Integrated Longitudinal Medicine Clerkship
Course Goals

**Goals**

1. Develop the knowledge attitude and skills appropriate to care for adults who present with symptoms or problems commonly seen in the community primary care setting as well as the community hospital setting.

2. Develop a longitudinal understanding of common disease processes from onset to resolution by following patients across settings i.e. clinic, hospital, nursing home, etc.

3. Develop an understanding of common challenges and pitfalls occurring during transitions in care.

4. Develop an appreciation of the importance of team-based care in chronic disease management as well as the value of the Patient Centered Medical Home.

5. Develop the knowledge and skills necessary to practice an evidence-based approach to medical care.

6. Incorporate knowledge of how community/culture/and social context affect health and illness and use that knowledge in the assessment and planning of care for individuals and populations.

7. Identify recommended preventive services and health promotion opportunities for different groups of patients at risk.

8. Develop professional attributes and lifelong learning skills.

9. Communicate effectively both verbally and in writing with interprofessional team members in the primary care setting.

10. Develop skills and attitudes necessary to communicate and collaborate with patients and families in shared decision-making about diagnoses and long-term health care management.

11. Develop the knowledge, skills, and attitudes necessary to incorporate the concept of value into medical care decisions.
Clinical Longitudinal Medicine Clerkship

Clinical Learning Objectives

Clinical

Medical Knowledge for Practice

1. Use guidelines to identify recommended age-appropriate preventive services.

Patient Care

1. Gather a comprehensive or focused history and physical exam on adult patients in the primary care outpatient setting.

2. Gather a comprehensive or focused history and physical exam on adult patients in the inpatient community hospital setting.

3. Develop and prioritize a list of initial diagnostic hypotheses or differential diagnoses, including "red flags," following an encounter with a primary care patient seen in the office setting.

4. Develop and prioritize a list of initial diagnostic hypotheses or differential diagnoses following an encounter with a primary care patient seen in the inpatient community hospital setting.

5. Develop initial and long-term diagnostic and therapeutic management plans appropriate for primary care patients.

6. Order appropriate diagnostic and screening tests for adult patients in an inpatient community hospital.

7. Identify common normal and abnormal intraoral lesions.

8. Manage adult patients needing hospital admission from the primary care outpatient setting and follow patients throughout the hospital admission.

9. Coordinate care between care facilities for patients being discharged from the hospital.

10. Identify common dermatologic conditions and skin lesions.
Integrated Longitudinal Medicine Clerkship

Session Learning Objectives

ACP Internal Medicine Essentials Self-Assessments

1. Identify strengths and weaknesses of knowledge of medical problems common to ambulatory care settings.
2. Determine when to seek help or further knowledge in order to develop a self-improvement learning plan.

Advanced Care Planning - HAC Intrasession

1. Discuss expected outcomes in-hospital resuscitation.
2. Describe important steps in effective discussions regarding patient care goals and resuscitation preferences.
3. Identify helpful words and phrases in discussing code status with seriously ill hospitalized patients.

Community Service Learning Project

1. Discuss the provider's link to the community and the opportunities that providers have to influence the health of their communities outside the office walls.

Comparative PowerPoint Presentation - Intrasession

1. Demonstrate how to assess and improve Clinical Care through Working in Teams and Implementing elements of a Patient-Centered Medical Home.

Dermatology & Intraoral Health Module

1. Identify common normal and abnormal intraoral lesions.
2. Identify common dermatologic conditions and skin lesions.

Evidence Based Medicine Project

1. Effectively search evidence based medicine resources to obtain original primary literature.
2. Effectively present relevant primary literature to justify a treatment decision.
H&P
1. Describe and define the signs and symptoms associated with common presenting problems for adult inpatients.
2. Explore care transitions across multiple delivery settings with focus on transitions from hospital to home, nursing home, and rehabilitation settings.
3. Use verbal and non-verbal skills to establish rapport with patients/families.
4. Demonstrate effective communication techniques to obtain relevant historical information and report initial and long-term diagnostic and therapeutic management plans for common clinical conditions in the primary care setting.
5. Identify clinical questions as they arise in patient care activities.

HAC Orientation
1. Describe course objectives and required project work.

ILMC Orientation
1. Describe course objectives and required project work.
2. Communicate evidence for improved health outcomes (including the IOM Triple Aim) through a strong primary care base.
3. Demonstrate how to assess and improve clinical care through working in teams and implementing elements of a Patient-Centered Medical Home.
4. Use point of care tools to suggest age appropriate preventive services.
5. Describe elements of Chronic Disease Management.
6. Use the Meyers Briggs or FIRO-B indicators to assist you in interprofessional collaboration.

Interprofessional Collaboration Exercise
1. Use the Meyers Briggs or FIRO-B indicators to assist you in interprofessional collaboration.

Non-Pain Symptom Management - HAC Intrasession
1. Discuss the basic approach to symptom management.
2. List 3 non-pharmacologic management techniques for each symptom.
3. Describe the first line pharmacologic management for each symptom.

Palliative Care Module
1. Define palliative care.
2. Describe the similarities and differences between palliative care and hospice care.
3. Recognize the components of integrated care model of modern palliative care.
4. Discuss the goals of palliative care.
5. Describe a patient who is receiving palliative care or hospice.
PCMH Module 1

1. Recognize various PCMH definitions.
2. Identify PCMH origins.
3. Realize PCMH as a primary model of care.
4. Identify PCMH components.
5. Identify the use (or lack of) of PCMH elements in a clinical practice setting.

PCMH Module 2

1. Discuss the definitions of patient-centered care and how to apply to patient care.
2. Identify current health care efforts and gaps supporting patient engagement in patient care and practice improvement.
3. Discuss how to manage patients and families with sensitivity to patients’ beliefs, customs, culture, and community.

PCMH Module 3

1. Discuss the potential effects of introducing teams into a clinic setting.
2. Identify attributes of a functional care team.
3. Discuss "The Five Dysfunctions of a Team."
4. Discuss how small primary care practices can implement change management using a team approach.

PCMH Module 4

1. Describe how a patient registry differs from an electronic health record.
2. Discuss the benefits for patient outcomes with the use of patient registries and population management as part of patient care.
3. Discuss adoption and use of a patient registry in an ambulatory primary care setting.

Preventative Medicine Project

1. Recognize the difference between screening and diagnostic tests.
2. Describe the two requirements of a successful screening program.
3. Consider the trade-offs between benefits and harms of screening.
4. Reflect on the quality of evidence supporting these recommendations.
5. Review USPSTF recommendations for various screening tests.
6. Describe how screening may influence important clinical outcomes (suffering, death).
7. Review typical screening modalities for a given disease.
8. Use point of care tools to suggest age appropriate preventive services.
**TBL 1 - ECG**

1. Apply a systematic approach to interpretation of the 12 lead ECG.
2. Describe the components of the cardiac electrical conduction system, the sequence of its activation, and its representation on a surface ECG.
3. Define normal sinus rhythm.
4. Identify and differentiate normal sinus rhythm, sinus bradycardia and sinus tachycardia.
5. Identify junctional rhythm.
6. Differentiate between premature atrial complexes and premature ventricular complexes.
7. Identify the three types of atrioventricular block.
8. Identify the QRS axis as normal, leftward or rightward.

**TBL 2 - Hyponatremia**

1. Describe the clinical relevance of hyponatremia including potential serious outcomes.
2. Develop and utilize a decision tree to create a differential diagnosis for hyponatremia including pseudohyponatremia and the hypo/eu/hyper-volemic construct.
3. Obtain the costs and interpret diagnostic testing for a patient with hyponatremia.
4. Discuss the diagnosis of SIADH.
5. Estimate the costs of common treatments for hyponatremia.
6. Demonstrate a systematic approach to determining QRS axis on ECG.
7. Identify axis deviation on ECG.
8. Develop a differential diagnosis for axis deviation on ECG.
9. Describe morphology of typical left and right bundle branch blocks.

**TBL 3 - Altered Mental Status**

1. Differentiate between dementia and delirium.
2. Create and utilize a decision tree that includes common causes of delirium including medications, metabolic etiologies, toxins, infection, and CNS etiologies.
3. Conduct a focused history on patients’ who present with altered mental status with particular focus on establishing baseline mental status and timeline of mental decline and evaluation of medication administration history.
4. Identify appropriate laboratory and radiographic studies in the diagnosis of delirium.
5. Prevent delirium in patients at high risk.
6. Describe an approach to evaluation of narrow complex tachycardia on an ECG.
7. Identify and differentiate between sinus tachycardia, atrial fibrillation, atrial flutter, AVNRT, MAT, and ectopic atrial tachycardia.
8. Estimate the costs of evaluation for altered mental status.
9. Estimate the cost of common treatments for altered mental status.
**TBL 4 - Pneumonia**

1. Describe the key historical features and physical exam findings associated with community acquired pneumonia.
2. Obtain the costs and interpret the diagnostic testing need to differentiate between transudative and exudative pleural effusions.
3. Describe an approach to the evaluation of wide complex tachycardia on ECG.
4. Differentiate between ventricular tachycardia and SVT and aberrancy on ECG.
5. Identify ventricular fibrillation on ECG.
6. Create and utilize a decision tree to create a differential diagnosis for hypoxemia.
7. Obtain the costs and interpret diagnostic testing for a patient with hypoxemia.
8. Create and utilize a decision tree to create a differential diagnosis for pleural effusion.
9. Estimate the cost of common treatments for pneumonia.
10. Estimate the cost of common treatments for pleural effusion.

**Transistions in Care Project**

1. Experience caring for patients at the transition in care in which individual and system factors play a role in successful transition.