FLORIDA ATLANTIC UNIVERSITY CHARLES E. SCHMIDT COLLEGE OF MEDICINE COURSE SYLLABUS

GENERAL INFORMATION

Course Number: BCC 7177

Credit Hours: 15

Prerequisites: Enrolled in 3rd Year of MD program

Online: Blackboard Learning System

Term: All

Course Title: Geriatrics and Palliative Care Clerkship

Course Director: Joseph Ouslander, M.D.

Office: BC-71 Room 237

Office Hours: Tuesday, Wednesday 1:30 – 3:00 p.m.

Telephone: 297 0975

E-Mail: joseph.ouslander@fau.edu

COURSE DESCRIPTION

The overall goal of this clerkship is to prepare medical students to utilize person-centered and evidence-based approaches to the management of older adults in different settings of care, including palliative and end-of-life care. The knowledge and skills acquired during this clerkship should transcend any specialty area of medicine – virtually all physicians who practice clinical medicine must have a basic understanding of the care of the most rapidly growing segment of the U.S. population, who disproportionately use health services.

COURSE OBJECTIVES

The key learning objectives for this clerkship are to:

- 1. Understand the key differences in managing chronic and acute conditions in older vs. younger patients in different health care settings.
- 2. Apply national goals for high quality health care to older patients in different health care settings and transitions among these settings i.e. the STEEEP goals care that is:
 - a. Safe
 - b. Timely
 - c. Effective
 - d. Efficient
 - e. Equitable
 - f. Person-centered
- 3. Incorporate principles of palliative care into the care of older patients and their families

4. Utilize evidence-based practices to the extent they are available in the care of older patients and their families.

Geriatrics and Palliative Care Competencies

By the end of this clerkship, students will be expected to demonstrate the following competencies:

- 1. Perform a comprehensive geriatric-oriented history and physical examination, including assessing and describing functional status using multiple data sources and standardized geriatric assessment tools when appropriate, and incorporate findings into a plan of care.
- 2. Evaluate and manage selected common geriatric syndromes which occur in hospitalized older adults and apply potential prevention strategies, including at least two of the following conditions: immobility, delirium, medication side effects, malnutrition, pressure ulcers, or hospital acquired infections.
- **3.** Generate a differential diagnosis based on recognition of the unique presentations of common conditions in older adults, including at least two of the following: acute coronary syndrome, congestive heart failure, dehydration, urinary tract infection, acute abdomen, and pneumonia.
- **4.** Plan drug therapy that maximizes benefits, and at the same time minimizes risks and costs for older patients, with particular attention to age-related changes that may alter pharmacology, and drugs that should be avoided in older patients.
- **5.** Apply the strengths of different disciplines to the design of a safe and feasible discharge plan for a hospitalized geriatric patient with multiple medical and functional problems.
- **6.** Determine the appropriate role for palliative and hospice in the care of geriatric patients.
- **7.** Assess and provide initial management of pain and related non-pain symptoms based on patients' goals of care.
- **8.** Communicate effectively in order to assist geriatric patients and their caregivers in making care decisions that account for life expectancy, functional status, patient preferences and their goals of care.
- **9.** Demonstrate an understanding of how health care financing for the elderly can impact the development of management plans for individual geriatric patients, especially during transitions between care settings.
- **10.** Apply evidence-based practice to the care of geriatric patients.

EVALUATION

Grading Policy for M3

Grades in the third year clerkships

Student will receive grades in the following Clerkships based on an Honors, High Satisfactory, Satisfactory, Unsatisfactory scale:

Medicine

Surgery

Geriatrics

Pediatrics

Obstetrics and Gynecology

Psychiatry

Community and Preventive Medicine/Longitudinal Preceptorship

Students will receive a Satisfactory/Unsatisfactory grade for each Longitudinal Integrated Clerkship.

A target will be set for a maximum of 25% Honors for each graded clerkship. This will be decided by the members of each discipline specific Clerkship Grading Committee.

Grading requirements

Performance in all aspects of the clerkship will be monitored. Students are required to pass all components stipulated in the clerkship syllabus in order to pass the clerkship. The clerkship grade will be determined by components that will assess medical knowledge, clinical skills, professionalism, and discipline-specific skills.

Clinical Performance Evaluation by Faculty Preceptor (Clinical skills)

NBME Subject Examination (Medical Knowledge)

Professionalism (attendance, patient logs, participation, communication skills)

Presentations, Oral Exams, OSCEs and Projects (Clerkship dependent)

Performance in a clerkship that is below expectations or unsatisfactory in any of the components of the clerkship, as defined in the discipline handbook, will result in grade of "Unsatisfactory".

Expectations for the assignments and projects

Clerkship Directors will determine the specific formative and summative requirements for their clerkship including write-ups, OSCE's, presentations, assignments, oral examinations etc. Determinates of the final grade in all clerkships will be clearly stated in the handbook for that discipline. Students should review the handbook for each clerkship so they understand the ways in which they will be assessed and how the final grade will be determined.

Clinical Performance Evaluations

Evaluation forms will be completed by clinical attendings and/or faculty preceptors.

Clinical Evaluations will assess students based on the following categories:

- (1) History Taking
- (2) Physical Examination
- (3) Record Keeping
- (4) Oral Presentation
- (5) Clinical Problem Solving
- (6) Fund of Knowledge
- (7) Professional Attributes and Responsibility
- (8) Self-Improvement
- (9) Interpersonal Communication Skills (Patients and Families)
- (10) Interpersonal Communication Skills (Relations with Health Care Team)
- (11) Narrative Assessment

The achievement of educational objectives in these areas defines the successful development of the physician-in-training and occurs during the course of a student's progress in medical school and beyond.

The Clerkship Evaluation Form is located in handbook.

Determining Final Core Clerkship Grades

All final core clerkship grades will be determined by the Grading Committee for that discipline. Further details on how grades are determined in each clerkship will be defined in that discipline's handbook. Grading Committees for each discipline will consist of the Clerkship Directors, Site Directors, and/or faculty members in that discipline. The final grade will reflect the totality of the experiences with that student. The Clerkship Directors have the authority to disregard an individual assessment based on judgment of the preponderance of the evidence. All grades for a given LIC will be reported to students no greater than six weeks after the completion of that LIC.

An **Honors** grade will be given to students for superior or outstanding achievement in all of their components for that clerkship, as determined by the Discipline Grading Committee.

Ordinarily, Honors grades will be given to no more than 25% of a class.

A **High Satisfactory** grade will be given to students with superior achievement in several, but not all components of the clerkship.

A **Satisfactory** grade will be given to students who demonstrate satisfactory achievement in all components of the clerkship.

A grade of **Unsatisfactory** will be given to students whose performance is unsatisfactory or because of important deficiencies in some or all aspects of their clerkship performance.

Grade Descriptors

The qualitative descriptors below will be used for grade determination by the Geriatrics and Palliative Care Clerkship Grading Committee:

Unsatisfactory:

This student has shown significant deficits in any one of the major areas of assessment including history taking, physical examination, clinical problem solving, record keeping, presentation skills, fund of knowledge, professional attributes and responsibility, self-improvement, interpersonal skills, communication skills with patients, families, and the health care team. The student did not complete patient logs, assigned CLIPP Cases, or required Clinical Skills Assessments in a satisfactory manner. The student failed to pass the Pediatrics NBME Shelf Exam (< 5th percentile). The deficit(s) observed cause serious concern about the student's ability to deliver appropriate care to patients and/or to conduct themselves with the professionalism expected of third year medical students as determined by the Geriatrics and Pallative Care Clerkship Grading Committee.

Satisfactory:

This student has generally demonstrated proficiency with the basic material and skills expected of a student at this level of training but has shown limited motivation to learn during the rotation and has demonstrated one or two areas which though not frankly deficient would benefit from continued improvement. Examples include occasionally superficial or disorganized write-ups or presentations, occasional notable omissions or errors in a history, some gaps in knowledge of basic pathophysiology or therapeutics, occasional difficulty in interactions with patients, family or staff. This student met expectations for their exams, assignments, and patient logs. Any significant deficits that raise serious concern about the student's ability to function appropriately in a clinical setting warrant a grade of Unsatisfactory rather than Satisfactory.

High Satisfactory:

This student's work consistently exceeds expectations in all respects; in at least several areas, the student's work has been very good to outstanding. Although not truly exceptional, the student is consistently motivated, reliable, and organized, and works well with patients, staff and faculty. By the end of the rotation, he/she can be trusted to perform and present a thorough, reasonably efficient evaluation on a complex patient and generate an appropriate differential diagnosis and treatment plan. He/she has completed all expected tasks during the rotation and has sometimes sought out additional opportunities for learning and contributing during the rotation. This student performed adequately to extremely well on their Pediatrics NBME shelf exam, and completed all assignments and patient logs in a timely manner. This student demonstrates strong professionalism skills.

Honors:

This student has consistently performed at levels that far exceed the expected level for their level of training. He/she has consistently demonstrated excellent to outstanding clinical skills, presentations, write-ups and fund of knowledge, is highly motivated, reliable and well attuned to patients, families and staff, reads widely, and shows a consistent interest in seeking out and incorporating feedback, extending skills and knowledge, and contributing to the team. This student completed all assignments and patient logs in an exemplary manner. This student has impeccable professionalism. High scores (particularly above 50th

percentile) on the Shelf Exam, while not required, are a plus that may be considered when other areas of performance are in the range between Honors and High Honors. The student has demonstrated performance that would typically merit enthusiastic recommendation to a leading residency training program.

Passing/Failing/Remediation policies

Students are expected to pass all of the components of the clerkship including clerkship evaluations, NBME subject exam, professionalism, and other assignments in order to pass the clerkship:

Expectations for the NBME Subject Examination in each discipline: Failure on the NBME shelf exam will result in a grade of "I" providing that performance in all other components of the clerkship is judged satisfactorily. Passing a re-examination will enable the "I" to be converted to a "P." No more than two such "I's" will be allowed during an academic year.

Students are expected to prepare independently. All examinations will be administered at FAU at the dates and times assigned in your clerkship schedule. A student must sit for all examinations as scheduled. A student must obtain permission for an excused absence from the clerkship director and notify the Dean for Student Affairs prior to the time for sitting for a scheduled examination. In the event of a personal emergency, the course clerkship director and the 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 director, 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.

Criteria and Policies Regarding Failing the NBME

To pass the clerkship you must "pass" the NBME, defined as scoring at or above the 5th percentile nationally compared to first takers at a similar period of the academic year. If you fail to do so, you will receive an incomplete grade for the clerkship. You will be required to re-take the exam during one of the preferred NBME Remediation Dates, unless approved by the Clerkship Director to take it later at another time. If you fail to score at or above the 5th percentile on your second attempt, you will receive a failing grade and remediation (which may include repeating the entire clerkship) will be determined by the Clerkship Discipline Coordinator in conjunction with the Clinical Promotions Committee.

Preferred Shelf Exam Remediation Dates

Upon notification of failing the NBME, the student must contact the LIC Director/or the Clerkship Director to set a date to retake the exam. To avoid having to study for and take the makeup exam while actively in another clerkship, the following dates have been set as preferred Shelf Exam Remediation Dates:

- The 1st Monday afternoon upon return from Winter Break
- The 1st Monday afternoon after return from Summer Break
- Two weeks after the completion of M3, prior to start of 4th year.

Ideally, the earliest one of these dates should be chosen. However, the student should have enough time to study for the exam, preferably spending one-to-two weeks of unscheduled time to do so. The date is to be determined by the Clerkship Director, after consultation with the student, and if necessary, with the M3/M4 Committee.

Remediation of a Failing grade

If a student fails a clerkship, remediation will be determined by the Clerkship Director in conjunction with discipline specific Clerkship Grading Committee. If remediation includes additional time in clinical experiences, the scheduling of this time will be set by the LIC Directors, after consultation with the student, the Clerkship Directors, and the student's Learning Community Advisor. Exceptions will be at the discretion of the Clerkship Director and the discipline specific Clerkship Grading Committee. If a student fails 2 clerkships within a given LIC, the student will be required to re-take the LIC in the next calendar year.

Professionalism

Students whose professionalism prompts concerns will see that reflected in their grade for the clerkship. Major professionalism issues may result in a Fail for the clerkship regardless of clinical grades or final exam performance.

The following is a list of some of the reasons for which the clerkship director will bring student up for discussion at the Clerkship Directors meeting and the students' grade may be impacted.

- Any unexcused absences to <u>didactic sessions</u> or <u>clinical duties</u>
- Any excused or unexcused absences to orientation
- Any excused or unexcused absences to <u>exams</u> (including exams rescheduled for valid reasons)
- Any excused or unexcused absences to <u>simulation exercises</u>
- Any comment of unprofessional behavior on evaluations or otherwise reported to the clerkship director
- Late, incomplete, or unsatisfactory submission of electronic patient log reports
- Recurrent tardiness
- Any late or incomplete assignments

Attendance Policy

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 Directors. Only a Clerkship 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.

Unexpected absences: If a student is absent unexpectedly from the scheduled daily activities of the rotation, the clerkship director and the supervising attending should be notified by phone as early as possible. If the clerkship director is unavailable, the LIC Director should be called. Failure to notify the appropriate individual will result in the absence being unexcused.

All absences will be recorded and reviewed at the monthly Clerkship Director meeting. Repeated absences from required curricular activities may result in disciplinary action, up to and including dismissal from the CESCOM.

Monitoring Student progress/performance:

Weekly informal discussions on student progress between clerkship directors, site directors, and clinical faculty. These discussions will occur at the various clinical sites and also from 1 to 1:30 on Tuesdays at FAU prior to start of didactic afternoons.

Every two weeks the students' discipline specific patient log lists will be sent to each clerkship directors for review.

Monthly in person, email or phone communication will occur between clerkship directors/site directors and the clinical faculty and preceptors to hear how students are performing, and assure that they are meeting expectations.

Monthly clerkship directors meeting at FAU on Tuesday from 12 to 1 to officially review each student's progress and discuss curricular issues. Final monthly meeting of each LIC will be used as the grading committee meetings to discuss LIC grades for each student. The final meeting of each 6 months will be for discipline specific grading committee meetings and will be used to determine Honors /High Satisfactory/Satisfactory/Unsatisfactory grades for each clerkship.

Every 2 months an on-line evaluation form will be filled out by all clinical faculty/preceptors that will be sent to clerkship directors/LIC Directors for review. First 2 bimonthly on-line evaluations in LIC will be formative, final evaluation will be used for grading/narrative purposes.

Feedback to students:

Students will receive daily/weekly informal feedback from the clinical attendings and preceptors they are working with. Faculty development sessions will be used to educate faculty on how to give feedback to students in their offices and in the hospitals.

LIC Directors, Clerkship Directors, and /or designated Site Directors will meet individually every 2 months with students to give them formal feedback on their performance during the LICs. All attending evaluations, patient logs, assignments/projects, and participation in didactic sessions will be reviewed, as well as a student's own self-assessment. These meetings will occur after the on-line evaluations are received from the clinical faculty, so that this information can be reported to students and any plans for improvement/remediation can be implemented.

Students who have concerns or questions about their progress can at any time contact their clerkship director/LIC director individually to set up a meeting.

Student Appeal of a Grade

Students who do not feel that their summary evaluation or grade accurately reflected their performance should follow the policies defined in the FAU student handbook.

COURSE INFORMATION

Rotation Overview

- Integrated with the core Internal Medicine and Surgery Clerkships as part of the Medical and Surgical Sciences (MSS) Longitudinal Integrated Clerkship.
- Students will be assigned to one of the geriatrics sites: Cleveland Clinic or Boca Regional Hospital and will also spend time at affiliated skilled nursing facilities, home care programs, and hospices.
- The geriatrics rotation will be 10 weeks divided into two 5 week blocks. Each student will have 2 scheduled half-day geriatric/palliative care sessions per week for those 10 weeks, for a total of 20 half day sessions within the 6 month clerkship.

Requirements for Geriatrics and Palliative Care

During the Geriatrics/Palliative Care rotation each student will be expected to:

- 1. Perform two admission evaluations on elderly patients admitted to a skilled nursing facility for rehabilitation with the goal of returning home and complete and complete a structured note.
- 2. Perform one inpatient geriatric evaluation before discharge home or to a skilled nursing home, and a post-discharge evaluation of the same patient (can be one of the patients for #1).
- **3.** Perform at least one inpatient geriatric case study of a complex older patient, preferably a patient who has been readmitted to the hospital within 30 days of a previous admission and complete a structured note.
- **4.** Participate in at least one home visit with a Medicare home health nurse on an elderly patient within two weeks of hospital discharge and complete a structured note.
- **5.** Participate in at least one visit to a patient on home hospice and complete a structured note.
- **6.** Perform at least two assessments (routine or change in condition) of a long-stay nursing home resident using a structured note.
- 7. Present one Geriatrics Journal Club on teaching rounds.

8. Complete the Case-Based Geriatrics Self-Learning Modules and review them with teaching attending physicians.

Geriatrics and Palliative Care References and Resources

- Required Text:
 Essentials of Clinical Geriatrics. Kane, Ouslander, Abrass and Resnick. McGraw-Hill Professions; 7th edition.
- Case-Based Learning Modules on Geriatric Conditions

Overall Medical and Surgical Sciences Integrated Clerkship Assignments

Patient Logs: All geriatric and palliative care patients seen must be logged and submitted in a timely manner.

Direct observation of Clinical Skills ("DOCS" cards): All students are required to be observed interviewing and/or examining patients by their supervising attendings. Students are responsible to hand in their assigned Direct Observation of Clinical Skills cards to the clerkship director before the end of the clerkship.

Student Report: All the students will present a case based teaching presentation during the Tuesday didactic afternoons at FAU. The topic will be a case from one of the MSS disciplines: Medicine, Surgery, or Geriatrics. Appropriate current references and journals must be utilized.

Didactics

Teaching sessions will be held at FAU on Tuesday afternoons. All the topics within Medical and Surgical Sciences will be integrated over the 6 month clerkship. The geriatrics and palliative care topics will be:

- Preventing iatrogenic complications in the hospitalized elders
- Interventions to improve care transitions in the geriatric population
- Evidence-based update in clinical geriatrics
- Palliative care consultation case studies
- Case Presentations root cause analysis of 30-day hospital admissions in Medicare patients
- Case Presentations End-of-life care in patients with dementia

Religious Observance (Adapted from the FAU Policy)

The College of Medicine recognizes that students, faculty and staff observe a variety of religious faiths and practices. Although many religious holidays are observed with time off, a few of the religious days of observance may be part of the academic calendar. The College respects the religious beliefs and practices of its students and seeks to accommodate them within the requirements of the academic schedule. As a result, a student who must be absent from a class requirement will not be penalized. Students who anticipate absence should notify the OSA and the supervising faculty in advance. The instructor will provide a reasonable opportunity to make up such excused absences. Any student who feels aggrieved regarding religious accommodations may present a grievance to the Director of Equal Opportunity Programs. Any such grievances will follow Florida Atlantic University's established grievance procedure regarding alleged discrimination. The College will follow the established FAU policy regarding absences due to personal observances of religious holidays.

To review the policy, access the Leave of Absence Policy: http://www.fau.edu/policies/files/PM76_OCR.pdf

Disability Support Services

In compliance with the Americans with Disabilities Act (ADA), students who require special accommodations due to a disability to properly execute coursework must register with the Office for Students with Disabilities (OSD) located in Boca Raton – SU133 (561-297-3880 and follow all OSD procedures.

Code of Academic Integrity

Students at Florida Atlantic University are expected to maintain the highest ethical standards. Academic dishonesty, including cheating and plagiarism, 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. Harsh penalties are associated with academic dishonesty. For more information, see:

- 1. The Policy on Academic, Professional and Behavioral Requirements and Standards governing the College of Medicine
- 2. Oath of Academic and Professional Conduct for Students in the College of Medicine
- 3. *University Regulation 4.001*