of scheduled participation during one period of time and no more than 4 additional hours to accomplish an effective transition of patient care.
- Students should have 8 hours free of duty between work shifts.
- After a 24-hour shift, students should have 14 hours free of duty.
- No more than every 3rd night on call

Students should contact the director when they are approaching duty hour limits, and discuss with the director about how to proceed including possible schedule adjustment at the clinical site.