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## Graduate Programs—NEW COURSE PROPOSAL

DEPARTMENT NAME: BMED

COLLEGE OF: BIOMEDICAL SCIENCE—MEDICAL EDUCATION PROGRAM

**RECOMMENDED COURSE IDENTIFICATION:**

PREFIX \_\_\_\_\_ BMS \_\_\_\_\_ COURSE NUMBER 7150 \_\_\_\_\_ LAB CODE (L or C) \_\_\_\_\_

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

COMPLETE COURSE TITLE \_\_\_\_\_

**EFFECTIVE DATE**

(first term course will be offered)

CREDITS: 6

TEXTBOOK INFORMATION: Introductory Textbook of Psychiatry, 4<sup>th</sup> edition Andreason and Black  
 Stahl's Essential Psychopharmacology, 3<sup>rd</sup> edition  
 Kaplan and Sadock's Concise Textbook of Clinical Psychiatry, 3<sup>rd</sup> edition LWW

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

COURSE DESCRIPTION, NO MORE THAN 3 LINES: The Psychiatry Clerkship is a six-week clinical course that provides the student with a solid foundation in the evaluation, diagnosis and treatment of patients with psychiatric illness.

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.

\_\_\_\_\_ TBD \_\_\_\_\_  
 Faculty Contact, Email, Complete Phone Number

**SIGNATURES**

**SUPPORTING MATERIALS**

<p><b>Approved by:</b></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><b>Date:</b></p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p><b>Syllabus</b>—must include all details as shown in the UGPC Guidelines.</p> <p><b>Written Consent</b>—required from all departments affected.</p> <p>Go to: <a href="http://graduate.fau.edu/gpc/">http://graduate.fau.edu/gpc/</a> to download this form and guidelines to fill out the form.</p>
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Email this form and syllabus to [diamond@fau.edu](mailto:diamond@fau.edu) and [eqirjo@fau.edu](mailto: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. 2013-2014

Syllabus :

1. **Course title** : Psychiatry Clerkship

**Course number**: BCC 7150

**Number of credit hours**: 6

Lecture/small group Hours: up to 4 hrs/week at SCMHC and Bethesda Memorial Hospital, per Blackboard.

Clinical Hours: up to 80 hrs/week at SCMCH, per Blackboard

Students must follow the same duty hour rules followed by residents. Duty hours must not exceed 80 hours/week, averaged over a four-week period. Students must have one day (24 hrs) in seven free from all clinical/educational responsibilities, averaged over a four-week period.

**Dress Code:**

Professional clinical dress is required at all times. Suggested dress for women is dress, skirt, and blouse, or dress pants. Suggested dress for men is shirt, tie, and dress pants.

White coats should be worn at all times and must be clean. The regional campus-issued white coat can be worn. At the South County Mental Health Center, white coats are optional. For men, the tie is optional in clinic, and ties should NOT be worn on inpatient service for safety reasons.

FAU Medical Education Program and SCMHC identification badges must be worn at all times.

**Drug screening policy at South County Mental Health Center:**

As per the policy for all students participating in patient care at SCMCH, students will be asked to provide samples on the first day of the clerkship for testing. Testing will be done at no charge to the student.

**Services at South County Mental Health Center:**

Students will have access to a room with computers and 24/7 internet access. It is available for study and work on laptops.

No secure storage (such as lockers) will be available for valuables. Belongings can be locked in the office of the attending physicians if needed.

A break room with vending machines is available. Meal tickets for lunch can be purchased from the staff for the on-site cafeteria used by staff and patients. Many restaurants are close-by.

**2. Course prerequisites:**

Accepted for matriculation in the FAU Medical Sciences program.

**3. Course logistics:**

a. term:

b. not an online course

c. Biomedical Science Building room BC-126, anatomy lab, small group PBL rooms.

**4. Instructor information:**

Course Director: TBA

**Course support:** Bethesda Clerkship Program Assistant  
Ms. Sarah Mueller  
Office: BMH, lower level  
Phone: 561-292-4891  
Fax: 561-374-5769  
E-mail: [fau.smueller@fau.edu](mailto:fau.smueller@fau.edu)

*Please note: Any official student communication from the director or program assistant will be sent via e-mail to students at their FAU e-mail addresses. If students would like to meet with the course director, they must call or e-mail the course director 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 curriculum continues to place a priority on active, collaborative, learner-centered methodologies to prioritize the knowledge, skills and attitudes required of physicians to practice in today's health care system. The clerkships of the Bethesda experience will overall allow students to follow their patients through their care and treatment and participate in the medical, surgical, diagnostic and therapeutic aspects of the care required for management of acute and chronic illnesses. Students will continue to spend time with their Integrated Patient Care community preceptor following their patient panel and other patients presenting with acute and chronic illnesses.

Clinical experiences are designed to emphasize interdisciplinary, team-based, complex disease management with a major focus on continuity care, health maintenance and disease prevention. The third year clerkships will strive to not only integrate the basic and clinical sciences, but also the behavioral and social sciences with continued emphasis on these areas:

- Humanistic medicine
- Professionalism
- Reflective Practice and Self-Improvement
- Quality Improvement and Outcomes Management
- Patient Safety
- Information Management and Evidence Driven Decision Making
- Comprehensive Chronic Disease Management
- Inter-professional Care and Teamwork
- Population Based Medicine

The Psychiatry Clerkship is a six-week clinical course that provides the student with a solid foundation in the evaluation, diagnosis and treatment of patients with psychiatric illness. The clerkship will build upon the student's knowledge of neurobiology, psychopathology and psychopharmacology which were covered in the CMC Neuroscience and Behavioral Medicine Course, and will further develop the student's clinical interviewing skills that are fundamental to all disciplines.

It is the primary goal of the clerkship for the student to become competent in the diagnosis and treatment of common psychiatric disorders which present as either a primary condition, or as a co-morbid condition with medical or surgical disease. All students will receive their training at South County Mental Health Center in Delray Beach. Faculty have participated in faculty development sessions to orient them to the FAU Medical Education Program goals, expectations for student learning and performance, as well as assessment of student clinical performance.

The South County Mental Health Center (SCMHC) is a private, non-profit corporation chartered by the State of Florida in 1974. Since its creation, SCMHC has brought quality mental health and substance abuse care to our communities in a manner which enhances and preserves human dignity. Through local support, guidance and cooperation, the Center has been able to achieve its primary purpose of serving people of all ages and

incomes. SCMHC is located at 16158 South Military Trail, just south of Linton Boulevard on Military Trail.

**Clerkship activities:**

On day 1 of the clerkship, students are to assemble at 8h30 am in the conference area of room 101 of Building B (Dr. Laughlin’s office) for a short refresher and assignment of duties.

The clerkship will predominantly be an outpatient clinical experience. Students will spend five out of the six weeks in the Outpatient Medication Clinic at South County Mental Health Center. Each student will be assigned to a clerkship faculty psychiatrist, who will function as a direct supervisor of the student’s clinical activities. Students will have the opportunity to participate in the evaluation, diagnosis and ongoing care of a wide range of psychiatric outpatients. Particular effort will be made to allow students to follow their patients longitudinally over the six weeks, in order to emphasize continuity of care and comprehensive chronic disease management.

Sample week for the outpatient clinic (5 of 6 weeks)

	<b>Monday</b>	<b>Tuesday</b>	<b>Wednesday</b>	<b>Thursday</b>	<b>Friday</b>
AM	Medication Clinic	Clinic	Clinic	Clinic	Clinic
		Court Session <sup>§</sup>	Long-term Care Committee Meeting <sup>§</sup>		Observation of Psychotherapy Session <sup>§</sup>
PM	Clinic**	Clinic	Clinic	Academic half-day*	Faculty Patient Interview Case Conference (Weekly)
					Clinic

\* Week 4: PS4 curriculum.

\*\* Students are expected to work with the preceptor as much as possible, but this time may be used for the IPC4 community preceptor visit.

<sup>§</sup> Attendance at one each of these events, timing arranged with assigned preceptor.

Exposure to patients with more severe psychopathology and emergency psychiatry will be accomplished through a one week rotation through the Inpatient and Emergency Services at South County Mental Health Center. This will be supplemented by two weekend day on call experiences. Students are required to attend the weekly Psychiatry student case report, in which students presents and discuss their cases with the Clerkship psychiatry coordinator.

Students will also attend a weekly educational case conference, in which a faculty member interviews a patient and leads a discussion with the students, covering differential diagnosis, treatment planning and interviewing techniques. Students will also be required to attend either one long-term care committee meeting in which a chronically ill patient is discussed in depth or one length-of-stay conference, and one court session (on site). Additionally, each student will have the opportunity to observe a psychotherapy session. Students will arrange with their assigned preceptor, on an individual basis, when they will attend these meetings and sessions.

Sample week for the inpatient/emergency (1 week)

	Monday	Tuesday	Wednesday	Thursday	Friday
AM	Inpatient/ Emergency Service	Inpatient/ Emergency Service	Inpatient/ Emergency Service	Inpatient/ Emergency Service	Inpatient/ Emergency Service
	Length of Stay Conference <sup>§</sup>	Court Session <sup>§</sup>	Long-term Care Committee Meeting <sup>§</sup>		Observation of Psychotherapy Session <sup>§</sup>
PM	Inpatient/Emerge ncy Service	Inpatient/ Emergency Service	Inpatient/ Emergency Service	Academic half- day*	Faculty Patient Interview Case Conference (Weekly)
					Inpatient/ Emergency Service

\* Week 4: PS4 curriculum.

\*\* Students are expected to work with the preceptor as much as possible, but this time may be used for the IPC4 community preceptor visit.

<sup>§</sup> Attendance at one each of these events, timing arranged with assigned preceptor.

**Didactic topic schedule:**

The lecture and didactic schedule to support this clerkship is outlined below. Please consult Blackboard for supporting materials, times and locations. There may be occasional changes in the order of this outline.

Clerkship Week	Lecture Topic
Week 1	Psychiatric History Mental Status Examination Psychiatric Case Presentation and Documentation Differential Diagnosis in Psychiatry Student Report
Week 2	Basic Interview Technique Advanced Interview Technique (challenging interview) Schizophrenia and Other Psychotic Disorders (diagnosis) Schizophrenia and Other Psychotic Disorders (treatment) Chronic Mental Illness Student Report
Week 3	Psychiatric Emergencies Mood Disorders (diagnosis) Mood Disorders (treatment) Substance Use Disorders Student Report

Week 4	Anxiety Disorders (diagnosis) Anxiety Disorders (treatment) Physicianship Skills 4
Week 5	Personality Disorders Introduction to Psychotherapy Child and Adolescent Psychiatry Geriatric Psychiatry Student Report
Week 6	Somatoform and Dissociative Disorders Psychiatric Aspects of Medical Illness Eating Disorders Clinical Case Review (two hours - video and paper based cases as needed)

**Specific student responsibilities:**

- **Online patient log documentation of clinical exposure:** Students are required to document all significant clinical experiences during the clerkship in the CMC psychiatry clerkship log posted on Blackboard.

- **Mid-Clerkship Evaluation (end of week 3):** Students will meet with the Clerkship psychiatry coordinator for a mid-clerkship evaluation and feedback session which may include:

- NBME-type practice questions

- Brief clinical evaluation from preceptor identifying areas where improvement is needed

- Review of clinical caseload to ensure compliance with clinical exposure requirements by the completion of the clerkship.

- **Written case report:**

Two written case reports will be required (2-4 pages), and are to be submitted directly to the Clerkship psychiatry coordinator by Friday 5 p.m. of weeks 2 and 5.

Late reports will lead to deductions in points at the discretion of the clerkship psychiatry coordinator

The evaluation form for case reports will be available on Blackboard. Written case reports include a comprehensive psychiatric case history and discussion of the differential diagnosis and treatment plan. To emphasize the chronic illness model, students are required to select at least one patient with a chronic mental illness. The treatment plan section of the case report should include a discussion of issues relevant to a comprehensive approach to managing chronic mental illness.

- **Student report:** At each academic half-day weekly, students will be asked to volunteer to orally present patients, abnormal laboratory results, or other aspects of a patient's care for relevant interactive discussion.

Students will be expected to organize their discussions according to these categories, where applicable:

- Diagnostic criteria
- Epidemiology
- Natural history
- Pathophysiology
- Clinical presentation
- Physical findings
- Differential diagnosis
- Diagnostic testing
- Therapeutic management

## 7. Course objectives/student learning outcomes:

### Competency Based Objectives:

The objectives for the regional campus clerkship are aligned with those of the corresponding disciplines of the main campus. In addition, objectives specific to the Continuity Medicine Curriculum (CMC) have been added, to continue the emphasis on chronic illness and care.

The objectives continue to be presented in the context of the six ACGME competencies that provide the framework for graduate medical education. Each competency can be specifically mapped back to the institutional objectives of the FAU Medical Education Program of the CMC (found on Blackboard).

Student skills, behaviors and knowledge related to the objectives will be assessed by faculty in different ways and at different times in the clerkship, as described in the assessment section of this document.

### I. Patient Care

#### A. Psychiatric History, Physical, and the Mental Status Examination

##### Overall Goal:

By the completion of the clerkship, the student will demonstrate the ability to obtain a complete psychiatric history, recognize relevant physical findings and perform a complete mental status examination.

##### Specific goals:

- Perform a complete psychiatric history, including identifying data, chief complaint, history of present illness, past psychiatric history, medications (psychotropic and non-psychotropic), general medical history, substance use history, family history, personal history and social history.
- Recognize the importance of, and be able to obtain and interpret historical data from multiple sources, including family members, mental health providers, primary care providers and medical records.
- Elicit, describe and document a comprehensive Mental Status Examination, including general appearance and behavior, motor activity, speech, mood, affect, thought content, thought process, perception, sensorium and cognition, abstraction, intellect, judgment and insight. Describe variations in presentation according to age, stage of development and cultural background.
- Assess for the presence of significant medical history or physical examination findings, and determine the extent to which a medical/surgical illness contributes to a patient's psychiatric illness.

#### B. Interviewing Skills

##### Overall Goal:

By the completion of the clerkship, the student will demonstrate the ability to conduct a psychiatric interview which elicits information necessary for diagnosis and treatment, and forms the basis of a therapeutic alliance with the patient.

##### Specific goals:

- Demonstrate respect, empathy, responsiveness and a non-judgmental attitude regardless of the patient's problems, personal characteristics or background.
- Demonstrate effective interviewing skills, including appropriate initiation of interview, establishment of rapport, appropriate use of open-ended and closed questions, techniques for asking "difficult" questions, appropriate use of empathy, non-judgmental attitude, clarification, appropriate confrontation, summation and closure of interview.
- Describe and use basic strategies for developing rapport and obtaining information in challenging interviews (disorganized, cognitively impaired, resistant, mistrustful, agitated patient)
- Identify non-verbal expressions of affect in a patient's responses, and use this to modify the direction

of the interview.

- Understand and avoid common mistakes in interviewing technique including unnecessary interruption, long, complex questions, leading questions, ignoring important verbal or nonverbal cues, judgmental attitude and insufficient clarification and follow-up questions.

### C. Clinical Reasoning, Differential Diagnosis and Treatment Planning

Overall Goal:

By the completion of the clerkship, the student will demonstrate the ability to identify psychopathology, formulate accurate differential and working diagnoses, and develop appropriate assessment and treatment plans, including the appropriate use of laboratory testing, imaging, psychological tests and consultation.

Specific goals:

- Use the DSM IV-TR to identify signs and symptoms that comprise specific disorders or syndromes, and construct diagnoses using the five axes system.
- Formulate a differential diagnosis and plan for assessment of common presenting signs and symptoms of psychiatric disorders (e.g., anxiety, depression, agitation, paranoia, hallucinations, confusion) including appropriate laboratory, imaging, psychological testing and other medical testing.
- Understand the importance of ruling out substance induced disorders and disorders due to a general medical condition for all psychiatric presentations.
- Interpret test results relevant to the differential diagnosis and revise diagnostic formulation accordingly.
- Assess changes in clinical status, and alter diagnostic hypotheses and management recommendations in response to changes.
- Collaborate with colleagues, other mental health professionals, patients and their families in the development and implementation of treatment and management plans.

## II. **Medical Knowledge**

### A. Psychiatric Emergencies

Overall Goal:

By the completion of the clerkship, the student will demonstrate knowledge of common psychiatric emergencies and their management.

Specific goals:

- Identify and discuss risk factors for suicide across the lifespan.
- Develop a differential diagnosis, conduct risk assessment and recommend further evaluation and management of patients exhibiting suicidal thoughts or behavior.
- Identify risk factors for violence and assaultive behavior, and recognize signs and symptoms of potential assaultiveness.
- Discuss the clinical assessment and differential diagnosis of a patient presenting with acute psychotic symptoms.
- Discuss classes, indications and associated risks of medications used for the management of acutely psychotic, agitated or combative patients.
- Discuss the indications for psychiatric hospitalization, including the presenting problem and its acuity, danger to self and others, community resources and family support.
- Discuss the clinical features, differential diagnosis and evaluation of delirium.
- Recognize the typical signs and symptoms of common psychopharmacological emergencies (e.g., lithium toxicity, neuroleptic malignant syndrome, anticholinergic delirium, acute dystonic reactions, MAOI related hypertensive crisis).
- Summarize the process of admission to a psychiatric hospital including voluntary vs. involuntary commitment and the role of the physician in commitment.



## B. Psychiatric Aspects of Medical Illness

### Overall Goal:

By completion of the clerkship, the student will demonstrate the ability to recognize, evaluate and understand the psychiatric manifestations of general medical conditions and understand the initial management, work-up and treatment of these disorders.

### Specific goals:

- Recognize the common medical disorders that may present with psychiatric symptoms (e.g., hypothyroidism)
- Discuss the impact of depression on the morbidity and mortality of medical-surgical illness (myocardial infarction, cardiovascular disease, cerebrovascular disease, diabetes, cancer).
- Describe some common presentations of anxiety, depression and psychosis in non-psychiatric settings, and develop an approach to evaluating and treating psychiatric disorders in general medical practice.

## C. Mood Disorders

### Overall Goal:

By the completion of the clerkship the student will demonstrate the ability to recognize, diagnose and recommend treatment for patients presenting with mood disorders.

### Specific goals:

- Discuss the epidemiology of mood disorders, with special emphasis on the prevalence of depression in the general population, and in non-psychiatric clinical settings among patients with medical-surgical illness.
- Discuss the clinical features, course of illness, prognosis and comorbidity of primary mood disorders including Major Depressive Disorder, Bipolar Disorder, Dysthymic Disorder, Cyclothymic Disorder and Adjustment Disorder with Depressed Mood.
- Discuss the differential diagnosis of patients presenting with signs and symptoms of mood disturbance, including primary mood disorders and mood disorders secondary to substance use or underlying medical-surgical illness.
- Compare and contrast the features of unipolar and bipolar mood disorder with regard to epidemiology, clinical features, clinical course, family history and comorbidity.
- Contrast normal mood variations, states of demoralization and bereavement with the pathological mood changes that constitute depressive illness.
- Outline the recommended acute and maintenance treatments for mood disorders including biological and psychotherapeutic treatments.

## D. Schizophrenia and Other Psychotic Disorders

### Overall Goal:

By the completion of the clerkship, the student will demonstrate proficiency in the recognition, evaluation, treatment and management of patients with psychosis, and be able to differentiate schizophrenia from psychosis associated with affective disorders, general medical conditions and other psychotic disorders.

### Specific goals:

- Define the term psychosis and discuss the clinical manifestations of patients with psychotic symptoms.
- Recognize that psychosis is a syndrome, and discuss the broad differential diagnosis of psychotic symptoms, including both primary psychiatric disorders and psychosis due to substances and an underlying medical illness.
- Discuss the epidemiology, clinical features, course of illness, prognosis and comorbidity of primary psychotic disorders including Schizophrenia, Schizophreniform Disorder, Schizoaffective Disorder, Delusional Disorder and Brief Psychotic Disorder.

- Discuss the prodromal stage of Schizophrenia, good and poor prognostic features and the importance of negative symptoms.
- Outline the recommended acute and maintenance treatments of psychotic disorders including psychopharmacological and non-pharmacological approaches.

#### E. Anxiety Disorders

##### Overall Goal:

By the completion of the clerkship, the student will demonstrate proficiency in the recognition, evaluation, treatment and management of patients with anxiety disorders.

##### Specific goals:

- Discuss the epidemiology of anxiety disorders with special emphasis on the prevalence of anxiety in the general population and in non-psychiatric clinical settings.
- Discuss the clinical features, course of illness, prognosis and comorbidity of primary anxiety disorders including Generalized Anxiety Disorder, Panic Disorder, Simple Phobia, Social Phobia, Acute and Post-traumatic Stress Disorders, Obsessive Compulsive Disorder, Adjustment Disorder with Anxious Mood.
- Discuss the differential diagnosis of patients presenting with anxiety symptoms including primary anxiety disorders and anxiety disorders secondary to substance use or an underlying medical-surgical illness.
- Identify common general medical and substance induced causes of anxiety (e.g. hyperthyroidism, stimulant use)
- Outline the recommended acute and maintenance treatments for anxiety disorders including pharmacological and psychotherapeutic treatments.

#### F. Substance Use Disorders

##### Overall Goal:

By the completion of the clerkship, the student will demonstrate proficiency in the recognition, evaluation, treatment and management of patients with substance use disorders.

##### Specific goals:

- Obtain a thorough substance use history through the use of empathic, nonjudgmental interviewing techniques.
- Know the DSM-IV diagnostic criteria for substance abuse and substance dependence.
- Know the clinical features of intoxication with cocaine, amphetamines, hallucinogens, cannabis, phencyclidine, barbiturates, opiates, caffeine, nicotine, benzodiazepines, alcohol and anabolic steroids.
- Recognize the clinical signs and recommend management strategies for substance withdrawal from sedative hypnotics including alcohol, benzodiazepines and barbiturates.
- Discuss the epidemiology, course of illness, medical and psycho-social complications of alcoholism and other common substance use disorders.
- Discuss typical presentations of substance use disorders in general medical and psychiatric clinical settings.
- Summarize the psychiatric complications of alcoholism including depression, suicide, violence, accidents, amnesic syndromes and psychosis.
- Discuss management strategies for substance use and dependence including detoxification, 12 step programs, support groups, pharmacotherapy, rehabilitation programs and family intervention.

#### G. Personality Disorders

##### Overall Goal:

By the completion of the clerkship, the student will recognize maladaptive personality traits and interpersonal patterns that typify personality disorders, and discuss strategies for caring for patients with personality disorders.

##### Specific goals:

- Explain how the DSM-IV defines personality traits and disorders, and identify features common to all personality disorders.
- Discuss the three cluster conceptualization of personality disorders as outlined in the DSM-IV, and describe typical features of each disorder.
- State the psychotherapeutic and pharmacologic treatment and management strategies for patients with personality disorders.
- Discuss the recognition and management of patients presenting with personality disorders in the medical setting.

#### H. Somatoform Disorders, Factitious Disorder and Malingering

##### Overall Goal:

By the completion of the clerkship, the student will be able to recognize and state the principles of management of patients with somatoform and factitious disorders.

##### Specific goals:

- Discuss the significance of physical symptoms as manifestations of psychological distress.
- State the clinical features of Somatization Disorder, Conversion Disorder, Pain Disorder, Body Dysmorphic Disorder and Hypochondriasis.
- State the features of Factitious Disorder and Malingering, and distinguish these conditions from the Somatoform Disorders.
- Discuss the principles, challenges and necessity of collaboration among physicians in the ongoing evaluation and management of patients with Somatoform Disorders.

#### I. Eating Disorders

##### Overall goal:

By the completion of the clerkship, the student will demonstrate proficiency in the recognition and evaluation of patients with eating disorders, and refer them for further evaluation and treatment.

##### Specific goals:

- Discuss the epidemiology, clinical features, course, prognosis and complications of Anorexia Nervosa and Bulimia Nervosa.
- Outline the evaluation, treatment, management and appropriate referral of patients with eating disorders.

#### J. Disorders of Childhood and Adolescence

##### Overall Goal:

By the completion of the clerkship, the student will demonstrate the ability to assess the unique factors essential to the evaluation of children and adolescents, diagnose the most common childhood disorders, and refer patients for further evaluation and treatment.

##### Specific goals:

- Compare and contrast the process of performing a psychiatric evaluation of children and adolescent with that of adults.
- Discuss the epidemiology, clinical features, clinical course, family history, prognosis, evaluation and treatment of common psychiatric disorders in children and adolescents, including Attention Deficit Hyperactivity Disorder, Disruptive Behavioral Disorders, Learning Disability, Autistic Spectrum Disorders, Mood Disorders, Anxiety Disorders, Eating Disorders and Substance Use Disorders.
- Discuss the epidemiology and clinical features of suicide risk in children and adolescents.
- Identify signs and symptoms of sexual and physical abuse, and discuss its effect on future risk for psychiatric illness.
- Discuss the physician's role in diagnosing, managing and reporting suspected abuse of children and adolescents.

## K. Geriatric Psychiatry

### Overall Goal:

By the completion of the clerkship, the student will incorporate knowledge of the physiological and psychological changes accompanying aging into treatment planning, and be able to diagnose common psychiatric disorders that present in the elderly.

### Specific goals:

- Compare and contrast the clinical presentation of psychiatric disorders in the elderly versus other adults.
- Discuss the physiology of aging relevant to the prescribing of psychotropic medications.
- Appreciate that multiple medications can cause cognitive, behavioral and affective problems in the elderly.
- Discuss the effect of multiple losses in the elderly relevant to the course and management of psychiatric disorders.
- Discuss and assess the heightened risk of suicide in elderly patients in various cultural groups
- Summarize the assessment and treatment of patients with dementia.

## L. Psychopharmacology and other Biological Therapies

### Overall Goal:

By the completion of the clerkship, the student will summarize the indications, basic mechanisms of action, common side effects, and drug interactions of each class of psychotropic medications, and demonstrate proficiency in the selection and use of these agents to treat mental disorders.

### Specific goals:

- Discuss the indications, basic mechanisms of action, common and serious side effects, signs of toxicity, drug interactions, blood level monitoring, initial dosing and discontinuation strategies of each class of psychotropic medications listed below, and demonstrate proficiency in the selection and use of these agents.
  - Antidepressants
  - Antipsychotics
  - Anxiolytics
  - Mood Stabilizers
  - Sedative Hypnotics
  - Stimulants
- Understand and practice the principle of an adequate trial of pharmacotherapy.
- Understand reasons for medication non-compliance and use strategies to promote compliance.
- Discuss the mechanism of action, indications and side effects of electroconvulsive therapy (ECT).

## M. Psychotherapies

### Overall Goal:

By the completion of the clerkship, the student will have a basic understanding of the principles and techniques of psychotherapy sufficient to explain options to a patient and make a referral when indicated.

### Specific goals:

- State the basic principles and indications for the following therapies; cognitive behavioral therapy, supportive psychotherapy, psychodynamic psychotherapy, group therapy, couples therapy and family therapy.
- Understand the concepts of therapeutic alliance, transference and countertransference and appreciate how they affect the doctor-patient relationship.
- Begin to recognize commonly used defense mechanisms.

## III. **Practice-Based Learning and Improvement**

### Overall Goal:

By the completion of the clerkship, the student will demonstrate the ability to evaluate both their patient care practices and the scientific evidence, in order to improve the quality of care they deliver to patients with psychiatric illness.

## IV. **Interpersonal and Communication Skills**

### Overall Goal:

By the completion of the clerkship, the student will demonstrate interpersonal and communication skills that result in effective information exchange and collaboration with patients, their families and other health care providers.

## V. **Professionalism**

### Overall Goal:

By the completion of the clerkship, the student will demonstrate a commitment to excellence and maturation in professional development.

## VI. **Systems-Based Practice**

### Overall Goal:

By the completion of the clerkship, the student will recognize the importance of interdisciplinary collaboration in optimizing clinical outcome for patients with psychiatric illness, work effectively with other health professionals, and demonstrate knowledge of the role of mental health services in the larger community and health care systems.

**Online patient log documentation of clinical exposure:**

Students are required to document all significant clinical experiences during the clerkship in the CMC Psychiatry clerkship log posted on Blackboard. The log will be reviewed periodically by the clerkship discipline coordinator to monitor progress, and if necessary, arrange for additional clinical experiences.

The following diagnoses are the experiences and procedures that students must log, in addition to logging demographic and social elements:

- Family Counseling
- Medication Management
- Psycho-education
- Psychotherapy

- Acute Stress Disorder
- Adjustment Disorder
- Alcohol Abuse
- Alcohol Dependence
- Anorexia Nervosa
- Antisocial Personality Disorder
- Anxiety Disorder NOS
- Asperger's Disorder
- Attention Deficit Hyperactivity Disorder
- Autistic Disorder
- Avoidant Personality Disorder
- Bipolar Disorder NOS
- Bipolar I Disorder
- Bipolar II Disorder
- Borderline Personality Disorder
- Brief Psychotic Disorder
- Bulimia Nervosa
- Conduct Disorder
- Cyclothymic Disorder
- Delusional Disorder
- Dementia
- Dependent Personality Disorder
- Depressive Disorder NOS
- Disruptive Behavior Disorder NOS
- Dysthymic Disorder
- Eating Disorder NOS
- Generalized Anxiety Disorder
- Histrionic Personality Disorder
- Major Depressive Disorder
- Narcissistic Personality Disorder
- Obsessive Compulsive Disorder
- Obsessive Compulsive Personality Disorder
- Oppositional Defiant Disorder
- Panic Disorder
- Paranoid Personality Disorder
- Personality Disorder NOS
- Pervasive Developmental Disorder NOS
- Posttraumatic Stress Disorder
- Psychotic Disorder NOS
- Schizoaffective Disorder
- Schizoid Personality Disorder
- Schizophrenia
- Schizophreniform Disorder
- Schizotypal Personality Disorder
- Social Phobia
- Specific Phobia
- Substance Abuse (drug)
- Substance Dependence (drug)
- Substance Induced Disorder with onset during intoxication
- Substance Induced Disorder with onset during withdrawal
- Tourette's Disorder

## 8. Course evaluation method:

Examination Policy:

Assessment in the clerkship:

During the clerkship, each student will meet half-way with each clerkship discipline coordinator for a feedback session. All attending evaluations, patient logs, and participation in didactic sessions will be reviewed.

Expectations for the observed clinical exam: The observed clinical exam will consist of faculty observation of the student performing a thirty minute psychiatric diagnostic interview of an actual patient, followed by a brief oral case presentation, and discussion of the differential diagnosis and treatment plan with the examiner. The exam will evaluate the student's interviewing skills, case presentation skills, knowledge of psychiatric diagnosis and treatment, and professionalism. The exam also provides an opportunity to give the student immediate feedback on their interviewing and case presentation skills. The examination will be conducted by either the Clerkship psychiatry coordinator or faculty preceptors specifically trained in conducting and grading the examination.

The observed clinical exam will be given at the end of Week 5 or during Week 6. Exam scheduling is dependent on suitable patients being available. Students will be given due notice.

Expectations for the NBME Subject Examination in psychiatry:

Students are expected to prepare independently. All examinations will be administered in the Biomedical Sciences building on the dates and times of week 6 of the clerkship posted on Blackboard. A student must sit for all examinations as scheduled.

Performance in all aspects of the clerkship will be monitored:

Clinical Performance Evaluation by Faculty Preceptor	50%
NBME Subject Examination in Psychiatry	30%
Observed Clinical Exam	10%
Written Case Reports	10%

### Passing/failing/remediation policies

Students are to refer to The Student Rights and Responsibilities Handbook (on Blackboard).

Students are expected to achieve all of the following to pass the clerkship:

1. Achieve a score equal to or greater than 70 based on the clerkship grading policy.
2. For the NBME Subject exam, the student must pass, defined as scoring at or above the 5<sup>th</sup> percentile nationally compared to first takers at a similar period of the academic year.
3. Receive an overall "Fulfills CC3 expectations" rating for the aggregate Clinical Performance Evaluation.
4. Pass the observed clinical exam at a minimum of 70%
5. Obtain a minimum of 70% on the written case reports
6. Attend all lectures with required case-based material or make-up absences with assigned work designated by clerkship discipline coordinator.
7. Completion of the patient logs in Blackboard.

If a student fails to achieve any of the above, an Incomplete grade for the clerkship will be assigned. If the NBME subject exam is below the 5<sup>th</sup> percentile, the student will be required to re-take the exam within 14 weeks of notification, unless approved to take it later by the Clerkship Discipline Coordinator. If the exam is passed on the second try, the overall grade will not change (i.e., only the first score will be used in determining



the overall grade), and a “D” will be assigned. If a score at or above the 5<sup>th</sup> percentile on the second attempt is not achieved, a “F” grade will be assigned and remediation (which may include repeating the entire clerkship) will be determined by the Clerkship Discipline Coordinator in conjunction with the Junior/Senior Promotions Committee.

Students are to refer to The Student Rights and Responsibilities Handbook (on Blackboard).

#### **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.**

*A student must obtain permission for an excused absence from the clerkship medicine coordinator 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 clerkship medicine coordinator and the Assistant Dean for Student Affairs must be notified of the absence as soon as possible. A missed examination will be rescheduled at the discretion of the clerkship medicine coordinator, at a time that does not interfere with other clinical work. Unexcused absences will result in a grade of zero (0) for the missed examination.*

#### **11. Special Course requirements:**

Attendance Policy:

The FAU Medical Education Program 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 request must be made to the Clerkship Discipline Coordinator(s). Only a Clerkship Discipline Coordinator 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](http://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:**

Suggested Text:

Students may find the following reference sources helpful.

Title	Author	Publisher
Diagnostic Statistical Manual of Mental Disorders IV-Text Revision		American Psychiatric Publishing
DSM-IV Casebook	Spitzer	APPI
Introductory Textbook of Psychiatry, 4 <sup>th</sup> edition	Andreason and Black	American Psychiatric Publishing
Stahl's Essential Psychopharmacology, 3 <sup>rd</sup> edition	Stahl	Cambridge University Press
American Psychiatric Publishing Textbook of Clinical Psychiatry, 5 <sup>th</sup> edition	Hales (editor)	APPI
APA Practice Guideline for the Treatment of Psychiatric Disorders		APPI
Gabbard's Treatments of Psychiatric Disorders, 4 <sup>th</sup> edition		APPI
Essentials of Clinical Psychopharmacology, 2 <sup>nd</sup> edition	Schatzberg	APPI
Manual of Clinical Psychopharmacology, 6 <sup>th</sup> edition		APPI
Kaplan and Sadock's Concise Textbook of Clinical Psychiatry, 3 <sup>rd</sup> edition	Sadock and Sadock	Lippincott Williams & Wilkins

**Web-based postings on Blackboard:**

Students are encouraged to use their laptop as much as possible in order to access resources, logs and other resources.

Please refrain from checking personal e-mails during teaching periods. Please put your cell phone or other device on “vibrate” to minimize disruption.

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

Academic half-day Handouts	Yes	Academic half-day Objectives	Yes	Exams	No
Required Activities <sup>‡</sup>	Yes	Grades	Yes	Additional Materials	Yes
Procedure logs	Yes	Patient logs	Yes	Evaluation forms	Yes

<sup>‡</sup> Students should note that clinical schedules have been entered for each student in Blackboard. The schedule indicates where students need to be: the start-end times of clinical activities are subject to change.

For example, a community preceptor session may be listed as 8:00 a.m. to 12:00 p.m. The actual time is potentially different, such as 7:45 a.m. to 11:45 a.m. or 8:00 a.m. to 12:15 p.m. The time of the activity is defined by the attending physicians and supersedes only the timing listed in Blackboard.

**17. Course topical outline, including dates:**

**Content outline:**

*Please refer to Blackboard for up-to-date information and session-related objectives and handouts.*

**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.