



Clinical Skills IV

MEDC 223.8

YEAR 2 TERM 2

 COURSE SYLLABUS 2016-17



UNIVERSITY OF SASKATCHEWAN

College of Medicine

MEDICINE.USASK.CA

COURSE DESCRIPTION

Learning in Clinical Skills IV (Year 2 – Term 2) will enable students to improve their clinical skills, including patient-centered communication and physical examination through a combination of assessment of ‘real-life’ patients and structured learning sessions in a **small group setting**. Students will further develop clinical reasoning skills including development of differential diagnoses, and interpretation of investigations. The course will include the following components, **Clinical Scenarios, Focused Interview and Physical Examination and Review Sessions, Discipline-specific patient Encounter Sessions** in Endocrinology, Plastic Surgery, Pediatrics, Geriatrics, Female Reproductive Health, Female Sensitive Exam, and Mental Health. When appropriate and possible, sessions will be organized around content students are learning in other courses.

Completion of this course will help you attain elements of your overall undergraduate program objectives ([MD Program Objectives](#)).

COURSE OBJECTIVES

By the completion of Clinical Skills IV course, students will be able to:

1. Establish ethical relationships with patients characterized by understanding, trust and empathy (professional, communicator)
2. Conduct patient-centered interviews that:
 - explore and apply the four dimensions of illness – “FIFE” (feelings, ideas, impact on function, expectations);
 - explore the disease process and relevant past history;
 - explore relevant social, cultural, and family context with the patient;
 - reach agreement with patients on the nature of their problems, appropriate goals of treatment, and roles of patient and doctor (and others, as appropriate) in management (communicator, medical expert, collaborator).
3. Perform a physical examination relevant to a patient’s presenting problems, in an orderly efficient manner, demonstrating respect and sensitivity to patient comfort (medical expert, professional)
4. Practice clinical reasoning, including tailoring the interview content and physical examination, and integrating investigations to assist with the development of a provisional differential diagnosis (medical expert)
5. Present a concise verbal summary of the patient’s disease and illness experience, potential differential diagnoses, attempt to provide a brief assessment and management plan, and record the information obtained in an appropriate format (communicator, medical expert)
6. Solve or suggest solutions to clinical problems, dilemmas, and challenges suitable for their level of training including advocating for the patient as necessary (medical expert, advocate)
7. Demonstrate skill in those procedures taught in Clinical Skills I-IV (medical expert)
8. Demonstrate competence in personal time management, such that competing demands are prioritized, requirements are completed as described, and deadlines are met (manager, professional)
9. Demonstrate skills in using appropriate evidence-based resources to develop differential diagnoses, investigative and management plans (scholar)
10. Exhibit professional behaviours consistently, including integrity; respect for and effective working relationships with patients, faculty, staff and peers; appropriate attire, awareness of necessity for scent free environment; and responsibility through punctual, regular attendance and timely completion of assignments (professional, collaborator)

COURSE CONTACTS

Course Director: Dr. Karen Mohr – karen.mohr@usask.ca

Clinical Skills Course Chair: Dr. Joanna Smith – Joanna.smith@usask.ca

Administrative Coordinator (Saskatoon): Laura Erickson – laura.erickson@usask.ca (306)-966-5354

Administrative Coordinator (Regina): Alexis Robb - alexis.robbs@rqhealth.ca (306) 766-0556

Administrative Assistant: Kimberly Basque kimberly.basque@usask.ca - (306) 966-6151

COURSE SCHEDULE

The Clinical Skills IV Course consists of a variety of activities (including lectures, CLRC sessions, department-based sessions, and half day skills specific learning). Your schedule will be posted on One45.

Please check One45 **DAILY** to ensure that you have the most current schedule information. Schedule is subject to change. Changes to the schedule will be posted to One45. **Changes to the schedule may be made up to 48 hours in advance of the scheduled session, if required.** If a change is made to the schedule after it has been posted to one45, students will be notified by email as well as the change being made in one45. Students must stay in their assigned groups (no switching).

INDEPENDENT LEARNING

During the course, protected time for independent learning has been set aside to allow and encourage students to prepare and practice skills learned for their own progress in meeting the broad objectives for the medical program.

COURSE DELIVERY

Students are broken into small groups that they will continue in through the course. Students are advised trades or switches are not permitted as students are expected to stay with their pre-assigned group throughout the term.

Students will learn through a variety of methods, including:

Facilitated small group learning sessions with simulated and ward/clinic patients

- CLRC Sessions/Learning Centre
- Departmental Discipline Sessions
- Specific skills training half days

Independent self-directed learning

COURSE MATERIAL ACCESS

Course materials, including the syllabus, sessions, objectives, required reading, forms, and other useful documents are posted on One45.

- If you are having difficulty accessing your account please contact Student Central 306-966-1212 or contact IT Services Help Desk 306-966-4817

RESOURCES

📖 READINGS/TEXTBOOKS

- Required Textbook: Bates Guide to Physical Examination and History Taking 11th Edition, Lippincott Williams & Wilkins, 2013.
- Bates' Visual Guide to Physical Examination. Available online under Health Sciences Library at: <http://library.usask.ca/hsl>
- Learning materials from previous Clinical Skills Courses are valuable references – available at <http://sundog.usask.ca/search/r?SEARCH=MEDC+113.8>
- Kaplan and Sadock's Synopsis of Psychiatry: Behavioral Sciences/Clinical Psychiatry, (11th Ed.) B.J. Sadock (Author), V.A. Sadock (Author), R. Ruiz (Ed.), (2014) ISBN 978-1609139711 (Mental Health module)
- Interview Guide for Evaluating DSM-5 Psychiatric Disorders and the Mental Status Examination, by Mark Zimmerman, (2013) ISBN (Mental Health Module)

- Other reading:
 - The Edmonton Manual: Approach to the OSCE 4th Edition, Editors-in-chief Turner and Raghuram, 2015
 - Clinical Examination: A systematic guide to the physical diagnosis 7th Edition, N.J. Talley, S. O’Oonnor.

REQUIRED MEDICAL INSTRUMENTS

These required medical instruments must be purchased before the commencement of the school year:

- stethoscope
- reflex hammer (Queen’s Square preferred)*
- centimeter ruler
- pen light
- flexible tape measure
- watch with second hand
- lab coat*

*Lab coats can be purchased at:

- U of S Main Bookstore, Marquis Hall
- Uniform Choice at: 7A 3110 8th St. E. (306-651-0388)

Please bring all necessary equipment to sessions. Preceptors will not provide stethoscopes, pen lights, reflex hammers, etc. for you to use.

RECOMMENDED MEDICAL INSTRUMENTS

While the above medical instruments are required, it is strongly recommended that you have the following instruments for personal use.

- ophthalmoscope/otoscope
- aneroid blood pressure cuff
- tuning fork(s) (128 cps +/- 512 cps)

CLINICAL LEARNING

Saskatoon Site:

The CLRC (2nd floor, E wing, Health Sciences Building) is where several small group sessions are held. The CLRC is available for students to practice clinical skills outside of class time when space is available. You will need to request practice time in advance by emailing: clrc_scheduling@usask.ca or through a Super User.

Regina Site:

Regina small group learning sessions are held in the Learning Centre

The learning centre is available after hours to the students. They need to use their RQHR id badges to access the space. 4 exam rooms are open in the evenings to use. During the day, study and practice space is available, but must be booked through one of the UGME staff.

The simulation centre is also available to students after they do an individual orientation session with the simulation staff. Once that orientation is complete, the student’s id badge will allow them access to the space

FEEDBACK ON STUDENT PERFORMANCE

Student feedback is information regarding student performance that is offered with the express purpose of improving their learning and future performance. It is considered one of the most powerful influences on learning and achievement (Hattie & Timperley, 2007).

Clinical Skills courses are the practice arenas to develop and hone your medical skills. Feedback in these courses is constant and comes through a variety of sources and in numerous ways. Informal, formal, self, and peer feedback are all part of this course. Course tutors will provide you with a variety of formal and informal, verbal and written feedback throughout your clinical sessions. You will be asked to give and receive peer feedback during sessions and will be taught how to do this in a specific and objective fashion. You should also be constantly reflecting, setting targets, and developing action plans for improvement and integration of feedback in constructive ways. Every interaction in this course is an opportunity for growth – you will receive formal and informal feedback throughout each module, but do not discount the value of oral feedback and comments.

DRESS CODE

All sessions require professional dress for clinic. Please do not assume that scrubs will be provided. Please come dressed and groomed in a manner that would be viewed acceptable by other conservative professionals.

COURSE ASSESSMENT OVERVIEW

MODULE	SESSIONS	ASSESSMENT COMPONENTS	SUCCESSFUL COMPLETION
Clinical Scenarios	Dermatology Endocrinology Female Reproductive Cases 13-18	Summative cumulative assessment	Pass 70%
Focused Interview and Physical Exam (FIPE)	Review	Formative assessment during session.	Pass 70%
		Long case write up (20% of FIPE module mark) Due one(1) week after the session by 23:59	Pass 70%
		Mini-OSCE session (20% of FIPE module mark)	Pass 70%
	Female Reproductive	Pre-quiz for each session (10% of FIPE module mark)	Pass 70%
		Summative Assessment of Session (10% of FIPE module mark)	Pass 70%
	Endocrinology	Case write-up (20% of FIPE module mark) Due one(1) week after the session by 23:59	Pass 70%
Summative Assessment of Session (10% of FIPE module mark)		Pass70%	
Dermatology	Summative Assessment of Session (10% of FIPE module mark)	Pass 70%	
Ultrasounds Enhanced Clinical Exam	Formative assessment during session	Mandatory attendance with active participation	

Discipline-Specific Patient Encounter (DSPE)	Endocrinology Clinic Encounter	Formative assessment during session	Mandatory attendance with active participation
	Pediatrics (Review, Newborn)	Summative Assessment of session(s) (6% of module mark)	Pass 70%
		Case Write Up (4% of module mark) Due one(1) week after the session by 23:59	Pass 70%
	Female Reproduction (Gynecological History Encounter, Pelvic Examination Teaching)	Pre-session Blackboard quiz for Pelvic Examination session (5% of module mark)	Pass 70%
		Case write up of ward encounter (15% of module mark) Due one (1) week after session by 23:59	Pass 70%
	Sensitive Exam Teaching Associates Female	Formative assessment during session	Mandatory attendance with active participation
	Phlebotomy	Formative assessment during session	Mandatory attendance with active participation
	Geriatrics skills day	Summative in-session assignment (20% of module mark)	Pass 70%
Mental Health	Summative assessment of session(s) (5% of module mark)	Pass 70%	
	Interview Skills assessment (30% of module mark) Interview write up (15% of module mark) Due one (1) week after session by 23:59	Pass 70%	
Plastics skills ½ day	Formative assessment during session	Mandatory attendance with active participation	
OSCE	Summative OSCE based on ANY modules and disciplines within Clinical Skills I-IV	40% of course mark	Grade as determined by criterion referenced standard setting Reference
Written Final Exam	Written questions from ANY of the modules and disciplines within Clinical Skills IV.	20% of course mark	Pass mark 70%

MARK ALLOCATION

Modules: 40%, Distributed as follows: FIPE 10% DSPE 25% and Clinical Scenarios 5%

OSCE: 40 %*

Written Final Exam: 20%

* OSCE pass mark will be set at the total OSCE score level using a criterion referenced standard such that a passing candidate is determined to be acceptably competent to progress within the curriculum.

Cut scores, thus determined, will be adjusted to a pass mark of 70%, or as defined in the course syllabus.

ASSIGNMENT SUBMISSION POLICY

Assignment Submission:

It is the expectation that all assignments will be submitted on time, as this is an element of professionalism.

Late Assignments:

Any assignment submitted after 23:59 SK time on the specified date is deemed **late** (unless otherwise specified). All due dates or timelines for assignment submission are published in the student course syllabus. *

*Note: Blackboard routinely updates their systems on certain Wednesday evenings. In the event that Blackboard is down for scheduled maintenance or due to technical difficulties, assignments are to be submitted by 0900 the following morning.

A late assignment may still be submitted up to three consecutive calendar days (72 hours) from the original deadline for that assessment. The assignment must be submitted to the appropriate year Administrative Co-ordinator in Saskatoon, or the Educational Consultant in Regina for years 1-2. Years 3-4 must submit to the Rotation Coordinator. The maximum mark that a student may receive on a late assignment will be the pass mark for the assignment, but can be lower if warranted.

Any late assignments not submitted by 23:59 on the third day will receive a mark of 0%. After this period, all mandatory assignments must still be submitted, or the student will be deemed to be missing a course component, which will result in an incomplete course. Subsequent academic consequences will be determined at the promotions committee meetings.

In addition to the consequences specified herein, students submitting mandatory assignments late should anticipate a meeting to discuss professionalism, which may result in associated documentation.

All requests for a deferral of an assignment due date must be received a minimum of 72 hours prior to the deadline.

All such requests must be sent to the Course Director or Rotation Coordinator and copied to the relevant Administrative Co-ordinator. The course director, in consultation with the year chair and appropriate course/module/rotation director will make a final decision and notify the student of the outcome. Exceptional, unforeseen circumstances will be considered on an individual basis as above.

CITATION FORMAT

Unless otherwise specified by the course or module director, the expected citation format is that of the International Committee of Medical Journal Editors (ICMJE). Examples of this citation format are available at www.nlm.nih.gov/bsd/uniform_requirements.html

COURSE POLICY FOR SUCCESSFUL COMPLETION & REMEDIATION

In order to successfully complete the course for the purposes of promotion, students must pass the final exam, pass the OSCE, pass all course modules, and fail no more than 2 individual course assessments. If required, one individual course component may be remediated once under the conditions stated below in order to complete the course requirements for passing.

The four course components required for successful completion are as follows:

1. Written End of Term Exam: Successful completion of the written end of term exam. Students must achieve a pass mark of 70% on the written end of term exam.
2. OSCE: Successful completion of the OSCE achieving a passing grade as determined by criterion referenced standard setting.
3. Course Modules: Successful completion of all course modules as outlined in the assessment overview. Students must achieve a pass mark of 70% in each course module (FIPE, Clinical Scenarios, and DSPE).
4. In-Module Assessments: In the event that a student fails 3 or more individual in-module assessments, this will be treated as equivalent to a failure of a course component. Assessments contributing to an already failed course module do not contribute towards this total.

PROFESSIONALISM:

Students can be deemed unsuccessful on any course assessment for not achieving course expectations of professionalism. This would include, but is not limited to, any unapproved absences from a mandatory session, and/or submission of late assignments. Students failing to meet professional expectations in the course should anticipate a meeting with the Module/Course Directors and/or Year Chair to discuss the concern, which may result in a breach of professionalism report. For further information on professionalism, please refer to the UGME Breach of Professionalism policy and statement on [Ethics and Professionalism](#).

REMIEDIATION:

1. In the event of a failure of any one of the above course components a student may be offered remediation and supplemental assessment. Failure of more than one course component will result in an automatic failure of the course, with no remediation offered.
2. At the point that a failure of a course component is identified during the term, a student will meet with the Module/Course Director and/or Year Chair to devise a learning plan if remediation is being offered. The module director/course director retains the right to determine the specific type of remediation needed for each individual student. This remediation may be in the form of additional assignments, assigned readings, and meetings with the module director and/or other mentors. This may not apply if a failure of a course component is identified after the final exam period*.
3. After completion of remediation a supplemental assessment will be offered at the end of the term. The Module Director retains the right to determine the specific type of supplemental assessment, which may be in a different format than the original assessment.
4. Failure of a supplemental assessment will be deemed as a failure of a second course component resulting in automatic failure of the course.
5. A maximum of 1 course component remediation and supplemental assessment will be offered for the course. Where the in-module assessment component (course component #4) needs to be remediated, this will require remediation of each assignment/assessment separately, but still shall be considered the remediation of one course component for the purposes this policy. Successful completion of remediation and supplemental assessment will result in a grade a minimum pass grade for that component.
6. In the event that remediation of any part of this course, including but not limited to: clinical experiences, assignments, written exams or OSCEs is required, students must be available in an appropriate site for up to 6 weeks post completion of a course to complete the remediation process. It is strongly recommend that any travel be carefully planned with this is mind, including researching cancelation policies and carefully considering non-refundable items. Exceptions and appeals to this policy will be adjudicated on a case by case basis by the Program Manager of UGME, the Assistant Dean Academic and Associate Dean of UGME. Exceptions to this policy will be rare and granted under only very special circumstances.

7. There will only be a single site supplemental OSCE. The supplemental OSCE will either be in Saskatoon or Regina and students will be expected to travel to whichever site is chosen.

*When failure of a course component is identified after the final examination period, the implications of this failure will be adjudicated at the Year 2 Promotions Committee and a final decision whether to grant remediation/supplemental work will be determined by the Student Academic Management Committee.

COURSE FAILURE

Students who fail two or more of the above course components will be considered **unsuccessful** in the Clinical Skills IV Course and will **NOT** be offered additional remediation and supplemental assessment. This includes failure of a supplemental assessment.

Students with significant professionalism concerns may also be deemed unsuccessful in the course on the basis of unprofessional conduct.

Students who are not promoted as a result of failure of this course will receive an “F” on their transcripts for the relevant course.

Further decisions regarding academic outcomes will be adjudicated by the Year 2 Term II Promotions Committee and the Student Academic Management Committee.

WRITTEN COURSE ASSESSMENT COMPONENTS DUE DATES

Course components including a written assessment component (SOAP note, Case write-up, Reflective Journaling Assignment) are due at 23:59 SK time, **ONE WEEK following the clinical encounter**, unless advised otherwise by your instructor or the UGME office. Respect for due dates is a component of professionalism and is assessed as such.

*Note: Blackboard routinely updates their systems on certain Wednesday evenings. In the event that Blackboard is down for scheduled maintenance or due to technical difficulties, assignments are to be submitted by 0900 the following morning.

ATTENDANCE

See [Student Information Guide](#) for the general policy.

It is expected that students will attend all small group sessions unless absence is unavoidable.

Who should you contact in case of an absence?

Illness or family emergencies or compassionate reasons – Prior to the absence, or as soon as possible after the absence, a student must notify (1) Year 2 Admin Coordinator – Absence Request to (laura.erickson@usask.ca) or in person (B526, Health Sciences Building), or phone (306) 966-5354; and (2) his/her preceptor for the clinical or small group session. For Regina students contact Christa Kaytor via email (Christa.Kaytor@rqhealth.ca), (306) 766-3157 with reasons for each missed session. Such notification should occur before the session in question, whenever circumstances permit.

Unexplained absences and/or other unprofessional conduct is grounds for an informal/formal breach of professionalism and could result in failure of the course.

What are the implications of being absent?

When students have absences for other reasons for which they have received prior approval, they will not be assessed negatively in terms of professionalism. Students should request guidance from their preceptor on how to independently make up any material missed. Sessions will not be rescheduled and additional sessions will not be offered in order to make up missed material, except in the situation of a documented unavoidable absence due to illness. It is the responsibility of the student to ensure he/she meets all the requirements of the module.

Students should be aware that professionalism is being assessed in every Clinical Skills IV session. Lateness or absences without appropriate notification/approval will likely result in marks reduced for poor professional behavior and may result in an informal or formal breach of professionalism report. Unapproved absences may result in failure of a module or the entire course.

RECORDING OF THE LECTURES

Some lectures will be recorded and posted to the course Blackboard site under Course Materials. The lecture recordings are not intended to be a replacement for attending the session but to enhance understanding of the concepts. Any student recording of sessions should be with the permission of the individual instructor.

COPYRIGHT

Students are expected to respect the University of Saskatchewan Copyright Policy outlined at www.usask.ca/copyright/

“Class recordings are normally the intellectual property of the person who has made the presentation in the class. Ordinarily, this person would be the instructor. Copyright provides presenters with the legal right to control the use of their own creations. Class recordings may not be copied, reproduced, redistributed, or edited by anyone without permission of the presenter except as allowed under law.” (1)

WHAT TO DO IF YOUR TUTOR DOES NOT ARRIVE FOR A SCHEDULED SESSION

If your tutor does not arrive for a scheduled session after verifying session details on one45, then as quickly as possible:

In Regina please contact Christa Kaytor. If unavailable, contact any UGME Administrative staff member.

In Saskatoon, please contact Laura Erickson, who will contact the Module Director and Administrative Assistant for the relevant module. If unavailable, contact Kimberly Basque or Sara Dzaman. If the session is scheduled in the CLRC, please also advise the CLRC staff, as they may also be able to assist in contacting the tutor.

They will attempt to contact the scheduled tutor or an alternate, and, if unable to make arrangements, the session will be rescheduled. Rescheduling is difficult, due to very full schedules, so every attempt will be made to deliver the session as scheduled.

*Please do remember to check one45 for updates, as last minute changes are occasionally necessary.

IMPORTANT AND RELEVANT STUDENT INFORMATION

The following information is extremely important for your success in medical school. To avoid duplication and ensure clarity, please refer to the [UGME Policies](#) page and the [Student Information Guide](#) for the following policies:

- UGME CONTACT INFORMATION
- MD PROGRAM ATTENDANCE POLICY
- ETHICS AND PROFESSIONALISM
- ACCOMMODATION OF STUDENTS WITH DISABILITIES
- OFFICE OF STUDENT AFFAIRS
- STUDENT MISTREATMENT
- EMAIL COMMUNICATIONS
- GUIDELINES FOR PROVIDING FEEDBACK
- PROGRAM EVALUATIONS
- PROCEDURES FOR ACADEMIC APPEAL

Where a specific College of Medicine policy or procedure does not exist, the College refers to the U of S Academic Courses Policy at <http://policies.usask.ca/policies/academic-affairs/academic-courses.php>

INTEGRITY DEFINED (FROM THE OFFICE OF THE UNIVERSITY SECRETARY)

The University of Saskatchewan is committed to the highest standards of academic integrity and honesty. Students are expected to be familiar with these standards regarding academic honesty and to uphold the policies of the University in this respect. Students are particularly urged to familiarize themselves with the provisions of the Student Conduct & Appeals section of the University Secretary Website and avoid any behavior that could potentially result in suspicions of cheating, plagiarism, misrepresentation of facts and/or participation in an offence. Academic dishonesty is a serious offence and can result in suspension or expulsion from the University.

All students should read and be familiar with the Regulations on Academic Student Misconduct (www.usask.ca/secretariat/student-conduct-appeals/StudentAcademicMisconduct.pdf) as well as the Standard of Student Conduct in Non-Academic Matters and Procedures for Resolution of Complaints and Appeals (www.usask.ca/secretariat/student-conduct-appeals/StudentNon-AcademicMisconduct.pdf)

For more information on what academic integrity means for students see the Student Conduct & Appeals section of the University Secretary Website at: www.usask.ca/secretariat/student-conduct-appeals/forms/IntegrityDefined.pdf

EXAMINATIONS WITH DISABILITY SERVICES FOR STUDENTS (DSS)

Students who have disabilities (learning, medical, physical, or mental health) are strongly encouraged to register with Disability Services for Students (DSS) if they have not already done so. Students who suspect they may have disabilities should contact the Student Affairs Coordinator at the Office of Student Affairs (OSA) for advice and referrals. In order to access DSS programs and supports, students must follow DSS policy and procedures. For more information, check students.usask.ca/health/centres/disability-services-for-students.php , or contact DSS at 966-7273 or dss@usask.ca.

Students registered with DSS may request alternative arrangements for mid-term and final examinations.

Students must arrange such accommodations through the Office of Student Affairs (OSA) by the stated deadlines. Instructors shall provide the examinations for students who are being accommodated by the deadlines established by OSA.

STUDENT SUPPORTS

COLLEGE OF MEDICINE, OFFICE OF STUDENT AFFAIRS

Student Affairs offers confidential support and advocacy at arm's length from the academic offices. For more information, please contact the COM Student Affairs Coordinator, Edith Conacher at edith.conacher@usask.ca or 306-966-4751. In Regina please contact Dr. Nicole Fahlman at nicole.fahlman@usask.ca - (306) 209-0142 or Dr. Tiann O'Carroll at tiann.ocarroll@usask.ca - (306) 529-0777.

STUDENT LEARNING SERVICES

Student Learning Services (SLS) offers assistance to U of S undergrad and graduate students. For information on specific services, please see the SLS web site www.usask.ca/ulc/.

STUDENT AND ENROLMENT SERVICES DIVISION

The Student and Enrolment Services Division (SESD) focuses on providing developmental and support services and programs to students and the university community. For more information, see the SESD web site www.usask.ca/sesd/ COURSE MODULES

COURSE MODULES

The modules are designed to allow skill development by systems. By the end of this course, you will begin to integrate the information learned in each separate module into a comprehensive patient assessment.

Clinical Scenarios

Clinical Scenario Sessions

Module Director: Dr. Karen Mohr – karen.mohr@usask.ca

Administrative Coordinator: Laura Erickson – laura.erickson@usask.ca (306)-966-5354

Regina Administrative Coordinator: Alexis Robb – alexis.robb@rqhealth.ca (306) 766-0556

Administrative Assistant - Kimberly Basque – kimberly.basque@usask.ca (306) 966-6151

Description: During these sessions, students will be presented with a clinical problem by a simulated patient. The student is expected to perform an appropriate interview and examination, including special testing, then discuss potential differential diagnosis and (when relevant) management with clinician preceptors. Preceptors can be from any discipline. Different clinical scenarios will focus on demonstration of specific interviewing and physical examination skills. Sessions will emphasize feedback on clinical reasoning skills at a level appropriate for the learners. In term IV the content will build on the previous information.

Location: CLRC (Saskatoon) Learning Centre (Regina)

Objectives: By the completion of the Clinical Scenario Sessions, students will be able to:

1. Effectively perform a patient-centered interview relevant to common presenting complaints, including exploring the illness experience (“FIFE”: feelings, ideas, impacts on function, expectations). (medical expert, communicator)
2. Effectively and sensitively perform physical examinations relevant to common presenting complaints. (medical expert, professional)
3. Compare and contrast possible differential diagnoses for common presenting complaints, based on concurrent and/or previous course material. (medical expert)
4. Propose preliminary differential diagnoses for common clinical presentations. (medical expert)
5. Propose preliminary management plans, including any appropriate initial investigations and/or treatment for common clinical presentations. (medical expert, manager)
6. Explain, using appropriate terminology, the preliminary differential diagnoses and management plans to patients, colleagues and preceptor (communicator)
7. Exhibit professional behaviours consistently, including integrity; respect for and effective working relationships with patients, faculty, staff and peers; appropriate attire, awareness of necessity for scent free environment; and responsibility through punctual, regular attendance and timely completion of assignments (professional, collaborator)

****SPECIFIC SESSION OBJECTIVES CAN BE FOUND ON ONE45 PRIOR TO SESSION**

Formative Assessment: will occur throughout the module during SP encounters and debriefing, and will additionally be provided by the Formative Assessment form completed following each clinical scenario session by tutor.

Summative Assessment:

- Students will be assessed at the end of each session using the Summative Assessment form which is to be completed online on One45. The final mark will be the average of these assessments.

Successful Completion of module:

Achieve a final average mark of 70%

Focused Interview & Physical Exam

Focused Interview & Physical Exam Sessions

Module Director: Dr. Karen Mohr – karen.mohr@usask.ca

Administrative Coordinator: Sara Dzaman sara.dzaman@usask.ca - (306)-966-6946

Regina Administrative Coordinator: Alexis Robb - alexis.robb@rqhealth.ca – (306) 766-0556

Administrative Assistant: Kimberly Basque kimberly.basque@usask.ca - (306) 966-6151

MODULE DESCRIPTION

The aim of these sessions is to review the history taking and physical examination skills learned in the last terms of Clinical Skills, and build on them to develop a focused patient-centered history and physical examination for the relevant system. Historical features and findings typical of common pathologies will be identified, as will special examination techniques for the designated system. The course is designed to complement concurrent learning in other courses, and develop clinical reasoning processes.

Location: CLRC (Saskatoon) Learning Centre (Regina)

MODULE OUTLINE

One preceptor with a small group of 4 students and a simulated patient (SP)

- Review of systems to date
 - Chronic disease follow up (cardio-resp disease)
 - Follow up post-op patient
 - Essential clinical skills interpretation
- Endocrine
 - Thyroid disease
 - Approach to Diabetic foot
- Dermatology
 - Rash
 - Skin lesion
- Female Repro
 - Gynecological procedures
 - Intrapartum I management
 - Intrapartum II management
- Clinician Performed Ultrasound

MODULE OBJECTIVES

By the completion of this module, students working with simulated patients will be able to:

1. Demonstrate and report an appropriate patient-centered focused history for Endocrinology, Dermatology, Female Reproductive health, and previously introduced systems (medical expert, communicator).
2. Demonstrate specific physical examination techniques relevant to the Endocrine, Dermatologic and Female Reproductive health assessment, along with previously introduced skills of examination in Clinical Skills I-III (medical expert).
3. Identify aspects of the history and physical exam findings that might be expected in some common diseases of the Endocrinology, Dermatology and Female Reproductive health (medical expert).

4. Incorporate key investigations relevant to patient presentations (medical expert, manager)
5. Exhibit professional behaviours consistently, including integrity; respect for and effective working relationships with patients, faculty, staff and peers; appropriate attire, awareness of necessity for scent free environment; and responsibility through punctual, regular attendance and timely completion of assignments (professional, collaborator)

****SPECIFIC SESSION OBJECTIVES CAN BE FOUND ON ONE45 PRIOR TO SESSION**

MODULE ASSESSMENT

Formative Assessment:

This will occur on an ongoing basis throughout the sessions, and additionally will be provided at the end of each review session via the Student Assessment Checklists (attached), which are to be completed on-line on One45, and also serve to document attendance. Student Assessment Checklists are designed to be used for formative feedback and to inform the final summative assessment.

Summative Assessment Mark Allocation for Module:

Pass Mark for all assessment components is 70%

Review Session

1. Students will submit a written **long case write-up** following the long case review session marked by the tutor according to the assessment rubric provided on One45. (20% of FIPE module mark) Due one (1) week following the session at 23:59
2. Students will be observed by the tutor while performing review of short skills stations (**mini OSCE**). (20% of FIPE module mark)

Female Reproduction Sessions

1. Students will complete a **pre-session online Blackboard quiz** prior to each female repro encounter, based on pre-reading.(10% of FIPE module mark)
2. Female Repro **summative assessment**.(10% of FIPE module mark)

Endocrinology Session

1. Students will submit a **case write-up** report following the endocrine session marked by the tutor according to the assessment rubric provided on One45 (20% of FIPE module mark) Due one (1) week following the session at 23:59
2. **Summative assessment** of professionalism and participation for endocrine sessions. (10% of FIPE module mark)

Dermatology Session

1. **Summative session** professionalism participation assessment for dermatology session. (10% of FIPE module mark)

Successful Completion of module:

Students must:

- Submit all assignments
- Achieve a cumulative mark of 70% based on the above weighting

Clinician Performed Ultrasound

Module Director: Dr. Paul Olszynski – pao292@mail.usask.ca

Administrative Coordinator: Sara Dzaman – sara.dzaman@usask.ca (306)-966-6946

Regina Administrative Coordinator: Alexis Robb alexis.robbs@rqhealth.ca – (306) 766-0556

Administrative Assistant: Kimberly Basque kimberly.basque@usask.ca - (306) 966-6151

Location: CLRC (Saskatoon), Learning Centre (Regina)

Description: During term IV students will review and practice previously introduced content over the Clinician Performed Ultrasound. Students follow session learning map with facilitator oversight as provided on One45

Objectives: By the end of the session, students will be able to:

1. Demonstrate basic probe handling and early sonographic skill development (medical expert)
2. Demonstrate basic understanding of probe and ultrasound physics (medical expert)
3. Exhibit professional behaviors as outlined in module objectives (professional, communicator).
4. Describe test performance, operator dependence, safety and limitations of each indication (medical expert)
5. Generate appropriate ultrasound images for the following 3 indications (medical expert):
 - a. Assessment for Pericardial Effusion
 - i. Review pertinent anatomy in the thoracic cavity.
 - ii. Identify the anatomic landmark used to orient subxiphoid ultrasound assessment of the heart.
 - iii. Identify the sonographic landmark used to visualize the area of interest during subxiphoid ultrasound assessment of the heart.
 - iv. Describe the area of interest visible during subxiphoid ultrasound assessment of the heart.
 - v. Briefly describe the technique used in subxiphoid ultrasound assessment of the heart.
 - vi. Describe two major indications for bedside ultrasound assessment of the heart.
 - vii. Describe how to distinguish between a small pericardial effusion and epicardial fat during subxiphoid ultrasound assessment of the heart.
 - viii. Recognize other commonly used acoustic windows applied during ultrasound assessment of the heart.
 - ix. Briefly review a scenario demonstrating clinical application of bedside cardiac ultrasound.
 - b. Assessment for Pleural Effusion
 - i. Describe pertinent anatomy in the thoracic cavity.
 - ii. Identify the anatomic landmarks used to orient ultrasound assessment of the lungs and pleura.
 - iii. Identify the sonographic landmarks used to visualize the areas of interest during ultrasound assessment of the lungs and pleura.
 - iv. Describe the areas of interest visible during ultrasound assessment of the lungs and pleura.
 - v. Briefly describe the technique used in ultrasound assessment of the lungs and pleura.
 - vi. Understand the value of a focused clinical question in the context of ultrasound assessment of the lungs and pleura.
 - vii. Briefly review a scenario demonstrating clinical application of bedside lung and pleura ultrasound.
 - c. Assessment for Free Fluid in the Abdomen
 - i. Describe the main objectives of this assessment in specific contexts (trauma, abdominal pain, liver disease).
 - ii. Review pertinent anatomy in the abdominal cavity.
 - iii. Identify the anatomic landmarks used to orient the assessment of free fluid in the abdomen
 - iv. Identify the sonographic landmarks used to visualize the areas of interest during this set of scans.
 - v. Describe the areas of interest visible during these scans.
 - vi. Briefly describe the technique used during the assessment for free fluid in the abdomen.
 - vii. Explain three major limitations of this assessment in the relevant contexts (trauma, abdominal pain)

- viii. Briefly review a scenario demonstrating clinical application of the assessment for free fluid in the abdomen.
- d. Assessment for Obstructive Uropathy
 - Objectives:
 - i. Review pertinent anatomy in the abdomen and pelvis.
 - ii. Identify the anatomic landmark used to orient ultrasound assessment of the kidney and bladder
 - iii. Identify the sonographic landmark used to visualize the area of interest during ultrasound assessment of the kidney and bladder.
 - iv. Briefly describe the technique used during ultrasound assessment of the kidneys and bladder
 - v. Describe two major indications for bedside ultrasound assessment of the renal system.
 - vi. Recognize other commonly used acoustic windows applied during ultrasound assessment of the kidneys
 - vii. Describe the appearance of hydronephrosis ranging from mild-severe.
 - viii. Estimate bladder volume based on sonographic measurement
 - ix. Interpret images of the renal system and recognize normal from abnormal findings
 - x. Briefly review a scenario demonstrating clinical application of bedside renal ultrasound.

Formative Assessment: This will occur on an ongoing basis throughout the session.

Summative Assessment: Meets expectations for professionalism.

Discipline Specific Patient Encounter Modules

Description: During these sessions, students will participate in clinical assessment of real patients in a variety of clinical settings. This will include obtaining an accurate and relevant history and physical examination, presenting a differential diagnosis, formulating a plan for diagnostic interventions and beginning to formulate a management plan. Students will work in small groups with a clinician preceptor. Objectives related to patient-centeredness and professionalism apply to all sessions as outlined in the course objectives.

Location: See One45 for your specific schedule. Times and locations will vary. Check regularly for changes as changes can occur up to 48 hours in advance of the session. If changes are made within 48 hours of the session, you will be contacted directly by the module coordinator or administrative assistant.

Dress Code: *All sessions require professional attire for clinic / hospital setting.*

Objectives: By the completion of their Discipline-Specific Patient Encounter sessions, students be able to:

1. Conduct patient-centered interviews relevant to patients' presenting concerns and the clinical setting (communicator, medical expert, collaborator).
2. Perform physical examinations relevant to patients' presenting problems, in an orderly efficient manner, demonstrating respect and sensitivity to patient comfort (medical expert, professional)
3. Practice clinical reasoning, including tailoring the interview content and physical examination to assist with the development of a provisional differential diagnosis (medical expert)
4. Suggest appropriate preliminary diagnostic investigations and management plan (medical expert, manager)
5. Present a concise verbal summary of the patient's disease and illness experience, potential differential diagnoses, attempt to provide a brief assessment and management plan, and record the information obtained in an appropriate format as required (communicator, medical expert)
6. Exhibit professional behaviours consistently, including integrity; respect for and effective working relationships with patients, faculty, staff and peers; appropriate attire, awareness of necessity for scent free environment; and responsibility through punctual, regular attendance and timely completion of assignments (professional, collaborator)

Pediatrics

Section Lead: Dr. Eric Ong – eso127@mail.usask.ca

Administrative Assistant: Tara Duxbury tara.duxbury@usask.ca – (306) 844-1271

Description: Students will participate in clinical assessment of real patients in a variety of pediatric clinical settings. The students will continue to refine an approach to the pediatric history and physical examination and gain practice integrating information from the history and physical examination in order to generate differential diagnoses and a management plan. In this term students will be introduced to the newborn examination. Students will work in small groups with a clinician preceptor.

Location: See One45

Patient Interactive Session

Description: This session is designed to expose the student to a pediatric patient and parent suffering from a chronic illness.

Objectives: by the completion of the patient interactive session, students will be able to:

1. Describe how chronic illness affects the patient and family in different domains, including environmental, social, financial, cognitive, physical, emotional, spiritual and cultural. (medical expert):
2. Describe how a patient's chronic illness can be impacted by navigating our healthcare system (collaborator, health advocate).
3. Communicate with a patient and/or their family about their experiences in navigating the healthcare system (communicator).

Newborn Exam

Description: this session is designed to expose the student to neonates and gain proficiency in the newborn exam.

Objective: by the completion of the newborn exam session, the student will be able to:

1. Examine a neonatal patient for dysmorphic features (medical expert).
2. Correctly examine the skull shape, palpate sutures and examine the infant's fontanelle (medical expert).
3. Correctly perform an examination for red reflexes (medical expert).
4. Correctly perform a cardiac, respiratory and abdominal examination (medical expert).
5. Correctly examine the neonatal genitalia in a male and female (medical expert).
6. Correctly perform a hip examination for investigation of developmental hip dysplasia (medical expert).
7. Correctly inspect a neonatal spine and describe the indications for spinal imaging to rule out spina bifida (medical expert).
8. Correctly perform a neonatal neurological examination and describe when primitive reflexes are expected to resolve (medical expert).

Pediatric Review Session

Description: this session is designed to integrate knowledge gained in the prior pediatric encounters into a full pediatric history and physical examination.

Objectives: By the completion of this session, students will be able to:

1. Obtain a relevant history of a patient's presenting illness as well as full past medical history, family history, and social history (medical expert, communicator).
2. Perform a full physical examination on a pediatric patient (medical expert).
3. Verbally present the patient's history and physical findings and participate in generating a differential diagnosis and treatment plan (medical expert).

Formative Assessment: During each session the students will receive verbal formative feedback on their history taking and physical examination skills.

Summative Assessment:

1. At the **end of the newborn session(s)**, the preceptor will complete a **summative Assessment Form** for each student. (2% of module mark)
2. At the end of the history and physical exam review session, the preceptor will complete a **summative assessment form** for each student. The Assessment Form will provide an evaluation of the student's history taking, physical examination skills, ability to recognize the contribution of the information gathered to the assessment of the presenting problem and professionalism. (4% of module mark)
3. Following the Review session students will be expected to complete a **patient write up** for preceptor marking. Each component of assessment will contribute equally to the performance. (4% of module mark)

Internal Medicine - Endocrinology

Section Lead: Niels Koehncke – niels.koehncke@usask.ca

Administrative Assistant: Jodie Doucette – Jodie.doucette@usask.ca – (306) 844-1153

Description: During the session, students will be exposed to a patient with an endocrine concern, refine their basic clinical skills and become increasingly proficient at establishing diagnoses and planning therapeutic intervention. Because of the degree of student/patient interaction during this module, the values and attitudes pertaining to the physician/patient relationship will also be stressed.

During this discipline specific patient encounter on the ward or clinic, students will continue to build on skills and knowledge, highlighting important and common aspects of endocrine diseases. Thyroid and diabetes presentations are common endocrinological issues and will be emphasized in the session.

Location: See One45

Objectives: By the end of this session, the student will be able to:

1. Explain the definition of diabetes mellitus, hyper and hypothyroidism. (medical expert, communicator)
2. Elicit and interpret important symptoms on history including: (medical expert)
 - a) Constitutional symptoms (weight gain, polyuria, polydipsia, blurry vision, weight loss)
 - b) Family history of diabetes, gestational diabetes, thyroid history, congenital deafness
 - c) Medications
 - d) Recent infections (i.e. pharyngitis)
 - e) Edema formation (face, hands, extremities)
 - f) Swallowing difficulties, increased neck size
 - g) Diagnosis of malignancy or another endocrine disorder
3. Demonstrate and interpret physical examination findings, including: (medical expert, communicator)
 - a) Examination of the thyroid
 - b) Neurological examination of the lower extremity
4. Suggest a differential diagnosis and initial investigations relevant to the history and physical examination findings. (medical expert)
5. Present results of the patient encounter to preceptor in an organized manner. (medical expert, communicator, scholar)
6. Exhibit professional behavior consistently, including integrity; respect for and effective working relationships with patients, faculty, staff and peers; appropriate attire, awareness of necessity for scent free environment; and responsibility through punctual, regular attendance. (professional, collaborator)

Formative Assessment:

During each session the students will receive verbal formative feedback on their history taking and physical examination skills.

Students must meet expectations in professionalism.

Female Reproduction

Section Lead: Dr. Anita Agrawal – a.agrawal@usask.ca – (306) 844-1169

Administrative Assistant: TBD – please contact Kim Basque in the interim

Description: Students will be exposed to two sessions in this module. The first will be introduction of the female physical examination, and the second a ward/clinic encounter of a patient with a gynecological presentation. Throughout this module, the principles of professionalism will be continually emphasized. At all times, the dignity, and comfort of the patient should be acknowledged and respected. The clinician should constantly strive to interact with the patient in an honest, forthright, yet compassionate manner.

Location: See One45

Objectives:

Session: Gynecologic History Encounter

By the end of this session, the student will be able to:

1. Demonstrate a patient-centered, focused gynecologic history from a postoperative patient on the ward. (medical expert; communicator; professional)
2. Summarize and verbally report a patient history to the preceptor using medically appropriate language. (medical expert; communicator)
3. Exhibit professional behaviours consistently, including integrity; respect for and effective working relationships with patients, faculty, staff and peers; appropriate attire, awareness of necessity for scent free environment; and responsibility through punctual, regular attendance and timely completion of assignments (professional)

Session: Pelvic Examination Teaching

By the end of this session, the student will be able to:

1. Demonstrate a complete pelvic examination on a model, including appropriate patient positioning; inspection of the external genitalia; visualization of the internal anatomy with the speculum; and performance of a bimanual examination. (medical expert)
2. Describe, using standard terminology, the appearance of the cervix, any abnormalities; the size, position and mobility of the uterus; the presence and location of any unusual masses; and the presence or absence of palpable ovaries. (medical expert; communicator)
3. Exhibit professional behaviours consistently, including integrity; respect for and effective working relationships with patients, faculty, staff and peers; appropriate attire, awareness of necessity for scent free environment; and responsibility through punctual, regular attendance and timely completion of assignments (professional)

Summative Assessment:

Pre-session Blackboard quiz for Pelvic Examination session (5% of module mark)

Case write-up of ward encounter (15% of module mark)

Sensitive Exam Teaching Associates: Female

Section Lead: Dr. Randi Ramunno – randi.ramunno@usask.ca – (306) 551-4384

Administrative Assistant: Laura Erickson – laura.erickson@usask.ca (306) 966-5354

Description: Throughout this module, the principles of professionalism will be continually emphasized. At all times, the dignity, and comfort of the patient should be acknowledged and respected. The clinician should constantly strive to interact with the patient in an honest, forthright, yet compassionate manner.

Location: See One45

Objectives:

By the completion of the SETA sessions, students will be able to:

1. Obtain verbal consent from the patient to perform a sensitive physical exam (communicator, medical expert)
2. Demonstrate appropriate language and terminology when communicating with the patient during a sensitive physical examination (medical expert, communicator)
3. Employ special techniques to enhance relaxation and decrease patient anxiety during a sensitive examination (communicator, professionalism)
4. Appreciate the importance of patient comfort and sensitivity during sensitive examinations. (professionalism)
5. Demonstrate specific physical examination techniques relevant to the Female Reproductive System (medical expert)
6. Identify normal, variations of normal and abnormal findings in relation to the Female Reproductive System (medical expert)
7. Exhibit professional behaviors consistently, including integrity; respect for and effective working relationships with patients, faculty, staff and peers; appropriate attire, awareness of necessity for scent free environment; and responsibility through punctual, regular attendance and timely completion of assignments (professional, collaborator)

Formative Assessment:

During each session the students will receive verbal formative feedback on their history taking and physical examination skills.

Mental Health

Session Lead: Dr. Vern Bennett- vern.bennett@usask.ca – (306) 844-1077

Administrative Assistant: Holly Maas holly.maas@saskatoonhealthregion.ca – (306) 844-1312

Description: This module provides 24 hours of student contact time spanning approximately four weeks. The module is delivered in a clinical environment providing an experiential learning opportunity. Students directly interview patients, under the supervision of a tutor, that have psychiatric diagnoses. The intensiveness of the module allows for rapid skill acquisition, challenges the student to reflect on personal attitudes and the culture bound nature of stigma, and the key role as physician in facilitating understanding within a genuine empathic approach to the patient.

During the clinical sessions, each student will have the opportunity to complete at least two clinical patient interviews, supervised by the tutor and in the presence of their peers. Each Interview is approximately 45 minutes.

Following the interview, 20-30 minutes is devoted to reviewing the patient presentation, providing interview feedback by peers and tutor

Location: see ONE45

Objectives:

By completion of this session, students will be able to:

1. Describe the elements of the Mental Status Exam (communicator, medical expert)
2. Demonstrate the essential elements of a psychiatric interview on real patients presenting with a variety of psychiatric symptoms (communicator, medical expert)

3. Assess and interpret findings of a patient with mental illness. (medical expert)
4. Propose a reasonable diagnosis and differential for a patient presenting with mental illness symptoms (medical expert)
5. Demonstrate the role of a physician in reducing stigma by facilitating a comfortable and supportive environment that allows for the understanding of mental illness. (communicator, advocate)
6. Develop and refine interpersonal communication skills with patients and colleagues, including providing and receiving peer feedback (communicator, professional)
7. Present in oral and written format, a concise summary of a mental health assessment for a real patient (communicator, medical expert, scholar)
8. Exhibit professional behaviors consistently, including integrity; respect for and effective working relationships with patients, faculty, staff and peers; appropriate attire, awareness of necessity for scent free environment; and responsibility through punctual, regular attendance and timely completion of assignments (professional, collaborator)

Formative Assessment: This will occur with peer and faculty feedback based upon template.

Summative Assessment:

1. Interview skills assessment (30% of module mark)
2. Summative assessment of session(s) (5% of module mark)
3. Interview write-up (15% of module mark)

Plastics Skills Day

Session Lead: Dr. Geethan Chandran - drgeethanchandran@gmail.com

Administrative Assistant: Angel Julian – surgery.preclerkship@usask.ca – (306) 966-5668

Description: Student will experience preceptor led small group sessions with hands on practice in skills outlined in the session objectives. Students will be using models and each other to develop their skills during the sessions. Plastic and Reconstructive Surgery is a very broadly based discipline. Your time with us will serve as an introduction rather than a comprehensive summary. A brief overview of the origin of this area of surgery as well as the various fields within will be presented during a short didactic session. The anatomy and physical examination of the hand and a brief overview of two common hand conditions, carpal tunnel and trigger finger, will be covered before the patient assessments.

Location: CLRC/ Learning center

Objectives:

By the end of this session, the student will be able to:

1. Perform a complete hand exam including special tests (e.g. Tinel's sign, Phalen's test) pertaining to hand conditions (medical expert)
2. Present your interpretation of a hand X-ray, including descriptions of features of a hand fracture. (medical expert)
3. Perform common hand splints (medical expert)
4. Describe clinical features of Dupuytren's Contracture, Carpal Tunnel Syndrome and Stenosing Tenosynovitis on a patient (medical expert)
5. Perform a complete facial exam as it pertains to facial fractures/injuries (medical expert)
6. Review local anesthetic toxicity/pharmacology and perform a digital block (medical expert)

7. Exhibit professional behaviours consistently, including integrity; respect for and effective working relationships with patients, faculty, staff and peers; and responsibility through punctual, regular attendance and timely completion of assignments (professional, collaborator)

Formative Assessment: Feedback throughout the sessions.

Geriatrics Skills Day

Session Lead: Dr. Jenny Basran jenny.basran@saskatoonhealthregion.ca

Administrative Assistant: TBA

Alexis Robb alexis.robbs@rghealth.ca – (306) 766-0556 - Regina

Description: “Geriatric Syndrome” is used to describe the unique features of common health conditions in older people who do not fit into discrete disease categories, such as delirium, falls, and frailty. Geriatric syndromes are highly prevalent in older adults, particularly the rapidly growing over 80 years old cohort, and can have substantial effect on quality of life and disability. Multiple underlying factors, involving multiple organ systems, tend to contribute to geriatric syndromes. Often, the primary symptom is not related to the specific pathological condition underlying the change in health status. For example, when an infection affecting the urinary tract causes delirium, it is the change in neural function in the form of cognitive and behavioural change that permits the diagnosis of delirium and determines many functional outcomes. Because these syndromes cross organ systems and transcend discipline-based boundaries, they challenge the traditional ways of planning and delivering clinical care. Recently, practicing physicians, across the spectrum of health care, have stated the biggest challenge they face now is their limited ability and training to manage multiple chronic diseases in an aging population. The aim of this module is to introduce the student to these syndromes and other common conditions in older adults and help them develop an approach to these challenging geriatric patients.

Students will receive an overview of a complete geriatric assessment. In a small group format student will rotate through skill stations highlighting mobility assessment, polypharmacy, cognitive impairment, and functional home assessment. The multidisciplinary team approach will be emphasized.

Location: see One45

Objectives:

By the end of this session, students will be able to:

1. Demonstrate and practice a Timed Up and Go test. (communicator, medical expert)
2. Discuss falls and how fear of falling factors into patient health and social functioning. (communicator, medical expert, scholar)
3. Demonstrate a geriatric history, including an approach to common presentations of patients with polypharmacy issues. (medical expert)
4. Different example of cognitive impairment (specifically differentiating dementia, delirium and depression) and practice how to use brief screening tools (MMSE, Clock, and MOCA) on “patients”. (communicator, medical expert, scholar)
5. Discuss home functional assessment, transitional care and aids to recreational functioning (communicator, medical expert, scholar)
6. Discuss patient transfer and aging. (collaborator, communicator, medical expert)
7. Exhibit professional behaviours consistently, including integrity; respect for and effective working relationships with patients, faculty, staff and peers; and responsibility through punctual, regular attendance and timely completion of assignments (professional, collaborator)

Formative Assessment: In session ongoing feedback.

Summative Assessment:

1. Summative Assignment at end of session(20% of module mark)
2. Meets expectations for professionalism

Phlebotomy Skills Day

Session Lead: Dr. Karen Mohr karen.mohr@usask.ca

Administrative Assistant: Laura Erickson laura.erickson@usask.ca (306) 966-5354

Description: Students will work with phlebotomists to learn the skills as outlined in the objectives.

Location: see One45

Objectives

By the end of the session, the students will be able to:

1. Perform phlebotomy. (medical expert)
2. Explain the risks of phlebotomy and methods to reduce risks to body fluid exposure. (medical expert)
3. Discuss protocols in the event of exposure to body fluids. (medical expert, communicator, scholar)
4. State the potential complications of phlebotomy. (medical expert, scholar)

Summative Assessment Mark Allocation for DSPE Module:

Pass mark on all module assessment components is 70%

The weighting of the module marks is as follows:

- Pediatric Summative in Session 7.5 %
- Pediatric Case Write Up Rubric on One45 2.5%
- Female Repro Pre-tests on BBLearn 5%
- Female Repro Case Write Up rubric on One45 15%
- Geriatric skills Summative Assignment Rubric on One45 20%
- Mental Health Peer and Preceptor in session feedback 5%
- Mental Health Interview Skills Summative Assessment 30%
- Mental Health Patient write up Rubric on One45 15%

Successful Completion of Module:

Students must:

- Submit all assignments
- Achieve a cumulative mark of 70% based on the above weighting