OSU-CHS CLME 9145 Class of 2020 Rural Clinic Clerkship Syllabus

Rural Medical Education Contact Information									
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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

Fail

Information, including confidential and non-confidential reporting options, can be found at http://lis2manychs.okstate.edu

Rural Clinic Prerequisites

Successful completion of the first four semesters of the prescribed eight semester courses of study (OMS1 and OMSII). Available for Rotation 1 to Rotation 12. Enrollment for Rotation 13 and 14 by special permission only and must be preapproved by Clinical Education and Center for Rural Health. No Rural Clinic rotations are available after Rotation 14.

Rural Clinic Course Description

Rural Clinic is a 4 week clerkship in a rural community with an assigned primary care physician in a clinic setting. Experiences may include, but are not limited to, physician supervised procedures, patient rounds, surgical assistance, labor and delivery, hospital staff and committee meetings, emergency room calls, community and public health functions, house calls, nursing home and hospice visits, sport physicals, health and social events, volunteering in a free clinic setting, interprofessional experience, rural research participation, presenting, attending lectures or grand rounds, watching videos and reading assignments.

Housing at Rural Clerkship Sites

At most rural clinic sites, complimentary housing is provided (for students only) and students are expected to live in the community 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.

Rural Clinic 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 Case is complete with score of 70% or better.

Case Presentation Power Point received a combined 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. At the discretion of the Course Coordinator:

Two or more boxes are checked on Evaluation Failure Criteria (See Clerkship Handbook).

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 **not** 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.

Rural Clinic Grading: Honors

Honors Criteria and Recommendation At the discretion of the Course Coordinator, Honors will be recommended if the following criteria is met.

Student...

Requirements

Completed all onboarding requirements in a timely and appropriate manner consistent with the site's requests.

Is a self-directed learner Is self-directed, takes initiative.

Demonstrated an outstanding grasp of the concept of structure-function interrelationships.

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.

Demonstrated an exceptional understanding of how to promote health in the patient.

Demonstrated a knowledge base superior in both breadth and depth.

Rapidly focuses on correct working and differential diagnosis. Accurately interprets any and all diagnostic or lab studies.

Has the ability to provide constructive and timely feedback.

Responds calmly in all situations.

Demonstrates ability to adapt effectively to multiple settings.

Is a humble leader, respectfully educating and sharing knowledge with peers and members of the team. Completed and uploaded all assignments to LCMS before the deadline (7 days after the rotation ended). Assignments were complete, accurate, and of the highest quality as determined by the Course Coordinator.

Resources.

Performance Evaluation completed by preceptor contained positive comments or preceptor indicated to Course

Performance Evaluation completed by preceptor had many strengths checked, including Rural Barriers and Rural

Coordinator or others that student's performance was exceptional.

Stayed in the rural community during the rotation, when rural housing was provided, to gain a better rural perspective and rural cultural experience.

Did not miss more than 1 (approved) day from the Clerkship.

Responded to all communications in a timely and courteous manner.

Received written recommendation from a regional coordinator, a site representative and/or the preceptor.

Rural Clinic 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

D:00 : 1D

Differential Dx

Plan

Oral Presentation

Time management

Practice systems

OMM skill

Clinical MSE

Professional responsibility

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.

Using medical decision-making, construct a differential diagnosis and develop treatment/management strategies for common diseases and conditions seen in a rural family practice 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.

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.

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.

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.

Demonstrate an understanding of the importance of interdisciplinary teams, consultants, and health care resources for the benefit of the patient.

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.

Perform Mental Status Exam as indicated by presenting issue, in an efficient, correct and sensitive manner and be able

to identify abnormal findings.

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 the non-physician clinicians' training, limitations and responsibilities as they relate to their role in a rural practice. 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.

Rural Clinic Course Requirements and Assignments

Requirements Prior to start of course Contact regional coordinator and preceptor 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, provide site with a Curriculum Vitae (CV) containing your contact information. Review course information in

Rural Clinic Orientation Videos or Readings

Orientation will be presented by ZOOM on the 1st day for the rotation. A ZOOM link will be sent with a choice of Required Didactic Lectures, times to connect: morning or afternoon. You must check into your housing and meet with your preceptor on the first day of the rotation. Watch emails from your Regional Coordinators for more information. Required videos and readings will be offered through ZOOM or LCMS.

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. 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.

Community Experiences

Participate in community experiences during the four week rotation. Appropriate suggestions for possible experiences are provided by the preceptor and the Regional Coordinator and should be discussed and set up during the first week of the rotation. Students should represent OSU-COM by presenting to a local middle school, high school or community organizational group, volunteering at a Free Clinic, or teaching a youth group about a health related topic. For this to count, both the community and the student should benefit from the health and educationally related experience. Student will be required to provide details of community experiences in Section 3 of the Reflection Paper, which should include detailed descriptions, purpose, service provided, event, location, names/titles, dates, times, attendees, # of participants, what was gained by the experience, etc.

ACOFP OMT assigned reading and OMT Case

Students are evaluated on their skills, use of OMT, and understanding of OMT Principles. Read Progress Notes and Coding (Chapter 30 in the 2nd Ed) and The Standardized Medical Record (Chapter 31 in the 2nd Ed) from the Somatic Dysfunction in Osteopathic Family Medicine (2nd Ed) Nelson, Kenneth E, et al. LWW, 2014. Complete one OMM case utilizing OMT on a patient seen during the Rural Clinic rotation. OMM Case should describe the problem, the history, the osteopathic finding, and techniques used to treat. Do not use the patient's name. Be sure your name, date and rotation site are legible and on each page of the OMT Case Forms. The OMM Patient Case will be graded by the Course Coordinator. OMT Case Forms are available in LCMS. The 2-page Form must be uploaded in LCMS as a single document.

or LCMS (PET)

Patient Encounter Tracking Provide Entrustable Professional Activities (EPA) documentation needed for Residency by documenting everything 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. No grade will be issued without physician verification. Report sent to student by email after Demonstrate presentation skills by presenting a patient case using PowerPoint and a video conferencing source, such

Patient Case Presentation Due last week of course Includes Peer Evaluations as ZOOM. Presentation should demonstrate professionalism and be organized, accurate, complete, concise and include prioritization and analysis of medical issues, suggestions for management, all relevant material necessary to determine plan of care, rural barriers, use of rural resources, evidence based medicine and medical literature reference. Patient Case Presentation Rubric and Presentation Tips page available in LCMS.

Clerkship Article Community Experience Summary Experience Reflection

and Picture

Write a two page summary and reflection of the rural experience.

Section 1 should contain your first and last name, rotation dates, location, preceptor's name and information about the preceptor and the clinical site.

Section 2 should contain detailed information about the location and the community and include statistics of interest about the area. Should include reference to provided readings or videos, if applicable.

Section 3 should contain detailed information about the Community Experiences and any unique cultural information about the area.

Section 4 should contain your personal reflection of the rural experience.

Provide at least 1 picture and at the bottom of the article include: "I give OSU-CHS and/or the Center for Rural Health permission to publish my article and/or photos" along with signature and date. Permission/signatures are needed for anyone in the picture. Uploaded to LCMS+ as one document.

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 and ask for letters of recommendation. Complete the Site Evaluation in LCMS. Upload all your assignments to LCMS.

Student Responsibilities for a Successful Rotation

Dress appropriately at all times. 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 Clinic 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 Clinic 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 Clinic 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.