

Clinical Integration II

MEDC 124.4

TERM 2

- COURSE SYLLABUS
2016/2017



UNIVERSITY OF SASKATCHEWAN

College of Medicine

MEDICINE.USASK.CA

Clinical Integration II: Introduction – Course Overview

COURSE DESCRIPTION

This is the second of four courses in the Clinical Integration series. The Clinical Integration II course is designed to provide students with basic knowledge, skills and early experiences that support gathering and integration of knowledge, critical thinking, and clinical reasoning skills. These will be further developed in Clinical Integration III and IV courses in Year 2.

Students will also engage in interprofessional problem-based learning and integrative cases focused on developing critical thinking skills and integrating the information learned in concurrent courses.

Completion of this course will contribute to attaining elements of the overall undergraduate program objectives ([MD Program Objectives](#)).

OVERALL COURSE OBJECTIVES

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

1. Apply disease-specific knowledge to interpret specific patient cases (Medical Expert)
2. Identify relevant elements of the patient-centered approach, such as contextual factors and FIFE (Communicator, Medical Expert)
3. Suggest appropriate investigations for important clinical presentations, based upon relevant guidelines and Choosing Wisely Canada (Medical Expert, Scholar)
4. Formulate a comprehensive differential diagnosis for clinical presentations (Medical Expert)
5. Use significant clinical and investigation findings to refine the differential diagnoses (Medical Expert)
6. Suggest management approaches that address patient-centered concerns. (Communicator, Medical Expert)
7. Identify relevant opportunities for health promotion and illness prevention (Communicator, Medical Expert)
8. Identify ethical principles relevant to issues presented in case discussions (Communicator, Medical Expert)
9. Describe elements of effective inter-professional collaboration (Collaborator, Communicator, Professional)
10. Apply information literacy skills to develop and answer clinical questions (Medical Expert, Scholar)
11. Demonstrate critical appraisal and reasoning skills (Medical Expert, Scholar)
12. Demonstrate independent identification of learning needs (Professional, Scholar)
13. Demonstrate analysis and synthesis of relevant information (Medical Expert, Scholar)

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

COURSE CONTACTS

Course Director: Dr. Courtney Meier - courtneyclm@yahoo.com – (306) 244-3016

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

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

Course Administrative Assistant: Ashley McNabb ashley.mcnabb@usask.ca (306) 966-7202

COURSE SCHEDULE

Please check One45 **DAILY** 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 via email by the course administrators.

Date	Time	Session	Learning Activity
January 9	1:30-2:20	Course Orientation	Lecture – E1130
	2:35-4:20	Introduction to Medical Imaging	Lecture – E1130

January 30	1:30 – 2:50 3:00 – 4:20	Information Literacy Session 1 Integrative Case 1	Small Group – see One45
February 1	2:30 - 4:20	Interprofessional PBL: One Health Perspective	Small Group – see Blackboard
February 8	2:30 - 4:20	Interprofessional PBL: One Health Perspective	Small Group – see Blackboard
February 13	1:30 – 2:50 3:00 – 4:20	Integrative Case 2 Information Literacy Session 2	Small Group – see One45
March 1	2:30 - 4:20	Interprofessional PBL: First Nation Culture, Health & Healing	Small Group – see Blackboard
March 8	2:30 - 4:20	Interprofessional PBL: First Nation Culture, Health & Healing	Small Group – see Blackboard
March 13	1:30 – 3:20 3:30 – 4:20	Integrative Case 3 Information Literacy Session 3	Small Group – see One45
March 29	1:30 - 4:20	Integrative Case 4	Small Group – see One45
April 12	1:30 - 4:20	Integrative Case 5	Small Group – see One45
April 24	1:30 - 4:20	Integrative Medicine	Lecture – E1130
April 26	8:30 – 11:20	Integrative Case 6	Small Group – see One45
May 5	9:00-12:00	Final Exam	B450

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 (for example, answering clarification questions, redirecting students if off track, etc.) and to ensure completion of case objectives.

COURSE MATERIAL ACCESS

Course materials, including syllabus, sessions, objectives, required reading, forms, and other relevant documents are posted as handouts in **One45**. Cases will be released on **Blackboard** at the initiation of the integrative case (IC) session.

Suggested preparation for each session includes review of patient-centred interview techniques, physical examination and clinical skills relevant to the case topics. It may be helpful to review the following websites: <http://www.choosingwiselycanada.org>, www.machealth.ca, www.cochranelibrary.com, www.ebm.bmj.com, www.clinicalevidence.bmj.com, www.medicine.ox.ac.uk/bandolier, www.nice.org.uk, and PubMed (www.ncbi.nlm.nih.gov). Many restricted sites are accessible through the University of Saskatchewan library system.

COURSE ASSESSMENT OVERVIEW

6 Integrative Cases (10% each)	60%
iPBL Assignment	10%
Information Literacy Assignment	10%
Final Examination	20%

EVALUATION COMPONENTS

Component 1: Integrative Cases

Value:	60% of final grade
Due Date:	Due in class or one week following the Integrative Case session at 23:59*.
Description:	Integrative case sessions will be assessed based on constructive participation during the small group work and an in-session or take-home assignment to be completed in structured essay form. Take home assignments are to be submitted one week after the session by 23:59* (rubric is visible on One45). Pre-reading will be posted on Blackboard prior to the first integrative case. Marks for each IC session sessions will be tabulated and visible in One45.

Component 2: iPBL Written Assignments

Value:	10% of final grade
Due Dates:	Due March 15 th 2017 by 23:59*.
Description:	A written assignment using the student's 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 . Marks will be tabulated and will be visible in One45.

Component 3: Information Literacy Written Assignment

Value:	10% of final grade
Due Date:	Due in class or one week following the session by 23:59*.
Description:	A written assignment using the information literacy skills learned over the 3 information literacy sessions. Development of a searchable research question with appropriate use of resources and search method.

Final Exam

Value:	20% of final grade
Date:	Friday, May 5, 2017
Length:	3 hours
Type:	Summative, Cumulative, Open book 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.

Students are also expected 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 Course Director and/or Course Chair to identify areas of weakness and develop a structured remediation and learning plan, and complete a supplemental assessment. After the final examination period, the implications of failing to successfully complete course components will be adjudicated at the 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.

What are Expectations for attendance in Clinical Integration I?

See the Attendance Policy for expectations. It is expected that students will attend all sessions unless absence is unavoidable. Attendance at small group sessions is mandatory. Unexplained absences should expect to receive a Breach of Professionalism report which may include academic consequences.

How is attendance documented?

Attendance will be taken during your 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 rather 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. The addition of formal Clinical Reasoning Teaching.
2. Use of Integrated Cases to reinforce Clinical Integration Content and content of other course.
3. Multiple changes to make course content more clinically relevant to students (including use of integrated cases, changed assignments/lecture format/lecture content for some modules, and introduction of a family, which students will care for throughout Clinical Integration terms 1-4.

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.

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

This course is composed of the following modules: Integrated Cases, Integrative Medicine, Interdisciplinary Problem Based Learning (iPBL), and Information Literacy. The modules are designed to focus on various aspects of medical education suited to the level of the student within this term. By the end of this course, you will begin to integrate the information learned in each separate module into a comprehensive application of information learned throughout the term.

Integrated Cases

Module Director: Dr. Courtney Meier courtney.meier@usask.ca

Description: In these small group learning experiences, you will work through patient cases in order to practice applying knowledge gained from previous and concurrent courses and to further develop your critical thinking and clinical reasoning skills.

Objectives: By the end of the module, students will be expected to:

1. Apply disease-specific knowledge to interpret specific patient cases (Medical Expert)
2. Identify relevant elements of the patient-centered approach, such as contextual factors and FIFE. (Communicator, Medical Expert)
3. Suggest appropriate investigations for important clinical presentations, based upon relevant guidelines and Choosing Wisely Canada. (Medical Expert, Scholar)
4. Formulate a comprehensive differential diagnosis for clinical presentations. (Medical Expert)
5. Use significant clinical and investigation findings to refine the differential diagnoses. (Medical Expert)
6. Suggest management approaches that address patient-centered concerns. (Communicator, Medical Expert)
7. Identify relevant opportunities for health promotion and illness prevention. (Communicator, Medical Expert)
8. Identify ethical principles relevant to issues presented in case discussions. (Communicator, Medical Expert)
9. Demonstrate critical appraisal and reasoning skills. (Medical Expert, Scholar)
10. Demonstrate independent identification of learning needs, analysis, and synthesis of relevant information. (Professional, Scholar)

Assessment:**Integrated Cases**

Value: **60%** of final grade (6 assignments at 10% each)

Due Date: Due in class or 1 week following the Integrative Case session by 23:59*.

Description: Integrated case sessions will be assessed based on constructive participation during the small group work and an in-session or take-home clinical question to be completed in structured essay form. These are to be submitted within 1 week of the session (rubric is visible on One45). Pre-reading will be posted on **Blackboard** prior to the first integrative case. **Marks for each IC session sessions will be tabulated and visible in One45.**

*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 Director: Dr. Louise Gagne lgagne@sasktel.net

Description: 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." This interactive large group session will introduce the primary concepts of integrative medicine and the emergence of integrative medicine as an academic discipline. Primary prevention strategies and the underlying drivers of chronic illness will be explored. The module will then examine how these concepts can be applied to various chronic health conditions.

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

1. Advise patients about the primary prevention of cancer including:
nutrition, physical activity, environmental toxins, stress/psychosocial, smoking, and epigenetics
(Communicator, Health Advocate, Medical Expert, Scholar)
2. Discuss and explain the importance of the gut microbiome including:
dysbiosis, probiotics, prebiotics, and SIBO (small bowel bacterial overgrowth)
(Communicator, Medical Expert, Scholar)
3. Explain the antecedent factors leading to a diagnosis of irritable bowel syndrome including:
elimination diets, FODMAPS, current research, specialized laboratory tests: comprehensive stool analysis
(Communicator, Medical Expert, Scholar)
4. Discuss and explain the concept of metabolic syndrome including:
insulin resistance, obesity, non-alcoholic fatty liver disease (NASH), waist circumference, labs/diagnostic tools, and environmental links. (Communicator, Medical Expert, Scholar)
5. Explain the underlying mechanism behind endothelial dysfunction including:
inflammation, oxidative stress, and auto-immune dysregulation. (Communicator, Medical Expert, Scholar)
6. Describe an integrative approach to a patient including:
description of the elements of comprehensive patient centred history and physical examination
discussion of principles of diet and weight management
description of the use of motivational interviewing
description of non-alcoholic fatty liver disease
discussion of an integrative approach to dyslipidemia
discussion of an integrative approach to hypertension
review of dietary strategies and supplements that may improve asthma symptoms
list risks and benefits of statin medications
explanation of the concept of insulin resistance
description of an integrative medicine approach to treatment and follow up
(Collaborator, Communicator, Medical Expert, Scholar)

Assessment:

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

Inter-professional Problem-Based Learning (iPBL)

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

Description: Health professions' students work in teams to gain knowledge and experience in Inter-professional 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 or three 2-hour sessions, each one week apart, the team uses 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.

Objectives: Upon completion of iPBL module(s) and within the context of specific cases, the student will be able to:

1. Identify professionals (currently not part of the team) who could contribute to the care of the patient. (Collaborator, Communicator, Professional)
2. Consider the roles of others in determining your own professional & interprofessional roles. (Collaborator, Professional)
3. Describe how the use of effective group processes contributes to patient care. (Collaborator, Scholar)
4. Describe how elements of effective interprofessional communication improve the practice of medicine. (Collaborator, Communicator, Professional)
5. Describe leadership & decision-making behaviours that are likely to contribute to group effectiveness. (Collaborator, Communicator, Leader)
6. Describe resources, including community resources, social service agencies, & government programs that contribute to quality care. (Collaborator, Communicator, Leader)
7. Determine useful communication approaches based on an understanding of the client's usual communication style. (Communicator)
8. Describe potential conflicts within interprofessional groups. (Collaborator, Communicator, Professional)

Assessment: Satisfactory completion of this module will be based on the student's participation in iPBL sessions and satisfactory completion of a written assignment, worth 10% of the final grade.

Information Literacy

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

Description: These are interactive computer-based small group sessions in which students learn to identify information needs and search more effectively for information resources.

Objectives:

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

1. Articulate their information need as a clearly defined, searchable research question using PICO format. (Communicator, Medical Expert, Scholar)
2. Distinguish between foreground and background questions. (Medical Expert, Scholar)

3. Identify appropriate types of resources to answer foreground and background questions. (Medical Expert, Scholar)
4. Demonstrate effective use of keywords, Medical Subject Headings, combining words (i.e., AND, OR), explode, focus, subheadings and limits. (Communicator, Scholar)

Assessment: Written in-class assignment worth 10% of the overall Clinical Integration II mark.