



Clinical Integration IV

MEDC 224.4

YEAR 2 Term 2

COURSE SYLLABUS 2016-17



UNIVERSITY OF SASKATCHEWAN

College of Medicine

MEDICINE.USASK.CA

Clinical Integration IV – Course Overview

COURSE DESCRIPTION

This is the fourth of four courses in the Clinical Integration series. Clinical Integration IV is designed to provide students with knowledge, skills and experiences that support gathering and integration of knowledge, critical thinking and clinical reasoning skills. This will consolidate learning from the first 3 Terms.

Students will receive an Ethics Lecture and engage in discussion of Ethics cases.

Students will receive one (1) Integrative Medicine Lecture.

Information Literacy IV will be delivered in this module.

One Interprofessional Problem-Based Learning case will be held.

Integrative cases will focus on developing clinical Reasoning skills and integrating the information learned in the other courses both during this term and from previous terms.

OVERALL COURSE OBJECTIVES

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

1. Synthesize and present information discussed. (medical expert, collaborator, communicator)
2. Identify and select appropriate use of laboratory, radiologic and other investigations that contribute to the investigation of problems identified in the cases and group discussions utilizing principles based on the Choosing Wisely initiative where appropriate. (medical expert, manager)
3. Develop and prioritize a list of working diagnoses.(medical expert)
4. Utilize knowledge gained from other courses and research to manage the patient/caregiver/societal issues identified in the cases (medical expert, manager, advocate)
5. Identify opportunities to apply health promotion and illness prevention for patients and families, caregivers and society (medical expert, advocate, manager)
6. Identify, analyze and propose approaches to legal and ethical issues that may arise from case presentations and discussions (medical expert, professional, scholar, manager)
7. Identify, discuss and apply principles of interprofessional collaboration as related to patient care, community and team relationships (communicator, collaborator, professional, advocate)
8. Apply critical appraisal and reasoning skills to resolve issues identified in case presentations and group discussions (scholar, communicator, manager)
9. Demonstrate professional and ethical behavior (professional)
10. Demonstrate effective Information Literacy (scholar, medical expert)

The University of Saskatchewan Learning Charter is intended to define aspirations about the learning experience that the university aims to provide, and the roles to be played in realizing these aspirations by students, instructors and the institution. A copy of the Learning Charter can be found at: [www.usask.ca/university secretary/LearningCharter.pdf](http://www.usask.ca/university%20secretary/LearningCharter.pdf)

COURSE CONTACTS

Course Director: Dr. Di Naidu – di.naidu@usask.ca (306) 850-9997

Course Site Coordinator (Regina): Christa Kaytor—christa.kaytor@rqhealth.ca (306) 766-3157

Clinical Integration Courses Chair: Dr. Deirdre Andres – d.andres@usask.ca – (306) 655-4200

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

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

Administrative Assistant (Regina): Sherry Lindenbach – sherry.lindenbach@rqhealth.ca – (306) 766-0578---

COURSE SCHEDULE

Please check One45 **REGULARLY** to ensure that you have the most current schedule information. The latest a change can be made to a session (unless it is a true emergency) is 48 hours in advance of the scheduled sessions. If changes are made to a session which has already been scheduled in One45, affected students will be notified directly by the course administrators – in the event of rescheduling, a student who has an approved absence will not be negatively assessed in terms of professionalism.

Date: 2017	Time	Session	Learning Activity
January 11	1:30-2:00	Course Orientation	Lecture – GB06
	2:30-4:30	iPBL- Palliative Care	Small Group – see Blackboard
January 17	2:30-4:30	iPBL- Palliative Care	Small Group – see Blackboard
January 25	2:30-4:30	iPBL – Palliative Care	Small Group – see Blackboard
February 1	1:30-2:30	Ethics lecture	Lecture – GB06
	2:30-4:20	Ethics Cases	Small Group – see One45
February 8	1:30-4:20	Integrated Case	Small Group – see One45
February 15	1:30-4:20	Integrated Case	Small Group – see One45
March 1	1:30-4:20	Integrated Case	Small Group – see One45
March 8	1:30-4:20	Integrated Case	Small Group – see One45
March 15	9:00-12:00	Integrated Case	Small Group – see One45
March 22	1:30-4:20	Integrated Case	Small Group – see One45
March 29	1:30-4:20	Integrated Case	Small Group – see One45
April 5	1:30-3:30	Information Literacy	Discussion/demonstration – large group (greater than 12) – see One45
April 12	1:30-4:20	Integrated Case	Small Group – see One45
April 19	1:30-4:20	Integrated Case	Small Group – see One45
April 24	1:30-4:20	Integrated Case	Small Group – see One45
April 25	8:30-12:20	Integrative Medicine	Lecture - GB06
	1:30-4:20	Integrated Case	Small Group – see One45
May 8	1:30-4:30	Final Exam	

COURSE MATERIAL ACCESS

Course materials, including syllabus, sessions, objectives, required reading, forms and other relevant documents are posted as handouts on One45.

Cases will be release on Blackboard at the initiation of the Integrative Case Session.

Relevant handouts will be available in Blackboard.

Suggested preparation for each session will include review of patient centred interview techniques, physical examination and clinical skills relevant to the case topics and review of clinical reasoning lecture notes. It may be helpful to review websites such as <http://www.choosingwiselycanada.org>.

COURSE DELIVERY

Sessions vary in length and are scheduled throughout the term. For most sessions, students will work interactively in small group settings. For integrative cases and iPBL sessions, learning is student-directed and students assign themselves roles to help facilitate the discussion. A facilitator is present to guide students through the case (e.g. answering clarification questions, redirecting students if they get off track, etc.) and to ensure completion of case objectives.

COURSE ASSESSMENT OVERVIEW

Formative Assessment – Working through the cases gives you the opportunity to apply your knowledge from multiple courses including Clinical Skills, Medicine & Society, and Foundations and this process provides formative feedback about your clinical knowledge and reasoning and help you to prepare for assessments in other courses.

Summative Assessment – In addition to the assignments as outlined below, there will be a number of questions within the Integrated Cases that will utilize in-group peer marking according to predetermined criteria.

MODULE ASSIGNMENTS/ASSESSMENTS 75 %

- **Ethics** 5 %
- **iPBL** 10%
- **Information Literacy** 10 %
- **Integrated Cases** 50 %

Final Examination:

- Case Based 25 %

EVALUATION COMPONENTS

Assignment: Ethics Assignment

Value: 5% of final grade
Due Date: Due one week following the Ethics session by 23:59*.
Description: The required written assignment will be a discussion of one of several ethical problems in a short essay – approximately two pages (~ 500 words) in length (double-spaced, Times New Roman 12 font).

There will also be several ethics based questions within the Integrated Cases and/or Final Examination.

Assignment: Integrated Cases

Value: 50% of final grade (10 assignments total, each worth 5%)
Due Date: Due in class or one week following the Integrative Case session by 23:59*.
Description: Each Integrative Case session will be assessed based on either a take-home clinical question that is to be completed in structured essay form and will be marked by the tutor/facilitator (rubric is visible in One45) and/or an in-class assignment and/or critical appraisal.

Assignment: iPBL Assignment

Value: **10%** of final grade
Due Date: Due February 1st 2017 by 23:59*.
Description: Written assignment using the students experience in their interprofessional group. Questions will be related .to the competencies from the CIHC competency framework & their key elements
Detailed description will be posted on **Blackboard**.

Assignment: Information Literacy

Value: **10%** of final grade
Due Date: Due in class or one week following the session by 23:59*.
Description: Written assignment.

Final Exam

Value: **25%** of final grade
Date: **Monday May 8, 2017**
Length: 3 hours
Type: Summative, Cumulative examination.

*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.

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

For successful course completion for the purposes of promotion, students are to obtain a cumulative mark of at least 70% on all the course assignments AND achieve a mark of at least 70% on the final exam. Students who are not promoted as a result of being unsuccessful on the course will receive a grade of 'F' on their transcripts for the relevant course.

Students are also required to complete all assignments within the course.

REMEDICATION AND COURSE FAILURE

If a student fails either the combined average of all the course assignments **or** the final examination, a maximum of one remediation attempt will be provided. Failure of a remediation/supplemental exam will result in a course failure. If a student fails **both** the combined average of all the course assignments and the final examination, this will be considered a course failure and remediation will not be offered.

Students who are eligible for remediation will be required to meet with the Module/ Course Director and/or Course Chair to identify areas of weakness and develop a structured remediation and learning plan, and complete a supplemental assessment. The Module Director/Course Director and/or Course Chair retains the right to determine the specific type of remediation and supplemental assessment needed for each individual student, which may be in a different format than the original assessment.

After the final examination period, the implications of failing to successfully complete course components will be adjudicated at the Year 2 Term 2 Promotions Committee and a final decision to grant remediation/supplemental work will be determined by the Student Academic Management Committee.

ATTENDANCE EXPECTATIONS

See [Student Information Guide](#) for MD Program Attendance and Absence policy.

As per the Attendance Policy, all small group sessions are mandatory for attendance. This will include all Integrated Cases, Ethics Small Groups, Integrative Medicine Small Group sessions, Information Literacy and the iPBL sessions.

Students who miss a Case or iPBL without appropriate approval or following appropriate notification steps in the event of illness (see Attendance Policy) will be assigned a mark of zero for that session, should expect to receive a Breach of Professionalism.

In the event of missing a session, students are expected to review case materials to address the learning objectives of the case.

Students who have an approved absence or unavoidable absence due to illness (see Attendance Policy) should notify the Year 2 Administrative Coordinator and Course Director, and will be given an opportunity to complete the case independently and submit the Clinical Question, which will be weighted as 7.5% (or prorated to reflect missing group dynamic marks if those are part of the missed session).

RECORDING OF THE LECTURES

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.

COPYRIGHT

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

COURSE EVALUATIONS QUALITY IMPROVEMENT

As a result of feedback from previous student course evaluations the following changes have been made:

1. Students will be able to access case information as they progress through the integrated case.
2. March 15th has been changed to a morning session to accommodate student attendance at the Health Innovation Conference in the afternoon.
3. Short Snapper Type cases will be increased
4. Assignments for Integrated Cases will be varied and some will be done in class
5. The reflective iPBL assignment has been changed
6. Information Literacy has been introduced in all 3 previous terms

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/

- **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

INTEGRATED CASES MODULE

Module Director: Dr. Di Naidu – di.naidu@usask.ca – (306) 850-9997

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

In these small group learning experiences, you will work through patient “cases” in order to have practice applying knowledge from previous and concurrent courses and to further develop your critical thinking and clinical reasoning skills. Some cases may include video interactions with simulated patients.

Module Assessment:

Some Integrated Case sessions will be assessed based on a take-home clinical question that is to be completed in structured essay form and will be marked by the tutor/facilitator (rubric is visible in One45) and submitted to Blackboard within one (1) week of the session by 23:59*.

Some sessions will be assessed based on appraisal of journal articles or guidelines completed during class-time and submitted at the end of the session.

Some questions found within the case will be completed as group work with peer marking

*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.

INTERPROFESSIONAL PROBLEM-BASED LEARNING (iPBL) MODULE

Module Director: Sean Polreis – sean.polreis@usask.ca – (306) 966-1311

Administrative Assistant: Doreen Walker - doreen.walker@usask.ca – (306) 966-1151

Regina: Megan Sapp – megan.sapp@rqhealth.ca – (306) 766-0552

Health professions' students work in teams to gain knowledge and experience in Interprofessional Collaboration. The team (comprised of approximately 10 students from 3 or more health disciplines with a trained tutor) is progressively provided with information on the health problems and social issues of a fictitious patient or client. In two 2-hour sessions, one week apart, the team will use a systematic, participatory, and collaborative approach to develop an evidence-based and patient-centered plan of care for the patient or client.

Students are exposed to interprofessional competencies first as an orientation at the beginning of each case and then throughout the case discussions as needed and finally at the end of each session. Students are guided to consider and discuss their roles, various dynamics that enable or interfere with effective interprofessional team collaboration, concepts of shared leadership, aspects of effective interprofessional communication including conflict resolution, and patient/client/family community-centered care. Thus some of the key components of the National Competency Framework established by the Canadian Interprofessional Health Collaborative (CIHC) are introduced to health professions' students participating in Interprofessional Problem-Based Learning (iPBL) and students have an opportunity to develop knowledge, skills, attitudes and behaviours for effective interprofessional collaborative practice. It is expected that students participate in these sessions in a respectful and collegial manner.

Objectives:

By the end of this module the student will be able to:

1. Role Clarification
 - Describe the importance of role clarification in caring for patients with complex health care needs. (collaborator)
 - Describe how other health care professionals (currently not on the team) could contribute to the care of the patient. (collaborator)
 - Perform your own role in a culturally respectful way. (collaborator)
2. Team Functioning
 - Demonstrate skills of effective team membership. (collaborator)
 - Describe ineffective team functioning within a group. (collaborator)
 - Facilitate discussions and interactions among team members. (collaborator)
3. Interprofessional Communication

- Integrate elements of effective interprofessional communication to improve team function. (collaborator, communicator)
 - Communicate with other group members in a collaborative, respectful, and responsible manner. (collaborator, communicator)
4. Collaborative Leadership
- Demonstrate leadership and decision-making behaviours that are likely to contribute to group effectiveness. (collaborator, manager)
 - Compare resources, including community resources, social service agencies, and government programs that contribute to quality care. (collaborator, advocate, manager)
5. Patient/client/family/community-centred care
- Determine useful communication approaches based on an understanding of the client's usual communication style and the implications for management. (communicator)
6. Interprofessional Conflict Resolution
- Describe steps and strategies for conflict resolution within interprofessional groups. (collaborator, manager)

Assessment:

Assessment for the iPBL of Clinical Integration IV will be based on the student's attendance at small group sessions and satisfactory completion of a written assignment. The required written assignment will be posted on Blackboard and due **one (1) week** after the last iPBL session by 23:59*.

*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.

INTEGRATIVE MEDICINE MODULE

Module Director: Dr. Deedee Maltman

Integrative medicine is defined by the Arizona Center for Integrative medicine as, "...healing-oriented medicine that takes account of the whole person, including all aspects of lifestyle. It emphasizes the therapeutic relationship between practitioner and patient, is informed by evidence, and makes use of all appropriate therapies." The sessions in this module will explore an integrative approach to mental health, an introduction to the inter-relationships between the major hormonal systems in the body and also discuss primary prevention of type 1 and type 2 diabetes.

OBJECTIVES:

1. Compare and contrast an integrative versus conventional approach to chronic illness. (medical expert)
2. Develop an integrative strategy for advising patients about mental health. (communicator)
3. Develop an integrative strategy for advising patients about how to reduce the risk of Diabetes (communicator)

Assessment:

Integrative Medicine principles will be assessed in at least one of the Integrated Cases and assignments, and/or the final exam.

ETHICS

Module Director: Ryan Meneses

This module is intended to provide further introduction to a number of basic topics in ethics, especially to those that apply to clinical medicine and interactions with patients. The ethics module in the Clinical Integration Course is designed to reinforce concepts that were initially introduced in first year.

The general goal for this module is to develop a basic understanding of the role moral decision-making plays in medicine and all of healthcare. Students are encouraged to view ethics as an integral component of medicine, rather than a stand-alone subject or discipline. Students will begin to develop analytic skills aimed at problem-solving. The moral nature of the problems to be discussed is a central theme but integration of moral problem-solving skills into everyday medical case management is the long-term goal.

Students will develop an awareness of standard philosophical approaches including a basic knowledge of ethical principles and theories. This knowledge, along with a generic analytic methodology, will be used in the context of hypothetical case discussion.

The classroom work and case discussions will illustrate a broad range of moral and ethical issues in healthcare. Students are encouraged to reflect upon their personal morals, beliefs and values, recognizing the impact of these beliefs upon arguments advanced and positions taken. Development of self-knowledge is crucial to rational case analysis and ultimately, to the ethical practice of medicine.

The topics that will be explored within this module include: Genetics/ Reproductive Ethics, and Abortion.

Module Objectives:

Upon completion of this module, students will be able to:

1. Identify the major ethical issues (e.g. value conflicts) portrayed in cases discussed in small-group sessions. (medical expert)
2. Apply a basic case-analysis methodology to a case discussion, demonstrating an understanding of the analytic process. (medical expert, scholar)
3. Describe basic ethical theories and principles. (medical expert)
4. Apply basic ethical theories and principles to the analysis of an ethical problem as depicted in a healthcare case description. (medical expert)
5. Recognize and explain the impact of his/her own morals, beliefs and values upon the argument being proposed or the position being defended. (professional)
6. Develop a further understanding of communication strategies that may be used to discuss these issues – this process will expand upon knowledge and experience gained in Year 1. (communicator)

Module Delivery:

Large group (lecture-based) session is designed to deliver information about approaches to ethical problem solving, and to educate students about the legal and ethical requirements associated with certain aspects of patient care.

Small group session provides an opportunity for students to discuss different approaches to ethical problem solving, and to practice working through complex ethical dilemmas under the guidance of 1-2 mentors and fellow classmates.

Module Assessment:

Assessment for the Ethics component of Clinical Integration III will be based on the student's attendance at small group sessions and satisfactory completion of a written assignment. The required written assignment will be a discussion of one of several cases in a short essay – approximately one page in length (double-spaced, Times New Roman 12 font, *maximum 300 words in length). The written assignment is due one week after the small group session. Submissions will be marked on a pass/fail basis.

Required Resources:

The recommended text is: *Doing Right: A Practical Guide to Ethics for Medical Trainees and Physicians*, 2nd Edition by Philip Hebert (Oxford University Press, Toronto, 2009, ISBN 978-0-19-542841-4). The text can be purchased in the U of S Bookstore

INFORMATION LITERACY MODULE

Module Director: Erin Watson – emw119@mail.usask.ca

April 5th (2 hours)

Introduction to grey literature. Understanding and using resources to find drug advisories and recalls, and clinical trial information. Discussion of medical apps for mobile devices.

OBJECTIVES:

Upon completion of this module, students will be able to:

1. Select the appropriate sources to answer questions relating to clinical trials drug advisories, and recalls. (scholar)
2. Discriminate between mobile apps which are more likely to provide accurate information and those that are less likely to do so. (scholar)

Module Assessment:

The Information Literacy assignment (due in class or one week following the final Information Literacy session) will be worth 10% of the course mark. Detailed description will be posted.