

# OSU-CHS CLME 9255 Class of 2020 Emergency Medicine Clerkship Syllabus

## Rural Medical Education Contact Information

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Northcentral Coordinator	Alex L. Jones, M.S.	<a href="mailto:alex.l.jones@okstate.edu">alex.l.jones@okstate.edu</a>	918-401-0799	Stillwater	TBA
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Southwest Coordinator	Brenda Brantley	<a href="mailto:brenda.brantley@okstate.edu">brenda.brantley@okstate.edu</a>	918-401-0403	Lawton	1813 W. Gore Blvd.
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Telemedicine Helpdesk	Heather Hagan	<a href="mailto:telemed@okstate.edu">telemed@okstate.edu</a>	918-584-4378	Tulsa	1716 S. Phoenix Ave.

## Office Information

Center for Rural Health Office Hours: Monday-Friday, 8:00 AM to 5:00 PM OSU Holidays Observed. OSU Badge needed for entry.

## Title IX

Information, including confidential and non-confidential reporting options, can be found at <http://1is2manychs.okstate.edu>

## Emergency Medicine Prerequisites

Successful completion of the first four semesters of the prescribed eight semester courses of study (OMS1 and OMSII). Available for Rotations 8 to 14 and 18 to 22. **Enrollment for Rotations 15, 16 or 17 by permission only. If requesting to use required Emergency Medicine to audition at Emergency Medicine Residency site, it must be pre-approved by Center for Rural Health prior to the start of the rotation.**

## Emergency Medicine Course Description

Emergency Medicine is a 4-week clerkship in a large rural hospital Emergency room. Experiences may include, but are not limited to, physician supervised procedures, surgical assistance, labor and delivery, hospital staff and committee meetings, emergency room calls, community and public health functions, health and social events, interprofessional experience, attending lectures or grand rounds, watching videos and reading assignments with limited clinical experience outside of the Emergency Room. This rotation includes long shifts, night shifts, weekend shifts and on call duties. Each site will determine the schedule.

## Housing at Rural Clerkship Sites

At rural sites (Ada, Enid, Lawton, Tahlequah), complimentary housing is provided (for students only). No housing is available in urban sites (Tulsa, Norman and Oklahoma City). Students are expected to live in the community and may be on call as part of the learning experience. Housing varies from site to site. Some sites require pre-rotation paperwork or refundable deposits. More information about the housing at specific sites is available from regional coordinators. Contact regional coordinators as soon as possible if NOT planning to utilize provided housing for any reason. **Contact the housing contact at least 2 weeks prior to arrival for more information.**

## Emergency Medicine Grading: Pass/Fail/Incomplete

Pass	At the discretion of the Course Coordinator:
Requirements	Preceptor's Evaluation of student's performance is complete, acceptable and with no more than one concern. OMM Exam Soft (Examplify) Quiz is complete with a score of 70% or better ALL Course assignments are complete and uploaded to LCMS with a minimum score of 70%. No more than 3 (approved) days missed from the Clerkship and any make-up has been completed. Student's Evaluation of the Site is complete.
Fail	At the discretion of the Course Coordinator: Two or more boxes are checked on Evaluation Failure Criteria ( <b>See Clerkship Handbook</b> ). May be based on documented negative comments from coordinator, site or preceptor. Course assignment grades are below 70%. Unapproved time or excessive time was missed from the rotation and not made-up. Requirements are incomplete 30 days after the end of the rotation and deadline extension was not approved.
Incomplete	At the discretion of the Course Coordinator: Preceptor Evaluation has not been completed. Course assignments have not been completed and/or uploaded to LCMS. Make-up for time missed has <b>not</b> been made-up as instructed by preceptor or course coordinator. Student's Site Evaluation has not been completed.
Grievance or Complaint	Grievance of a rotation, preceptor evaluation or grade for Rural Clinic would start with the Course Coordinator.

## Emergency Medicine Grading: Honors

Honors Criteria and Recommendation Requirements	<p>At the discretion of the Course Coordinator, Honors will be recommended if the following criteria is met. Student...</p> <p>Completed all onboarding requirements in a timely and appropriate manner consistent with the site's requests.</p> <p>Is a self-directed learner</p> <p>Is self-directed, takes initiative.</p> <p>Demonstrated an outstanding grasp of the concept of structure-function interrelationships.</p> <p>Has a superior ability to understand the role of somatic dysfunction in health and disease as it applies to the nervous, circulatory, respiratory and musculoskeletal systems.</p> <p>Demonstrated an exceptional understanding of how to promote health in the patient.</p> <p>Demonstrated a knowledge base superior in both breadth and depth.</p> <p>Rapidly focuses on correct working and differential diagnosis.</p> <p>Accurately interprets any and all diagnostic or lab studies.</p> <p>Has the ability to provide constructive and timely feedback.</p> <p>Responds calmly in all situations.</p> <p>Demonstrates ability to adapt effectively to multiple settings.</p> <p>Is a humble leader, respectfully educating and sharing knowledge with peers and members of the team.</p> <p>Completed and uploaded all assignments to LCMS before the deadline (7 days after the rotation ended).</p> <p>Assignments were complete, accurate, and of the highest quality as determined by the Course Coordinator.</p> <p>Performance Evaluation completed by preceptor had many strengths checked, including Rural Barriers and Rural Resources.</p> <p>Performance Evaluation completed by preceptor contained positive comments or preceptor indicated to Course Coordinator or others that student's performance was exceptional.</p> <p>Stayed in the rural community during the rotation, when rural housing was provided, to gain a better rural perspective and rural cultural experience.</p> <p>Did not miss more than 1 (approved) day from the Clerkship.</p> <p>Responded to all communications in a timely and courteous manner.</p> <p>Received written recommendation from a regional coordinator, a site representative and/or the preceptor.</p>
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## Emergency Medicine Course Objectives

Clinical history taking	Perform a focused or comprehensive medical history, as indicated by presenting a case, in an organized, complete and efficient manner and identifying areas of clinical concern.
Clinical PE skills	Perform either a focused or comprehensive physical examination, as indicated by presenting case, in an efficient, correct and sensitive manner and identifying abnormal findings.
Use of Medical knowledge	Direct use of basic science knowledge and identify the relationships among patients' problems. Display knowledge about drugs (or class of drugs, dependent upon disease state) commonly prescribed for patients.
Differential Dx	Using medical decision-making, construct a differential diagnosis and develop treatment/management strategies for common diseases and conditions seen with an understanding of differentiating factors in rural and urban medical settings. Rapidly focus on correct working and differential diagnosis; accurately interpret any and all diagnostic or lab studies.
Plan	Develop a patient management plan appropriate to the diagnosis and medical decision making. Identify any rural barriers to patient compliance and educate patients/families about most aspects of the plan. Determine appropriate time of patient discharge or release from hospital
Oral Presentation	Case presentation is organized, accurate, complete, concise and includes prioritization and analysis of medical issues and suggestions for management; preceptor can rely on case presentations to contain all relevant material necessary to determine plan of care.
Time management	Chart efficiently and keep up with charting throughout the day, while simultaneously seeing patients and performing other assigned duties. Identify needs in workflow; recognize when a task, such as charting, should be put on hold in order to complete or participate in another activity, such as seeing the next patient.
Practice systems	Demonstrate an understanding of the importance of interdisciplinary teams, consultants, and health care resources for the benefit of the patient.
OMM skill	Consistently perform thorough osteopathic structural exam. Demonstrate ability to make a structural diagnosis and choose a manipulative treatment that is specifically suited for the diagnosis and patient's condition. Demonstrate skill in performing specific osteopathic manipulation. Apply appropriate Osteopathic Principles and Practice for diagnosis and treatment of hospitalized patient.
Clinical MSE	Perform Mental Status Exam as indicated by presenting issue, in an efficient, correct and sensitive manner and be able to identify abnormal findings.

Professional responsibility	Demonstrate ability to self-reflect and set goals; take initiative and attempt to solve problems independently before seeking assistance; be a self-directed learner and use resources available to answer questions before asking for assistance; take primary responsibility for patients and advocate for their needs; anticipate the needs of the team and actively attempt to meet those needs; demonstrate sensitivity and compassion.
Communication and Interpersonal Skills	Demonstrate ability to communicate proper greetings and introductions. Exhibit interpersonal skills with patients and their families to facilitate the communication process between physicians and patients through active listening, empathy and sensitivity, appropriate eye contact, proper closure of interaction, attentiveness and concern, with confidence and respect. Demonstrate ability to communicate complicated or difficult information to patients and families and appropriately respond to their concerns/questions.
Procedure skill	Demonstrate appropriate choice of procedure with clear insight into benefits, risks, and alternative options and understand the important steps with reasonable progression of the procedure.
Rural Emphasis	Demonstrate an understanding of the rural Osteopathic family physician's roles as the physician of first contact and a community leader. Identify barriers rural patients face that affect compliance and medical decision making, and explore resources available in the rural community that help to overcome rural specific barriers.

## Emergency Medicine Course Requirements and Assignments

Requirements Prior to start of course	Contact regional coordinator, preceptor and facility contact at least 6 weeks prior to the beginning of the rotation to get specific information about housing, onboarding procedure, daily schedule and other pertinent aspects of the rotation. Prior to arrival, follow instructions and complete all site/facility requirements before the deadline. Provide site with a Curriculum Vitae (CV) containing your contact information. Review course information in LCMS.
Emergency Medicine Orientation, Lectures, Videos or Readings	Orientation will be presented by the site on the 1st day for the rotation. <b>You must check into your housing and meet with your preceptor on the first day of the rotation.</b> Watch emails from the site and your Regional Coordinators for more information. <b>Required videos and readings will be offered through ZOOM or LCMS.</b>
Requirements During the Rotation	Work with other health professionals and students from other health related degree programs as part of the learning experience and function collaboratively on health care teams. Attend events, lectures or Grand Rounds, watch videos, participate in department or school events, participate in research, give presentations of regular or special assigned readings at the request of the preceptor, the department, or the school. <b>If there is a delay in reporting or if absent for any reason (or multiple reasons) or if missing a required event, student is required to complete the Exception to the Rotation Form, get the preceptor's signature and submit to the Regional Coordinator. This includes illnesses, auditions/interviews, school events. Makeup may be required.</b>
Required Reading See Reading Chart	Read <i>Tintinalli's Emergency Medicine Manual</i> 8th Edition by Rita K. Cydulka, Michael T. Fitch, Scott A. Joing, Vincent J. Wang, David M. Cline, O. John Ma. For optional material use <i>Tintinalli's Emergency Medicine: A Comprehensive Study Guide</i> , 8th Edition. Judith E. Tintinalli, J. Stephan Stapczynski, O. John Ma, Donald M. Yealy, Garth D. Meckler, David M. Cline. Available as EBook at OSU-CHS online Medical Library. <b>See suggested reading schedule.</b>
Emergency Medicine Videos	<b>Watch Emergency Medicine Video of your choice.</b> Go to COM Years 3 and 4 Resources in LCMS. Click on LTI Resources and click on Emergency Medicine folder, then chose from any of the topics listed. Complete the Video Evaluation Forms and upload to LCMS.
ACOFP OMT assigned reading and OMT Case	Students are evaluated on their skills, use of OMT, and understanding of OMT Principles. Read <i>The Patient with Otitis Media</i> (Chapter 21) in <i>Somatic Dysfunction in Osteopathic Family Medicine</i> (2nd Ed) Nelson, Kenneth E, et al. LWW, 2014 and the watch the OMT procedure videos, available at the OSU-CHS Medical Library under Clinical Rotation Resources/OMM (bottom of the OMM page). Complete the online ACOFP OMT Exam Soft (Exemplify) assessment quiz. Score 70% or better to Pass. Permission to reset and retake must be pre-approved. Failure to complete the Exam Soft assessment quizzes could result in an incomplete. If you need assistance locating the OMT resources, contact your Regional Coordinator or the OSU-CHS library.
Patient Encounter Tracking Card or LCMS (PET)	Provide <b>Entrustable Professional Activities (EPA)</b> documentation needed for Residency by documenting <b>everything</b> you see and do while on the rotation. Use the Patient Encounter Tracking (PET) Card provided or the Patient Encounter Tracking (PET) System provided in LCMS. Complete with date and level for each procedure and have physician sign card or provide verification of accuracy. Without initials or physician verification, document is considered incomplete. <b>No grade will be issued without physician verification.</b> Report sent to student by email after graduation.
Requirements At end of course	Thank your preceptor and others who volunteered their time and expertise for your educational experience. Ask your preceptor to complete your Performance Evaluation and provide feedback to help you improve for your next rotation. Be sure your Preceptor has a copy of your CV. Complete the Site Evaluation in LCMS. Upload all your assignments to LCMS.

## Student Responsibilities for a Successful Rotation

Appropriate dress is usually scrubs, but please verify with the hospital contact before the start of the rotation. Identify yourself as a non-graduate medical student with College approved identification. Exhibit professionalism and behave in an ethical manner. Demonstrate a desire to exceed expectations. Show interest in learning. Treat everyone with respect. Prepare for and participate in course activities. Turn in assignments on time. Accept and apply constructive feedback and ask for ways to improve. Demonstrate reliability and dependability by arriving prior to the start time. Do not leave early or without preceptor approval.

## **Electives at Rural Sites**

Electives at rural sites are based on availability, must be preapproved by the Center for Rural Health (based on availability), signed by the preceptor in advance of the starting date, and approved by the Department of Clinical Education. Required rotations at rural sites take precedence over elective rotation requests. To be approved, elective rotations must be applied for by submitting a written application for rotation to Clinical Education, no less than thirty days before the first day of the rotation or the length of time in advance that onboarding paperwork is due. Housing at rural sites is based on availability and may not be available for Elective rotations. Approval of rotations, site evaluations and grades for electives are all handled by the Department of Clinical Education.