



Graduate Programs—NEW COURSE PROPOSAL

UGPC APPROVAL _____
 UFS APPROVAL _____
 SCNS SUBMITTAL _____
 CONFIRMED _____
 BANNER POSTED _____
 ONLINE _____
 MISC _____

DEPARTMENT NAME: **BMED** | COLLEGE OF: **COLLEGE OF BIOMEDICAL SCIENCE – MEDICAL EDUCATION PROGRAM**

RECOMMENDED COURSE IDENTIFICATION:

PREFIX BMS COURSE NUMBER 6015 LAB CODE (L or C) _____

(TO OBTAIN A COURSE NUMBER, CONTACT ERUDOLPH@FAU.EDU)

COMPLETE COURSE TITLE : **PHYSICIANSHIP SKILLS 1**

EFFECTIVE DATE

(first term course will be offered)

FALL, 2011

CREDITS: **2 HRS.**

TEXTBOOK INFORMATION:

- Bickley, LS and Szilagyi, PG. *Bates' Guide to Physical Examination and History Taking (Eighth Edition)*. Philadelphia, PA: Lippincott Williams & Wilkins; 2003.

GRADING (SELECT ONLY ONE GRADING OPTION): REGULAR PASS/FAIL _____ SATISFACTORY/UNSATISFACTORY _____

COURSE DESCRIPTION, NO MORE THAN 3 LINES: The purpose of the Physicianship Skills 1 courses is to provide students with an understanding of the fundamental principles necessary to becoming informed, reasoned, compassionate, and conscientious physicians. The courses will provide students with further proficiency in history taking and physical examination started during the Introduction to the Medical Profession course

PREREQUISITES W/MINIMUM GRADE: * COREQUISITES: OTHER REGISTRATION CONTROLS (MAJOR, COLLEGE, LEVEL):

PREREQUISITES, COREQUISITES & REGISTRATION CONTROLS SHOWN ABOVE WILL BE ENFORCED FOR ALL COURSE SECTIONS.

*DEFAULT MINIMUM GRADE IS D-.

MINIMUM QUALIFICATIONS NEEDED TO TEACH THIS COURSE : **M.D.**

Other departments, colleges that might be affected by the new course must be consulted. List entities that have been consulted and attach written comments from each.

Gauri Agarwal, M.D
 E-Mail: gagarwal@fau.edu
 Phone: (561) 297-4132

 Faculty Contact, Email, Complete Phone Number

SIGNATURES

SUPPORTING MATERIALS

<p>Approved by:</p> <p>Department Chair: _____</p> <p>College Curriculum Chair: _____</p> <p>College Dean: _____</p> <p>UGPC Chair: _____</p> <p>Dean of the Graduate College: _____</p>	<p>Date:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>Syllabus—must include all details as shown in the UGPC Guidelines.</p> <p>Written Consent—required from all departments affected.</p> <p>Go to: http://graduate.fau.edu/gpc/ to download this form and guidelines to fill out the form.</p>
---	--	---

Email this form and syllabus to diamond@fau.edu and eqirjo@fau.edu one week **before** the University Graduate Programs Committee meeting so that materials may be viewed on the UGPC website by committee members prior to the meeting.



Graduate Programs—NEW COURSE PROPOSAL

UGPC APPROVAL _____
 UFS APPROVAL _____
 SCNS SUBMITTAL _____
 CONFIRMED _____
 BANNER POSTED _____
 ONLINE _____
 MISC _____

DEPARTMENT NAME: BMED | **COLLEGE OF: COLLEGE OF BIOMEDICAL SCIENCE – MEDICAL EDUCATION PROGRAM**

RECOMMENDED COURSE IDENTIFICATION:

PREFIX BMS COURSE NUMBER 6016 LAB CODE (L or C) _____

(TO OBTAIN A COURSE NUMBER, CONTACT ERUDOLPH@FAU.EDU)

COMPLETE COURSE TITLE : PHYSICIANSHIP SKILLS 2

EFFECTIVE DATE

(first term course will be offered)

FALL, 2011

CREDITS: 3 HRS.

TEXTBOOK INFORMATION:

- Bickley, LS and Szilagyi, PG. *Bates' Guide to Physical Examination and History Taking (Eighth Edition)*. Philadelphia, PA: Lippincott Williams & Wilkins; 2003.

GRADING (SELECT ONLY ONE GRADING OPTION): REGULAR X PASS/FAIL _____ SATISFACTORY/UNSATISFACTORY _____

COURSE DESCRIPTION, NO MORE THAN 3 LINES: The purpose of the Physicianship Skills 2 courses is to provide students with an understanding of the fundamental principles necessary to becoming informed, reasoned, compassionate, and conscientious physicians. The courses will provide students with further proficiency in history taking and physical examination started during the Introduction to the Medical Profession course

PREREQUISITES W/MINIMUM GRADE:*

COREQUISITES:

OTHER REGISTRATION CONTROLS (MAJOR, COLLEGE, LEVEL):

PHYSICIANSHIP SKILLS 1

PREREQUISITES, COREQUISITES & REGISTRATION CONTROLS SHOWN ABOVE WILL BE ENFORCED FOR ALL COURSE SECTIONS.

*DEFAULT MINIMUM GRADE IS D-.

MINIMUM QUALIFICATIONS NEEDED TO TEACH THIS COURSE : M.D.

Other departments, colleges that might be affected by the new course must be consulted. List entities that have been consulted and attach written comments from each.

Gauri Agarwal, M.D
 E-Mail: gagarwal@fau.edu
 Phone: (561) 297-4132

 Faculty Contact, Email, Complete Phone Number

SIGNATURES

SUPPORTING MATERIALS

<p>Approved by:</p> <p>Department Chair: _____</p> <p>College Curriculum Chair: _____</p> <p>College Dean: _____</p> <p>UGPC Chair: _____</p> <p>Dean of the Graduate College: _____</p>	<p>Date:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>Syllabus—must include all details as shown in the UGPC Guidelines.</p> <p>Written Consent—required from all departments affected.</p> <p>Go to: http://graduate.fau.edu/gpc/ to download this form and guidelines to fill out the form.</p>
---	--	---

Email this form and syllabus to diamond@fau.edu and eqirjo@fau.edu one week **before** the University Graduate Programs Committee meeting so that materials may be viewed on the UGPC website by committee members prior to the meeting.

FAU Medical Education Program. 2011-2012

Syllabus :

1. **Course title** : Physicianship skills 1 & 2

Course number: BMS 6015 & BMS 6016

Number of credit hours: 2 for PS 1 and 3 for PS 2

Lecture Hours: Tuesday Afternoons, 1:00 PM-4:00 PM, BC-126, unless otherwise specified

Small Group Hours: Tuesday Afternoons, 1:00 PM-4:00 PM, BC-126, unless otherwise specified

Learning Community: Friday afternoons 1PM – 3PM, location as assigned

Other Activity Hours: Time as assigned at: Simulation Center, Mae Volen Center in Boca Raton, Elder visit, Hospice center, Competency weeks

2. Course prerequisites:

Accepted for matriculation in the FAU Medical Sciences program.

3. Course logistics:

a. term: Fall 2011; Spring 2012

b. not an online course

c. Biomedical Science Building room BC-126, anatomy lab, small group PBL rooms, other off site locations, please see section 1 above.

4. Instructor information:

Course Directors:

Gauri Agarwal, M.D.
BC-118
gagarwal@fau.edu
Office: 561-297-4132

Julia Belkowitz, M.D.
BC-226
jbelkowi@fau.edu
Office: 561-297-5013

Julie C. Servoss, M.D., M.P.H.
BC-225
jservoss@fau.edu
Office: 561-297-4133

Course Support:

Ms. Ashia Milligan
IPC Specialist
BC-137
Phone: 561-297-4333
Fax: 561-297-0536
amilliga@fau.edu

Please note: All official student communication regarding the course will be sent via e-mail from the course directors or Ms. Milligan to students at their FAU e-mail address. If students would like to meet with the course directors, they must call the office of the course director they wish to meet with in order to schedule an appointment.

5. TA contact information:

N/A

6. Course description:

Rationale:

The Continuity Medicine Curriculum uses a chronic illness model and an integrated patient care approach to prepare students for medical practice.

The purpose of the Physicianship Skills courses is to provide students with an understanding of the fundamental principles necessary to becoming informed, reasoned, compassionate, and conscientious

physicians. They are to serve as a counterpart to the Integrated Patient Care courses that provide a unique opportunity for direct patient care.

The courses will provide students with further proficiency in history taking and physical examination started during the Introduction to the Medical Profession course. They aim to instill an awareness of the impact of chronic illness on patients and caregivers, and lay the foundation for the ethical and legal framework of patient care. They will also assist students in developing a mastery of the tools needed to explore clinical questions, understanding the necessity of becoming advocates for patients and disease prevention, and exploring the multifaceted barriers to patient care. Specific skills needed to care for distinctive groups of patients such as children, women, and the elderly, as well as patients at the end of life will be introduced. Additional goals are to encourage students to understand the basic tenets of professionalism, develop a cultural awareness and competency, and undertake the practice of medicine without prejudice or bias.

The Learning Community portion is a time for reflection and discussion of recent clinical experiences. It will allow students to continue to practice their ability to answer pertinent clinical questions in a methodical fashion from the medical literature and to explore issues of ethics, cultural competency, and humanitarian medicine.

It is the overarching goal of the Physicianship Skills courses to develop in students an ability to see their dual roles as professionals and healers.

7. Course objectives/student learning outcomes:

Competency Based Objectives:

At the end of the Fundamentals of Biomedical Science courses, medical students will be able to:

Professionalism

- § Demonstrate a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to their peers, patients and faculty
- § Appreciate the importance of a compassionate, non-judgmental attitude with classmates, faculty and staff
- § Understand and respect the need to collaborate with each other to promote learning
- § Apply reflective practice as a strategy to achieve personal and professional growth
- § Apply methods to reduce stress and improve wellness in oneself and others

Interpersonal Skills and Communication

- § Students must be able to demonstrate interpersonal and communication skills that result in effective information exchange and teaming with their peers and faculty
- § Demonstrate the ability to work in professional teams to solve problems.
- § Demonstrate the ability to do self and peer evaluations of performance and knowledge levels
- § Demonstrate skills to learn in a student-centered and adult learning environment

Patient Care

- § Correlate the biomedical science aspect of model diseases to the clinical knowledge acquired in the Integrated Patient Care and Physicianship Skills

Medical Knowledge

- § Understand the basic vocabulary of the biomedical sciences as they relate to structures, processes and diseases
- § Understand the concept of genome organization and expression and its effect on the practice of medicine
- § Describe the roles of various bio-molecules in the major metabolic pathways of cells
- § Correlate basic normal human anatomy with images used by health care professionals

- § Identify the knowledge base and gaps related to the application of course content to clinical disorders
- § Utilize a variety of resources (faculty, textbooks, computers, internet, etc.) to find information about anatomical, histological and developmental issues related to normal structure and clinical problems
- § Understand the interactions between organisms in infectious diseases and the mechanisms of defense against human pathogens
- § Understand the basic pathologic processes as they apply to disease mechanisms

Practice-Based Learning and Improvement

- § Reflect on the importance of dedication to life-long learning and strive for excellence in order to consistently provide optimal performance in class, small group and ultimately in patient care
- § Take charge of their own learning and effectively elicit feedback from faculty and peers in order to optimize learning

Systems-Based Practice

- § N/A

8. Course evaluation method

Examination Policy:

Exam Composition: All examination questions will be multiple-choice. Clinical vignettes will be used for many questions, and images will be incorporated as appropriate. Approximately 2-4 questions per afternoon session will potentially be used. Material from the learning community small group sessions will not be tested on the exams.

Therefore, a question like the following might appear on an exam:

A 32 year-old woman comes to her physician with vague, intermittent abdominal pain that has been present for six months. She has had no fever, vomiting, diarrhea, bloody stools, or weight loss. She has had an extensive evaluation at other physicians' offices and has been seen in the ER for this pain, but no etiology has been found. She has no other significant past medical history. What would be an important next step in her evaluation?

- a) Cardiac stress testing
- b) Colonoscopy
- c) Referral to a psychiatrist
- d) Referral to surgery for exploratory laparotomy
- e) Screening for domestic violence

Exam Administration: All examinations will be administered in the Biomedical Sciences building on the dates and times documented in the examination schedule. A student must sit for all examinations as scheduled. A student must obtain permission for an excused absence from the Course Director(s) and notify the Assistant Dean for Student Affairs prior to the time for sitting for a scheduled examination. In the event of a personal emergency, the course director and the Assistant Dean for Student Affairs must be notified of the absence as soon as possible. Missed examinations will be rescheduled at the discretion of the course director, at a time that does not interfere with other course work. Unexcused absences will result in a grade of zero (0) for the missed examination. Both excused and unexcused examination absences will result in submission of a PIR by the course director(s) (Professionalism incident report, see Medical Student Rights and Responsibilities Handbook).

All absences from examinations should be documented by the course director and will be communicated to the Office of Student Affairs. A record of excused and unexcused absences from examinations will be maintained by the Office of Student Affairs. A pattern of recurrent absences from examinations, whether excused or unexcused, will be reviewed by the class promotions committees and may result in a recommendation up to

and including dismissal from the FAU Medical Education Program. (See the Student Rights and Responsibilities Handbook)

During the exams, students are required to follow the examination protocol presented by the proctors. No specific questions regarding an exam item will be answered during any exam.

Examination Scoring: Scoring will be based solely on the answers recorded by the student on their laptop computer. Miskeying of answers will not be considered in grading a student's examination. Accuracy is the sole responsibility of the student. Grades will be available via Blackboard in a timely fashion.

Viewing the Examination: All exams will be secure. Students will be informed of the time and place where a copy of the exam can be reviewed.

Grading Policy:

Activity	Date	Percentage of Grade
Exam	PS1: December 15 th PS 2: June 1 st	35
Professionalism		35
Assignments		30
Total		100

Students will be assessed using the criteria of consistent attendance, prompt completion and quality of assignments, participation in small group activities and learning communities, as well as performance on an examination.

§ Professionalism (35%)

- Consistent attendance is expected at all lectures, small groups, learning communities, and off site activities. Any unexcused absences will result in a 2 point deduction per absence from the final course grade. **For an absence to be excused, written/ email permission must be granted directly from course directors.** Please see attendance policy below.
- Active participation is expected in all small groups, learning communities, and off site activities. This will be assessed by the faculty facilitators using a evaluation form that assesses students based upon the criteria of knowledge base, attitudes and behavior.

§ Assignments (30%)

- Assignments must be submitted by their due date, and are a component of many of the Physicianship course themes. The assignments include EBM, geriatric, advocacy and palliative care assignments. These will be tracked by the course directors.

§ Examination (35%)

- An examination will be given at the end of each semester to assess understanding of essential course concepts. Material that is tested will be derived from lectures and patient panel discussions. Material from the learning community and small groups will not be tested on the exam.

When a student obtains a “D” or “F” on any examination, a letter is sent to the student asking them to contact the Course director for assistance. The letter is copied to the student’s file.

9. Course grading scale:

A = 93-100; A- = 90-92; B+ = 88-89; B = 83-87; B - = 80-82;
C+ = 78-79; C= 73-77; C- = 70-72; D+ = 68-69; D = 63-67; D- = 60-62; F = 59 and below.

10. Policy on makeup tests, etc.

Current policy for courses: Introduction to the Medical Profession, Integrated Patient Care and Physicianship Skills:

- a) When a student fails any component* of these courses or displays unsatisfactory performance based on preceptor evaluation narrative comments, a letter is sent to the student notifying them and asking them to contact the Course Director(s) for assistance. The letter is copied to the student’s file.
- b) If the student receives a passing grade for a course, but does not pass one component, the student will be asked to meet with the Course Director(s) to discuss any problems the student may have had with the material. A plan of action for improving the student’s performance will be determined. Evidence of successful completion of the remediation must be provided by the Course Director(s) for inclusion in the student file. The student may be discussed at the Promotions Committee meeting.
- c) It is mathematically possible for a student to receive a passing grade for a course, but still not pass in more than one component. In this situation, the student will receive a “Fail” for the course. The student will be discussed at the Promotions Committee meeting.

* Components for these courses include but are not limited to: completion of a set of assignments, attendance, performance in the clinical setting (DoH and Community Preceptor), small-group performance, communication laboratories, and written examinations (in the Introduction to the Medical Profession and Physicianship Skills Courses).

11. Special Course requirements:

Attendance Policy:

The FAU faculty and administration agree that student attendance and participation in all scheduled learning sessions are important to students’ academic and professional progress, and ultimate success as physicians.

Attendance at all activities is mandatory. **For an absence to be excused, a written or email request must be made to the Course Director(s).** Only a Course Director can excuse an absence. No missed work associated with a specific session can be made up without loss of credit for satisfactory completion unless an excused absence has been granted.

Repeated unexcused absences from required curricular activities may result in disciplinary action, up to and including dismissal from the FAU Medical Education Program.

12. Classroom etiquette policy:

Students should be considerate of each other by switching his/her cell phone to vibrate during all teaching activities.

If a telephone call is of an emergency nature and must be answered during class, the student should excuse him/herself from the lecture hall before conversing.

Laptop computer use should be limited to viewing and recording lecture notes rather than checking e-mail, playing or viewing other distracting websites. Students may be asked by faculty to turn off laptops during any session where group participation is required (such as PBL and wrap-up sessions).

13. Disability policy statement:

In compliance with the Americans with Disabilities Act (ADA), students who require special accommodation due to a disability to properly execute coursework must register with the Office for Students with Disabilities (OSD) –in Boca Raton, SU 133 (561-297-3880)—and follow all OSD procedures.

14. Honor code policy:

Students at Florida Atlantic University are expected to maintain the highest ethical standards. Academic dishonesty is considered a serious breach of these ethical standards because it interferes with the University mission to provide a high quality education in which no student enjoys an unfair advantage over any other. Academic dishonesty is also destructive of the University community, which is grounded in a system of mutual trust and places high value on personal integrity and individual responsibility.

The FAU Honor Code requires a faculty member, student, or staff member to notify an instructor when there is reason to believe an academic irregularity is occurring in a course. The instructor must pursue any reasonable allegation, taking action where appropriate. The following constitute academic irregularities:

1. The use of notes, books or assistance from or to other students while taking an examination or working on other assignments, unless specifically authorized by the instructor, are defined as acts of cheating.
2. The presentation of words or ideas from any other source as one's own is an act defined as plagiarism.
3. Other activities that interfere with the educational mission of the University.

For full details of the FAU Honor Code, see University Regulation 4.001 at www.fau.edu/regulations/chapter4/4.001_Honor_Code.pdf.

The Code of Honorable and Professional Conduct should serve as a guide to medical students in matters related to academic integrity and professional conduct. The Code of Honorable and Professional Conduct provides a mechanism for peer evaluation of student conduct which the FAU faculty and administration believe is an essential component of medical education and development of medical students.

15. Required texts/readings:

The following is a textbook that students are expected to purchase. Textbooks are available at the FAU Bookstore.

- Bickley, LS and Szilagyi, PG. *Bates' Guide to Physical Examination and History Taking (Eighth Edition)*. Philadelphia, PA: Lippincott Williams & Wilkins; 2003.

Suggested Textbooks:

Every student should also plan to have access to a standard medical text such as Cecil's, Harrison's or Kelley's as well as access to notes and texts from the biomedical science and organ system courses.

- Smith, RC. *Patient-Centered Interviewing*. Philadelphia, PA: Lippincott Williams & Wilkins; 2001.
- Orient, JM. *Sapira's Art and Science of Bedside Diagnosis*. Philadelphia, PA: Lippincott Williams & Wilkins; 2000.
- Leblond, R., DeGowin, RL. and Brown, DD. *DeGowin's Diagnostic Examination*. McGraw-Hill; 2004.

Instruments:

On **August 7th**, there will be an opportunity to order instruments needed from a Welch-Allyn representative. The representative will be present according to the times in the one45 schedule.

The following should be purchased:

- Welch-Allyn Diagnostic Set with Coaxial Ophthalmoscope, Diagnostic Otoscope (Transilluminator is optional)
The Ophthalmology Department recommends that you purchase larger handle set.
- Pan-Optic Head (Optional)
- Two Headed (bell and diaphragm) Double Tube Stethoscope (suggested *Littman* or *Tycos* with ear pieces which fit your ears)
- Pen Light
- Pocket Eye Chart
- Tuning Fork (Frequency 128 Hz)
- Adult Babinski Reflex Hammer 10" (inches)
- Antiseptic handrub (pocket size, waterless)
- Blood Pressure Cuff (Optional)

16. Supplementary resources:

Web-based postings on Blackboard:

Students are encouraged to carry their laptop with them as much as possible in order to access resources, patient log and other resources.

Please refrain from checking personal e-mails during teaching periods. Please put your cell phone or pager on "vibrate" to minimize disruption.

Please be punctual as a courtesy to your colleagues and faculty.

Session handouts	Yes	Session Objectives	Yes	Quizzes	No
Required Activities	Yes	Grades	Yes	Additional Materials	Yes

Clinical Skills Web Resources:

(These resources may be accessed via the "Handouts and links" of the student e-Dossier on Blackboard)

Auscultation Assistant: <http://www.wilkes.med.ucla.edu/intro.html>

The Auscultation Assistant provides heart sounds, heart murmurs, and breath sounds in order to help medical students and others improve their physical diagnosis skills.

McGill University Virtual Stethoscope: <http://sprojects.mmi.mcgill.ca/mvs/>

In this educational resource you will find a tutorial on the physical exam with emphasis on auscultation, a brief review of selected cardiac and pulmonary physiology/pathophysiology topics, a virtual stethoscope interface for auscultating normal and abnormal cardiac and respiratory sounds, and powerful and interactive quizzes to help with mastery of the stethoscope (on-line only).

Loyola University Medical Education Network: Reviews components of the screening physical exam
<http://www.lumen.luc.edu/lumen/MedEd/MEDICINE/PULMONAR/PD/Contents.htm>

Heart Lab Cardiac Auscultation Simulator: <http://www.familypractice.com/heartlab/heartlab.htm>
Site allows you to select from the library of sounds to listen to accurate heart sounds on a simulated chest wall, review which maneuvers accentuate the sounds, locate where the sounds are best heard, and view a graphic representation of the sounds.

UC San Diego: A Practical Guide to Clinical Medicine <http://medicine.ucsd.edu/clinicalmed/lung.htm>
A comprehensive physical examination and clinical education site for medical students and other health care professionals.

Blaufuss Multimedia Heart Sounds Tutorial: <http://www.blaufuss.org/tutonline.html>

University of Washington Heart Sounds and Murmurs: <http://depts.washington.edu/~physdx/heart/demo.html>

UC Davis Review of Lung Sounds: <http://medocs.ucdavis.edu/IMD/420C/sounds/lngsound.htm>

R.A.L.E. Repository of Lung Sounds: <http://www.rale.ca/Repository.htm>

17. Course topical outline, including dates:

Content outline:

There are many approaches used in the Physicianship Skills course to teach about the following themes. The approaches are meant to build upon the principles begun in the Introduction to the Medical Profession while complementing the activities of the Integrated Patient care courses.

- Physical Examination
- Evidence Based Medicine
- Social Determinants of Health
- Principles of Ethics
- Legal Medicine
- Impact of Chronic Illness
- Language Barriers in Healthcare/medical interpreters
- Immunizations
- Geriatrics
- Palliative Care
- Complementary and Alternative Medicine
- Medical Error and Patient Safety
- Patient Advocacy and Prevention/Injury Prevention
- Systems Based Care/Economics of Healthcare

Tuesday afternoon core sessions

(1:00 PM - 4:00PM)

Tuesday afternoon sessions will combine didactics, small group case discussions, patient panels, and occasional activities in the Simulation Center.

Please be prepared to have your laptop available during these sessions. Some of these sessions will require preparation including completing readings or doc.com modules (please refer to Blackboard)

Learning Community

Friday (1:00 PM - 3:00 PM)

The weekly sessions include a dedicated time for reflection on the past week's clinical activities and immersion of the IPC courses. In addition, there will be a rotation of activities monthly including journal club, case presentations, a communication lab, medical humanities, and ethics/cultural competency topics.

- Evidence Based Medicine /Journal Club:
Activities and readings will be posted on Blackboard.
- Medical Humanities/Communication Lab:
Humanities pieces will be available online on the Blackboard site prior to learning community sessions and will be discussed within the learning community.
Communication Lab activities will be performed using the doc.com website. Review the assigned module prior to each communication lab session.
- Ethics/Cultural Competency Cases:
Ethics and cultural competency cases will be available online on Blackboard prior to learning community sessions and will be discussed within the learning community.
- Learning Community Case Presentations:
One learning community per four week block will focus on student presentations. Two students will present in each session.

The sessions will have two areas of focus:

- 1) To develop and practice skills of presenting a patient to the medical team
- 2) To discuss issues related to the care of the individual patient.

This presentation will follow the format described below, and the content will build as students learn to elicit various components of the history. At the beginning, students may only be able to present the Chief Complaint and the History of the Present Illness.

History:

Chief complaint:
History of the Present Illness:
Past Medical History:
Past Surgical History:
Hospitalizations:
Review of Systems:
Medications:
Allergies:
Immunizations:
Family History:
Social History:
Sexual History:

For pediatric, adolescent and geriatric patients, it would be appropriate to include specific components of developmental stages, nutrition etc., that have been presented in the Integrated Patient Care didactic sessions.

Physical Exam:

Vital Signs:
Anthropometrics (weight, height, length, head circumference, BMI, weight versus length as appropriate):
General Appearance:
HEENT:

Neck:
 Cardiovascular:
 Chest/ Pulmonary:
 Abdomen:
 Genitourinary:
 Musculoskeletal:
 Skin:
 Neurologic:

Labs/ Data:

Patient labs and data should be presented.

Students are encouraged to discuss any data that may be relevant to the concurrent courses of Fundamentals of Biomedical Science, or the CMC Neuroscience and Behavior, or the CMC Cardiovascular System. Attempts to integrate the basic science underpinning of the practice of clinical medicine are encouraged, as they promote deeper learning and material retention. For example, an EKG would generate a rich discussion if it happened during the Cardiovascular Module.

When preparing to discuss aspects of care for the selected patient in the Learning Community, students should consider the following in framing the presentation. It is not expected that each aspect will be covered in each presentation. As learners progress throughout their education, it is expected that the depth of discussion will increase as topics are covered in other courses of the curriculum.

- Define a clinical question that arose during this encounter.
- How did issues such as race, ethnicity, gender, age and language affect the patient encounter?
- Did this patient have a chronic illness and how does it impact your patient's lifestyle, finances, family, and community?
- What screening/prevention/assessment tools were or should have been used on this patient (pediatric, adult male/female, geriatric)?
- What ethical issues arose surrounding this patient encounter?
- How did you advocate for this patient? How could you have advocated for this patient?
- Did the patient's economic status impact care?
- How did they pay for their visit? How did they able to pay for prescriptions given, etc.?
- How were issues of health literacy addressed?
- Are there any issues regarding the patient's mental health?
- How were issues related to palliative care addressed?
- What laws or legal issues affected the care of this patient?
- Were there any medical errors associated with the visit? What precautions were taken to avoid medical errors?

Content outline:

Please refer to the Blackboard for up-to-date information, session-related objectives and hand-outs.

			Session Topic
Month 2	Aug. 31	Week 4	Introduction to the Physicianship Course/ Dermatology Exam
	Sept. 7	Week 5	Evidence Based Medicine
	Sept.14	Week 6	Ethics
	Sept.21	Week 7	Musculoskeletal Exam
Month 3	Sept.28	Week 8	Evidence Based Medicine
	Oct. 5	Week 9	Chest/ Pulmonary Exam
	Oct. 12	Week 10	Cardiovascular Exam
	Oct.19	Week 11	Immunizations
Month 4	Oct.26	Week 12	Social Determinants of Health
	Nov. 2	Week 13	Evidence Based Medicine
	Nov.9	Week 14	Health Literacy
	Nov.16	Week 15	Abdominal Exam-

Month 5	Nov. 23	Week 16	Pelvic Exam - Mon 11/23 1/2 class Simulation
	Nov. 30	Week 17	Pelvic exam (half the class)
	Dec. 7	Week 18	Health Interpreter
	Dec. 14	Week 19	Exam
VACATION			
Month 6	Jan.4	Week 20	Prevention and Patient Advocacy
	Jan. 11	Week 21	Introduction to Chronic Disease
	Jan. 18	Week 22	Geriatrics
	Jan. 25	Week 23	Geriatrics
Month 7	Feb. 1	Week 24	Geriatrics/ Chronic Disease Panel -Dementia/ Depression
	Feb. 8	Week 25	Evidence Based Medicine
	Feb.15.	Week 26	Head and Neck Exam
	Feb.22	Week 27	Chronic Disease Patient Panel- CVA
Month 8	Mar.1	Week 28	Neuro exam
	Mar. 8	Week 29	Eye Exam
	Mar. 15	Week 30	Chronic Disease Patient Panel-Spinal Cord Injury
	Mar. 22	Week 31	Chronic Disease Patient Panel- Mental Health
VACATION			
Month 9	Apr. 5	Week 32	PE Wrap Up
	Apr. 12	Week 33	Medical Errors& Patient Safety
	Apr. 19	Week 34	Prevention and Patient Advocacy
	Apr. 26	Week 35	Principles of Injury Prevention
Month 10	May 3	Week 36	Economics of Health Care I
	May 10	Week 37	Chronic Disease Patient Panel- cardiac disease
	May 17	Week 38	Law and Medicine
	May 24	Week 39	Practice H and P for competency week
Month 11	May 31	Week 40	Competency Week

Clinical Dress Code:

Studies show that patients attach significance to what their physicians wear. Out of respect for patients and their expectations, please follow the instructions when there is any interaction with patients:

- Wear white coat and ID badge at all times.
- Dress should be professional. You should appear appropriately attired, clean, and well groomed when you see patients in the hospital, clinic, or office setting.
- Acceptable clothing includes:
For women: dresses or blouses and skirts or slacks.
For men: shirts, ties, and slacks
 (No one is to wear jeans, shorts, sneakers, or sandals.)
- For Geriatrics home visits, a *slightly* more casual attire is accepted: the above guidelines still apply except that a white coat is not necessary and ties (for men) are optional.
- If your dress is not considered appropriate, you will be given feedback.

It must be remembered that it is the patient who ultimately decides what constitutes proper attire and demeanor. If the patient's standards for professional appearance and behavior are not met, he or she may be unwilling to provide some (perhaps important and sensitive) details of the history. Patients also may not readily agree to some components of the physical examination if their physician does not appear professional.

Universal Precautions:

The CDC recommends that universal precautions be followed with ALL patients since history and physical examination cannot identify all patients infected with HIV or other blood-borne pathogens.

- Wear gloves when touching blood, body fluids, mucous membranes or non-intact skin of all patients.
- Wear gloves when handling items soiled with blood or body fluids.
- Wear gloves when performing venipuncture or invasive procedures.
- Change gloves between patients.
- Wear masks and protective eyewear or face shields when doing procedures likely to generate droplets of blood or body fluids.
- Wear gowns or aprons when doing invasive procedures.
- Wash hands and skin immediately and thoroughly after contact with blood and body fluids.
- Do not recap needles or bend them or manipulate them in any way.
- Dispose of sharps in puncture-resistant containers.
- Although saliva is not known to transmit HIV, mouth to mouth resuscitation should be avoided. Resuscitation bags, mouthpieces or other ventilation devices should be available when appropriate.
- Health care workers with weeping or exudative lesions should avoid direct patient contact until the condition resolves.
- Pregnant health care workers should be especially aware of the above precautions and strictly adhere to them.

Study Habits:

A major contribution to your learning is active engagement, which includes participation in the learning of other students and interaction with the instructors. Students are expected to be proactive and to access the Blackboard system to review items associated to individual sessions.

Learning in the field of medicine is a life-long endeavor that is not only necessary, but can and should be fun. One of the most important factors for learning is curiosity and sometimes, the best way to keep this curiosity stimulated is through our interaction with colleagues and peers. When learning in small groups, we have a chance to try to explain topics to each other, brainstorm solutions together, give each other constructive feedback, and support and validate each other. We encourage balancing studying alone with learning in small groups. It is important to develop a study routine to avoid "putting things off" and "cramming" and to minimize the stress we may add to our lives in that way.

Independent Study Time:

Independent Study Time allocated within the day time schedule is provided for students, on average about 9 hours per week.

Students are expected to use this time to further their learning. The time should be used for independent study or with peers. It is an opportunity to seek out faculty to interact with them outside the formal teaching setting. Since the PBL small-group format requires that students research learning objectives, the time may be used to prepare for the subsequent sessions. Finally, the time may be used to work on assignments, problem-solving cases, off-campus visits or other tasks that are required by the courses.

Occasionally, some Independent Study Time sessions may be used for curriculum-related activities (e.g. standardized examinations): notice will be given as early as possible for these occasions.

Course and Faculty Evaluation:

FAU highly values the process of formal program evaluation and feedback. FAU students are required to complete all course evaluations and program evaluation surveys which are the Students Perception of Teaching (SPOT).

Grades and transcripts may be held for failure to submit required surveys. Evaluations should be constructive, to help improve individual faculty's teaching, and the content and format of the courses.

Moreover, the timely completion of evaluations at the level of undergraduate medical education assists students in developing the administrative and organizational skills required throughout their academic and professional career. We appreciate your completing evaluations to help continue with improvement of the learning experiences and environment for all students.

Faculty (in alphabetical order):

Gauri Agarwal, M.D.
Assistant Professor
561-297-4132
gagarwal@fau.edu

Julie Belkowitz, M.D.
Assistant Professor
561-297-5013
Jbelkowi@fau.edu

Jennifer Boxen
Assistant University Librarian
561-297-0032
jboxen@fau.edu

Lawrence Brickman, M.D.
Visiting Associate Professor
561-297-4336
brickma1@fau.edu

James Cresanta, M.D.
Associate Professor
561-297-4035
jcesant@fau.edu

Corinne L. Danielson, MPH, CHES
Florida Community Health Centers, Inc.
(772)-597-3890 Ext. 20
CDanielson@fchcinc.org

Ellen Eisenberg, MD
eeisenb2@fau.edu

Robin Fiore, Ph.D.
Associate Professor
561-297-3869
rfiore@fau.edu

Ira Karmin
Phone: 561-455-3627
Daniel Lichtstein, M.D., F.A.C.P.
Professor of Clinical Medicine

561-297-4338
lichste@fau.edu

Stuart Markowitz, M.D.
Professor
561-297-2191
markowit@fau.edu

Stephanie Mckee, Ph.D.
sschwartz272@yahoo.com

Meaghan McNulty, MD
Phone: 561-455-3627
mmculty@med.miami.edu

Joseph Ouslander, M.D.
jouslander@brch.com

Garnet Peter, M.D.
Assistant Professor
561-297-2161
gpeter@fau.edu

Gary Rose, M.D.
Associate Professor
561-297-0675
grose@fau.edu

Mira Sarsekeyeva, MD
Visiting Clinical Assistant Professor
561-297-3790
msarseke@fau.edu

Julie Servoss, M.D., M.P.H.
Assistant Professor
561-297-4133
jservoss@fau.edu

David Spicer, J.D.
561-625-6066
David748@aol.com