



SCHOOL OF
**MEDICINE &
DENTISTRY**

UNIVERSITY *of* ROCHESTER
MEDICAL CENTER

Clinical Course Catalog 2011 – 2012

Medical School Registrar's Office (585) 275-4541
Box 601, 601 Elmwood Avenue, Rochester, New York 14642

Core Clerkship Dates for 2011-12

MED300	SUR300	WCH300	MBB300
7/5 – 8/28/11	7/5 – 8/14/11	7/5 – 9/25/11	7/18 – 9/25/11
8/29 – 10/23/11	8/29 – 10/9/11	9/26 – 12/18/11	10/10 – 12/18/11
10/24 – 12/18/11	10/24 – 12/4/11	1/3 – 3/25/12	1/16 – 3/25/12
1/3 – 2/26/12	1/3 – 2/12/12	3/26 – 6/17/12	4/9 – 6/17/12
2/27 – 4/22/12	2/27 – 4/8/12		
4/23 – 6/17/12	4/23 – 6/3/12		

- Third year Comprehensive Assessment 6/18 – 6/24/12
- Vacations 12/19 – 1/1/12; 6/25 – 7/8/12

Clinical Clerkships and Externships

DATES	Emergency Clerkship	Community Health	Medicine Externship	Ob/GYN Externship	Pediatrics Externship	Surgery Externship	Neurology Externship	
07/05 – 07/10/11		Not Offered	SMH		SMH	SMH	Check with Registrar Before Scheduling	
07/11 – 07/17/11			RGH		RGH			
07/18 – 07/24/11			PRH					
07/25 – 07/31/11			HH					
08/01 – 08/07/11			SMH		SMH	SMH	Check with Registrar Before Scheduling	
08/08 – 08/14/11			RGH		RGH			
08/15 – 08/21/11			PRH					
08/21 – 08/28/11			HH					
08/29 – 09/04/11			SMH		SMH	SMH	Check with Registrar Before Scheduling	
09/05 – 09/11/11			RGH		RGH			
09/12 – 09/18/11			PRH					
09/19 – 09/25/11			HH					
09/26 – 10/02/11			SMH		SMH	SMH	Check with Registrar Before Scheduling	
10/03 – 10/09/11			RGH		RGH			
10/10 – 10/16/11			PRH					
10/17 – 10/23/11			HH					
10/24 – 10/30/11			SMH		SMH	SMH	Check with Registrar Before Scheduling	
10/31 – 11/06/11			RGH		RGH			
11/07 – 11/13/11			PRH					
11/14 – 11/20/11			HH					
11/21 – 11/27/11		Not Offered	SMH		SMH	SMH	Check with Registrar Before Scheduling	
11/28 – 12/04/11			RGH		RGH			
12/05 – 12/11/11			PRH					
12/12 – 12/18/11			HH					
12/19 – 12/25/11	Vacation							
12/26 – 01/01/12	Vacation							
01/02 – 01/08/12			SMH		SMH	SMH	Check with Registrar Before Scheduling	
01/09 – 01/15/12			RGH		RGH			
01/16 – 01/22/12			PRH					
01/23 – 01/29/12			HH					
01/30 – 02/05/12			All Fourth Year Students in Process of Discovery					
02/06 – 02/12/12			All Fourth Year Students in Process of Discovery					
02/13 – 02/19/12			All Fourth Year Students in Process of Discovery					
02/20 – 02/26/12			All Fourth Year Students in Process of Discovery					
02/27 – 03/04/12			SMH		SMH	SMH	Check with Registrar Before Scheduling	
03/05 – 03/11/12			RGH		RGH			
03/12 – 03/18/12			PRH					
03/19 – 03/25/12			HH					
03/26 – 04/01/12			SMH		SMH	SMH	Check with Registrar Before Scheduling	
04/02 – 04/08/12			RGH		RGH			
04/09 – 04/15/12			PRH					
04/16 – 04/22/12			HH					
04/23 – 04/29/12			Not Offered		SMH	SMH	Check with Registrar Before Scheduling	
04/30 – 05/06/12								RGH
05/07 – 05/13/12								
05/14 – 05/20/12								
05/21 – 05/27/12			SMH		SMH	SMH	See above	
05/28 – 06/03/12				3 rd Year Only	RGH			
06/04 – 06/10/12					3 rd Year Only			
06/11 – 06/17/12								
06/18 – 06/24/12	Third Year Comprehensive Assessment							
06/25 – 07/01/12	Third Year Comprehensive Assessment							
07/02 – 07/08/12	Third Year Comprehensive Assessment							

Academic Requirements for the Class of 2012

Years Three and Four of the Double Helix Curriculum

Core Inpatient Clerkships

- ❖ Adult Inpatient Clerkship - 16 weeks (Offered in two separate blocks) (8 weeks Internal Medicine, 6 weeks General Surgery, 2 weeks Basic Sciences)
- ❖ Women's and Children's Health Clerkship – 12 weeks (5 weeks Pediatrics, 5 weeks Ob/Gyn, 2 weeks Basic Sciences)
- ❖ Mind/Brain/Behavior Clerkship – 10 weeks (4 weeks Psychiatry, 4 weeks Neurology, 2 weeks Basic Sciences) (First two weeks of the 12-week block may be used as elective time, vacation, or research)

Other Academic Requirements

- ❖ Emergency Medicine – 4 weeks
- ❖ Sub-Internship – 4 weeks (Medicine, Pediatrics, Obstetrics and Gynecology, Neurology or Surgery *including some surgical subspecialties*)
- ❖ Community Health Improvement Course (CHIC) – 4 weeks
- ❖ Process of Discovery – 4 weeks
- ❖ Successful Interning – 1 week
- ❖ Surgical Subspecialties electives – 2 weeks
 - Anesthesiology
 - Otolaryngology
 - Gynecological Oncology
 - Ophthalmology
 - Orthopaedic Surgery
 - Plastic Surgery
 - Surgical Pathology
 - Neurosurgery
 - Urology
- ❖ Clinical Electives – 23 elective weeks (plus 2 weeks Surgical Specialties for a *total of 25 elective weeks*)
 - Also includes between two and four weeks of electives recommended and selected by the student's Advisory Dean after review of the Comprehensive Assessment. All selections will be reviewed in consult with the Advisory Dean.
- ❖ Third Year Comprehensive Assessment – 1 week (attendance required) 6/20 – 6/26/11.

Academic Requirements for the Class of 2013

Years Three and Four of the Double Helix Curriculum

Core Inpatient Clerkships

- ❖ Adult Inpatient Clerkship - 16 weeks (Offered in two separate blocks) (8 weeks Internal Medicine, 6 weeks General Surgery, 2 weeks Basic Sciences)
- ❖ Women's and Children's Health Clerkship – 12 weeks (5 weeks Pediatrics, 5 weeks Ob/Gyn, 2 weeks Basic Sciences)
- ❖ Mind/Brain/Behavior Clerkship – 10 weeks (4 weeks Psychiatry, 4 weeks Neurology, 2 weeks Basic Sciences) (First two weeks of the 12-week block may be used as elective time, vacation, or research)

Other Academic Requirements

- ❖ Emergency Medicine – 4 weeks
- ❖ Sub-Internship – 4 weeks (Medicine, Pediatrics, Obstetrics and Gynecology, Neurology or Surgery *including some surgical subspecialties*)
- ❖ Community Health Improvement Course (CHIC) – 4 weeks
- ❖ Process of Discovery – 4 weeks
- ❖ Successful Interning – 1 week
- ❖ Surgical Subspecialties electives – 2 weeks
 - Anesthesiology
 - Otolaryngology
 - Gynecological Oncology
 - Ophthalmology
 - Orthopaedic Surgery
 - Plastic Surgery
 - Surgical Pathology
 - Neurosurgery
 - Urology
- ❖ Clinical Electives – 23 elective weeks (plus 2 weeks Surgical Specialties for a *total of 25 elective weeks*)
 - Also includes between two and four weeks of electives recommended and selected by the student's Advisory Dean after review of the Comprehensive Assessment. All selections will be reviewed in consult with the Advisory Dean.
- ❖ Third Year Comprehensive Assessment – 1 week (attendance required) 6/18 – 6/24/12.

CLINICAL PROGRAM

GENERAL INFORMATION

UNIVERSITY OF ROCHESTER SCHOOL OF MEDICINE AND DENTISTRY

Medical School Registrar's Office (585) 275-4541
Box 601, 601 Elmwood Avenue, Rochester, New York 14642

Introduction

The third and fourth years of the Double Helix Curriculum (DHC) at the University of Rochester School of Medicine and Dentistry (URSMD) are designed to build upon the clinical and basic science knowledge acquired during the first two years. This educational goal is accomplished through exposure of students to clinical medicine in inpatient settings and management of acutely ill patients requiring hospitalization. This is accomplished primarily in the core clinical clerkships of the third year. This is a complement to prior exposure to patients in ambulatory settings with an emphasis on basic clinical skills and preventive medicine across the spectrum of primary care and specialty care. Additionally, students have the opportunity to return to advanced basic sciences in the context of the acutely ill patient. Students have electives which they can utilize to focus their learning based upon their individual needs.

Across the third and fourth years of the DHC, UR medical students have the flexibility to complete required clerkships and clinical electives. Students will have already completed the core ambulatory clerkship (ACE) during the first and second years of the curriculum. Six additional core clinical clerkships (internal medicine, surgery, obstetrics and gynecology, pediatrics, psychiatry and neurology,) **must** be completed by the end of the third year. These core clerkships provide students with advanced training in clinical data gathering and written and oral communication skills. Moreover, there is increased exposure to the interpretation and synthesis of clinical data and critical clinical decision making which are essential components for a career in medicine.

There are several required clinical experiences that must be completed by the end of the fourth year - Emergency Medicine (4 weeks), Surgical Subspecialty Selective (at least 2 weeks); Subinternship in one of the following - Internal Medicine, Obstetrics and Gynecology, Pediatrics, Neurology and Surgery. Within surgery, students can complete a subinternship in: General Surgery, SICU, Trauma Surgery, Orthopedics, Plastic Surgery, Thoracic Surgery (4 weeks). In addition, students must complete the Community Health Improvement Clerkship (4 weeks), Process of Discovery course (4 weeks) and Successful Interning (1 week). Students may elect to take selected required clinical experiences in the third year providing they have the necessary pre-requisites. The Subinternship, Process of Discovery, CHIC and Successful Interning courses, must be completed in the 4th year at the University of Rochester SMD. In order to meet the minimum graduation requirements, students will also be expected to complete 2-4 weeks of clinical electives selected with their individual advisory dean based upon performance on the comprehensive assessments and prior clinical clerkships.

The elective program is designed to provide a broad range of educational opportunities that enhance both educational needs and interests of students. Specifically, clinical electives may be used to: 1) aid in career-decision making; 2) obtain clinical experiences that will not be included in post-graduate training; 3) enhance clinical skills in areas of specific weakness; 4) pursue advanced clinical experiences and 5) pursue experiences in clinical research. This elective program catalogue is a resource of information related to the University of Rochester School of Medicine and Dentistry's clinical curriculum with a specific emphasis on clinical electives.

Intent and Format of the Elective Program

Clinical electives are an integral part of the UR SMD curriculum. Participation in clinical electives fosters academic growth in a number of areas. All departments in the medical school sponsor electives for clinical students. Current clinical electives range from experiences in clinical research to active involvement in community and/or international health. Electives are offered in a diverse group of clinical settings from academic health centers to community hospitals. In addition to the wide variety of clinical electives outlined in this bulletin, students and faculty members may design a clinical elective experience based on student interest. Students may **not** engage in a formal elective sponsored by a close relative. All electives **must** meet specific guidelines. Students may **not** be paid for any elective for which they are receiving academic credit. We encourage students to work with faculty members in custom-designing electives to suit your individual professional development needs. Self-designed elective proposals must be reviewed and approved, **in advance**, by an appropriate URSMD faculty member and your Advisory Dean. Students interested in designing special clinical electives should contact the Registrar's Office for information regarding elective requirements.

The content and format of each student's clinical elective program is created through a collaborative effort of the student with his/her advisory dean. Many factors contribute to the construction of an individual student's elective program. Each student's special clinical and career interests are among these factors. Additional considerations in the construction of a clinical elective program include the following:

- provision of a clinical experience of special interest that may not be otherwise covered in the curriculum
- provision of greater depth or breadth of experience in required curricular areas
- correction of an academic weakness as identified through the 2nd year or 3rd year comprehensive assessment
- provision of a mentoring relationship in patient care, research or education
- initiation or continuation of basic or clinical science research.

Prior to the third year, each student will meet individually with his or her Advisory Dean to discuss the results of the 2nd year comprehensive assessment as well as the student's initial career interests, which will assist in construction of the clinical schedule for the third year of medical school. During the months preceding the fourth year, students will again be encouraged to meet with their advisory dean to have further discussion of his/her residency training/career interests and the names of specific faculty to contact for information about the specific specialty/ies. At this time, the students will begin to construct their clinical schedule for the fourth year of medical school. The following factors are also considered for 4th year scheduling:

- composition of the clinical elective experience, including extramural (study away) electives
- timetable for application to residency programs
- appropriate post-graduate programs based upon the student's specific career interests and previous academic performance.

Clinical Scheduling and Registration

As described above, the third year of the URSMD Double Helix curriculum is comprised of core clinical clerkships, which are grouped into 4 twelve-week blocks. Each block includes 5-10 weeks of required clinical experiences three of which are followed by a 2 week advanced basic science component. These clerkships must be completed in the third year and must be completed at the University of Rochester School of Medicine and Dentistry. In fact, **all** required clinical rotations **must** be completed at the URSMD. During the elective time, students have the flexibility to take clinical electives and vacation. **Students are reminded to plan their elective and vacation time over the two years to meet all graduation requirements.** The specific clinical electives that are available during the elective block are dependent upon the timing of the elective block. Prerequisite core clerkships for specific electives are outlined in the clinical elective descriptions. Comprehensive details about the clerkships will be provided in each individual clerkship syllabus. In brief, the core clerkship experiences are:

- **Adult Inpatient - 16 weeks**
 - Internal Medicine - 8 weeks
 - Surgery - 6 weeks
 - Advanced Basic Science - 2 weeks

- **Women's and Children's Health - 12 weeks**
 - Obstetrics and Gynecology - 5 weeks
 - Pediatrics - 5 weeks
 - Advanced Basic Science - 2 weeks

- **Mind, Brain and Behavior - 10 weeks***
 - Neurology - 4 weeks
 - Psychiatry - 4 weeks
 - Advanced Basic Science - 2 weeks

*The initial two weeks of this 12 week block may be used for clinical electives or vacation.

Thus, during the third year, students have up to 11 weeks to pursue clinical electives, complete other requirements (e.g., Community Health Improvement Clerkship, Surgical Subspecialties), engage in research or schedule vacation.

Once again, the other **required clinical experiences** which need to be completed in the third or fourth year are:

- Emergency medicine - 4 weeks
- Surgical Subspecialty - 2 weeks
- Subinternship - 4 weeks (*Scheduled during the fourth year only*).

Other required experiences include:

- Community Health Improvement Clerkship - 4 weeks (Scheduled in August, September, October, November and March)

- Process of Discovery – 4 weeks (February of final year)
- Successful Interning – 1 week (Spring of final year)

All required clinical rotations must be completed in the spring of the 4th year at least one month prior to the commencement date.

In addition to the core clinical clerkships and the required clinical rotations and experiences, each student must also complete an additional 25 or 30 weeks of clinical electives. The total number of clinical electives weeks required are 25 or 30 which includes 2 weeks of surgical specialty. At least two weeks of clinical electives will be selected in consultation with Advisory Dean informed by the Year 2 Comprehensive Assessment and by earlier clerkship performance. These electives may be taken across years three and four of the curriculum.

****Students who entered medical school before August of 2001 are not required to complete the Community Health Improvement Clerkship (CHIC) and must do 4 additional weeks of elective work.**

Students are encouraged to take at least four weeks of vacation each year. In addition, students should plan to utilize up to 4 weeks of their unscheduled time for residency interviewing in December or January of their fourth year. Almost all students schedule more than the minimum number of clinical electives, but the schedule is left flexible for students who may wish to engage in research or participate in international health experiences.

All electives are completed on a full-time basis. New and revised elective courses are solicited for publication in the Elective Catalogue on an annual basis. Any information regarding new, revised or canceled electives received after the catalogue publication deadline will be made available to students on the electronic version of the catalogue and on the URSMD registrar's web page. Self-designed elective proposals **must** be reviewed and approved by a URSMD faculty member in the appropriate department and the student's Advisory Dean in advance of beginning the elective.

Students **must** register for all electives **prior to** beginning work. **Post-hoc credit for work in progress or completed work will not be granted.** Registration dates and information are included in this bulletin.

DOUBLE HELIX CURRICULUM GRADING POLICIES

DHC Core and Required Clerkship Grade Definitions

Honors	20%	
High Pass	30%	
Pass	50%	
P(m)	0-5%	
Fail	0-2%	(Must be repeated and Pass is the highest grade that can be assigned)
Incomplete (I)		
Withdraw (W)		
Withdraw Failing (WF)		
To Be Determined (TBD)		

The following grade definitions will be used for the core and required clerkships:

Honors: Academic and clinical performance rated as exceptional by all evaluators. Personal and professional qualities outstanding. Shows promise to excel in the most competitive residencies and will receive vigorous departmental support in applying for these. (In a typical year, approximately 20% of students will achieve this grade.)

High Pass: Academic and clinical performance rated as exceptional in several areas, at least very good in all others. Personal and professional qualities are excellent. Capable of succeeding in any residency and will receive strong departmental support. (In a typical year, approximately 30% of students will achieve this grade.)

Pass: Academic and clinical performance ranging from acceptable to very good in all areas (and may be exceptional in some areas). Personal and professional qualities are at least very good. No significant deficiencies. Most students receiving this grade will be capable of succeeding in any residency but will be challenged by the most competitive, and will receive strong departmental support although will be advised not to limit applications to the most highly competitive programs. Some students receiving this grade would not be comfortable or successful in the most competitive residency programs, will be advised to apply to less competitive (but still very good) residencies, and will receive departmental support. (This is the modal grade: In a typical year, approximately 50% of students will achieve this grade.)

Pass marginal: Some significant deficiencies identified, requiring remedial work (at the discretion of the clerkship director and the clerkship grading committee, albeit not repeat of the entire clerkship) before a Pass grade for the clerkship can be awarded. A Pass marginal can only be remediated to a grade of Pass, and must be remediated for promotion. Pass marginal will not appear on the final transcript. In a typical year, 0-5% of students will achieve this grade.

Withdraw: When a student has been enrolled for less than 50% of a clerkship and elects to withdraw or the student has been enrolled for greater than 50% of a clerkship and has a passing performance, the grade of Withdraw is assigned. The transcript will record the withdrawal with a 'W'.

Withdraw Failing: When a student has been enrolled for at least **50%** of a clerkship and elects to withdraw with a failing performance, a grade of WF should be assigned. When the clerkship is retaken and completed, the student will be assigned the grade earned in the retaken clerkship. The transcript will have the WF grade as well as the grade assigned in the retaken clerkship. For example:

Adult Inpatient Clerkship: Medicine Block A1-2002 Grade **WF**
Adult Inpatient Clerkship: Medicine Block A1-2003 Grade **HP**

To Be Determined: When students fail the NBME subject exam and need to re-take it but have an otherwise satisfactory clerkship performance.

Fail: Very significant deficiencies, requiring that the student repeat the entire clerkship. (In a typical year, 0-2% of students will achieve this grade.)

Incomplete: Used at the discretion of the clerkship director, usually when a student who has otherwise done passing or better work has been unable to fulfill all course requirements due to extenuating circumstances. On the final transcript, the grade of "Incomplete" may be either struck out or replaced by the final clerkship grade, depending on the circumstances.

Electives are graded as Pass or Fail.

Policy of feedback and evaluation for 3rd year clerkships:

The clerkship director or his/her designee, depending on the clerkship should give one-on-one formative feedback that identifies strengths and areas for improvement to each student at least once during each five-week block. *The objective is to ensure that students move to the next clerkship having received formative feedback on performance during the preceding clerkship.*

Final grades including written comments should be submitted by 6 weeks after the end of the basic science block for each clerkship. *The objective is to ensure that students know their grades for the two clerkships they completed in the preceding block by the time they start the second clerkship in the next block.*

MD with Distinction in Research

Students are invited to apply for consideration of MD with Distinction in Research around **March of their fourth year**. At that time, candidates submit a 4-5 page summary of their *research. The MD with Distinction in Research Review Committee (Honors Committee) then judges the quality of the research. The Committee recommends the degree to the Dean of the Medical School.

* The research must be completed during the student's tenure in medical school to be considered for a MD with Distinction in Research. Work submitted to satisfy the In-depth Experience (IDE) requirement is eligible for consideration for the Distinction in Research designation.

MD with Distinction in Community Service

The MD with Distinction in Community Service is an option for students who make significant longitudinal contributions (at least 140 hours) to community service and who achieve a grade of Honors or High Pass in the Longitudinal Community Health Improvement Clerkship (CHIC).

Selection Criteria

The selection criteria for the designation *MD with Distinction in Community Service* include four components:

- a. Distinguished record of **voluntary** (not paid) longitudinal community service on an **approved** community-based project
 - i. **Year I** at least forty (40) hours
 - ii. **Year II** at least forty (40) hours
 - iii. **Years III and IV** a **total** of 60 hours during Years III and IV
- b. Confirmation of longitudinal community service and number of completed hours by Adrienne Morgan, Co Director of CACHED
- c. Community Health Improvement Clerkship (CHIC) Performance
 - i. CHIC Final Paper
 - ii. Oral presentation (with PowerPoint visuals) on CHIC project
 - iii. CHIC Evaluation and grade of Honors or High Pass
- d. Review and selection of *Distinction in Community Service* candidates by the Community Service Committee

Candidacy for the MD with Distinction in Community Service

- All candidates for *the MD with Distinction in Community Service* **must** register (special electives form with Advisory Dean approval) with the CACHED **before February of Year I.**
- Volunteer service at the **CACHED approved** community-based location, will be tracked by CACHED over period of enrollment.
 - Student who fail to volunteer for the required number of hours will be notified annually and lose their eligibility for *Distinction in Community Service*.

Annual Announcement of Distinction in Community Service

The candidates selected for the *MD with Distinction in Community Service* will be announced at commencement. Students selected for *Distinction in Community Service* who delay their graduations, will have their *Distinction in Community Service* announced at commencement the year they graduate. Therefore, the distinction WILL NOT be included in the Medical Student Performance Evaluations of candidates participating in the NRMP before graduating.

Selection Committee

The SMD's Community Service Committee will serve as the selection committee for the *MD with Distinction in Community Service* designation.

OME Resource Staff

Adrienne Morgan, Co-Director, CACHED
Cristina Morganti, Program Assistant, CACHED
Carol Veltre, Medical School Registrar
Monique Williams, Assistant Medical School Registrar

Extramural (Study Away) Electives

Students who have maintained good academic standing and have successfully completed all courses in the first two years may participate in extramural electives in this country and abroad. Most LCME schools have joined the Visiting Student Application Service (VSAS). Students will be required to submit their application through the Visiting Student Application Service. VSAS charges a fee for this service. In addition, students must have completed all core clerkships prior to acceptance for a study away clinical elective at most LCME accredited medical schools. Thus, the majority of study away electives will be completed at the end of 3rd year or during the 4th year. Students may spend up to **12 weeks** of clinical electives at outside institutions with the approval of their advisory dean. Extramural electives provide unique opportunities for students to gain novel experiences in other countries or acquire insights into how different academic health centers and medical schools function. Moreover, student participation in clinical electives at other hospitals allows students to not only broaden their undergraduate medical education in the clinical area of their choice, but also may provide unique perspectives on the outside hospital, its residency training programs and the location.

In order to ensure that extramural electives are equivalent in quality to those offered at Rochester, students **must** obtain approval from a full-time, URSMD faculty member whose primary appointment is in the same field as that of the desired elective. Since arrangements for extramural clinical electives are more complex than those for other clinical electives, students are advised to make early inquiry. Information about the required documentation and special scheduling considerations may be obtained from the URSMD registrar's office. Students are responsible for making sure that their extramural elective evaluations are forwarded to the Registrar's Office after completion of the elective.

Payment or acceptance of a scholarship for an elective for credit away from Rochester is prohibited. Students may, however, accept reimbursement for travel, housing and board to the extent that these are directly incurred in taking the elective. For example, payment of housing expenses would be allowed if housing must be maintained in Rochester at the same time. This restriction is in place for several reasons. First, it is important to assure that extramural electives are educational experiences. Second, we do not want to have the possibility of students finding themselves in a situation where they are expected to render service having minimal or no educational value. Third, it is critical to assure that the elective sponsor regards and will conduct the educational experience as an educational program. Finally, we want to prevent the participation of students in poor programs because of the prospect of remuneration.

In summary, extramural electives provide special clinical educational experiences. Advanced planning for participation in extramural electives is imperative, because of the additional paperwork from UR and the outside institution involved. All students are encouraged to discuss study away ideas with their Advisory Dean in their individual clinical curriculum planning meetings.

Changes to the Clinical Program

Students **must** consult with their Advisory Dean if they are considering a change in their clinical program. Students may contact the Registrar's Office to see if there is a possibility of a change, but any revisions to the clinical program **must be approved** by his/her Advisory Dean. A drop/add form must be completed and signed by the student, Advisory Dean, and the Registrar's Office in order to complete the change.

For all required clerkships and subinternships in the third and fourth years: Students will not be allowed to drop or add a clerkship or subinternship within **4 weeks** of the rotations start date.

Any drop/add requests for other required clerkships made during the four-week window will require the written approval of **both the clerkship/externship director and the student's Advisory Dean**.

For all electives in the third and fourth years, students will **not** be allowed to drop or add an elective within **2 weeks** of the elective start date. Any drop/add requests made during the two-week window will require signatures from **both the elective director and the student's Advisory Dean**. If an elective is dropped after it has started, a "W" (withdrawal) will be on the student's transcript.

Any student not required to take CHIC (those who began the program prior to 2001) who sign up for it as an elective, cannot drop it once it has been scheduled.

Exceptions to the policies stated above will be considered only under extenuating circumstances and **only** with written approval from **both** the student's Advisory Dean **and** the Course/Elective Director.

Evaluations and Educational Experiences with Family Members

To avoid the appearance of favoritism that may result from curricular experiences with family member evaluators/preceptors, students are not permitted to engage in formal (credit bearing and/or funded) educational experiences with close relatives. In addition to the core clerkships, clinical electives, PBL's, small group assignments, students will not be allowed to participate in URSMD funded fellowships and educational experiences with family member evaluators. Whenever possible, students should not be assigned to hospitals where relatives currently practice to avoid bias in the student's evaluation.

For the purposes of this policy, the following are considered relatives:

- Spouse, spouse's natural and adopted children, grandchildren, and great-grandchildren; parents, step parents, grandparents, and great-grandparents; brothers, sisters, half brothers, and half sisters; aunts, uncles, nieces, nephews, first cousins, and second cousins; and persons married to them

Avoiding the Appearance of Bias in Evaluations Due to Prior Relationships

The Medical School expects both faculty and students to avoid situations where a previous relationship could bias evaluations, teaching or could create the appearance of bias. In case of doubt about such a situation, the student should contact his/her Advisory Dean and the faculty member must contact the Course Director.

The school views this issue as a matter of professionalism and all suspected violations of this policy will be reviewed by the MSPRB (Classes of 2006 and 2007), the Honor Board (Classes of 2008 and forward), or Department Chair.

Procedures to Avoid the Impact of Conflicts of Interest

The following policy and procedures have been implemented to avoid the impact of conflicts of interest. A faculty member or other institutional official will *automatically* recuse him/herself from any discussion or vote relating to a matter where there is a potential for or the existence of a conflict of interest and state publicly that there is a personal conflict.

The SMD policy and procedures to avoid the impact of conflicts of interest will be included on the agenda of all evaluation/disciplinary MSPRB, Appeals and Honor Board meetings. The voting members will be reminded that their eligibility to participate in a discussion or vote is a result of no known conflicts of interest. (Effective October 12, 2005)

Attendance in Clinical Rotations Policy

Students on clerkships (i.e., any clinical rotation) do **not** routinely receive any time off. **Full** attendance during **all** aspects of clerkships is expected as part of fulfilling professional role obligations regarding educational and patient care responsibilities. In the case of unexpected absences for urgent reasons (e.g., illness), the student must make every effort to notify the clerkship director, his/her administrative assistant, the senior resident and/or his/her Advisory Dean of their absence, and upon return to the clerkship must discuss the circumstances, including remediation of work missed, with the clerkship director. Time up to two days away from each rotation (no more than one day away for rotations shorter than four weeks) may be granted by the clerkship director for special circumstances as arranged in advance. It is expected that the student making such a request will do so as much in advance as practical, and will be prepared to discuss options for remediating the work that is missed. Longer time away will not be granted except under extraordinary circumstances and at the discretion of the clerkship director.

Please note that this means that fourth year students should plan their residency interviewing for open slots in their schedule; they should not plan out of town interviews while taking a clerkship.

DHC AOA and Medical Student Performance Evaluation (Former Dean's Letter) Groupings

SUMMARY OF THE REVISED FACTORS TAKEN INTO CONSIDERATION FOR THE AOA GROUPINGS

AOA Selection

The MSPRB's role in the AOA selection process is to identify up to twenty-five (25) percent of the class as the candidates eligible for AOA **consideration**. The **AOA Selection Committee** makes the **final** decision regarding the students selected (should not exceed one sixth of the graduating class). The AOA results will be posted around **Mid - September**.

Years 1 and 2 Performance (Effective for the Class of 2008 and forward. However only the Year 2 course performance will be considered for the Class of 2008).

- The Years I and II course directors (excluding ACE which is included in the existing formula) will identify the students who have performed in the top 10% of their courses.
- A summary of the Years I and II course performance will be shared with the AOA Selection Committee
- The Years 1 and 2 course performance will only be used for AOA consideration and will NOT be included in the Medical Student Performance Evaluation (Dean's Letter) groupings or in the MSPE.
- Descriptions of the factors the course directors take into consideration for identifying the top 10% will be included in the course syllabi.

CLERKSHIP PERFORMANCE

Formula to determine AOA Eligibility and MSPE Groupings

The formula below will be used by the MSPRB to determine the groupings for the MSPE and to identify the candidates eligible for AOA consideration. ACE and the core clerkships (medicine, neurology, OBGYN, pediatrics, psychiatry and surgery) will be included in the formula. The first and second year basic science course work will **not** be included in the formula. A grade multiplier will be used to balance the distribution of the clerkship grades.

Note: Medicine Clerkship Background

With the July of 2003 curricular changes for the Medicine Clerkship that involved increasing the course from 5 weeks to 8 weeks, the MSPRB voted (June 2, 2003) in favor of increasing the Medicine Clerkship's weight (now 1.6) in the formula. The other Clerkships will continue to have equal weight.

Formula: A Four point scale $H=4$, $HP=3$, $P=2$, $Pm=1$ x grade multiplier (a division by the average grade in the clerkship for the class year) divided by the number of clerkships completed.

Recalculation of Grouping For Out of Phase Students

Out of phase students will be to grouped with the class in which they complete **at least 51% of their core clinical requirements**. (MSPRB approved June 3, 2002). A recalculation using the formula below will be done for out of phase students.

Recalculation Formula Out Of Phase Students

Prior year's rank $\frac{15}{90} = 16.7$ slot in at number $16.7 \times$ new class size
Number students in current class

$\frac{15}{90} = .167 \times$ new class size if there are 106 students in new class =
new rank of 17.7

Factors taken into consideration by the AOA Selection Committee

In addition to the AOA eligible candidates identified by the MSPRB, the summary of the Year I and II course performance, the **AOA Selection Committee** may consider community service/leadership (as outlined in the MSPE biographical form) awards, and additional degrees earned during medical school in selecting up to one sixth of the graduating class for induction into AOA.

MEDICAL STUDENT PERFORMANCE EVALUATION (MSPE) GROUPINGS FOR STUDENTS WHO HAVE NOT COMPLETED THE FIVE REQUIRED CLERKSHIPS BEFORE AUGUST OF THE FOURTH YEAR

Students who have not completed five required clerkships before August of the fourth year will not be ranked for the MSPE groupings. In stead the following statement will be included in their MSPE: *"It is the policy of the University of Rochester School of Medicine and Dentistry that students who have not completed five required clerkships before August of the fourth year will not be ranked into MSPE groupings. However given X's clinical performance, he/she would most likely be in the ____category".*

Medical Student Performance Evaluation (MSPE) Groupings

The following descriptors and approximate percentages will be used for the DHC Dean's Letter groupings: **Outstanding** (20%), **Excellent** (20%), **Very Good** (55%) and **Good** (5%).

Awards, community service and additional degrees earned during medical school will NOT be used in a systematic way to move students at break points.

Assistance for Individuals with Disabilities

To be in compliance with the Americans with Disabilities Act, the School of Medicine and Dentistry is committed to making reasonable accommodations to assist students with documented disabilities to fulfill their educational objectives.

Candidates with disabilities who wish to request accommodations under the Americans with Disabilities Act must follow the University's procedures for verification of a disability. The University reserves the right to reject any requests for accommodation, that in its judgment, would involve the use of an intermediary that would in effect require a student to rely on someone else's power of selection, detection and observation, fundamentally alter the nature of the School's educational program, lower academic standards, cause an undue hardship on the School, or endanger the safety of patients or others.

Questions should be directed to Dean Brenda D. Lee, at (585) 275-5910.

Religious Observance

In order to be in compliance with New York State Education Law 224-a, the University has adopted the following statement regarding respect for students' religious beliefs.

"As provided in New York Education Law Section 224-a, students who choose not to register for classes, attend classes or take exams on certain days because of their religious beliefs will be given an equivalent opportunity to register for classes or to make up the work requirements or exams they miss, without penalties or additional fees."

If the requested accommodations in effect require or result in students not participating in required educational experiences, the MSPRB will be convened to evaluate the reasonableness of the requested accommodations and if granting such will substantially alter the depth and integrity of the educational requirements for University of Rochester medical students.

All requests for accommodations for religious observance are made via the student portal at <http://student.urmc.rochester.edu>. Rising Third and Fourth Year students should provide written notification no later than the **due dates for the first deadline for course preferences**.

Students are also encouraged to discuss their anticipated absences with their course and/or clerkship directors.

Policy On Medical Student Work Hours During Clinical Years

To address the time commitment required of medical students during clinical rotations and taking into account the effects of fatigue and sleep deprivation on learning, clinical activities, student health and safety, the medical school has adapted the following policy.

1. Duty hours must be limited to 80 hours per week averaged over a four-week period, inclusive of all in-house call and patient care activities.
2. Continuous on-site duty, including in-house call, must not exceed 24 consecutive hours. Students may remain on duty additional hours to participate in didactic activities, transfer care of patients, conduct outpatient clinics, and maintain continuity of medical and surgical care.
3. Students must be provided with one day in seven free from all educational and clinical responsibilities, averaged over a four-week period, inclusive of call. One day is defined as one continuous 24-hour period free from all clinical educational and administrative activities.
4. Optimally, students should be provided with a 10 hour period after in-house call that they are free from all patient care activities.

Clinical clerkships will design student duties with these requirements and mind. Clinical course directors are responsible for monitoring and documenting student duty hours and for the education of their faculty, residents and other appropriate individuals to facilitate compliance with this policy. Students are required to comply with all monitoring requirements set forth by each specific clerkship.

Guidelines to Prevent the Mistreatment of Students

In compliance with AAMC on student mistreatment, the following procedures have been adopted to prevent the mistreatment of School of Medicine and Dentistry students.

AAMC POLICY STATEMENT

Reaffirming Institutional Standards of Behavior in the Learning Environment

The medical learning environment is expected to facilitate students' acquisition of the professional and collegial attitudes necessary for effective, caring and compassionate health care. The development and nurturing of these attitudes is enhanced and, indeed, based on the presence of mutual respect between teacher and learner. Characteristics of this respect is the expectation that all participants in the educational program assume their responsibilities in a manner that enriches the quality of the learning process.

While these goals are primary to a school's educational mission, it must be acknowledged that the social and behavioral diversity of students, faculty, residents, and staff, combined with the intensity of the interactions between them, will, from time to time, lead to alleged, perceived or real incidents of inappropriate behavior or mistreatment of individuals. Examples of mistreatment include sexual harassment; discrimination or harassment based on race, religion, ethnicity, gender, sexual orientation, physical handicap or age; humiliation, psychological or physical punishment and the use of grading and other forms of assessment in a punitive manner. The occurrence, either intentional or unintentional, of such incidents results in a disruption of the spirit of learning and a breach in the integrity and trust between teacher and learner.

University of Rochester Guidelines

Education

1. Specifics regarding the University of Rochester guidelines have been shared with the faculty, house staff and students.
 2. An ombudsperson to hear student concerns has been designated in the Offices for Medical Education (Dean David R. Lambert).
 3. The basic science course directors and clinical clerkship directors are the initial contact people and are responsible for prevention of mistreatment of students in the courses. The Associate Dean for Undergraduate Medical Education (ADUME) will be the contact person for issues that occur in all electives.
-
1. Student concerns that are not satisfactorily addressed via the proposed course/clerkship grievance procedure will be reviewed by the Associate Dean for Undergraduate Medical Education. If further action is warranted, the ADUME will take the appropriate steps to resolve the problem(s).
 - 2.

SEXUAL HARASSMENT

It is the University's aim to provide a setting which is characterized by respect for all and encouragement for the development of each individual's full potential. The University will not

tolerate any behavior, including verbal or physical conduct, which constitutes sexual harassment. All students, staff, and faculty are accountable for compliance with this policy; violations may lead to disciplinary action which, in sufficiently severe cases, may lead to separation from the University after appropriate due process. Certain forms of sexual harassment are also illegal under state and federal laws.

While the Medical School generally considers the wishes of the alleged victim in deciding when and how to respond to cases of sexual and other harassment, in instances when the perpetrator has threatened to harm and/or is felt to be a danger to the victim or the SMD community, the School retains the right (without approval of the victim) to take appropriate measures to protect the victim and the community.

Students who report incidents of alleged sexual harassment, will be given a copy of the SMD and Medical School policy on sexual harassment, as well as information on the University and Medical School ombudspersons.

As described in Section C, the Non Academic Standards, Policies and Procedures of the MSRCAP, student charges of the sexual harassment will be reviewed by the Medical Student Promotions and Review Board (MSPRB).

The University of Rochester Policy on Sexual Harassment - Adopted 1981

Sexual harassment ranges from sexual innuendo made at inappropriate times to coerced sexual relations. Sexual harassment is defined by the University to include unwelcome verbal and physical conduct of a sexual nature and may include, but is not limited to, the following types of behavior:

- * sexually degrading words or gestures
- * verbal sexual abuse or harassment
- * offensive sexual graffiti, pictures or cartoons
- * subtle pressure for sexual activity
- * leering or ogling
- * disparaging remarks to a person about his/her gender or clothing
- * demands for sexual favors accompanied by implied or overt threats
- * unnecessary touching, patting, pinching or brushing
- * forced sexual contact including rape or date rape

Source: University of Rochester Sexual Harassment Brochure

If there are questions, concerns, or you need to discuss a problem, the following individuals are available to help:

Ruth Lawrence, M.D.
University Intercessor
275-4354
E-mail: ruth_lawrence@urmc.rochester.edu

Kathy Sweetland
University Intercessor
275-9125
E-Mail: Ksweetland@admin.rochester.edu

David R. Lambert, M.D.
Associate Dean for Undergraduate Medical Education
275-4537
E-Mail: david_lambert@urmc.rochester.edu

Diane M. Hartmann, M.D.
Associate Dean for Graduate Medical Education
AAMC Women's Liaison Officer
275-4607
E-mail: diane_hartmann@urmc.rochester.edu

RESPONDING TO ACTS OF INTOLERANCE AND DISCRIMINATION

As a result of the number of acts of intolerance that occurred at the University in recent years (for example in one year 15 events on the undergraduate campus and ESM, six involved racial issues, six involved gay and lesbian issues, three with issues of ethnicity and sexism) the brochure, *Responding to Acts of Intolerance and Discrimination*, was developed. The brochure describes how the University manages such incidents.

The Committee on Inclusion and Diversity was created to serve as a mechanism to monitor acts of intolerance across the entire University and to insure a coordinated response.

The coordinator is **University Intercessor Kathy Sweetland** in the Provost's Office, 24 Wallis Hall RC Box 270039 275-9125 Ksweetland@admin.rochester.edu

Compliance Requirements Summary for University of Rochester Medical Students (Revised April 2005)

New York State Department of Health

1. Child abuse certification - ACE
2. Infection Control - 1st Year Orientation

University of Rochester Medical Center

1. **Annual** Mandatory In-Service Exam - Completed via Blackboard (<http://bb.urmc.rochester.edu>)
2. Clinical Information System (CIS) - **scheduled as access is needed** - will require students to complete certification approximately one week before access is needed
3. Electronic Order Writing - 3rd Year Orientation
4. MANDATORY The Health Insurance Portability and Accountability Act (HIPAA) SESSIONS Completed via the intranet by September 1, of the year of matriculation. (<http://intranet.urmc.rochester.edu>)
5. 3rd Year Comprehensive Assessment

University of Rochester School of Medicine and Dentistry

1. Verification of Ability to Meet SMD Technical Standards - 1st Year Orientation
2. AAMC Questionnaires
 - a. Matriculating Student Questionnaire (MSQ) 1st Year Orientation
 - b. The Graduating Student Questionnaire (GSQ) at the start of the Process of Discovery
3. Second and fourth year exit surveys on curriculum and support services
4. Faculty/course evaluations - on going

5. CPR – must provide evidence of certification by December of Year 1 and updates when certification expires

University Health Service *(September 15 deadline, except as noted)*

1. Health Professions Student Health History Form (due before the start of classes or pay a \$25.00 late fee).
2. Complete immunization requirements
3. Submit documentation of Health Insurance Coverage. Note: The Student Health Plan consists of two parts: 1) the mandatory health fee 2) health insurance
4. Evidence of an annual physical health review (including a PPD & health update appointment)
5. TB respiratory protection

AAMC Student Questionnaires

All medical students are required to complete Association of American Medical Colleges Student Questionnaires. Completion of the Matriculating Student Questionnaire (MSQ) is a requirement for first year registration and matriculation. The Graduating Student Questionnaire (GSQ) is a requirement for graduation and must be completed not later than the start of Process of Discovery. The school reserves the right to add other AAMC questionnaires to the list of student requirements.

The data collected from the AAMC questionnaires are anonymous and influence planning, improvements and changes in medical education.

Student Participation in the Evaluation of Faculty and Curriculum

The University of Rochester School of Medicine and Dentistry has a history of valuing student feedback and a record of commitment to improving the educational environment. Students' views on the educational process provide much of the data used to assess courses and faculty. Thus, it is critical to our effort to improve the quality of assessment data that ALL students take this responsibility seriously and participate in this process. As stated in the admissions brochure, "We expect students to treat the educational enterprise with the same seriousness of purpose that we all treat patient care and research, and participation in curricular innovation and in the outcome studies to determine which innovations are most effective is an integral part of the students' role." Participation in the course / clerkship and faculty assessment process is therefore **required**.

Student Course and Clerkship Evaluations Requirements

Because participation in the course / clerkship and faculty assessment process is required, students who fail to participate in the assessment process can be reviewed by the MSPRB. Students who have not completed and submitted their evaluations within two weeks after a course / clerkship ends will be reviewed by the MSPRB. **(Effective February 17, 2003 and revised March 21, 2005)**

Follow-up on Delinquent Student Evaluations

One week after a course/clerkship has ended, the Office of Curriculum (OOC) will send **one** reminder to the students who have not completed their course/clerkship evaluations, that the course/clerkship evaluations will be open for one more week. To be in compliance, all outstanding evaluations must be completed during the final week. **Note:** For courses/clerkships that end in December, students will have four weeks to complete the evaluations. If the evaluations are not submitted after **two weeks**, (except as noted) the OOC will forward the students' names to the MSPRB.

**INFECTION CONTROL GUIDELINES FOR
UNIVERSITY OF ROCHESTER MEDICAL STUDENTS
UNIVERSITY HEALTH SERVICE
275-1164**

**UNIVERSAL PRECAUTIONS APPLY TO ALL EXPOSURES TO BLOOD, BODY FLUIDS,
TISSUES AND SECRETIONS.**

- ✓ **WASH** hands before and after all contact with patients. Consider all blood, visibly bloody secretions and fluids and genital secretions from ALL PATIENTS to be infectious.
- ✓ **GLOVES** are required for all anticipated contact with human blood, body fluids, or mucous membranes. Double glove for surgical procedures.
- ✓ **CHANGE GLOVES** and wash your hands after each procedure and before contact with another patient.
- ✓ **WEAR MASK OR GOGGLES** when blood or body fluids may splash into your face.
- ✓ **WEAR WATERPROOF GOWN** when blood or body fluids may soak through a cloth gown.
- ✓ **YOU ARE RESPONSIBLE** for properly disposing of any sharps or infectious materials you have used in designated containers.

For Tuberculosis: N95 respirator masks are required for potential tuberculosis exposures.

Definition of blood and body fluids (for blood borne pathogens):

- ✓ Human blood and blood products
- ✓ Semen and vaginal secretions
- ✓ Cerebrospinal fluid (CSF), synovial fluid, peritoneal fluid, pericardial fluid, amniotic fluid
- ✓ Saliva in dental procedures (assume blood contamination)
- ✓ Any body fluid **visibly** contaminated with blood
- ✓ Any unfixed human tissue or organ
- ✓ HIV-containing cell, tissue, or organ cultures or solutions, and blood, organs, or other tissues from experimental animals infected with HIV or hepatitis B virus (HBV)

Notice that other body excretions such as saliva, urine, stool, vomitus, and respiratory secretions are not included on this list (unless visibly contaminated with blood). However, many of these excretions present other infectious hazards.

PROCEDURE FOR NEEDLE STICKS, CUTS, AND BLOOD/BODY FLUID EXPOSURE:

1. WASH OR IRRIGATE IMMEDIATELY IF EXPOSED TO BLOOD OR BODY FLUIDS
- ✓ Intact skin: **wash with soap and water.**

- ✓ Non-intact skin, needle stick or cut: **wash with soap and water.**
- ✓ Mouth: **rinse well with water.**
- ✓ Eyes: **rinse with sterile water, saline or tap water.**

2. REPORT IMMEDIATELY

Call UHS Occupational Health Exposure Hotline at 275-1164 ASAP including nights/weekends/holidays

Leave the following information on voicemail when prompted:

- ✓ Your name & social security number
- ✓ Phone number
- ✓ Hospital where exposure occurred & name of source patient
- ✓ Date of exposure
- ✓ Type of exposure (ex: needle stick, scalpel cut, splash in eyes, etc.)

Weekdays: The UHS Occupational Health Nurses (Bonnie Smith & Susan Antenozzi) will give you further instructions for follow-up care. The OH Nurse is available Monday-Friday, 8:00 AM to 5:00 PM.

Nights/weekends/holidays: Voicemail will give you further instructions. A UHS on-call physician is available for consultation and coordination of ongoing treatment as needed.

3. EXPOSURE AT SMH

See instructions in #2

4. EXPOSURE AT AFFILIATED SITES

Students must notify the UHS EXPOSURE HOTLINE (275-1164) ASAP to coordinate proper follow-up and to make sure the bills will be paid. Initial treatment & counseling may be done at the affiliated site.

Students should discuss any exposure with the hospital's employee health office, their instructor, and the infection control office in the institution where the incident occurred.

Employee Health at Local Hospitals:

Highland Hospital
Employee Health: 341-8017
After hours: contact nurse supervisor

Monroe Community Hospital
Employee Health: 760-6208
After hours: contact nurse supervisor

Rochester General Hospital

Employee Health: 338-4026
After hours: contact nurse supervisor

Unity Health System
Employee Health: 723-7880
After hours: contact nurse supervisor

OTHER INFECTIOUS DISEASES

If you think you have been exposed to any of the following diseases, please contact the UHS Occupational Health Nurse for follow-up investigation:

- Chickenpox/zoster
- Meningococcal disease
- Pertussis
- Scabies
- Tuberculosis

If you are ill, there are certain conditions that may limit your contact with patients. If you think you have any of the following conditions, please contact the UHS Occupational Health Exposure Hotline at 275-1164 about the advisability of working with patients:

- Chickenpox or shingles
- Conjunctivitis
- Diarrheal illness
- Measles
- Skin infections
- Upper respiratory illness with fever

Source: OHG8 med new 04-05(bbp brochure)
Revised: June 2004

UNITED STATES MEDICAL LICENSING EXAMINATION (USMLE) REQUIREMENTS

New URSMD USMLE Policy *(Effective May 11, 2004)*

The University of Rochester now requires all students to take STEPS 1 and 2 of the USMLE, prior to graduation. While it is an institutional requirement to take STEPS 1 and 2 (CK and CS) of the USMLE prior to graduation, Rochester does not require passing USMLE examinations for promotion or receipt of the MD degree.

While Rochester students have some flexibility in when they take STEPS 1 and 2 (CK and CS) of the USMLE, it is expected that STEP 1 will be taken **before** September following Year 2 and that STEP 2 (CK and CS) will be taken **no later than February 1** following Year 3. The results of STEPS 1 and 2 must be released to the school. The Medical Student Promotions and Review Board will review all USMLE performance.

NOTE: The school will not release individual scores to anyone outside the institution, including residency programs. If the scores need to be shared with another party, the **student** will be responsible for transmitting the scores.

Because STEPS 1 and 2 (CK and CS) are required parts of the academic program, the examination fees and related travel costs for Step 2-CS have been included in the Cost of Attendance (COA) for Years 2 and 4.

Visiting Students

Unless otherwise noted, the clinical electives appearing in this bulletin are open to visiting students who have completed two years of pre-clinical work and one year of clinical experience at an LCME-approved United States medical school, a United States School of Osteopathic Medicine or a Canadian Medical School. Students enrolled at a U.S. LCME accredited medical school will be required to submit their application through the Visiting Student Application Service (VSAS). VSAS charges a fee for this service. In addition, The University of Rochester charges a non-refundable **\$100** administrative fee **per** elective. Students who attend an Osteopathic school will be required to complete the online application at

www.urmc.rochester.edu and mail it to our school along with the supporting documents and the administrative fee. **Criminal background checks must be submitted with application.**

Only students attending an international medical school with which the University of Rochester School of Medicine and Dentistry (URSMD) has a formal exchange agreement will be considered for elective experiences. Such students must be in the final year of medical studies and will be allowed to do no more than twelve weeks of elective experiences. International students must direct their application requests to the appropriate people at their home institution to learn if their school is affiliated with the URSMD. If so, then student must apply through the appropriate home office.

University of Rochester School of Medicine and Dentistry students are given first choice of available elective openings. Thus, all visiting medical students are encouraged to select two alternate clinical electives in addition to their desired elective course when submitting an application.

Visiting students must register with the University Health Service and provide documentation of the following:

- Rubella and rubeola immunization (certificate or positive lab test)
- Results of a tuberculin test within the past 6 months and any follow-up
- Proof of hospitalization insurance coverage. If student ambulatory health coverage is not in effect away from the parent institution then ambulatory health coverage must be purchased through the UR SMD University Health Service at a cost of approximately \$30/month.

Housing** inquiries should be directed to:

Residential Life
Community Living Program
University of Rochester
Rochester, NY 14627
(585) 275-1081

Please be aware that the Residence Office at the University does **not guarantee housing.

Hospital abbreviations are identified below and indicate the location of the elective:

HH: Highland Hospital	PRO: Private Office
RGH: Rochester General Hospital	MCH: Monroe Community Hospital
SMH: Strong Memorial Hospital	
PRH: Park Ridge Hospital	STM: Unity at St. Mary's Hospital

Application forms may be downloaded from our Web site at:

<http://www.urmc.rochester.education/registrar>

Core Inpatient Clerkships

The inpatient clerkships are rigorous immersion experiences that include weekends and evening or night call with progressive responsibility during the weeks spent on each discipline (e.g., one admission per call day in weeks one and two, and two admissions per call day thereafter). After the two paired-clinical rotations, the last two weeks of each core clerkship (weeks 11 and 12) are advanced basic science weeks in which students return to such topics as pharmacology, microbiology, genetics, and epidemiology, along with the curricular themes of ethics, nutrition, diversity, prevention, health care and epidemiology, along with the curricular themes of ethics, nutrition, diversity, prevention, health care financing, and aging – but now in the context of their inpatient clerkship experiences.

Adult Inpatient Clerkship

The Adult Inpatient Clerkship is a 16-week clerkship composed of two components—Internal Medicine 8 weeks and Surgery 6 weeks and a 2 week Basic Science block. The overall goal of this experience is to provide the student with exposure to the diagnosis and management of common problems encountered in adults with emphasis on the integration of basic science to clinical care.

Internal Medicine component (8 week experience)

The Internal Medicine Clerkship is divided into two 4-week blocks. During the first block each student is assigned to one of three sites in Rochester: Highland Hospital, Rochester General Hospital or Strong Memorial Hospital. At each hospital, students will work with one housestaff team that is composed of one intern (R1) and one upper level resident (R2 or R3). Students will evaluate new admissions and follow them during their hospitalization.

At each site, students will meet with an attending physician preceptor for 10 sessions for student centered learning. A central educational experience of this rotation, preceptor rounds allows students to work closely with an individual faculty member over an extended time and are designed to focus on the educational needs of students.

These sessions will focus on presentation of patients and discussion of the patients' problems and diagnostic and treatment strategies. Students will present their patients to the group (often at the bedside) and the preceptor will do bedside teaching and assess history and physical examination skills of the students. Discussion regarding problem lists, differential diagnoses and treatment will follow. Additionally, during these sessions, preceptors will assign students to prepare short discussions about topics raised during these sessions.

During the second four weeks, students will switch sites and/or teams. Some students will go to Park Ridge Hospital and possible a site outside of Rochester. Some students may rotate on the hematology/oncology team or the Cardiac Care Unit team at Strong Memorial Hospital. Students will go to attending rounds with their teams.

A didactic lecture series addressing core internal medicine topics is conducted throughout the clerkship specifically for the students.

The rotation is structured with the expectation that students will arrive with knowledge and skill in interviewing and physical examination. The experience will build on these fundamentals and progressively increase student responsibility over the eight weeks.

CLINICAL LEARNING OBJECTIVES

Knowledge:

Gain an in-depth understand of students' patients' diseases.
Understand common medical problems (covered in Teaching Conferences).
Interpret basic laboratory and diagnostic tests (EKG and radiology).
Understand appropriate use of consultants.
Discuss the literature related to problems/issues involving students' patients.
Understand the initial steps to evaluate a hospitalized patient's complaint, problem or diagnosis.

Skills:

Independently obtain a complete history and physical.

Generate an appropriately detailed differential diagnosis for a common medical complaint/problem.

Document an initial evaluation in a comprehensive format and also document a progress note.

Verbally present a complete history and physical with minimal written cues in an appropriately succinct timeframe.

While not required, it is expected students will gain skill in phlebotomy, EKG, arterial puncture, nasogastric tube placement and IV insertion.

Utilize Evidence Based Medicine skills in the care of individual patients.

Demonstrate and refine appropriate communication skills with colleagues, patients and families.

Recognize and appreciate ethical questions and issues involving patients cared for.

Attitudes:

Understand and appreciate the empathetic role of the physician.

Acknowledge, address and appreciate issues of diversity in healthcare.

Display and convey professionalism in words, actions and appearance.

Appreciate the role of the various members of the health care team.

Surgery Clerkship Component (six week experience)

Overview: The primary goal of the clerkship is to teach students the basic principles of surgical diagnosis and management, both operative and non-operative. Students should learn the indications for appropriate and timely referral of patients for surgical consultation. It is important for the student to gain an appreciation for the physical, psychological and socioeconomic disruptions that might accompany surgical illnesses. The student should recognize that proper surgical care involves accurate diagnosis, the exercise of judgment in selecting patients for surgery and the application of proper skills, values, and attitudes in the total care of the patient.

Learning Objectives

Knowledge:

Students will be expected to demonstrate knowledge of common surgical illnesses and patient care issues including, but not limited to; pre- and postoperative patient evaluation wound healing and care

- 3) the acute abdomen
- 4) fluid and electrolyte management
- 5) surgical infection
- 6) trauma and shock
- 7) surgical oncology
- 8) hernias
- 9) biliary tract disease

Skills:

Ability to perform an accurate workup of a surgical patient and create an appropriate management plan

- 2) Ability to write appropriate pre-and postoperative orders
- 3) Proper sterile technique in the care of wounds
- 4) Identification of and treatment of superficial wound infections
- 5) Ability to perform simple wound closure
- 6) Ability to manage common drains and tubes

Attitudes:

The student should demonstrate:

- 1) An empathetic, caring and respectful attitude in the care of patients and families. Understanding of ethical issues and professionalism in dealing with patients, families and health care providers
- 3) Ability to recognize and address issues of diversity and aging in healthcare.

Organization and Conduct of the Clerkship:

The clerkship is an intensive in-hospital patient care experience conducted at the following sites: Highland Hospital; Park Ridge Hospital, Strong Memorial Hospital, and Rochester General Hospital. Students will function as an integral member of a resident/attending team and, in addition, will be assigned a preceptor. Each student is expected to spend one half day per week in the preceptor's clinic. Students are expected to play an active and reasonably independent role, under appropriate supervision, in the care of their patients.

A series of core topic conferences are conducted at each site. Students will present patients and topics at many of these conferences. In addition, the Rochester-based students will convene weekly for Attending Rounds, Surgical Grand Rounds and a Clinical Conference at SMH.

Women's and Children's Health Clerkship

Includes one 5-week rotation in pediatrics and one 5-week rotation in obstetrics/gynecology, followed by two weeks of advanced basic science topics related to acutely ill women and children. The two clinical rotations are closely connected, in that at least one week of the pediatrics rotation revolves around sick newborns and their mothers, whose treatment is really inseparable. Didactic conferences spanning the 10 weeks cover various topics in maternal-fetal medicine.

Pediatric Clinical Portion (5 week experience)

Learning Objectives Knowledge: Acquire knowledge about the diagnosis and initial

management of common acute and chronic illnesses that occur in neonates, infants, children and adolescents. Recognize how the age of the child (and normal behaviors) influences the areas included in the exam, as well as the order of the examination, and the approach to the patient. Understand how findings have different clinical significance depending on the age of the child. Learn how to assess severity of illness in children. Know how the Denver Developmental Screening Test is used to assess motor, language and social development. Acquire basic knowledge of physical and psychosocial growth and development and its clinical application from infancy through adolescence. Learn the physical changes of puberty.

Attitudes: Understand the influence of the family, community, and society on the pediatric patient during health and illness. Understand the importance of health promotion and disease and accident prevention among pediatric patients. Gain exposure to the varied aspects of pediatric practice to assist in career selection.

Skills: Develop communication, physical examination and clinical problem-solving skills required to properly evaluate the health status of a pediatric patient. Learn the appropriate use of the limited or focused examination, particularly in the ambulatory setting. Learn how to establish rapport with children of various ages in order to perform the physical examination. Become skilled at observation as a method of obtaining data in the assessment of the child. Develop strategies for improving rapport. Learn to perform the Denver Developmental Screening Test and be able to conduct Tanner staging. Develop techniques for counseling around health promotion and disease and accident prevention.

Clinical Experiences

- ④ SMH experience includes a 3-week assignment on an inpatient unit/teams at Strong Golisano Children's Hospital at Strong (4-1600, 4-3600, 4-1400, PICU, Heme-Onc), and 2-one week selectives in either newborn care (NBN, NICU), community practice, acute ambulatory care (Illness Clinic, ED), or sub-specialty pediatrics
- ④ RGH experience includes assignments on (B7, Special Care Nursery, and acute ambulatory care (RGPA, EL newborn nursery and Emergency Departments at CHS or RGH
- ④ Students will work as members of the team to which they are assigned, and will participate in all work rounds, attending rounds, and resident conferences
- ④ On call shifts in the CHS or RGH emergency department during ED week
- ④ Evening/weekend call every fourth day per block with their pediatric ward intern when he/she is on-call

Didactics and Other Experiences

- ④ Weekly student conferences (clerkship lecture series, student presentations, chief resident medical student teaching rounds)
- ④ Daily resident and student conferences (morning report, pediatric resident noon conference M-W, ward attending rounds twice weekly, outpatient conference week of newborn nursery/ED)
- ④ Weekly resident conferences (radiology rounds, health team rounds, intern

report)

- ④ Weekly department Grand Rounds

Obstetrics and Gynecology Clinical Portion (5 week experience)

Learning Objectives Knowledge: To understand normal obstetrics as well as obstetrical disorders. To acquire knowledge about the diagnosis and management of common gynecologic diseases.

Attitudes: To demonstrate professional attitudes toward ob/gyn patients. Also, foster the necessary attributes to becoming an effective physician.

Skills: To demonstrate the ability to obtain a complete OB and GYN history (including sexual history) and present this in an oral and written form. Perform a spontaneous vaginal delivery, and perform a complete breast and pelvic exam, including Pap smear and cultures.

Clinical Experiences

- ④ based on inpatient Obstetrical and Gynecologic units (at SMH, HH, and RGH)
- ④ on call shifts with the respective teams; seven 24 hour in house calls during the rotation
- ④ one week in an Ambulatory session
- ④ one afternoon a week in a resident clinic

Didactics and Other Experiences

- ④ weekly student case conferences
- ④ weekly joint neonatology and perinatology conferences
- ④ weekly Department Grand Rounds
- ④ optional resident conferences
- ④ two, 3 hour clerkship case/lecture series
- ④ once a month Ethics conference
- ④ daily sign-in and sign out conferences
- ④ weekly meetings with faculty preceptor

Advanced Basic Science Portion (2 week experience)

Learning Objectives

Knowledge:

- ④ To enrich basic science knowledge in areas that are of a significance to pediatrics and obstetrics/gynecology
- ④ To revisit and enhance student understanding of pelvic anatomy
- ④ To reinforce perspectives about diversity, health economics, aging, prevention, ethics, nutrition, and palliative care

Attitudes: To recognize the value of continued basic science education and the important role of basic and clinical research in addressing issues related to health and disease in women and children.

Didactic and Other Experiences

- ④ Daily lectures relating basic science to clinical processes/diseases (infertility/reproductive endocrinology, pelvic embryology and anatomy, obstetrical anesthesia, Rh sensitization, fetal physiology, prematurity, genetics, autism, vaccine biology, and oncogenesis)
- ④ Four laboratory experiences in pelvic anatomy, Liley curves, blood typing, anesthesia
- ④ One PBL session (OB anesthesia)
- ④ Daily 20-minute student presentations on basic science topics relevant to the day's theme
- ④ Six sessions of small group discussions on themes
- ④ One M&M session on end-of-life and palliative care
- ④ One session on ethics and law

Mind/Brain/Behavior Clerkship

Is a 10-week rather than 12-week clerkship, giving students two weeks of elective time in the first two weeks of the block. The clerkship includes one 4-week rotation in psychiatry and one 4-week rotation in neurology, followed by two weeks of advanced basic science topics relating to clinical neuroscience and psychiatry.

Psychiatry Clinical Portion (4 week experience)

Learning Objectives

Knowledge: To understand important psychiatric disorders (cognitive, mood, psychotic, anxiety, personality, eating, substance use, and child), the DSM-IV approach to diagnosis, ethical, legal, and societal frameworks relevant to care, and mechanisms of action of drugs, psychotherapies, electroconvulsive therapy, and social interventions.

Attitudes: To demonstrate professional attitudes toward psychiatric patients, associated stigma, and the needs of traditionally neglected populations, appreciation of the importance of multidisciplinary collaboration, and enhanced self awareness in the context of clinical work.

Skills: To demonstrate the ability to gather a patient database (including history, mental status examination, physical examination, and laboratory findings) and present this in oral and written formats, for patients presenting with symptoms of the above disorders as well as with suicidality, violent behavior, or unexplained physical symptoms. The student also must demonstrate ability to form patient alliances and to use these alliances to foster patient care.

Clinical Experiences

- ④ Based on psychiatric inpatient units (at SMH, Unity/Genesee St., or RPC) or the SMH inpatient consultation service

- ④ On-call shifts in the SMH psychiatric emergency department
- ④ ECT observation
- ④ Patient-instructor exercise for alcoholism
- ④ AA meeting observation

Didactics and Other Experiences

- ④ Weekly psychiatry lectures (cognitive disorders, mood and anxiety disorders, psychotic disorders, child psychiatry, emergency psychiatry, neuropsychological testing, psychotherapy, ethics and law)
- ④ Weekly case conference
- ④ Joint neurology/psychiatry case conference, including End of Life/Palliative Care Conference
- ④ Weekly Department Grand Rounds
- ④ Optional resident organized seminar series (lunch talks)

Neurology Clinical Portion (4 week experience)

Learning Objectives

Knowledge: To understand how to evaluate common neurological problems: neurological emergencies (coma and mental status changes, stroke, seizures) and common outpatient neurological problems (headache, dizziness, back and neck pain, peripheral neuropathies), to recognize and understand less common neurological problems (e.g., multiple sclerosis, Parkinson's disease and other movement disorders, neuromuscular diseases, dementia, central nervous system infections, tumors of the nervous system), and to learn the appropriate indications for ordering laboratory studies in neurology (EEG, EMG, nerve conduction studies, evoked potentials, lumbar puncture, CT and MR imaging of the brain and spinal cord).

Attitudes: To develop the many personal attributes necessary for becoming an effective physician.

Skills: To demonstrate the ability to obtain an accurate neurological history, and to perform and interpret a neurological examination.

Clinical Experiences

- ④ Based on inpatient units (Strong Memorial Hospital, Rochester General Hospital, St. Mary's Hospital, or the Canandaigua VA Hospital)
- ④ Option to rotate on neurorehabilitation or pediatric neurology services
- ④ Students will work as members of the team to which they are assigned, and will participate in all work rounds, attending rounds, and resident conferences
- ④ Evening call three evenings per block with their neurology resident when he/she is on-call.

Didactics and Other Experiences

- ④ Weekly neurology lectures (headache, dizziness, back pain, compression neuropathies, seizures, stroke, coma/increased intracranial pressure, ethics and law)

- ④ Joint neurology/psychiatry cases conference, including End of Life/Palliative Care Conference
- ④ Weekly resident and student conferences (morning report, attending rounds, professor rounds, neuroradiology conference, brain cutting, critical care rounds, clinical clerk conference, biweekly resident teaching conferences)
- ④ Weekly Department grand rounds

Advanced Basic Science Portion (2 week experience)

Learning Objectives

Knowledge:

To familiarize the medical student with cutting-edge research To revisit and enhance student understanding of neuroanatomy, neuropathology, and advances in neuroimaging technology To reinforce perspectives about brain-behavior and behavior-brain relationships

Attitudes: To recognize the value of continued basic science education and the important role of basic and clinical research in addressing issues related to normal and abnormal functioning of the brain as well as therapeutic trials.

Didactic and Other Experiences

- ④ Daily lectures relating basic science to clinical processes/diseases (autism, growth factors and apoptosis, stem cells, dopamine systems, psychoses, gene therapy, neurogenetics, Alzheimer's disease)
- ④ Three laboratory experiences in hippocampal neuroanatomy, neuropathology, and imaging studies
- ④ Two PBL cases
- ④ Four afternoon sessions covering basic science and practice of rehabilitation, therapeutic trial design and implementation, and psychosurgery

Community Health Improvement Clerkship

Department of Community and Preventive Medicine (PM400) for 4th year medical students, which includes completion of a specific project aimed at improving community health (e.g., intervention, education, program involvement, advocacy, health screenings, etc.). Also included is a didactic component (10-15 lectures or presentations), and a paper describing needs and impact of project. Students, in their 4th year, sign up for one of the four "4-week blocks", typically between August and December.

Students have a second option – they can begin a "Longitudinal Track" version of this clerkship in Year 01 or Year 02 by beginning a community project (40 hours per year minimum), and this would satisfy the "project" component. They would then only be responsible for the didactic component and the final paper during the 4-week clerkship block in the 4th year.

Various locations are available in the Rochester metropolitan area to clerkship students, but many opportunities exist in some key areas where there is established access to communities with many health care needs, including *Enrique Fermi* School #17 (an elementary school) and the Orchard Street Community Health Center. Students will select a community location and

preceptor based on the project they chose to undertake.

Office space and computers, provided by the Department and Community and Preventive Medicine, and a New York State Department of Health grant (awarded to the Office of Medical Education), are located within a specific target community near the inner-city areas of Rochester. The office space is located within the same building as: 1) an elementary school, 2) a neighborhood action coalition, 3) a dental center, 4) a community health center, and 5) a faith-based organization. Information on these agencies, and their relation to CHIC are described in the course syllabus. Although students can engage with projects in other communities, this unique setting provides ample opportunities for a wide variety of projects, and allows for the “sustainability” of long-term projects. It also fosters long-term relationships between the University of Rochester and specific community agencies and members.

We view the teaching of community health at the University of Rochester School of Medicine as an important aspect of medicine and one’s future desire to help those within their community. The clerkship aims to educate students in the appropriate knowledge, attitudes, and skills (see skill objectives below) necessary for developing the role of the physician to be more than a practitioner in a 1-on-1 patient-physician relationship, but additionally become a key partner in the community who is able to help effect positive changes in health on a broader scale.

Objectives:

1. To learn how to improve significant community health issues affecting one’s community. Global areas for intervention, education, research, evaluation, and development include the following skill objectives (with examples):

- Environmental Change (clean indoor air, health foods in vending machines)
- Advocacy and Policy Change (lead poisoning policy, state legislation on obesity)
- Partnership Building (bringing voluntaries into specific neighborhoods, facilitating dialogue and action between agencies with specific projects)
- Assurance of Personal Health Services (disparities in access to health care, health screenings such as BP, cholesterol, Carbon Monoxide, cancer awareness, health care information and services on the internet)
- Risk Behavior Change (at the community level: smoking, diet, exercise, treatment adherence, exposure to lead hazards, safety from violence, etc.)
- Program Evaluation (assist in process and/or outcome evaluation of health programs)
- Surveillance (studying the background and epidemiology of specific diseases, data gathering in specific communities)

2. To learn epidemiological approaches using both quantitative and qualitative methods.

3. To learn how to assess and control common community health problems including, but not limited to the following content:

Lead Poisoning

Pediatric Obesity

Smoking

- Advocacy and Policy Change

Disparity in health care access

Violence and conflict

Health screenings

Cancer
Cardiovascular Disease
Diabetes
Diet and Exercise

For more information visit: <http://www.cvhpinstitute.org/chic>

Emergency Medicine Clerkship

Goals:

- Learn to develop appropriate assessment, differential diagnosis, and action plans for patients based on their presenting signs and symptoms.
- Improve skills to evaluate and manage multiple patients with a wide range of varying acuity.
- Increase knowledge and understanding of the role of Emergency Medicine and the Emergency Medical System in healthcare.

Learning Objectives: Upon completion of the rotation, you will be able to:

- Refine an initial complaint-focused assessment on a variety of patients who present to an emergency department.
- Decide the acuity of a patient's condition allowing increasing autonomy with attending supervision as indicated for patient's well being.
- Formulate a differential diagnosis with life-threatening conditions always addressed.
- Succinctly document pertinent positive and negative findings for the history and physical with an appropriate assessment plan.
- Acknowledge the multiplicity of reasons patients present to the emergency department and how to refine an evaluation for the condition or concern in question.
- Integrate the biopsychosocial model into all patient encounters.
- Learn how to access resources and referrals appropriately.
- Interpret initial laboratory and radiological data.
- Perform procedures under supervision as required by patients you evaluate.
- Address prevention where appropriate for future health of patients seen in the ED.
- Identify the most appropriate Emergency Medicine journals and textbooks.

Schedule of Activities:

A total of sixteen clinical shifts with two weeks at Strong Memorial Hospital's Emergency Department and two weeks at one of these community hospitals: Highland Hospital, Park Ridge Hospital, and Rochester General Hospital. Schedules will include days, evenings and nights. The students will generally follow an attending or resident during the shift. These shifts are required at Strong Memorial: Pediatrics, Poison Control Center, EMS and a weekend shift. Visiting students will be assigned shifts at Strong Memorial Hospital only.

Didactic Activities:

Students are required to attend lectures on Tuesday mornings, 8:00 a.m. to 11:00 a.m. If a suturing lecture is being given, it will run until 12:00 Noon. Emergency Medicine Grand Rounds are offered the second Thursday of each month, 8:00 a.m. to 9:00 a.m. and attendance is required by all medical students. Attendance at resident lectures on Thursday is optional.

Required Reading:

None are required, but students are encouraged to review Emergency Medicine: Concepts and Clinical Practice Peter Rosen and Roger Barkin (Eds.) and Emergency Medicine, JE Tintinalli, E Ruiz

and RL Krome (Eds). There are other reference books located in the emergency department as well.

Student Evaluations:

The major component of the student evaluation is based on the composite evaluations received from the faculty and residents who supervised the student during their rotation. This is supplemented by the degree of participation in departmental activities, including shifts, conferences and other offerings.

Medicine Sub-Internship

SYNOPSIS OF FOURTH YEAR MEDICINE SUBINTERNSHIP

The goals of this experience include:

Improving Clinical Skills:

- History and physical exam performance
- Lab and other diagnostic test selection and interpretation
- Case write-up and presentation
- Interpersonal relationships and communication with patients, families and colleagues including consultants and attending physicians

Enhance Clinical Problem Solving Skills:

- Defining problems
- Generating a differential diagnosis
- Choosing a work-up plan and implementing that plan
- Management and prioritizing of patient problems
- Improve clinical reasoning and judgment

Develop Self-Education Strategies:

- Case-based reading
- Evidence-based medicine

Expand Internal Medicine Knowledge

You will be assigned to a housestaff team of one R1 and one R2 or R3 on the medical floors. Your schedule will be the same as your team. There are no preceptor rounds, nor conferences specifically designed for subinterns. I encourage all subinterns to meet with me if there are any questions or concerns during your rotation. There may be one third-year student on your team, but there will be only one subintern per team.

For all of your patients, you are the intern. [Many other institutions refer to this experience as an acting internship.] The R2 or R3 is your supervisor. The R1 on the team will not work up your patients. You are responsible for performing a complete history and physical exam on the day of admission and for documenting the history and physical with your assessment and plan after you have reviewed the case with your supervising resident. Your complete admission note must be in

the chart the day of admission. You should write your patients' admission orders and all other orders. Any and all orders you write must be reviewed by your supervising resident or the R1 before they are taken off.

Your learning will come from caring for patients and reading about their diseases. In addition, researching the answers to questions that arise in the evaluation and care of these patients will expand your knowledge. Your supervising resident, attending physicians and consultants can help guide you in your reading.

Neurology Sub-Internship

Neurology Sub-Internship

Goal:

To learn the principles and skills underlying the recognition and management of the neurologic diseases a general medical practitioner is most likely to encounter in practice.

Offered:

Learning Objectives:

To develop skills in obtaining complete neurological histories, in performing accurate neurological examinations, and in selecting

appropriate therapies on a general neurology inpatient service in a tertiary referral center.

To gain in-depth knowledge of major categories of neurological disease, with special emphasis on stroke, epilepsy, coma and mental

status changes, movement disorders, neuromuscular disorders, demyelinating disorders, infections of the nervous system, tumors of

the nervous system, head trauma and dementia.

To gain experience in the appropriate ordering and interpretation of neurodiagnostic tests, including head and spine CT and MR scans,

EEG, Evoked Potential Testing, Neurovascular testing, and EMG and nerve conduction studies.

To develop and improve written and oral communication skills.

Schedule of Activities:

The Neurology Inpatient Service admits patients to the neurology unit (5-1600). The service is divided into two teams, each consisting of a neurology PGY-2, a medicine PGY-1 and a medical student. Medical students taking the neurology externship will be assigned to one of the inpatient services for four weeks.

Each student will evaluate, present and write-up approximately four new patients per week and will be responsible for following his/her patients during hospitalization. Each student will also take Evening Call with his or her resident about twice per week until

10:00 PM. Students are expected to attend either Saturday or Sunday morning rounds. The remainder of the weekend is free.

The student on the neurology clerkship will be responsible for obtaining a complete history, performing a complete general and neurological examination, generating a differential diagnosis

and formulating a plan of treatment for all patients that are assigned to him/her. He/she will be responsible for presenting each assigned patient as needed on rounds, and for completing the work-up on the same day that the patient is evaluated. Progress notes are to be written daily on all inpatients that are followed by the student.

The student will work as a member of the team to which he/she is assigned, and will participate in all work rounds, attending rounds, and resident conferences.

Obstetrics and Gynecology Sub-Internship

Cross-listed with OBG601

GOAL: The goal is to provide students with in-depth exposure to various aspects of in-patient and out-patient Obstetrics and Gynecology. It is appropriate for students considering or planning to enter OB-GYN, or for students entering other specialties who want further obstetrics and gynecology experience to improve their primary care skills.

LEARNING OBJECTIVES: By the end of the rotation the student should be able to:

- Manage normal labor and vaginal delivery
- Interpret antepartum and intrapartum fetal heart rate tracings
- Understand concepts of antepartum (prenatal) management of low risk and selected high-risk pregnancies
- Refine breast and pelvic exam skills
- Generate differential diagnoses for common gynecological symptoms (irregular or heavy bleeding, amenorrhea, pelvic pain, vaginal discharge, infertility, etc.) and formulate plans for evaluation and management x Assist on gynecological surgeries and cesarean deliveries.

SCHEDULE OF ACTIVITIES: The OB-GYN residents and faculty oversee students on this rotation. The course is divided into 2 weeks on GYN and 2 weeks on OB, including inpatient and outpatient services, OB-GYN ultrasound, emergency room, operating rooms, and night float. The student will have the opportunity to follow selected patients antepartum and intrapartum. Students are expected to care for patients at the level of an intern.

DIDACTIC ACTIVITIES: Weekly OB-GYN resident conferences, Grand Rounds, and combined OB/PEDS case presentations. The student will attend daily ward rounds with either the GYN or OB/MFM attending. I meet with students weekly to discuss topics of interest.

REQUIRED READING: There is no required reading *per se*, but familiarity with either Williams or Gabbe's Obstetrics and either Hacker and Moore's or Droegemueller's Gynecology is expected.

STUDENT EVALUATIONS: Evaluations are based on assessments from the GYN and OB/MFM faculty and residents. Important elements are enthusiasm & interest, willingness to actively participate in patient care, availability in Labor and Delivery, operating rooms, and the Ambulatory Care Facility, and evidence of active learning through reading and discussion with faculty.

Pediatric Sub-Internship

Pediatric Sub-Internship

Duration: 4 weeks

Course Director: Robert Swantz, M.D.

Course Location: Strong Memorial Hospital, Rochester General Hospital

Course Offered: Year Round

Description:

The pediatric sub-internship is a broadly based experience, which allows students to assume primary responsibility for patients under the direct supervision of second- or third-year residents and attendings. Sub-interns are assigned to any one of the primary ward teams at Golisano Children's Hospital at Strong (4-1600 Infant, Toddler and Pre-School Age; 4-1400 Adolescent; 4-3600 School Age; Hematology-Oncology; Pediatric Intensive Care Unit; and Neonatal Intensive Care Unit) or Rochester General Hospital (B7 Children's Unit). Clinical emphasis will include 1) enhancement of interviewing and physical examination skills, 2) broadening understanding of pathophysiology, 3) advancement of clinical problem-solving skills, 4) formulation of diagnostic and treatment plans, and 5) performance of commonly used procedures. The general goals of the sub-internship also include: 1) the acquisition of advanced knowledge of physical and psychosocial growth and development, 2) understanding the influence of family, community and society on the pediatric patient during health and disease, 3) understanding the importance of and strategies for health promotion and disease prevention, 4) exposure to the varied aspects of pediatric practice to assist in career selection. Sub-interns will have opportunities to develop their skills at communication with patients, families, staff and referring physicians. On-call schedules and patient care assignments are made in rotation with first year residents. Sub-interns are fully integrated into departmental rounds and teaching conferences with the house officers.

Surgery Sub-Internship

Sub-Internship (Externship) General Description

Fourth-year students are required to participate in a sub-internship of at least four weeks' duration. The overriding goal of this experience is to allow medical students who have completed their basic clinical rotations a hands-on, in-depth experience in which they can function at the level of an intern. The sub-internship is designed to be a broadly based experience, which allows students to assume *primary responsibility for and involvement in* the care of patients across the duration of their healthcare encounter. The sub-internship requirement can be satisfied by a rotation on a general inpatient service, a sub-specialty inpatient service, or in an ambulatory setting, provided the level of responsibility is commensurate with that of a first-year resident, and the sub-intern can assume primary responsibility for the patient. The requirement cannot be fulfilled by rotating through a service that only provides consultative care. Each sub-internship has defined prerequisite courses, which will usually include the core third-year clinical clerkships (thereby limiting the earliest that a student could fulfill the requirement to June of their third year). Sub-interns work under the direct supervision from second- or third-year residents, and/or

faculty preceptors. On-call schedules and patient care assignments generally are made in rotation with first-year residents. The curriculum for sub-interns varies among programs, but typically is at an advanced level from basic clerkship rotations; sub-interns are fully integrated into departmental rounds and teaching conferences with the house officers. Students are expected to fulfill this requirement at a University of Rochester teaching hospital. Rare exceptions may be made in consultation with an Advisory Dean.

The sub-internship rotation in surgery is an opportunity for fourth year students to function as an integral member of the surgery team with responsibilities commensurate with an R1 resident. Student sub-interns are expected to participate in inpatient rounds, outpatient clinics, surgical procedures, and on-call duty with primary responsibility for their patients, with appropriate resident and staff supervision. Faculty preceptors within the specialty are assigned to each sub-intern to enhance the educational experience and oversee clinical activities. Sub-interns are strongly encouraged to participate in all teaching conferences and Grand Rounds while on service.

Surgery sub-internship credit can be obtained by rotation on an in-patient general surgery service or surgical subspecialty.

In an effort to improve the ease and clarity with which students select surgical experiences that qualify for subinternship credit, the following experiences are acceptable and can be selected Directly through the registrar's office as availability permits:

General Surgery	Surgery Subspecialties	
Blue Surgery Service	SICU Service	Dr. David Kaufman
Gold Surgery Service	Orthopedic Surgery	Dr. Benedict DiGiovanni
Trauma Service	Plastic Surgery	Dr. John Giroto
Pediatric Surgery Service	Vascular Surgery	Dr. Karl Illig
	Cardiothoracic Surgery	Dr. George Hicks

These are acceptable due to the intensity of the experience in a hospital setting with responsibility that is on par with that of an intern. *Any exceptions to these must be presented to Dr. Singh for acceptability and approved by the individual Advisory Dean.*

All sub-internship rotations require registration through the registrar's office. Rotations on General Surgery Services are scheduled through the office of Dr. Michael Singh in the Department of Surgery. Services are available on a first-come, first served basis. Requests for service assignments are taken into consideration whenever possible. At the completion of the rotation, an exit interview is arranged to review course evaluations and obtain feedback on the rotation.

Subspecialty rotations require approval from Dr. Singh to avoid overlapping sub-interns on the same service. In addition, students must provide Dr. Singh with the name of a designated faculty preceptor from their surgical subspecialty who will be primarily responsible for their evaluation and final grade. A general description of the sub-internship will be forwarded to the faculty preceptor as a guideline for scheduling clinical activities. An exit interview is not arranged with Dr. Singh for students on sub-specialty rotations.

Anesthesiology Clerkship (ANS601)

Course Director:	Joseph Dooley
Contact Person:	Susan Catalano, 585-275-2143, susan_catalano@urmc.rochester.edu
Location:	SMH and Affiliated Hospitals
Block Length:	2 weeks
Dates Offered:	08/15/2011 - 06/17/2012
Students:	3 per Block
Prerequisites:	

GOAL

To understand the aspects of Anesthesiology with which all physicians should be familiar.

LEARNING OBJECTIVES

By the end of the rotation the student should be able to:

Demonstrate appropriate techniques for airway management in unconscious patients, including ventilation by mask, insertion of artificial airways and laryngeal masks, and oro-tracheal intubation.

Manage ventilation in unconscious patients, including deciding on ventilator settings and using non-invasive monitors and arterial blood gases to determine the appropriateness of ventilation.

Identify and interpret items on the anesthetic record with respect to their impact on post-operative care, including drugs used and fluids given intraoperatively.

Explain the appropriate management of acute blood loss, and the calculation of maximum allowable blood loss.

List the differential diagnosis of hypoxia and explain findings/tests which distinguish among the different causes.

Describe the pharmacology of commonly used induction agents and narcotics.

Discuss the appropriate use and monitoring of muscle relaxants for emergency and non-emergency intubations.

Describe the clinical application and interpretation of EKG, pulse oximetry, and capnography.

Discuss the appropriate use of local anesthetics, including the calculation of the maximum allowable dose, description of the signs/symptoms of toxicity, and the treatment of toxicity.

Be familiar with common airway securing devices and how/when to use them.

Understand the differences and indications for general versus regional anesthesia versus sedation.

Be familiar with the common drugs utilized in the daily practice of anesthesia

Be familiar with the common resuscitative drugs used (i.e. vasopressors, antiarrhythmics, inotropes).

Be familiar with common diseases we encounter daily (i.e. diabetes, HTN, COPD) and how they affect the care we deliver.

This is the focus of the PEC day-long experience.

SCHEDULE OF ACTIVITIES

Students are assigned to work with an Anesthesiology resident, CRNA, or member of the faculty, at SMH from 7:00 AM until 5:00 PM on weekdays.

Overnight call may be taken at the discretion of the student and preceptor. If students would like to shadow a preceptor overnight, allowances will be made for the student to have off during the daytime hours.

Students will help perform preoperative evaluations, participate in intraoperative care, and perform postoperative follow-up on their patients.

Procedures (such as intravenous line placement, endotracheal intubation, arterial line placement...) will be performed by the student at the discretion of the resident or attending.

DIDACTIC ACTIVITIES

Students are expected to attend an airway workshop during week one. Additional lectures may be added.

1) Morning conferences 3x a week at 06:30 - 07:00. (Breakfast usually provided.)

2) Airway workshop during first week.

Resident lectures 3x a week from 6:30 to 7:00 AM

Anesthesiology Grand Rounds on Thursday mornings from 7:00 to 8:00

Two sessions at the Center for Medical Simulation at SMH: 1) Airway management workshop 2) Crisis management in the operating room. (If scheduled)

Prior to the first day of the clerkship, the students will be given learning objectives and case scenarios relating to anesthesiology. The issues raised by these cases should be researched independently by the student and discussed with the resident preceptor or faculty member during the course of the clinical day

REQUIRED READING

National Medical Series for Independent Study: Anesthesiology (This will be given to all students to utilize as a reference during the rotation.) Select chapters (TBA) from Basics of Anesthesia, 3rd ed., by RK Stoelting and RD Miller. Book can be borrowed from Gillies Library in the Department of Anesthesiology at SMH.

STUDENT EVALUATIONS

To receive a grade of PASS:

1. Students must turn in a log sheet documenting that the learning objectives have been covered
2. Students must participate in all didactic activities.
3. Students must receive a satisfactory clinical evaluation from their preceptor(s) during the clerkship.
4. Students must complete an attendance record.
5. Students must complete the course evaluation.
6. Students must complete an evaluation of their preceptor(s).

Obstetric Anesthesiology (ANS603)

Course Director:	Richard Wissler M.D.
Contact Person:	Susan Catalano, 275-2143, Susan_catalano@urmc.rochester.edu
Location:	Strong Memorial Hospital
Block Length:	2 or 4 weeks
Dates Offered:	08/15/2011 - 07/01/2012
Students:	2 per Block
Prerequisites:	

GOAL

To understand the theoretical and practical aspects of pain relief for labor and delivery and perioperative safety during cesarean section.

LEARNING OBJECTIVES

By the end of the rotation the student should be able to: 1. Perform a preanesthetic evaluation of a pregnant patient. 2. Discuss the anesthetic implications of maternal medical conditions and formulate appropriate anesthetic plans for labor analgesia or cesarean section. 3. Identify OB patients who require anesthetic consultation, and describe how to obtain it. 4. Describe the anatomy and physiology of labor pain, including differences between first and second stages. 5. Discuss the full range of labor analgesia techniques including psychoprophylaxis, parenteral narcotics, inhalation agents, epidural and spinal anesthesia. 6. Discuss the pharmacology of local anesthetics and narcotics commonly used in epidural and spinal anesthesia. 7. Describe the clinical significance of maternal hypotension and its prevention and treatment. 8. Discuss the anesthetic implications of maternal physiologic adaptations to pregnancy including anesthetic potencies, airway management, and risk of aspiration pneumonia. 9. Describe maternal lumbar anatomy in relation to the administration of epidural and spinal anesthesia. 10. Perform epidural and spinal anesthetics for labor analgesia, with appropriate supervision. 11. Perform anesthesia for cesarean section, with appropriate supervision. 12. Describe methods of postoperative analgesia after cesarean section. 13. Discuss the major complications of epidural and spinal anesthesia, including evaluation and treatments.

SCHEDULE OF ACTIVITIES

Students are assigned to the OB Anesthesia Service at SMH, with hours of 7:00 a.m. to 4:00 p.m. on weekdays. The students do not have weekend or night on-call responsibilities. The students are regular members of the clinical care team in OB Anesthesia with assigned preceptors (resident, fellow or attending anesthesiologists). The emphasis is on active participation, including procedural skills.

DIDACTIC ACTIVITIES

Students participate in the daily OB Anesthesia didactic sessions each weekday, with assigned readings from the assigned textbook. In addition, students discuss their learning objectives with the preceptors throughout each day.

REQUIRED READING

Loaner copies of the current textbook are available. Students are encouraged to utilize the resources in the OB Anesthesia Education Office including an extensive subspecialty library, videotapes and anatomic models.

STUDENT EVALUATIONS

To receive a grade of Pass, students must turn in to the course director a learning objective log sheet and receive satisfactory evaluations from their preceptors.

Pain Management (ANS606)

Course Director: Rajbala Thakur M.D.

Contact Person: Susan Catalano. 275-2143, susan_catalano@urmc.rochester.edu

Location: Not Available

Block Length: 2 - 4 weeks

Dates Offered: 08/15/2011 - 06/17/2012

Students: 2 per Block

Prerequisites:

GOAL

To become familiar with the intricacies of pain assessment and multidisciplinary management of patients with chronic, non-malignant or malignant pain.

LEARNING OBJECTIVES

By the end of this short rotation student should:

Be able to assess a patient's pain through history, physical examination, behavioral observation and medication usage

Formulate patient focused and goal directed pain management plan under close supervision of a fellow /NP/ faculty member

Describe the major classes of pain (e.g. inflammatory, neuropathic, myofascial, Deafferentation pain , spasticity related pain , etc)

Discuss the pharmacology, indications and common side effects of analgesic and adjuvant medications (e.g. opioids, NSAIDs, neuroleptics, muscle relaxants, anxiolytics).

Be familiar with alternative and complementary treatment modalities available for pain management including physical therapy, cognitive behavior therapy, acupuncture etc

Discuss common indications for interventional techniques used in the treatment of pain.

Perform trigger point and sacroiliac joint injections under appropriate supervision.

SCHEDULE OF ACTIVITIES

Students are assigned to the outpatient pain service at the Pain Treatment Center; located at Sawgrass Surgical Center, Suite 210; working hours are from 0730 am to 1700 during weekdays. They are a part of the multidisciplinary team comprised of residents, fellows, nurse practitioners, clinical psychologist and attending pain management faculty. They are not expected to take any inhouse or pager call during this rotation. A detailed schedule including lectures and conferences is available in the clinic.

DIDACTIC ACTIVITIES

Emphasis is on active participation in the following activities:

Regular conferences on M/T/W and Friday starting at 0730. Monday conference time is variable.

Thursday: Anesthesiology grand rounds from 0700-0800 in room K 307.

Hands on teaching in the clinic and procedure room.

Fluoro imaging of the spine and interventional practice on a dummy with a pain management fellow. Time flexible.

REQUIRED READING

Copies of book chapters to be reviewed during the rotation can be made after consultation with the fellow. Students are encouraged to use resources available in the Gilles Library and pain office.

STUDENT EVALUATIONS

Students are responsible for keeping a log of cases and procedures he/she participates in.

Students are expected to answer and review a set of case scenarios regarding the use of adjuvant medications for chronic pain.

Students receive a grade depending on a composite evaluation by their preceptors.

Hemodynamic Monitoring (ANS610)

Course Director:	Ellen Iannoli M.D.
Contact Person:	Susan Catalano, 275-2143, susan_catalano@urmc.rochester.edu
Location:	Strong Memorial Hospital
Block Length:	1 week
Dates Offered:	07/11/2011 - 07/01/2012
Students:	1 per Block
Prerequisites:	

GOAL

To master concepts in advanced cardiovascular physiology and invasive hemodynamic monitoring in the clinical setting of the operating room.

LEARNING OBJECTIVES

By the end of the rotation the student should be able to:

Understand the technical aspects of arterial line and pulmonary artery catheter insertion.

Understand the clinical applications, complications and preventative measures involved in invasive hemodynamic monitoring.

Interpret hemodynamic data.

Apply the hemodynamic data to the care of the surgical or critically ill patient.

Understand the role of transesophageal echocardiography for intraoperative hemodynamic monitoring.

SCHEDULE OF ACTIVITIES

Students work in the operating room at SMH under the direction of the cardiac anesthesiologist starting at 7 a.m. to approximately 5 p.m. on weekdays. Emphasis is on hemodynamic monitoring and its application to the care of the cardiac surgical patient.

DIDACTIC ACTIVITIES

Emphasis is on clinical experience and "bedside" teaching. One-on-one or one-on-two tutorials supplement this experience. In addition, students may participate in workshops using the anesthesia human patient simulator focusing on hemodynamic assessment and cardiovascular management.

REQUIRED READING

2 Book Chapters from *Cardiac Anesthesia: Principles and Practice, 2nd Edition*, Fawzy G. Estafanous, MD; Paul G. Barash, MD; and J.G. Reves, MD., as well as supplemental documents by the University of Rochester Cardiac Anesthesia faculty.

STUDENT EVALUATIONS

To receive a grade of Pass, students must participate in clinical cases, attend tutorials sessions, document that the learning objectives have been covered, interpret and discuss case studies in cardiovascular medicine, and submit a log of their cases and attendings. Course materials will be sent via e-mail the week before the course. Students who will be on vacation that week may arrange with Susan Donahue to receive the information earlier. Essential information is contained in the Welcome Letter which is in this mailing.

Deaf Health: Research (DHP/MHU601)

Course Director: Stephanie Brown Clark M.D., Ph.D

Contact Person: Andrea Ehmann

Location: School of Medicine

Block Length: 2-4 wks

Dates Offered: -

Students: 2 per Block

Prerequisites:

GOAL

This is a research elective designed as part of the Deaf Health Pathway but open to everyone to pursue research work at the National Center for Deaf Health Research. The elective will be through the Division of Medical Humanities, the project will be arranged by the student with the NCDHR. At the end, students will produce a final product and submit it to the Division of Medical Humanities.

LEARNING OBJECTIVES

1. To foster interest in research in Deaf health and expose students to pressing issues which may impact the future healthcare practices for Deaf patients

To learn methods of data analysis and assessing data validity in the context of drawing conclusions of significance

SCHEDULE OF ACTIVITIES

Students will arrange activities with their research supervisor at the NCDHR.

DIDACTIC ACTIVITIES

Students will identify their learning needs and then address them with appropriate resources with the help of their supervisor.

REQUIRED READING

As appropriate to the individual project of the student.

STUDENT EVALUATIONS

Students will produce a paper at the end of the elective and submit it to the Deaf Health Pathway Advisory Board research advisors, detailing their research objectives, methods, and conclusions. The DHP Advisory Board will provide feedback to the students regarding their research. Students will be encouraged to submit the paper to the World Deaf Congress to present their work internationally.

Deaf Health: Continuing ASL Education (DHP/MHU602)

Course Director: Stephanie Brown Clark M.D., Ph.D

Contact Person: Andrea Ehmann, School of Medicine & Dentistry

Location: School of Medicine

Block Length: 2-4 wks

Dates Offered: -

Students: 2 per Block

Prerequisites:

GOAL

Students will arrange to work with ASL interpreters through SMH Interpreting Services. Student is responsible to identify his/her own advisor. If help is needed, please contact Heidi Thompson.

LEARNING OBJECTIVES

1. To increase ASL vocabulary.
2. To increase speed of signing.
3. To better proficiency of comprehension.

SCHEDULE OF ACTIVITIES

To be arranged with Advisor

DIDACTIC ACTIVITIES

Students will identify their learning needs and then address them with appropriate resources with the help of their supervisor.

REQUIRED READING

To be determined.

STUDENT EVALUATIONS

To be determined.

Deaf Health: Clinical Experience (DHP/MHU603)

Course Director:	Stephanie Brown Clark M.D., Ph.D
Contact Person:	Andrea Ehmann, School of Medicine & Dentistry
Location:	School of Medicine
Block Length:	1-4 wks
Dates Offered:	-
Students:	5 per Block
Prerequisites:	

GOAL

Students will work in a private office with Deaf patients, in assisting with gathering medical histories and performing physical exam. The focus will not be so much on the differential diagnosis and medical aspect of it, but more the social and cultural aspect of the physician-patient dynamic. Student must identify an advisor. Can contact Heidi Thompson if help is required to find an advisor.

1.

LEARNING OBJECTIVES

To gain further experience in clinical application of ASL.

2. To expand ASL medical vocabulary to be better equipped in obtaining histories and physical exams.

SCHEDULE OF ACTIVITIES

Students will spend time in the office one half-day each day throughout the week at the Private Office, and spend the remaining half-day as self-study to learn new vocabulary and practice vocabulary learned in the office during that day.

DIDACTIC ACTIVITIES

Students will identify their learning needs and then address them with appropriate resources with the help of their supervisor.

REQUIRED READING

As appropriate to the individual project of the student.

STUDENT EVALUATIONS

Written evaluations from adviser with regards to student performance and ASL knowledge base improvement will be obtained. Students will have to submit a daily journal (one paragraph per day) regarding their experiences for the day and reflections on the doctor-patient interactions.

Deaf Health: Curriculum Development (DHP/MHU604)

Course Director:	Stephanie Brown Clark M.D., Ph.D
Contact Person:	Andrea Ehmann, School of Medicine & Dentistry
Location:	Strong Memorial Hospital
Block Length:	4 wks
Dates Offered:	-
Students:	2 per Block
Prerequisites:	

GOAL

Students will be the Course Coordinator for the Deaf Health Pathway for the entire academic year, and will use this as their project. Students will be responsible for designing, modifying, and executing the curriculum and making sure everything is in place. In the end, students will produce and updated/revised/improved curriculum to the Division of Medical Humanities.

LEARNING OBJECTIVES

1. To expand and improve the Deaf Health Pathway with student feedback and input of the Advisory Committee.
2. To learn about curriculum design and be able to successfully plan and execute curriculum.
3. To reflect on feedback from students, and learn how to apply student feedback to curriculum in a realistic and constructive manner.

SCHEDULE OF ACTIVITIES

Students will arrange, attend, and be available for emergencies relating to the seminar activities, and be available to answer any questions regarding the track.

DIDACTIC ACTIVITIES

Students will periodically meet with Dr. Brown-Clark and give updates with regards to the curriculum and modifications.

REQUIRED READING

As appropriate to the individual project of the student.

STUDENT EVALUATIONS

Successful execution of curriculum and completion of making necessary arrangements for the pathway. Written documentation of curriculum and syllabus must be provided at the conclusion of the 4-week period.

Dentistry, Oral and Maxillofacial Surgery (DNS600)

Course Director:	Lee Pollan
Contact Person:	Marilyn Foy
Location:	Strong Memorial Hospital
Block Length:	2 or more weeks
Dates Offered:	07/11/2011 - 06/17/2012
Students:	1 per Block
Prerequisites:	Adult Inpatient Clerkship (AIC300)

GOAL

To understand the relationship of oral health care and oral surgery to general total health care and the general practice of medicine and how oral health care and oral surgical care is inter-related with total health care.

LEARNING OBJECTIVES

By the end of the rotation the student should be able to: Perform a complete intra-oral and extra-oral head and neck examination. Identify the following anatomical structures in patient and on x-ray: enamel, dentine, gingiva, pulp chamber, cementum, buccal mucosa, labial frenum, pterygo-mandibular area, palatine tonsil, soft palate, hard palate, uvula, parotid, and submandibular glands and duct orifices, anatomical spaces associated with head and neck infection. Recognize and diagnose basic fractures of craniofacial skeleton based on clinical and radiographic findings. Discuss the oral manifestations of systemic disease or its treatment in patients receiving head and neck radiation, cancer chemotherapy, bone marrow transplant, HIV infection, diabetes, autoimmune disorders, e.g. Sjoren's Syndrome. Understand the role of the oral and maxillofacial surgeon in the treatment and reconstruction of diseases of the maxillofacial region, including implants, cleft and craniofacial anomalies, and maxillofacial trauma.

SCHEDULE OF ACTIVITIES

Students are assigned to the Strong Memorial Hospital, Department of Dentistry clinical facility and will work with the general practice, oral surgery and specialty providers of dental care starting at 8:30 am. They will be guided by the chief resident in Oral and Maxillofacial Surgery and General Practice Residency and work with these to examine patients, diagnose and treat dental diseases, assist in surgical procedures and attend all rounds and lectures.

DIDACTIC ACTIVITIES

Students will be oriented by the Dentist-in-Chief and Chairman of the department or Chief of the Oral and Maxillofacial Surgery Division on the first day of the rotation. They are expected to read about and discuss the learning objectives with their preceptor. Students will attend all the ongoing didactic activities in the department during the clerkship. These include resident lectures 8:00 - 9:00 am, Oral and Maxillofacial Surgery Rounds and other seminars.

REQUIRED READING

Students will be provided with review articles in the areas related to the learning objectives on arrival in the department.

STUDENT EVALUATIONS

To receive a grade of Pass, students must keep a log of their activities, participate in the case conferences and seminars and receive a satisfactory evaluation from the residents with whom they work.

Hospital General Dentistry (DNS601)

Course Director:	Todd Thierer D.D.S.
Contact Person:	Marilyn Foy
Location:	Eastman Dental Center
Block Length:	1-4 weeks
Dates Offered:	07/11/2011 - 06/17/2012
Students:	2 per Block
Prerequisites:	

GOAL

To provide dental students with a didactic and practical experience in general and hospital dentistry in an outpatient hospital general dentistry service.

LEARNING OBJECTIVES

The student should gain experience in treatment planning and treating patients with complex medical and dental needs under a variety of conditions and using a variety of patient management techniques. The objective will be achieved through the following activities:

1. Participation in all didactic activities of the Division of General Dentistry during their rotation.
2. Observation and supervised treatment of patients in the Hospital Dental Service of Strong Memorial Hospital.
3. Participation in the Consultation Service of the Eastman Dental Center.
4. Observation of treatment of general dentistry patients in the operating room.
5. Observation of treatment of patients undergoing conscious sedation by the Dental Service in the Ambulatory Center of Strong Memorial Hospital.

SCHEDULE OF ACTIVITIES

Students will be assigned a preceptor who is a senior resident in the General Practice Residency program. The preceptor will insure that the student participates in the activities listed above.

DIDACTIC ACTIVITIES

Students will participate in all conferences, seminars and lectures with the General Practice residents.

REQUIRED READING

STUDENT EVALUATIONS

Externs are required to keep a log of their clinical activities and attendance in didactic activities to satisfactorily complete the externship.

General Dentistry (DNS602)

Course Director: Hans Malmstrom D.D.S.

Contact Person: Marilyn Foy 275-8315

Location: Eastman Dental Center

Block Length: 2-4 weeks

Dates Offered: 07/11/2011 - 06/17/2012

Students: 2 per Block

Prerequisites:

GOAL

Prerequisite: Completion of junior year at an accredited North American dental school.

Goal: To understand the relationship of oralhealth care and oral surgery to general total health care and the general practice of medicine andhow oral health care and oral surgical care is inter-related with total health care.

LEARNING OBJECTIVES

By the end of the rotation the student should be able to:

1. Perform a complete intra-oral and extra-oral head and neck examination.
2. Identify the following anatomical structures in patient and on x-ray: enamel, dentine, gingiva, pulp chamber, cementum, buccal mucosa, labial frenum, pterygo-mandibular area, palatine tonsil, soft palate, hard palate, uvula, parotid, and submandibular glands and duct orifices.
3. Describe and diagnose caries and periodontal disease.
4. Understand the role of the general dentist as the primary care coordinator of patients' treatment.

SCHEDULE OF ACTIVITIES

Students are assigned to the Eastman Department of Dentistry at the Eastman Dental Center facility and will work with the general dentistry and specialty providers of dental care starting at 9:00 a.m. A second-year resident enrolled in the Advanced Education in General Dentistry residency program will work with the student to examine patients, diagnose and treat dental diseases, assist in treatment procedres and attend all lectures and seminars.

DIDACTIC ACTIVITIES

Students will be oriented by the Program Director in General Dentistry or his designee of the Advanced Education in General Dentistry program on the first day of the rotation. They are expected to read about and discuss the learning objectives with their preceptor (a second-year dental resident). Students will attend all the ongoing didactic activities in the program during the clerkship. These include resident lectues 8:00-9:00 a.m. and othe seminars.

REQUIRED READING

STUDENT EVALUATIONS

To receive a grade of satisfactory, students must keep a log of their activities, participate in the case conferences and seminars and receive a satisfactory evaluation from the residents with whom they work.

Prosthodontics (DNS603)

Course Director:	Carlo Ercoli
Contact Person:	Marilyn Foy 585-275-8315
Location:	Eastman Dental Center
Block Length:	4 weeks
Dates Offered:	07/11/2011 - 06/17/2012
Students:	1 per Block
Prerequisites:	

GOAL

To provide UCL ED1 residents who specialize in prosthodontics with an opportunity to have an additional learning experience in prosthodontics during their graduate dental training.

LEARNING OBJECTIVES

By the end of the rotation the resident should become familiar with certain areas of prosthodontics, which are part of the University of Rochester Eastman Dental Center (UREDC) clinical and didactic curriculum. These areas include prosthodontic diagnosis and treatment planning, management of patients with craniofacial dysmorphism and dental implants. This objective will be achieved through the following activities:

1. Participate in seminars, conferences and lectures with other UREDC prosthodontic residents.
2. Observe patients receiving prosthodontic treatment.
3. Observe consultations and prosthodontic screenings.
4. Participate in residents' case presentations at UREDC.

SCHEDULE OF ACTIVITIES

Students are assigned a preceptor who is a senior UREDC prosthodontic resident. The preceptor will insure that the visiting extern participates in all of the activities listed under "Learning Objective."

DIDACTIC ACTIVITIES

Externs will participate in all conferences, seminars and lectures with the UREDC prosthodontic residents.

REQUIRED READING

STUDENT EVALUATIONS

Externs must keep a log of their clinical activities and actively participate in conferences and seminars to satisfactorily complete the externship.

Pediatric Dentistry (DNS605)

Course Director: Jeffrey Karp

Contact Person: Marilyn Foy 275-8315

Location:

Block Length: 1-4 weeks

Dates Offered: 07/18/2011 - 06/17/2012

Students: 1 per Block

Prerequisites:

GOAL

To provide senior dental students who may specialize in pediatric dentistry with an opportunity to have an additional educational learning experience in pediatric dentistry during their undergraduate dental training.

LEARNING OBJECTIVES

By the end of the rotation the student should become familiar with certain areas of pediatric dentistry, which are traditionally not included in an undergraduate dental curriculum. These areas include conscious sedation, oral rehabilitation and general anesthesia, emergent dental treatment, and treatment of medically compromised and developmentally disabled children. The objective will be achieved through the following activities.

1. Observe children receiving dental treatment utilizing conscious sedation techniques at Eastman Dental Center (EDC).
2. Observe children receiving dental treatment in the operating room under general anesthesia at Strong Memorial Hospital (SMH).
3. Observe children receiving emergent dental care in the Emergency Department of SMH.
4. Participate in consultations provided by the Pediatric Dental Service for in-patients at SMH.
5. Participate in cleft palate staffing conferences at EDC.

SCHEDULE OF ACTIVITIES

Students are assigned a preceptor who is a senior resident or fellow in pediatric dentistry. The preceptor will insure that the student participates in all of the activities listed under "Learning Objective".

DIDACTIC ACTIVITIES

Students will participate in all conferences, seminars and lectures with the pediatric dentistry residents.

REQUIRED READING

STUDENT EVALUATIONS

Externs must keep a log of their clinical activities and actively participate in conferences and seminars to satisfactorily complete the externship.

Teaching Tutorial (DPT600)

Course Director: David Kaufman M.D.

Contact Person: Marge Roberts

Location: Strong Memorial Hospital

Block Length: 2 weeks

Dates Offered: -

Students: 8 per Block

Prerequisites:

GOAL

Demonstrate knowledge and skill in tutoring and teaching 2nd year medical students.

LEARNING OBJECTIVES

At the end of the course, students should be able to:

Effectively tutor a PBL group for 2nd year medical students and critique PBL

Tutor students who require extra help in Disease Processes and Therapeutics

Effectively assist in laboratory instruction

The students will participate in writing a portion of a new PBL

Learn to write and grade examination questions

SCHEDULE OF ACTIVITIES

Students will attend DPT daily from 8-12 during their 2 week block, including labs and PBL that they will tutor. They will work with 2nd year medical students to provide extra help in the afternoon. Students will work together to organize a section of a new PBL and write new on-line labs and a chapter for the DPT "textbook". As the block is progressing students will write examination questions. Will meet with the Course Director to discuss examination questions and evaluate the portion of the PBL that they are writing. Students will be expected to grade one or two essay questions from the exam.

Available Dates (these dates are approximate and may change when the final course schedule is complete):

October 24 - November 4 November 7 - November 18 November 21 - December 2 December 5 - December 16

January 2 - January 13 January 16 - January 27 January 30 - February 10

February 13 - February 24

February 27 - March 8

DIDACTIC ACTIVITIES

REQUIRED READING

STUDENT EVALUATIONS

Teaching Tutorial in Host Defense (DPT601)

Course Director: Mary Anne Courtney Ph.D.

Contact Person: mcry@mail.rochester.edu

Location: School of Medicine

Block Length: 1 - 4 weeks

Dates Offered: -

Students: 12 per Block

Prerequisites:

GOAL

To give the student an opportunity to revisit the microbiology, pathology and immunology taught in Host Defense. To allow the student an opportunity to teach medical students in the Problem Base Learning or Laboratory setting.

LEARNING OBJECTIVES

The student will have reviewed relevant Host Defense Material.

The student will have taught in either the PBL or lab setting.

The student will have assessed the performance of the students they taught.

The student will have developed a teaching module for Host Defense.

SCHEDULE OF ACTIVITIES

The student will be responsible for attending the preparation meetings for the labs or PBLs they will teach. Participants will be responsible for a written evaluation of the students to be given in a timely manner. Students are expected to attend any lectures in Host Defense that will benefit them.

DIDACTIC ACTIVITIES

The student will teach in the PBL or lab setting. They will develop a module to be used in Host Defense. This module could be for a small group activity, a laboratory or a PBL case.

REQUIRED READING

The preparation reading for the PBL or labs they will teach. Any reading necessary for the development of the teaching module.

STUDENT EVALUATIONS

The students will be evaluated by their performance as judged by their evaluations of the students, and student evaluation of them.

Y2CS Tutoring (DPT602)

Course Director: Denham Ward M.D., Ph.D.

Contact Person:

Location: School of Medicine

Block Length:

Dates Offered: -

Students: 0 per Block

Prerequisites:

GOAL

LEARNING OBJECTIVES

SCHEDULE OF ACTIVITIES

DIDACTIC ACTIVITIES

REQUIRED READING

STUDENT EVALUATIONS

Clinical Dermatology (DRM601)

Course Director: Elaine Gilmore
Contact Person: Jayne Kresinske 275-3872
Location: Strong Memorial Hospital
Block Length: 2 weeks
Dates Offered: 08/01/2011 - 06/24/2012
Students: 3 per Block
Prerequisites:

GOAL

The student should gain a useful knowledge of how to diagnose and differentiate among common skin diseases and develop a practical understanding of the rationale for their treatment.

LEARNING OBJECTIVES

By the end of the rotation the student should be able to:

Diagnose and differentiate common skin diseases

Develop a practical understanding and rationale for the treatment of common skin diseases

Acquire the ability to gain more specific skills including the preparation and interpretation of a KOH slide.

SCHEDULE OF ACTIVITIES

Include patient work-ups and discussion with the instructor. Time for reading will be set aside by preceptor. Viewing of a set of teaching powerpoints and presentation of a 10 minute talk in an area of interest.

DIDACTIC ACTIVITIES

REQUIRED READING

Students will be given pertinent reading assignments during the rotation.

STUDENT EVALUATIONS

Dermatology Research Elective (DRM602)

Course Director: Alice P. Pentland
Contact Person: Jayne Kresinske
Location: Strong Memorial Hospital
Block Length: 8 weeks
Dates Offered: 07/04/2011 - 06/24/2012
Students: 2 per Block
Prerequisites:

GOAL

To gain experience through active participation in ongoing laboratory-based research projects in the dermatology research laboratories in one of the following areas of investigation: STUDENT MUST MEET WITH COURSE DIRECTOR BEFORE SCHEDULING ELECTIVE. PLEASE CALL 275-1998 TO SET UP AN APPOINTMENT. ELECTIVES ARE 8 WEEK CONSECUTIVE BLOCKS

dermatology
dermatology
pigment cell biology
Keratinocyte biology and photocarcinogenesis
Mind-body interactions
Image informatics
Chemistry/material science

LEARNING OBJECTIVES

By the end of the rotation the student should be able to: TO BE DETERMINED WITH PRECEPTOR

SCHEDULE OF ACTIVITIES

A defined segment of a research project will be assigned to a student who will be working closely with a faculty preceptor and performing experiments under supervision. There will be special emphasis placed on critical literature review, experimental design, data interpretation and proper controls and preparation of experimental results for publication. There will be participation in laboratory meetings and journal clubs. The student will be able to attend major clinical dermatological conferences during the elective.

DIDACTIC ACTIVITIES

REQUIRED READING

STUDENT EVALUATIONS

TO BE DETERMINED WITH PRECEPTOR

Advanced Emergency Medicine Clerkship (EDD600)

Course Director:	Erik Rueckmann M.D.
Contact Person:	Jessica Mead 463-2926 jessica_mead@urmc.rochester.edu
Location:	Strong Memorial Hospital
Block Length:	2-4 weeks
Dates Offered:	-
Students:	4 per Block
Prerequisites:	Emergency Clerkship (EDD400)

GOAL

GOALS:

To expand upon the experience of the Emergency Medicine Clerkship with emphasis on assuming internship-level responsibility for the diagnosis, treatment, consultation with other services, disposition of patients, and advanced procedural responsibilities commonplace in the Emergency Department.

LEARNING OBJECTIVES

LEARNING OBJECTIVES:

By the end of this clerkship, the student should be able to:

- Identify patients/conditions for which emergency management is indicated.
- Document in a clear and concise fashion pertinent historical and physical findings for a patient's presenting complaint.
- Identify patients/conditions for which consultation is indicated.
- Demonstrate appropriate techniques for procedures (slit lamp exam, lumbar puncture, thoracentesis, chest tube placement, laceration repair, splinting) when indicated.
- Assist with resuscitations.
- Identify arrhythmias and address initial management.
- Discuss the differential diagnosis of emergent chest pain, respiratory distress, acute abdomen, mental status changes, shock and open fractures.
- Identify community resources (Alternatives for Battered Women, Rape Crisis, Substance Abuse Rehabilitation, Community Health Nurses, Poison Control).
- Discuss the role of the Emergency Medical Services (EMS) in Monroe County.

SCHEDULE OF ACTIVITIES

SCHEDULE OF ACTIVITIES

This is a patient-oriented emergency medicine experience individualized to the students' particular interest in emergency medicine.

Students will generally work 12 clinical shifts over 4 weeks and participate in 1 6-hour ambulance ride-along per 2 weeks of the rotation.

Close supervision by residents and faculty preceptors will facilitate acquisition of clinical judgment and technical skills.

Each student will be matched with an attending or third year emergency medicine resident for each shift.

Clinical shifts will be 8 hour shifts including days, evenings, and nights. Emphasis is on active participation in all aspects of patient care.

Students will have exposure to toxicology practices.

Students will gain experience with advanced procedures frequent in the Emergency Department (endotracheal intubation, central venous access, etc.)

DIDACTIC ACTIVITIES

DIDACTIC ACTIVITIES

Attendance to and participation in all Thursday resident lectures and conferences will be required.

These include case conference, EKG readings, grand rounds, journal club, morbidity and mortality, research forum, toxicology conference, and trauma conference.

REQUIRED READING

REQUIRED READING

Textbook: Tintinalli JE, Kelen GD, Strapczynski JS. Emergency Medicine: A Comprehensive Study Guide, 6th edition. **Chapters:**

- 1 - Emergency Medical Services (pages 1-5)
 - 8 – Cardiopulmonary Resuscitation in Adult (pages 44-48)
 - 9 – Pediatric Cardiopulmonary Resuscitation (pages 57-64)
 - 24 - Disturbances of Cardiac Rhythm Conduction (pages 169-192)
 - 30 - Anaphylaxis and Acute Allergic Reactions (pages 242-246)
 - 43 - Puncture Wounds Bites (pages 330-336)
 - 45 – Approach to Chest Pain and Possible Myocardial Ischemia (pages 341-351)
 - 47 – Acute Coronary Syndrome (pages 356-365)
 - 58 – Respiratory Distress (pages 443-451)
 - 68 – Acute Abdominal Pain (pages 515-519)
 - 110 – Pediatric Fever (pages 749-752)
 - 221 – Altered Mental Status and Coma (pages 1440-1448)
 - 259 – Early Evaluation and Management of Orthopedic Injuries (1739-1752)
- Total Reading = 106 pages.

Tintinalli's Emergency Medicine textbook can be borrowed from the Department of Emergency Medicine and accessed through the Miner Digital Library.

STUDENT EVALUATIONS

STUDENT EVALUATIONS

This is a PASS/FAIL course.

To receive a grade of satisfactory the student must maintain perfect attendance, turn in a log sheet documenting that the learning objectives have been covered, and receive satisfactory clinical evaluations from their preceptors during the rotation.

Clinical Pharmacotherapy (EDD604)

Course Director: Daniel Hays

Contact Person: Daniel Hays

Location: Strong Memorial Hospital

Block Length: 1 - 4 weeks

Dates Offered: -

Students: 4 per Block

Prerequisites:

GOAL

To master concepts in general pharmacotherapy as related to patients within the emergency department.

LEARNING OBJECTIVES

? Understand general principals of antibiotic therapy? Understand and apply pharmacokinetics for aminoglycosides and vancomycin? Understand pharmacotherapy related too Anti-arrhythmic therapyo Infectious diseaseso Pain managemento Seizure disorderso Hypertensive urgencies/emergencieso Medical/surgical emergencies

SCHEDULE OF ACTIVITIES

: Students are expected to be in the Emergency Department at SMH weekdays and weekends when the faculty is present. Emphasis during the first week is related to antibiotics and infectious diseases with the remainder of the rotation devoted to general pharmacotherapy

DIDACTIC ACTIVITIES

Emphasis is placed on infectious diseases and anti-infectives through lecture and readings. In addition, the students may be at ?bedside? during medical/surgical codes.

REQUIRED READING

The Syllabus contains a series of articles ranging from the IDSA position paper on Community Acquired Pneumonia to the AFFIRM Trial for arrhythmias

STUDENT EVALUATIONS

To obtain a grade of Satisfactory, the student must be present, participate in active discussion and be able to document that the learning objectives have been covered as well as demonstrate academic growth by working out several pharmacokinetic examples.

Emergency Medicine at Rochester General Hospital (EDD610)

Course Director: Ravi Singh

Contact Person: Ravi.Singh@rochestergeneral.org phone 922 3846, email-judene.scheidt@viahealth.org

Location: Rochester General Hospital

Block Length: 4 weeks

Dates Offered: -

Students: 2 per Block

Prerequisites: Surgery Clerkship (SUR300)
Medicine Clerkship (MED300)

GOAL

To become familiar with the practice of emergency medicine at a large community hospital. Encourage students to seriously consider a career in emergency medicine at a community hospital. To prepare medical students for an ED Residency.

LEARNING OBJECTIVES

To work up, treat and appropriately dispo common problems which bring patients to the ED

Most students would work in the sub acute area of ED. Common problems they would see include abdominal pain, vag bleeding, minor trauma including fractures and lacerations

Students showing special aptitude may at the discretion of ED attending, work in the Acute ED. Common problems would include chest pain, stroke, resp. distress, major trauma.

How to evaluate an ED patient. The diagnostic work up for common ED presentations. Pateint disposition from ED.

SCHEDULE OF ACTIVITIES

Rotation would be 4 weeks in length. 48 hours per week. 12 hrs/day, 4 days a week

Student would work directly under supervision of ED attending

Required attendance at biweekly ed cme conference on wednesdays, monthly ed morbidity and mortality conference on 4th thursday of the month

Show up for orientation to the ED, at 7 am monday morning, on the 1st monday of the new cycle for their rotations.

DIDACTIC ACTIVITIES

One-on-one teaching with supervising ED attending, supplemented by teaching sessions with Associate ED Chief of Education. in these sessions, articles and reviews about current ED practice, would be discussed. case presentations with emphasis on using history and physical exams to arrive at working diagnosis would be stressed.

Monthly morbidity and mortality conference. Bi-weekly Wednesday ED conference series, weekly quizzes on common ED problems, and weekly articles on common ED presentations.

REQUIRED READING

Emergency Medicine: A Comprehensive Study Guide 6th Edition by Judith E. Tintinalli, M.D.A., American College of Emergency Physicians, Jane Stephan Downman (Editor)

Emergency Medicine Manual by O. John Ma (Editor), David M. Cline, M.D. (Editor), Judith E. Tintinalli, M.D.A. (Editor)

STUDENT EVALUATIONS

Students would be evaluated using a common template used for evaluating residents who rotate thru the Department of Emergency Medicine.

Occupational and Environmental Medicine (EHS601)

Course Director: Bruce Barron

Contact Person: Debbie Klein, 487 - 1010, debbie_klein@urmc.rochester.edu

Location: Strong Memorial Hospital

Block Length: 2 weeks

Dates Offered: -

Students: 1 per Block

Prerequisites:

GOAL

Demonstrate knowledge and skills in performing occupational and environmental clinical assessments.

LEARNING OBJECTIVES

Discuss the different types of services offered by occupational and environmental medicine programs (preventive, medical, and rehabilitative). Discuss the role of toxicology, industrial hygiene, and ergonomics as it relates to occupational and environmental medicine. Demonstrate an understanding of the New York State Workers' Compensation system, including successful completion of a C4 report to the Workers' Compensation Board.

SCHEDULE OF ACTIVITIES

The student will participate in clinic activities within the Division of Occupational and Environmental Medicine.

DIDACTIC ACTIVITIES

There will be formal didactic sessions including lectures on hearing conservation programs and audiogram interpretations, principles of industrial hygiene and toxicology, preventive medicine, agricultural medicine, ergonomics, and occupational biopsychosocial assessments. Additionally, the student may attend monthly Occupational and Environmental Medicine Clinical Updates and Grand Rounds.

REQUIRED READING

Students will be given pertinent reading assignments during the rotation.

STUDENT EVALUATIONS

The student will be evaluated through direct observation of physical assessments, case presentations, and participation in didactic sessions.

Family Medicine Elective (FAM608)

Course Director: Elizabeth Brown

Contact Person: Jennifer Barth, (585) 273-5677, jennifer_barth@urmc.rochester.edu

Location: Highland Family Medicine

Block Length: 2 - 4 weeks

Dates Offered: 07/04/2011 - 06/24/2012

Students: 2 per Block

Prerequisites:

GOAL

To develop further and refine skills in the diagnosis and management of common problems in urban, inner-city, and/or rural ambulatory community-based Family Medicine practice.

LEARNING OBJECTIVES

By the end of the rotation the student should be able to:1) Diagnose and treat 20 most common presenting concerns in family practice2) Demonstrate skills in cultural competency, including caring for patients of various races, ages, ethnicities, and socioeconomic levels3) Demonstrate understanding of the impact of health insurance, as well as the "safety net" of care for those patients who are uninsured or underinsured, and how this affects patient care4) Demonstrate understanding of the psychosocial and health literacy barriers to health care that may be endemic in specific populations, such as those living in the inner city5) Demonstrate understanding of when to use ancillary health providers, such as social workers, home nursing services, outreach workers, and what services they can provide6) Provide advocacy for patients7) Identify and assess risk factors such as domestic violence, substance abuse, and illiteracy. Provide appropriate counseling and referral8) Identify and learn appropriate management of common office procedures

FOCUSED EXPERIENCES AVAILABLE: (**must** be arranged before the elective begins, and are subject to provider availability)

OB/Women's Health

Inner-city, Urban, and Rural settings

Dermatology / Procedures (as available & in combination with others)

Refugee Health

GLBT (gay, lesbian, bisexual, transgender) Health

Geriatrics with possible home visits

Deaf Community Health

HIV

SCHEDULE OF ACTIVITIES

The student will see patients under the supervision of urban, inner-city, or community-based family physician preceptors in the Rochester area. Practice hours vary, as do on-call arrangements. This is primarily an outpatient experience. Students will participate in resident teaching activities one 1/2-day session per week as schedule indicates.

DIDACTIC ACTIVITIES

At the beginning of the elective, students discuss learning objectives with the Course Director (Dr. Brown) and their faculty mentor. These objectives should be revisited (and revised, if necessary) during the course of the elective. Generally, brief case presentations to the primary preceptor, during or shortly after the patient encounter, will constitute the majority of teaching activities. It is expected that formal feedback sessions will occur at the midpoint and at the end of the elective.

REQUIRED READING

Paulman's book, "Family Medicine Clerkship Guide," and Phillip's book, "Essentials of Family Medicine" will be used as your resource texts while on elective. Other articles as provided.

STUDENT EVALUATIONS

In order to receive a grade of Passing, the student must attend all sessions, receive a satisfactory evaluation from the preceptor(s), and return his or her evaluation of the elective prior to grades being posted.

Family Medicine Inpatient Adult Medicine (FAM612)

Course Director: Elizabeth Brown

Contact Person: Jennifer Barth, (585) 273-5677, jennifer_barth@urmc.rochester.edu

Location: Highland Hospital

Block Length: 4 weeks (2 to 6 by arrangement)

Dates Offered: 07/25/2011 - 06/24/2012

Students: 2 per Block

Prerequisites:

GOAL

To develop further and refine skills in the diagnosis and management of common problems in an inpatient medical service

LEARNING OBJECTIVES

By the end of the rotation the student should be able to: 1) Conduct a focused history and physical exam pertinent to the patient's presenting concerns

2) Diagnose and treat the 20 most common presenting concerns in inpatient family practice

3) Provide appropriate preventative medicine and screening to patients

4) Identify situations where consultation and referral are indicated and make those arrangements

5) Provide evidence of ability to engage in self-directed learning, including setting personal goals

6) Take primary responsibility in providing appropriate medical care to inpatients in the hospital on the medical service

7) Apply the biopsychosocial model of complete care for patients in the hospital

SCHEDULE OF ACTIVITIES

The student will become an integral part of a Family Medicine resident team. In the mornings, the student will participate in inpatient rounds with the family residents during their time in the hospital. Students will be able to participate in resident teaching activities at least one 1/2-day session per week.

DIDACTIC ACTIVITIES

At the beginning of the rotation, students discuss learning objectives with their faculty preceptor and senior residents.

These objectives are revisited (and revised, if necessary) during the elective. Generally, brief case presentations to senior residents and the primary preceptor, during or shortly after the patient encounters, and during inpatient rounds, will constitute the majority of teaching activities.

REQUIRED READING

Appropriate to the medical conditions encountered in the hospital and outpatient settings. Paulman's book, "Family Medicine Clerkship Guide," and Phillip's "Essentials of Family Medicine" will be made available to you as a reference texts while on elective.

STUDENT EVALUATIONS

In order to receive a grade of Passing, the student must be an active member of the resident inpatient service, receive satisfactory feedback and evaluations from residents, and their faculty preceptor, and return his or her evaluation of the elective before grades are posted.

Family Medicine in Rural Honduras (FAM620)

Course Director: Doug Stockman M.D.
Contact Person: Elizabeth Brown, MD elizabeth_brown@urmc.rochester.edu
Location: Not Available
Block Length: 2-5 weeks
Dates Offered: 10/17/2011 - 05/27/2012
Students: 2 per Block
Prerequisites: Surgery Clerkship (SUR300)
Medicine Clerkship (MED300)
Women's and Children's Health (WCH300)

GOAL

.....
.....

LEARNING OBJECTIVES

.....
.....
.....
.....
.....
.....

SCHEDULE OF ACTIVITIES

.....
.....
.....
.....

This elective is only offered for two weeks in October and April; the exact times of the trips will vary year to year.

DIDACTIC ACTIVITIES

.....
.....
.....
.....

REQUIRED READING

.....

STUDENT EVALUATIONS

.....
.....
.....
.....
.....
.....
.....

Clinical Cardiology With Medical Spanish (LHP/MED601)

Course Director: Gladys Velarde, MD

Contact Person: Maricela Guzman:341-7709; maricela_guzman@urmc.rochester.edu

Location: Strong Memorial Hospital

Block Length: 2 weeks

Dates Offered: -

Students: 1 per Block

Prerequisites:

GOAL

Note to interested students: please schedule this elective at least 2 months in advance, to give the clinic enough time to schedule spanish-speaking patients during your two-week block.

To practice medical Spanish and cultural interpersonal skills within an outpatient setting, focusing on clinical cardiology.

LEARNING OBJECTIVES

By the end of the rotation, the student should be able to:

- o Introduce him/herself to a Spanish-speaking patient and develop a strong patient-provider relationship, utilizing his or her knowledge of Latino culture and language
 - o Obtain a patient's cardiovascular history entirely in Spanish
 - o Guide a patient through the physical exam using Spanish only
 - o Counsel a Spanish-speaking patient on the management of a variety of cardiovascular conditions
 - o Have a better understanding of the unique epidemiologic statistics of cardiovascular disease within the Latino population, including gender differences that affect presentation and outcome of disease
 - o Describe culturally-mediated conditions, such as "los nervios", "ansiedad", "fatiga", "hinchazon" and their affects on the patient's cardiac health
 - o Comprehend alternative therapies that are often utilized by Spanish-speaking patients for various ailments
- Feel more comfortable relating to Spanish-speaking patients within the realm of cardiology

SCHEDULE OF ACTIVITIES

During this elective, students will take care of cardiology patients in an out-patient office setting. The elective should be scheduled in advance, so as to allow the clinic enough time to schedule patients into the elective block. Please be aware that not *all* of Dr. Velarde's patients are exclusively Spanish-speaking. Therefore, Dr. Velarde will supplement language learning and practice by speaking to students in Spanish, both in and out of patient rooms. Most of the didactic teaching will be in Spanish.

DIDACTIC ACTIVITIES

Students will attend any cardiology-related meetings, grand rounds, conferences, etc, as directed by Dr. Velarde. This elective will center mostly around out-patient care, but if any of Dr. Velarde's Spanish-speaking patients are admitted to SMH for care, students will round on these patients with Dr. Velarde at Strong.

REQUIRED READING

Institute of Medicine's "Unequal *Treatment: Confronting Racial and Ethnic Disparities in Health Care.*"

Smedley, Stith, and Nelson. 2003.

501 Spanish verbs. Kendris and Kendris. 2003.

Spanish for Health Care. Houston and Rush. 2002.

STUDENT EVALUATIONS

Students will be evaluated on their completion of each of the above learning objectives. This elective is graded on a pass/fail basis.

Pediatrics and Clinical Gynecology (LHP/PED602)

Course Director:	Daniel M. Yawman
Contact Person:	daniel_yawman@urmc.rochester.edu
Location:	SMH and Affiliated Hospitals
Block Length:	2 wks
Dates Offered:	-
Students:	1 per Block
Prerequisites:	Women's and Children's Health (WCH300)

GOAL

Note to interested students: please schedule this elective between 2-6 months in advance To ENSURE AVAILABILITY OF PRECEPTORS.

****Additionally, please email Dr. Yawman after you have registered for the elective. he will help you arrange your daily schedule for your two-week block

.To practice medical Spanish and cultural interpersonal skills within an outpatient setting, focusing on clinical pediatrics and gynecology.

LEARNING OBJECTIVES

By the end of the rotation, the student should be able to:

- O Introduce him/herself to a Spanish-speaking patient and his/her family, while also developing a strong patient-provider relationship, utilizing his or her knowledge of Latino culture and language
 - O Obtain a patient's history entirely in Spanish conversation with the patient and his/her family
 - O Guide a patient through the physical exam using Spanish only
 - O Counsel a Spanish-speaking patient and his/her family on the management of a variety of commonly-seen outpatient pediatric conditions
 - O Counsel a Spanish-speaking patient on the management of a variety of gynecologic conditions, as well as providing information on sexually-transmitted diseases and anticipatory guidance during pregnancy.
 - O Have a better understanding of the unique epidemiologic statistics of gynecologic and obstetric morbidities within the Latina population
 - O Describe culturally-mediated conditions, such as "los nervios", "ansiedad", "fatiga", "hinchazon" and their affects on the patient's physical health
 - O Comprehend alternative therapies that are often utilized by Spanish-speaking patients for various ailments
- Feel more comfortable relating to Spanish-speaking patients and their families within the realm of women and children's health

SCHEDULE OF ACTIVITIES

During this elective, students will take care of both gynecologic and pediatric patients in an out-patient office setting. The elective should be scheduled in advance, so as to allow both clinics enough time to schedule patients into the elective block. Please be aware that not all of Dr. Yawman's or Dr. Fernandez's patients are exclusively Spanish-speaking. Therefore, both preceptors will supplement language learning and practice by speaking to students in Spanish, both in and out of patient rooms. Most of the didactic teaching will be in Spanish.

Monday
Tuesday
Wednesday
Thursday
Friday
AM
Peds @ RGH
GYN @ SMH
GYN @ SMH
GYN@ SMH
Peds @ RGH
PM
Peds @ RGH
GYN @ SMH
GYN @ SMH
GYN@ SMH
Peds @ RGH

DIDACTIC ACTIVITIES

Students will attend any Pediatrics- or OB/GYN-related meetings, grand rounds, conferences, etc, as directed by Dr. Yawman and Dr. Fernandez. This elective will center mostly on out-patient care, but if any of Dr. Yawman's or Dr. Fernandez's Spanish-speaking patients are admitted to SMH or RGH for in-patient care, students will round on these patients with their respective attending.

REQUIRED READING

Institute of Medicine's "Unequal Treatment: Confronting Racial and Ethnic Disparities in Health Care."

Smedley, Stith, and Nelson. 2003.

501 Spanish verbs. Kendris and Kendris. 2003.

Spanish for Health Care. Houston and Rush. 2002.

STUDENT EVALUATIONS

Students will be evaluated on their completion of each of the above learning objectives. This elective is graded on a pass/fail basis.

Medicine in Peru (LHP603)

Course Director:	Gladys Velarde, MD
Contact Person:	Maricel Guzman
Location:	Away Elective or Student Fellowship
Block Length:	4-12 wks
Dates Offered:	-
Students:	3 per Block
Prerequisites:	Third Year Comprehensive Assessment (TYC300)

GOAL

please **NOTE: this elective is Limited to 3 students per academic year. Each student has the opportunity to stay for up to 12 weeks, if they choose. However, the minimum time is 4 weeks.**

*****NOTE to students***: after you register for this course, you must:**

- 1. email dr. monesinos to personally schedule your time in peru. his email is: emonte@aressco.com. He will be organizing your stay in Peru. YOU MUST ALSO EMAIL DR. PEDRO MENDOZA AT pmendozaa@unmsm.edu.pe AND GIVE HIM THE SAME INFORMATION.**
- 2. EMAIL MARY CHRISTIAN AT mary_christian@urmc.rochester.edu TO ORGANIZE YOUR INSURANCE FOR THIS TRIP; THE COST OF THE INSURANCE WILL BE BILLED TO YOUR STUDENT ACCOUNT.**
- 3. EMAIL ADRIENNE MORGAN AT adrienne_morgan@urmc.rochester.edu TO ORGANIZE YOUR LIABILITY COVERAGE.**
- 4. YOUR UHS HEALTH INSURANCE PLAN WILL COVER YOU WHILE YOU ARE IN PERU. PLEASE KEEP ANY RECEIPTS AND YOU WILL BE REIMBURSED AFTER YOU PRESENT THEM TO UHS UPON YOUR RETURN.**
- 5. ORGANIZE PROPHYLACTIC HIV MEDICATIONS WITH UHS BEFORE YOU LEAVE FOR PERU. YOU MUST TAKE THESE MEDICATIONS WITH YOU ON YOUR TRIP.**
- 6. OBTAIN A PRECEPTOR EVALUATION FORM FROM ADRIENNE MORGAN. YOU MUST PRESENT THIS FORM TO YOUR PRECEPTOR IN PERU IN ORDER TO GET CREDIT AND A PASS/FAIL GRADE FOR THIS COURSE.**
- 7. FILL OUT AN ADD/DROP FORM AT STUDENT SERVICES FOR INTERNATIONAL MEDICINE AFTER YOU REGISTER FOR THIS COURSE AND BEFORE YOU LEAVE FOR PERU.**
- 8. CONTACT ADRIENNE MORGAN WITH ANY OTHER QUESTIONS.**

Goal: The goals of this elective are:

1. to provide students with a Spanish-language immersion experience in the oldest medical school in the Americas, the University of San Marcos.
2. to give students the opportunity to learn and practice their medical field of interest in Peru under the guidance of UNMSM faculty at Dos de Mayo Hospital in Lima.
3. to explore the issues in public health that confront Peruvian society, including issues of access to care, quality of care, and disparities in healthcare in the public sector in Peru
4. to understand the Peruvian healthcare system
5. to provide third and fourth year medical students with a unique opportunity to practice their verbal Spanish skills, especially medical Spanish

LEARNING OBJECTIVES

Learning objectives:

By the end of the rotation, the student should be able to

- o Introduce him/herself to a Spanish-speaking patient and develop a strong patient-provider relationship, utilizing his or her knowledge of Peruvian culture and Spanish language
- o Obtain a patient's history entirely in Spanish
- o Guide a patient through the physical exam using Spanish only
- o Counsel a Spanish-speaking patient on the management of their illness
- o Have a better understanding of the unique epidemiologic statistics of the Peruvian population
- o Comprehend alternative therapies that are often utilized by Spanish-speaking patients for various ailments
- o Understand what measures are being taken in Peru to better the health of the entire population

SCHEDULE OF ACTIVITIES

Schedule of Activities: After registering for this course, you will contact Mrs. Maria Montesinos and Dr. Mendoza (email addresses are listed above) and inform them of the department in which you would prefer to study. They will organize your contacts for you, as well as housing and any other concerns. Your didactic and clinical activities will be organized between you and your preceptor at Dos de Mayo Hospital.

DIDACTIC ACTIVITIES

REQUIRED READING

Required Reading:

Peru: Improving Health Care for the Poor. A World Bank Country Study. ISBN: 0-8213-4493-5

History of the Conquest of Peru. Prescott, William H. Lippincott.

Institute of Medicine's "Unequal *Treatment: Confronting Racial and Ethnic Disparities in Health Care.*"

Smedley, Stith, and Nelson. 2003.

501 Spanish verbs. Kendris and Kendris. 2003.

Spanish for Health Care. Houston and Rush. 2002.

STUDENT EVALUATIONS

Student Evaluations: Students are required to submit an Evaluation form from the University of Rochester to his or her preceptor(s) at Dos de Mayo Hospital. Students will be evaluated on their completion of each of the above learning objectives. This elective is graded on a pass/fail basis.

Medical Intensive Care Unit (MED605)

Course Director:	David Trawick
Contact Person:	Bill Fuller 275-2050 willard_fuller@urmc.rochester.edu
Location:	Strong Memorial Hospital
Block Length:	2 or 4 weeks
Dates Offered:	07/11/2011 - 05/13/2012
Students:	1 per Block
Prerequisites:	

GOAL

At the end of this rotation, the student should be able to articulate the initial diagnostic approach to and management of patients with acute hypoxemic respiratory failure, acute on chronic respiratory failure (e.g. exacerbation of COPD), acute respiratory distress syndrome (ARDS), sepsis and septic shock, and multisystem organ dysfunction. Basic principles of ventilator management including basic ventilator settings and trouble shooting will also be expected.

LEARNING OBJECTIVES

The student will join the Medical Intensive Care Unit Team at Strong Memorial Hospital. The MICU Team consists of an Attending, Fellow, and Interns and Residents in Internal Medicine or Emergency Medicine and manages all patients in MICU on 8-1600 and step-down patients on 8-3400. The student will accompany the team on rounds and assist the intern/resident team with new admissions during the day. Opportunities for night call will also be available. The student will be expected to write thorough but succinct admission notes and daily progress notes on their patients, and present their patients to the Attending and Fellow during formal work rounds in the morning and informal afternoon/evening rounds. The student will not be expected to write orders or perform procedures (e.g. central line insertion), but can assist the intern/resident team. The student will be expected to provide a 5-10 minute overview of evidenced based management of one of his or her cases once per week on rounds (total of two presentations). The student may have the opportunity to participate in family meetings at which end-of-life care is discussed. Student will be expected to attend regularly scheduled conferences (e.g. City Wide Chest Conference on Wednesday morning, and Pulmonary Clinic Conference Fridays at noon, and Critical Care Conference), and may also have the opportunity to present an interesting case at these conferences.

SCHEDULE OF ACTIVITIES

Daily rounds five days per week on the MICU beginning at 8 a.m. end ending by about 11:30 a.m. Evening work rounds at about 5 p.m.

DIDACTIC ACTIVITIES

Formal didactic sessions include City Wide Chest Conference on Wednesday morning, and Pulmonary Clinic Conference Fridays at noon. Informal teaching sessions as part of rounds and daily lectures by the attending or fellow.

REQUIRED READING

STUDENT EVALUATIONS

Student's performance will be graded by: (i) their participation in rounds and ability to complete a coherent admission notes and daily progress notes in a timely basis; (ii) direct observation of their clinical skills including history taking and physical exam; and (iii) effectiveness as a team player.

Medical Intensive Care Unit (MED606)

Course Director:	David Lee (RGH) M.D.
Contact Person:	Susan Sutton, 922-4409, susan.sutton@rochestergeneral.org
Location:	Rochester General Hospital
Block Length:	4 weeks
Dates Offered:	-
Students:	2 per Block
Prerequisites:	Medicine Clerkship (MED300)

GOAL

To appreciate basic concepts and develop skills used in evaluation and management of adult patients with critical illness.

LEARNING OBJECTIVES

By the end of the rotation the student should be able to:- Describe the basic capabilities of mechanical ventilators.- Recognize and treat acute respiratory failure from its onset to liberation from a ventilator- Recognize organ system interactions in critically ill patients with multiple medical problems.- Organize data and recognize priorities in managing patients with multiple medical problems.- Identify ethical and psychosocial issues in management of patients with critical illness.

SCHEDULE OF ACTIVITIES

The student will be a member of one of two MICU teams, functioning as a medical extern, and taking care of 1-3 patients. The student will have the same on-call schedule as the medical intern on the team, namely being on a day shift (08:00 - 21:00) with no overnight call. The student will work up new patients and be responsible for coordinating the care of their patients under the supervision of a medical resident (R2 or R3).

DIDACTIC ACTIVITIES

Attendings will round with resident teams several times a week. Teaching will include work rounds, X-ray rounds, and other didactic rounds. Students should plan to attend pulmonary pathology conference (Monday AM), City-Wide Chest Conference (Wed AM), RGH Medical Grands (Thu AM), pulmonary X-ray conference (Thu AM), and resident noon conferences (daily at noon).

REQUIRED READING

None required prior to the rotation. Handouts may be made available during the rotation. Students will be expected and encouraged to investigate pertinent clinical problems from on-line and print sources, especially primary sources.

STUDENT EVALUATIONS

Students should expect feedback from their MICU attendings - students can remind us of this responsibility during the rotation.

Geriatrics (MED615)

Course Director: Annette Medina-Walpole M.D.

Contact Person: susan_darby@urmc.rochester.edu

Location: Monroe Community Hospital

Block Length: 2 weeks with one student per block

Dates Offered: 07/18/2011 - 06/17/2012

Students: 1 per Block

Prerequisites: Adult Inpatient Clerkship (AIC300)

GOAL

This is a two week elective designed to expose students to geriatrics in various care settings in the Rochester community and to allow students to understand the medical and psychosocial needs of the aging population and apply the principles of geriatrics into clinical practice.

LEARNING OBJECTIVES

By the end of the rotation the student should be able to: Distinguish normal from pathologic aging. Demonstrate appropriate communication and interpersonal skills when interacting with older adults. Perform an appropriate physical exam with attention to physical signs of aging, functional assessment and mental status. Recognize early reversible signs of geriatric syndromes and identify appropriate interventional strategies to prevent/postpone institutionalization. Describe the work up and management of common geriatric syndromes such as dementia, delirium, falls, urinary incontinence, malnutrition and polypharmacy. Actively participate as a team member in the Geriatric Assessment Clinic and in the care plans of the nursing home and rehabilitation patients. Experience various community resources available for the care of older adults at home.

SCHEDULE OF ACTIVITIES

null

DIDACTIC ACTIVITIES

null

REQUIRED READING

null

STUDENT EVALUATIONS

null

Clinical Cardiology (MED630)

Course Director: J. Franklin Richeson M.D.

Contact Person: Tammy Michielsen, 5-4290, tammy_michielsen@urmc.rochester.edu

Location: Strong Memorial Hospital

Block Length: 2-4 weeks

Dates Offered: 07/04/2011 - 07/01/2012

Students: 2 per Block

Prerequisites:

GOAL

To instruct students in general aspects of clinical cardiology, and to give them familiarity with techniques used in this discipline, especially electrocardiography.

LEARNING OBJECTIVES

By the end of the rotation the student should be able to: Have a knowledgeable approach to the patient with cardiovascular disease, and be able to take a cardiovascular history and perform a physical examination. Be familiar with the major diagnostic categories of cardiovascular disease, and have information about the diagnostic approaches and therapy of these conditions. Have considerable information about interpretation of electrocardiograms, and some familiarity with other specific diagnostic tests, including treadmill exercise, Holter monitoring, echocardiography, nuclear cardiology tests, and cardiac catheterization. Develop an approach to preventative cardiology, a discipline with which all physicians should be familiar.

SCHEDULE OF ACTIVITIES

Students make rounds with faculty members of the Clinical Service at Strong Memorial Hospital. There are ample opportunities to work up individual cases, to attend conferences, and to learn from faculty about diagnostic testing, especially electrocardiography.

DIDACTIC ACTIVITIES

The Cardiology Unit has a full schedule of conferences, most of which will be instructive to students and of interest to them. There are also frequent one-on-one instruction sessions with faculty of the Clinical Service, especially in the area of electrocardiography.

REQUIRED READING

None specifically required, but the textbooks by Braunwald and by Hurst are an excellent source of reference material.

STUDENT EVALUATIONS

Grades for overall course performance are given at the end of the rotation by course directors.

EKG Interpretation (MED632)

Course Director: Abrar H. Shah

Contact Person: Rebekah Kepple, 723-7500, rkepple@unityhealth.org

Location: Park Ridge Hospital

Block Length: 2 weeks in set blocks

Dates Offered: 07/04/2011 - 05/20/2012

Students: 2 per Block

Prerequisites:

GOAL

To develop basic understanding of EKG's.

LEARNING OBJECTIVES

By the end of the rotation the student should be able to: *Recognize different types of Cardiac Arrhythmia's commonly seen. *Identify Acute Myocardial Infarction, Ischemia, Chamber Hypertrophy, Bundle Branch Blocks, and EKG manifestation of electrolyte abnormalities.

SCHEDULE OF ACTIVITIES

Students are assigned to Park Ridge Hospital EKG Department where they will have the opportunity for interpretation of EKG's. The interpretations will be reviewed by one of the faculty Cardiologists. The student will have ample opportunity to discuss the EKG's with the Preceptor. The morning hours are spent interpreting routine daily EKG's from the Hospital and afternoons are spent reviewing interesting EKG's on file and observing Stress Test. Some exposure to Echocardiography can be arranged if the student wishes.

DIDACTIC ACTIVITIES

REQUIRED READING

Rapid Interpretation of EKG, Dale Dubin, M.D., Cover Publishing Company, Tampa
Practical Electrocardiography, Henry J.L. Marriot, M.D., Williams and Wilkins, Baltimore
Electrocardiography in Clinical Practice-Adult and Pediatric, Chaun Chou, M.D., Timothy K. Knilans, M.D., Saunders, Philadelphia

STUDENT EVALUATIONS

To be completed by the Preceptor after the student's satisfactory completion of the course, and reviewing the results of an EKG Interpretation at the end of the course.

Diagnostic Clinical Cardiology (MED633)

Course Director:	Chad Teeters
Contact Person:	Mary Cassidy; 341-0417
Location:	Highland Hospital
Block Length:	2 weeks
Dates Offered:	10/10/2011 - 04/01/2012
Students:	4 per Block
Prerequisites:	

GOAL

To provide students with basic knowledge and skills in the interpretation of electrocardiograms and other non-invasive cardiac diagnostic procedures. To expand students knowledge in the clinical evaluation of patients with common and complex heart problems. **PLEASE NOTE that this is a CONTINUOUS 2 week course** that builds on knowledge from successive sessions; thus students CANNOT start the course in midweek/midsession.

LEARNING OBJECTIVES

By the end of the rotation the student should be able to:·Read and interpret Ekg's, including a basic understanding of the underlying electrophysiology·Recognize and understand cardiac arrhythmias commonly seen in clinical practice·Recognize and understand electrocardiographic patterns of acute coronary syndromes and other cardiac abnormalities·Understand the methodology and indications for non-invasive cardiology diagnostic procedures, including echocardiography, nuclear cardiology, and exercise stress testing·Recognize and understand the pathophysiology of abnormal physical signs in patients with various types of CV disease

SCHEDULE OF ACTIVITIES

·Students are assigned to the Cardiology Department at Highland Hospital where they will review and interpret electrocardiograms; including a didactic/seminar session with a faculty cardiologist on a daily basis.

DIDACTIC ACTIVITIES

The students will have the opportunity to observe the performance and interpretation of other non-invasive diagnostic procedures as outlined above

REQUIRED READING

·Practical Electrocardiography, Henry J.L. Marriott, Williams & Wilkins, Baltimore·Electrocardiography in Clinical Practice, Te-Chuan Chou, W.B. Saunders Co., Philadelphia

STUDENT EVALUATIONS

To be completed by the designated faculty preceptor after the student's satisfactory completion of the course.

Heart Failure Management (MED634)

Course Director:	Eugene Storozynsky
Contact Person:	
Location:	Strong Memorial Hospital
Block Length:	2 weeks
Dates Offered:	-
Students:	1 per Block
Prerequisites:	Medicine Clerkship (MED300)

GOAL

To instruct the students in the proper medical and surgical management of inpatients and outpatients with chronic and acute heart failure.

LEARNING OBJECTIVES

By the end of the rotation the student should be able to:1. Understand the initial evaluation of the patient with new-onset heart failure.2. Understand the treatment options for acute heart failure3. Select proper medical therapy for patients with heart failure4. Understand the proper role of inotropic therapy, cardiac transplantation, and ventricular assist devices5. Appreciate the epidemiology of heart failure6. Understand the important role of preventive measures in treating patients with heart failure, or those at risk for heart failure7. Understand the different causes for cardiomyopathy8. Appreciate the differences between patients with heart failure with and without preserved systolic function.

SCHEDULE OF ACTIVITIES

Students will round with the inpatient heart failure and transplantation attendings and will also be able to attend the heart failure outpatient clinics. Attendance at diagnostic procedures such as right heart catheterizations and coronary angiography will be encouraged and students may also observe cardiac transplantations when they occur.

DIDACTIC ACTIVITIES

The cardiology unit has a full schedule of conferences including a weekly heart failure and transplantation conference. There are also frequent one-on-one instruction sessions with faculty of the Clinical Services.

REQUIRED READING

None specifically required, but journal articles on recent topics of interest will be distributed regularly.

STUDENT EVALUATIONS

Grades for overall course performance are given at the end of the rotation by course directors.

Hypertension and Vascular Disease (MED635)

Course Director:	John Bisognano M.D.
Contact Person:	Cathy Cottorone
Location:	SMH and Affiliated Hospitals
Block Length:	2 weeks
Dates Offered:	-
Students:	1 per Block
Prerequisites:	Medicine Clerkship (MED300)

GOAL

To develop an in-depth understanding of the evaluation and treatment of patients with primary hypertension, severe hypertension and secondary hypertension. Also, to understand the relationship of hypertension to vascular disease and to become familiar with the diagnostic and therapeutic options available for patients with vascular disease. Students will also be assigned, as time permits to general cardiology outpatient clinics where preventive care including hypertension, lipid, and heart failure management will be the focus.

LEARNING OBJECTIVES

By the end of the rotation the student should be able to:1. Understand the goals in treating all hypertensive patients, including those with diabetes and renal insufficiency2. Perform appropriate evaluation in patients with suspected secondary causes of hypertension3. Construct a treatment approach for patients with severe or resistant hypertension4. Understand appropriate selection of vascular diagnostic tests5. Recommend appropriate medical and surgical treatment for patients with peripheral vascular disease6. Understand the proper treatment of lipid disorders and management of other chronic cardiovascular conditions such as chronic angina and heart failure.

SCHEDULE OF ACTIVITIES

Students will attend clinic with Dr. Bisognano and faculty from the hypertension program, preventive cardiology faculty, general cardiology faculty, as well as interventional cardiologists involved in the treatment of peripheral artery disease. . Students may also round on the inpatient cardiology and vascular services whenever there are patients of interest in the hospital. There will be additional opportunities to attend clinical conferences, to spend time in the vascular laboratory, and to participate in vascular procedures.

DIDACTIC ACTIVITIES

The Cardiology Unit and the Vascular Surgery Section has a full schedule of conferences, and most will be of interest to students in this rotation. There will be frequent one-on-one instruction with faculty of the Clinical Services.

REQUIRED READING

None specifically required, but journal articles of interest will be distributed throughout the rotation.

STUDENT EVALUATIONS

Grades for overall course performance are given at the end of the rotation by course directors.

Outpatient Cardiology Office Experience (MED636)

Course Director: J.P. Mishra

Contact Person: Tammy Michielsen 275-4290 tammy_michielsen@urmc.rochester.edu

Location: Private Office

Block Length: 2-4 weeks

Dates Offered: 07/04/2011 - 07/01/2012

Students: 1 per Block

Prerequisites:

GOAL

To develop an understanding of the evaluation and treatment of patient conditions typically encountered in an outpatient cardiology office including hypertension, lipid disorders, coronary disease, CHF, valvular disease and arrhythmias.

Various aspects of heart failure, systolic, diastolic, cardiomyopathy.

Pacemaker follow up, Defibrillators interrogation

Various modalities of Stress testing for heart disease

Learning how to approach the patients in an office setting and how to focus cardiac exam in a time-effective manner.

LEARNING OBJECTIVES

Case distribution will vary, however, by the end of the rotation the student should be able to

1. Understand the principles of preventative cardiology and the goals in treating all cardiac patients.
2. Perform appropriate evaluation in patients with suspected coronary disease.
3. Understand appropriate selection and performance characteristics of various cardiac tests.
4. Construct an outpatient treatment approach for patients with CHF.
5. Recommend appropriate medical and surgical treatments for patients with coronary and valvular disease.
6. Improve physical diagnosis skills with respect to the entire cardiovascular exam and be able to correlate auscultative findings with echocardiographic data.

SCHEDULE OF ACTIVITIES

Students will work in the office with Dr. Mishra seeing clinical cardiology patients, as well as assisting in performing exercise tests, performing and reviewing echocardiograms and reviewing nuclear cardiology studies. This will give students a clear understanding of the daily practice of outpatient cardiology in a busy clinical office.

DIDACTIC ACTIVITIES

There will be one-on-one instruction with faculty regarding each patient.

REQUIRED READING

None specifically required, but journal articles of interest will be distributed throughout the rotation. Suggested books will also be recommended by faculty.

STUDENT EVALUATIONS

The student will be evaluated by the preceptor with regard to their cardiovascular history and physical examination skills as well as the ability to synthesize individual case histories into a cogent differential diagnosis and evaluation and management plan.

Clinical Endocrinology - Metabolism (MED643)

Course Director:	Laura Calvi M.D.
Contact Person:	Barbara Morabito 273-4628 or 275-2901
Location:	Strong Memorial Hospital
Block Length:	
Dates Offered:	07/04/2011 - 06/24/2012
Students:	1 per Block
Prerequisites:	Family Medicine Clerkship (FAM300) Medicine Clerkship (MED300)

GOAL

To become more knowledgeable regarding the diagnosis and treatment of endocrine diseases. This course offers exposure to a large variety of endocrinologic issues as they are managed primarily in the outpatient setting. The rotating student will also be able to take advantage of inpatient consult service, and will participate actively in the academic conferences offered by the division.

LEARNING OBJECTIVES

By the end of the rotation the student should be able to:

·Perform appropriate endocrine exams.

Discuss the purposes of endocrinological tests and when to appropriately order them.

·demonstrate the ability to integrate the history, physical exam, and lab results in order to reach a practical diagnostic conclusion in patients with endocrinologic conditions.

·List the available treatment options for the management of diabetes, thyroid and pituitary disease as well as the other endocrinologic disorders encountered and how to apply them.

SCHEDULE OF ACTIVITIES

Student will spend 5 days/week either in the Endocrine Clinic, rotate in the Neuroendocrine Multidisciplinary Clinic, participate to the Endocrine Consult Service, or at Endocrine Unit Conferences. Students will be scheduled to see two New Patients in the Friday afternoon Endocrine Clinic. In both the clinic and on the consult service he/she will work closely with an assigned faculty preceptor and the fellows and housestaff assigned to the endocrine service. There are 2-3 teaching conferences each week.

DIDACTIC ACTIVITIES

Daily teaching rounds

Journal club (twice monthly)

Thyroid Multidisciplinary Conference (once monthly)

Citywide clinical case discussion (once weekly)

Core curriculum conference series (once weekly)

REQUIRED READING

The endocrine section of one of the standard textbooks of medicine.

STUDENT EVALUATIONS

To receive a grade of Pass the student must successfully demonstrate proficiency of the learning objectives, attend all sessions, maintain a logbook of patients seen, and receive a passing evaluation from the preceptor.

Clinical Gastroenterology (MED645)

Course Director: Thomas Park MD
Contact Person: bonnie_austin@urmc.rochester.edu
Location: Strong Memorial Hospital
Block Length: 2 - 4 weeks
Dates Offered: 07/11/2011 - 06/24/2012
Students: 3 per Block
Prerequisites:

GOAL

Broad exposure to common GI and Liver diseases with focus on diagnostic evaluation and management, GI symptom evaluation, and GI emergency management, in both the outpatient and inpatient settings.

LEARNING OBJECTIVES

SCHEDULE OF ACTIVITIES

Depending on the length of their rotation, and their personal interests and career goals, students may be assigned predominantly to inpatient consultation service with some outpatient clinic exposure, or predominantly to outpatient clinic with some procedural exposure. Activities are generally from 8 a.m. to 5 p.m., Monday thru Friday. There are no on-call responsibilities, and no weekend rounds.

DIDACTIC ACTIVITIES

Students will attend the formal didactic lectures of the Strong Memorial Hospital Gastroenterology division. They may be asked to make brief didactic presentations on clinical rounds pertinent to patients they are following.

REQUIRED READING

STUDENT EVALUATIONS

Clinical Gastroenterology (MED648)

Course Director: Anil Kumar Sharma M.D.

Contact Person: Bonnie Ackely # 271 2808 ext 222

Location: SMH and Affiliated Hospitals

Block Length: 2 - 6 weeks

Dates Offered: -

Students: 1 per Block

Prerequisites: Medicine Clerkship (MED300)

GOAL

Students will see patients with a range of gastrointestinal and liver disease and appreciate what is involved in evaluating these patients using the history, physical and specialized endoscopic procedures. The course is predominately done in the outpatient setting, but a component of in-patient experience can also be arranged if desired. There is no On-Call commitment expected.

LEARNING OBJECTIVES

By the end of the rotation the student will: Become experienced in a variety of gastrointestinal diseases including liver disease, inflammatory bowel disease, peptic disease and intestinal neoplasm. Observe and learn the utility of endoscopic procedures. Learn how to review appropriate information derived from radiological and clinical laboratory studies which compliment the evaluation of patients with gastrointestinal disease. Learn about the pharmacologic treatment of gastrointestinal disease. Learn how to work up and report on the evaluation of patients with gastrointestinal disease.

SCHEDULE OF ACTIVITIES

The student will work with the preceptor in his practice situation. The student will work up between two and five new patients per day, write the reports and present them to the preceptor. The student will observe between four and eight endoscopic procedures per day. The student will follow through with the evaluation of patients seen primarily and also see interesting patients who are being followed by the practice. The work day will be from 8:00 a.m. until 5:00 or 6:00 p.m. There will be no on-call obligations who are being followed by the practice.

DIDACTIC ACTIVITIES

The student will attend GI clinical conferences at the University of Rochester Strong Memorial Hospital and Highland Hospital.

REQUIRED READING

There is no specific required reading but the student will be required to read up on and obtain literature relative to many patients seen. Appropriate reprints will be given out when available.

STUDENT EVALUATIONS

The student will be evaluated on the basis of their interest and fund of knowledge.

Clinical Gastroenterology (MED649)

Course Director:	Karin Dunnigan M.D.
Contact Person:	Kathy Hamblin, 922-4136, kathy.hamblin@rochestergeneral.org
Location:	Rochester General Hospital
Block Length:	2 - 4 weeks
Dates Offered:	-
Students:	1 per Block
Prerequisites:	Medicine Clerkship (MED300)

GOAL

To increase the student's familiarity with gastrointestinal, hepatic, and nutritional diseases.

LEARNING OBJECTIVES

By the end of the rotation the student should be able to: **GENERAL:** Be able to evaluate patients with common gastrointestinal symptoms. Develop a familiarity with the common drugs used in gastrointestinal disease, both prescription and over-the-counter, understand their action, the situations for which they are used, their potential side effects, and their cost to the patient. Become aware of the spectrum of procedures performed by a gastroenterologist, and understand the indications, alternatives and potential complications of each. Identify patients/clinical situations for whom/which consultation with a gastroenterologist is indicated. **SPECIFIC:** Develop a reasonable diagnostic approach to both the acute and chronic gastrointestinal bleeder. Become familiar with the treatment of gastroesophageal reflux disease and peptic ulcer disease. Be aware of the populations at risk for colon cancer, and the manner in which they are screened. Discuss the clinical and serologic features of viral hepatitis. Learn the differential diagnosis of chronic liver disease, and develop a methodical approach to the evaluation of abnormal liver function tests. Develop an approach to the patient with acute or chronic abdominal pain. Understand the mechanisms of diarrhea, and how to evaluate patients with this symptom. Become familiar with the clinical features of inflammatory bowel disease, the methods of evaluation, and the available therapy. Understand the objectives of nutrition support, including nutrition assessment and development of both enteral and parental nutrition prescriptions.

SCHEDULE OF ACTIVITIES

Students are assigned to the Gastroenterology Unit at Rochester General Hospital from 8:30 am to 5:30 pm on weekdays. They work with three attending gastroenterologists and participate in the out- and in-patient consultative service. Students observe gastrointestinal procedures including diagnostic and therapeutic upper and lower endoscopy, ERCP and liver biopsy. They have the opportunity to attend the daily noon conferences in the Department of Medicine for the residents, as well as Medical Grand Rounds on Thursday at 8:30.

DIDACTIC ACTIVITIES

Each patient seen is discussed with an attending, and independent reading about these patients is expected. Selected pathology slides will be reviewed with the pathology department. The student will be expected to give a weekly, 20-minute presentation on a topic pertaining to a patient seen that week. They are encouraged to attend the monthly Gastroenterology clinical conference when it is given during the time they spend on this elective.

REQUIRED READING

Sleisenger, M. Gastrointestinal Disease 5th edition: Chapters 10,19,30,49, 63,64,80. Chopra, S. Disorders of the Liver, 1st edition: Chapters 1,2, 6,16,17 or Sherlock, S. Diseases of the Liver and Biliary System, 7th edition: Chapters 2,4,7-21,29. Rombeau, J. Clinical Nutrition. 2nd Edition: Chapters 12,15,18. Cope's Early Diagnosis of the Acute Abdomen. Selected review articles will be provided to the student. All the texts listed are available in the Gastroenterology Unit and in the medical library.

STUDENT EVALUATIONS

To receive a passing evaluation, the student must present a weekly conference. In addition, through patient assessments, case presentations and write-ups, they will demonstrate to their preceptors that they have gained the knowledge stated in the objectives.

Geriatric Fracture Center (MED651)

Course Director: Daniel Mendelson
Contact Person: Julie_Hutchison@URMC.Rochester.edu
Location: Highland Hospital
Block Length: 2 to 4 weeks
Dates Offered: 07/04/2011 - 07/08/2012
Students: 2 per Block
Prerequisites:

GOAL

This elective is designed for senior medical students to allow them to gain familiarity with co-managed care, total quality management, clinical research, and interdisciplinary care in an acute setting dealing with frail, elderly patients with osteoporotic fractures. This elective should be interesting to students with interest in both the medical and surgical management of frail elders.

LEARNING OBJECTIVES

1. Learn the concepts and values of co-management and total quality management. 2. Learn how to perform perioperative medical management of frail patients. 3. Learn surgical techniques used to manage fragility fractures. 4. Participate in a research or teaching project.

SCHEDULE OF ACTIVITIES

Daily rounds with the GFC team. Specific activities to be arranged based on patient census.

DIDACTIC ACTIVITIES

Weekly teaching rounds 7A on Mondays. Noon conferences daily. Additional activities as available.

REQUIRED READING

Friedman, S.M., et al., Geriatric co-management of proximal femur fractures: total quality management and protocol-driven care result in better outcomes for a frail patient population. *J Am Geriatr Soc*, 2008. 56(7): p. 1349-56.
Kates, S., D. Mendelson, and S. Friedman, Co-managed care for fragility hip fractures (Rochester model). *Osteoporosis International*, 2010. 21(Suppl 4): p. S621-S625.

STUDENT EVALUATIONS

Faculty assessment.

Hematology (MED653)

Course Director: Alissa Huston

Contact Person: Kristin Galvin-Burwick 275-4797 kristin_galvinburwick@urmc.rochester.edu

Location: Strong Memorial Hospital

Block Length: 2 weeks or 4 weeks

Dates Offered: 07/04/2011 - 06/17/2012

Students: 1 per Block

Prerequisites:

GOAL

Students will become familiar with both malignant and benign diseases of the blood. Students will be encouraged to consider a career in hematology and to develop an interest in cancer research.

LEARNING OBJECTIVES

At the end of the elective the student will be able to:

Interpret peripheral blood smears and bone marrow morphology.

Describe the significance of disturbances in blood counts

Describe the rationale for ordering tests for bleeding and thrombotic disorders

Interpret tests for bleeding and thrombotic disorders

Explain the management of bleeding and thrombotic disorders

Demonstrate history and physical taking skills in the evaluation of patients with bleeding disorders and thrombotic conditions

Demonstrate history and physical taking skills in the evaluation of patients with lymphadenopathy or paraproteinemia

Discuss a rational approach to the diagnosis and treatment of cytopenias, such as anemia, thrombocytopenia, pancytopenia.

Discuss appropriate use of hematopoietic growth factors such as erythropoietin, granulocyte colony stimulating factor, etc.

Explain the appropriate use of blood products and the work up of various transfusion reactions.

SCHEDULE OF ACTIVITIES

This elective is four weeks in length. The student will begin work at 8 a.m. daily under the supervision of the attending on the inpatient hematology service. The student will participate in daily rounds, didactic sessions as assigned and will attend two outpatient hematology clinics per week.

DIDACTIC ACTIVITIES

The student will attend the myeloid conference on Wednesdays at 12:30 p.m., Wilmot Cancer Center Grand Rounds on Fridays at noon, and other hematology conferences as directed by Dr. Huston.

REQUIRED READING

Selected articles as assigned by Dr. Huston at the outset of the elective rotation.

STUDENT EVALUATIONS

To receive a passing grade, students must attend all clinical and didactic activities. They will also make a short presentation to the hematology attending and team. Students must also receive a satisfactory evaluation from the course director and return their course evaluations prior to grades being posted.

Clinical Hematology (MED654)

Course Director:	Pradyumna Phatak M.D.
Contact Person:	Sherri Hill at 922-5387 email sherri.hill@rochestergeneral.org
Location:	Rochester General Hospital
Block Length:	2 - 6 weeks
Dates Offered:	07/04/2011 - 06/10/2012
Students:	1 per Block
Prerequisites:	Medicine Clerkship (MED300)

GOAL

To understand the pathophysiology underlying common hematologic disorders and to develop a problem-oriented approach to the diagnosis and management of blood disorders.

LEARNING OBJECTIVES

By the end of the rotation the student should be able to: Formulate an accurate differential diagnosis for most common hematologic problems Interpret peripheral blood smears Have an understanding of disorders of hemostasis and thrombosis Utilize hematology laboratory studies in a rational manner A two week block will be enough to acquire basic skills. Students seeking in-depth study should arrange a four to six week block.

SCHEDULE OF ACTIVITIES

Students will be expected to participate in daily in-patient rounds and will see outpatients with a preceptor five days a week. Bone marrow conferences with the hematopathologist are held twice a week and multi-disciplinary comprehensive Hemophilia Clinics once a month. An effort will be made to expose the student to as many different types of common hematologic problems as possible.

DIDACTIC ACTIVITIES

Teaching occurs for the most part in the context of inpatient and outpatient cases seen during the clerkship. Students will be expected to present cases to the preceptor and to other students/residents on the service. The preceptor will help direct the student to the relevant literature. Students are expected to attend a weekly City-Wide Hematology Clinical Conference.

REQUIRED READING

Each student will receive a manual that outlines practical approaches to common hematologic problems as well as up to date references for further reading.

STUDENT EVALUATIONS

To achieve a grade of satisfactory, students must participate in the majority of the unit's activities outlined above and demonstrate to the preceptor that they have achieved the learning objectives.

Medical Oncology (MED655)

Course Director: Alissa Huston

Contact Person: Kristin Galvin-Burwick 275-4797 kristin_galvinburwick@urmc.rochester.edu

Location: Strong Memorial Hospital

Block Length:

Dates Offered: 07/04/2011 - 06/17/2012

Students: 1 per Block

Prerequisites:

GOAL

Students will become familiar with common cancers. Students will be encouraged to consider a career in medical oncology and to develop an interest in cancer research.

LEARNING OBJECTIVES

At the end of the elective the student will be able to:

List the signs and symptoms of common cancers and describe their diagnostic evaluation and natural history.

Discuss the principles of cancer therapy including chemo-, hormonal-, and biologic-therapy.

Explain the management of common complications of therapy including myelosuppression, infection, hemorrhage, nausea, vomiting, and renal and cardiac failure.

Explain the treatment of oncologic emergencies; such as febrile neutropenia, spinal cord compression, and metabolic abnormalities such as hypercalcemia.

Discuss the management of cancer-related pain and the use of narcotic analgesics and adjunctive medications.

Discuss the long term complications of cancer and its therapy.

Discuss the role of clinical trials in a clinical cancer setting.

Demonstrate history and physical taking skills in the evaluation of patients with cancer

SCHEDULE OF ACTIVITIES

This elective is four weeks in length. The student will begin work at 8 a.m. daily under the supervision of attending physician on the medical oncology consult service. Students will participate in daily rounds and will attend outpatient medical oncology clinics two days per week as assigned.

DIDACTIC ACTIVITIES

Students will attend the breast oncology pathology conference at 7:30 a.m. on Mondays, the breast oncology didactic conference at noon on Wednesdays, the medical oncology pathology conference on alternating Thursdays at noon, Wilmot Cancer Center Grand Rounds on Fridays at noon, and other oncology conferences as directed by Dr. Huston.

REQUIRED READING

Selected articles as assigned by Dr. Huston at the outset of the elective rotation.

STUDENT EVALUATIONS

To receive a passing grade, students must attend all clinical and didactic activities. They will also make a short presentation to the oncology attending physician and team. Students must also receive a satisfactory evaluation from the course director and return their course evaluations prior to grades being posted.

Individualized Hematology/Medical Oncology (MED656)

Course Director: Alissa Huston

Contact Person: Kristin Galvin-Burwick 275-4797 kristin_galvinburwick@urmc.rochester.edu

Location: Strong Memorial Hospital

Block Length:

Dates Offered: 07/04/2011 - 06/17/2012

Students: 1 per Block

Prerequisites:

GOAL

This elective is intended for fourth year medical students who have already taken MED 653 or MED 655. It offers the chance for the development of an in-depth learning experience for students who wish to focus their learning on a particular hematologic or oncologic disease family.

LEARNING OBJECTIVES

To be discussed with the course director upon registration.

SCHEDULE OF ACTIVITIES

To be discussed with the course director upon registration.

DIDACTIC ACTIVITIES

To be discussed with the course director upon registration.

REQUIRED READING

To be discussed with the course director upon registration.

STUDENT EVALUATIONS

To be discussed with the course director upon registration.

Clinical Immunology (MED658)

Course Director:	Jennifer Anolik
Contact Person:	Janet DiMora 3-4670
Location:	SMH and Affiliated Hospitals
Block Length:	2 - 4 weeks
Dates Offered:	07/04/2011 - 07/08/2012
Students:	1 per Block
Prerequisites:	

GOAL

To provide a solid foundation in Allergy/Immunology and Rheumatology which will allow the student to approach the patient with allergic or musculoskeletal complaints in an organized and efficient manner.

LEARNING OBJECTIVES

By the end of the rotation the student should will:-Develop an understanding of the diagnostic criteria for rheumatoid arthritis, osteoarthritis, crystal induced arthritis, systemic lupus erythematosus, seronegative spondyloarthropathies, fibromyalgia, septic arthritis, allergic rhinitis and asthma.-Develop an understanding of synovial fluid analysis and its use in diagnosis and management of acute and chronic arthritis.

-Develop skills in interpreting bone radiographs and understand the radiographic features of rheumatoid arthritis, osteoarthritis, gout, psuedogout, and seronegative spondyloarthropathies.-Develop an understanding of the use of immunologic laboratory studies in the diagnosis and management of patients with autoimmune diseases.-Develop an understanding of the indications for and potential side effects of commonly used medications such as NSAIDs, hydroxychloroquine, sulfasalazine, methotrexate, azathioprine, cyclophosphamide, etanercept, infliximab, leflunomide, corticosteroids, colchicine, probenecid, and allopurinol.-Develop an understanding of the role of physical and occupational therapy in the treatment of musculoskeletal problems.-Develop an understanding of the indications, contra-indications, and techniques of arthrocentesis.-Develop an understanding of allergic diseases, asthma and the differential diagnosis of wheezing, nasal congestion and rhinorrhea.-Develop experience in taking a complete environmental history and in advising patients regarding techniques to reduce exposure to house dust mite, mold, and animal antigens.

SCHEDULE OF ACTIVITIES

Students will be assigned to an ambulatory office practice for up to 4 half days per week. Students will also be encouraged to evaluate selected inpatients who are being followed by the inpatient service. Students will attend the Division conferences.

DIDACTIC ACTIVITIES

Students are required to attend all AIR conferences which include Thursday morning Clinical Conferences, Case Conundrum, Radiology Conference & Journal Club.

REQUIRED READING

Students are required to complete a Blackboard self-study course, AIR.MS .2011-2012.

STUDENT EVALUATIONS

The standard Medical School Evaluation will be used

Elective in Infectious Diseases (MED660)

Course Director: Edward Walsh M.D.

Contact Person: Edna Fernandez, 922-4003, edna.fernandez@rochestergeneral.org

Location: Rochester General Hospital

Block Length: 3 - 4 weeks

Dates Offered: -

Students: 1 per Block

Prerequisites: Adult Inpatient Clerkship (AIC300)

GOAL

Students should develop greater familiarity with infectious agents and their clinical presentation, host-parasite relationships, use of the diagnostic microbiology laboratory and antibiotic chemotherapy.

LEARNING OBJECTIVES

By the end of the rotation the student should be able to: ?Recognize common bedside and laboratory findings that point to a possible infectious disease etiology of disease in the hospitalized patient. ?Order and properly interpret diagnostic laboratory tests used in the evaluation of patients for whom an Infectious Disease Service consultation is requested. These include a variety of conventional viral, bacterial, and fungal culture and serologic methods. ?Make rational drug choices among families of antimicrobial and antiviral agents for the treatment of infectious diseases and to recognize potential allergic and toxic side effects and their management. ?Discuss the mechanisms of host defense against infectious agents in normal and immunocompromised patients. ?Discuss common problems in hospital epidemiology and infection control.

SCHEDULE OF ACTIVITIES

DIDACTIC ACTIVITIES

REQUIRED READING

STUDENT EVALUATIONS

HIV Outpatient Care (MED662)

Course Director:	Peter Mariuz
Contact Person:	Joyce Westcott 275 7644
Location:	Strong Memorial Hospital
Block Length:	2 weeks
Dates Offered:	07/04/2011 - 07/08/2012
Students:	1 per Block
Prerequisites:	Adult Inpatient Clerkship (AIC300)

GOAL

To develop an understanding of HIV ambulatory care, the diagnostic challenges of HIV related complications, the psycho-social impact of HIV disease, and relevant issues around HIV prevention.

LEARNING OBJECTIVES

By the end of the rotation the student should be able to:

Describe the current recommendations for prophylaxis of opportunistic infections.

List the different options for treatment of pulmonary pneumocystosis.

List currently approved antiretrovirals, and discuss their uses and side effects. Discuss use of antiretrovirals for prevention of vertical transmission of HIV. Describe the initial work-up of HIV-infected individuals, including guidelines for interpretation of tuberculin skin tests.

Discuss strategies to improve the patient's adherence to medications.

Identify patients for whom psychiatric consultation is indicated.

SCHEDULE OF ACTIVITIES

null

DIDACTIC ACTIVITIES

null

REQUIRED READING

null

STUDENT EVALUATIONS

null

Infectious Diseases Consultation (MED663)

Course Director: Mark Shelly M.D.

Contact Person: Julie Hutchinson - 3585/341-6776 - Julie_Hutchinson@urmc.rochester.edu

Location: Highland Hospital

Block Length: 2 or more weeks

Dates Offered: -

Students: 1 per Block

Prerequisites: Adult Inpatient Clerkship (AIC300)

GOAL

Beginning understanding of the approach and appropriate therapeutic choices in common hospital infections.

Elective available only by individual appointment. Please contact the Highland Hospital Infectious Disease Department at 341-6821 for availability.

LEARNING OBJECTIVES

Perform targeted consults evaluations of fevers and infections in hospital patients. Understand the empiric choices made for identified infection syndromes. Increase fluency in microbiology and antibiotics.

SCHEDULE OF ACTIVITIES

Round on patients 6 days a week, with one weekend off out of two. See consults and review patients with the attending on service. No call.

DIDACTIC ACTIVITIES

IC Clinical Conference 11:30-13:00 Thursdays, or Citywide ID on last Thursday of the month.

REQUIRED READING

STUDENT EVALUATIONS

Students will be evaluated based on one-on-one interaction with the precepting attending(s).

Infectious Diseases (MED665)

Course Director:	Paul Graman M.D.
Contact Person:	Veronica Albert-Roberts 275-5871, veronica_albert-roberts@urmc.rochester.edu
Location:	Strong Memorial Hospital
Block Length:	2- 4 weeks
Dates Offered:	07/04/2011 - 06/24/2012
Students:	2 per Block
Prerequisites:	Medicine Clerkship (MED300)

GOAL

To understand the principles of diagnosis and treatment of common infectious diseases, including interpretation of culture and susceptibility tests, and use of antimicrobial agents.

LEARNING OBJECTIVES

.....

....., bacteremia, UTI, and tuberculosis.

Distinguish between infection, colonization, and contamination.

Interpret results of cultures and gram stains from various sites, including sputum, urine, blood, CSF, and wounds.

Interpret results of antibiotic susceptibility testing, and apply these results in the selection of appropriate antibiotic therapy.

Define minimum inhibitory concentration (MIC) and minimum bactericidal concentration (MBC).

Discuss pharmacology, toxicity and spectrum of commonly used antibiotics.

Evaluate a patient with fever of uncertain etiology.

SCHEDULE OF ACTIVITIES

Students work closely with Fellows, Medical Residents, and Attendings on the Infectious Disease in-patient service at SMH. Students will be assigned new patient consultations for work-up in conjunction with a Fellow or Resident; students will write up, present and discuss these cases on ID Attending Rounds.

DIDACTIC ACTIVITIES

Students are expected to read about and discuss patient cases with their preceptors. Students should attend ID Clinical Conference (Thursdays 11:30-1:00) and ID City-Wide Conference (last Thursday of month 8:00-9:30). They are welcome to attend other conferences including AIDS Conference (Mondays 12:00-1:00), ID Journal Club (Tuesdays 12:00-1:00), ID Research Conference (most Tuesdays 9:15-10:15), and ID Seminar Series (Fridays 8:00-9:00). Students may be assigned to present one of their patient cases at ID Clinical Conference.

REQUIRED READING

A Practical Approach to Infectious Diseases, RE Reese and RF Betts, 5th ed., 2003 (selected chapters); Principles and Practice of Infectious Diseases, Mandell, Bennett, and Dolin, 7th ed., 2010 (selected chapters).

STUDENT EVALUATIONS

In order to receive a grade of Pass, students must: 1) demonstrate an appropriate knowledge of the learning objectives, 2) actively participate in rounds, patient care, and conferences, and 3) complete patient work-ups at a level commensurate with their experience.

Clinical Nephrology (MED670)

Course Director:	Rebeca Monk
Contact Person:	Marilyn Miran 275-1554 marilyn_miran@urmc.rochester.edu
Location:	Strong Memorial Hospital
Block Length:	3 - 4 weeks- ONLY 4TH YEAR STUDENTS ARE ACCEPTED
Dates Offered:	07/11/2011 - 07/01/2012
Students:	2 per Block
Prerequisites:	Medicine Clerkship (MED300) Third Year Comprehensive Assessment (TYC300)

GOAL

An elective experience designed for 4th year Medical students to gain experience in clinical nephrology, the student is expected to achieve competence in the diagnosis and management of common problems in nephrology including acute and chronic kidney disease as well as acid-base and electrolyte disturbances

LEARNING OBJECTIVES

By the end of the rotation the student should be able to:-Present data on new patients to the team and generate a consult note on new patients.-Provide excellent daily follow-up on several patients on the team.-Generate an appropriate differential diagnosis for patients with acute kidney disease.-Use appropriate diagnostic tools to differentiate between pre-renal and intrinsic renal disease-Do a urinalysis and become familiar with common findings seen.-Diagnose and manage common electrolyte and acid-base disorders-Understand the rationale for prescribing standard medications used in patients with chronic kidney disease-Become familiar with the work-up of patients with proteinuria and hematuria.-Become familiar with common disorders of calcium and phosphorus balance, and nephrolithiasis

SCHEDULE OF ACTIVITIES

Students are assigned to SMH and work on the inpatient units with the acute consult team which consists of an attending, a Nephrology fellow and occasionally internal medicine residents. Essential outpatient experience is obtained in the Tuesday afternoon and Friday morning general nephrology clinics.

DIDACTIC ACTIVITIES

There is a monthly clinical conference presented by a fellow, renal pathology conference twice/month, weekly journal club, a weekly sign-out conference in which all of the complex and interesting inpatients on the service are discussed. Other seminars of interest are the weekly journal club, biweekly physiology conference and biopsy conference which students are welcome to attend.

REQUIRED READING

Case relevant material

STUDENT EVALUATIONS

A narrative evaluation is completed with comments regarding the student's knowledge, clinical skills, problem-solving and clinical reasoning abilities, communication skills and personal and professional qualities, including dependability, motivation and interpersonal relationships during the rotation.

Elective in Nephrology (MED671)

Course Director:	Marvin Grieff
Contact Person:	Patricia Read, 922-4707, patricia.read@rochestergeneral.org
Location:	Rochester General Hospital
Block Length:	2 - 4 weeks
Dates Offered:	07/04/2011 - 07/01/2012
Students:	2 per Block
Prerequisites:	Medicine Clerkship (MED300) Adult Inpatient Clerkship (AIC300)

GOAL

To understand the basic concepts of renal diseases, acid-base and fluid balance.

LEARNING OBJECTIVES

By the end of the rotation the student should be able to: Identify patients for whose management a nephrology consultation is indicated and learn how to perform the consultation. Explain the difference between acute and chronic renal disease, and the general correlation between different patterns of urinalysis sediment findings and certain disease states. Define the different types of proteinuria, and define the mechanism of nephrotic syndrome. Learn the major causes of acute renal failure and to distinguish between prerenal disease, acute tubular necrosis and obstructive uropathy. Learn the use of urinary sodium concentration and the fractional excretion of sodium to distinguish between prerenal states and acute tubular necrosis as a cause of acute renal failure. Know the major glomerular syndromes (nephritic and nephrotic) and their clinical presentation. Discuss the mechanisms responsible for immune mediated glomerular injury, vasculitis, and how they affect the structure and function of the kidney. Discuss the progression of chronic renal failure and the adaptive responses to loss of functioning nephrons. Discuss the mechanisms by which uremic symptoms are produced, the role of parathyroid hormone and Vitamin D in chronic renal insufficiency and erythropoietin in Renal anemia. Describe the indications for dialysis both in acute and chronic renal failure. Discuss the mechanisms of sodium retention in edema states and how to use diuretics in the treatment of sodium retention. Discuss the factors which determine the plasma sodium concentration, and the mechanism and treatment of hypo and hyponatremia. Discuss the factors involved in the regulation of potassium balance, the major causes of hyper and hypokalemia and the physiological principles of therapy for hyperkalemia. Explain the basic principles of acid base physiology, the characteristics of different acid base disorders and the rational treatment of metabolic acidosis and metabolic alkalosis.

SCHEDULE OF ACTIVITIES

The students assigned to the Rochester General Hospital Nephrology Unit will work with the consulting nephrologists from 8:30 a.m. to 5:30 p.m. on weekdays. The students will be assigned new patient consultations, usually one per day and will follow these patients during the elective. The students will also see new patients in the outpatient nephrology clinic, and on follow-up visits. The student will perform the initial evaluation under the direct supervision of the consulting nephrologists. Urinalysis will be performed by the student under the guidance of a nephrologist on each new consultation.

DIDACTIC ACTIVITIES

Students will be assigned a preceptor (different from the consulting nephrologists). This preceptor will discuss the learning objectives with the students. The student will participate in all the clinical conferences of the nephrology unit. Each student will be assigned a specific nephrological problem, based on material seen on the wards. This will be researched and presented to the nephrology group at the clinical conference. In addition, the students are expected to attend resident conferences and the RGH medical grand rounds each week.

REQUIRED READING

Renal Pathophysiology - the Essentials, by Burton D. Rose and Helmut G. Rennke, 1994. Nephrology Secrets by Donald E. Hricik, 1999

STUDENT EVALUATIONS

To receive a grade of pass, students must perform adequate, work-ups to the preceptor, participate in the clinical conference and must receive a satisfactory clinical evaluation from the consulting nephrologists.

Elective in Nephrology (MED673)

Course Director:**Contact Person:** Christine Carrier-Gray 341-6895 Christine_Carrier-Gray@urmc.rochester.edu**Location:** Highland Hospital**Block Length:** 4 - 6 weeks**Dates Offered:** -**Students:** 1 per Block**Prerequisites:** Medicine Clerkship (MED300)
Adult Inpatient Clerkship (AIC300)

GOAL

To understand the principles of evaluation and management of acid base, fluid electrolyte, and nephrologic problems. [Must get course director's approval prior to scheduling](#)

LEARNING OBJECTIVES

By the end of the rotation the student should be able to: 1. Perform a urinalysis, identify chemical and microscopic components accurately, and apply this finding to the clinical setting in formulating a differential diagnosis. 2. Interpret arterial blood gases, plasma and urine anion gap, and evaluate and formulate a specific treatment plan for simple and mixed acid base disturbances. 3. Evaluate and formulate a specific treatment plan for fluid and electrolyte disturbances utilizing clinical and blood and chemistry results (osmolality, fractional excretion). 4. Evaluate timed urinary collections for creatinine and protein. 5. Know the appropriate workup and differential diagnosis of clinical problems including hematuria, proteinuria, and renal failure. 6. Discuss the management of acute renal failure and chronic renal failure. ?Identify the features of glomerulonephritis and list the main histologic types and primary and secondary etiologies for these. ?Describe the effects of certain drugs (antibiotics, non-steroidal anti-inflammatory drugs) on the kidney. ?Identify patients/situations that require consultation with a nephrologist? Describe the principles of dialysis and the modalities available to treat patients with end-stage renal disease. ?Evaluate patients presenting with nephrolithiasis and describe reasons to consider workup to rule out secondary hypertension. ?Discuss primary and secondary hypertension and describe reasons for and plans for workup of secondary causes.

SCHEDULE OF ACTIVITIES

All activities are at Highland Hospital where students will work under the guidance and supervision of the four faculty nephrologists. They will participate in inpatient hospital rounds and evaluate inpatient and outpatient consults.

DIDACTIC ACTIVITIES

Students will participate in nephrology subspecialty conferences and journal clubs. They will be expected to independently evaluate clinical problems and formulate and discuss differential diagnosis, workup and treatment plan with the attending nephrologist.

REQUIRED READING

1. Pathophysiology of Renal Disease, 2nd edition. B.D. Rose: Chapters 1-6, and 10. 2. Clinical Use of the Anion Gap?, Medicine 56 (1):38-54 (Emmett and Narins). 3. Clinical Physiology of Acid-Base and Electrolyte Disorder, 4th Edition B.D. Rose: Chapters 10-11, 18-28. *All resources can be borrowed from the Nephrology Department library at HH.

STUDENT EVALUATIONS

To receive a grade of pass, the student must participate in daily rounds taking an active role in patient evaluation and care. They must turn in a documented log sheet that learning objectives were met and they must complete and pass the written nephrology exam given at the end of the course. The latter will be reviewed with the student to identify weaknesses and clarify understandings.

Clinical Oncology/Hematology (MED680)

Course Director: Stephen Ignaczak

Contact Person:

Location: Clifton Springs Hospital and Clinic

Block Length: 2 - 4 weeks

Dates Offered: -

Students: 1 per Block

Prerequisites:

GOAL

Students will obtain a general knowledge of the medical care of cancer patients and benign hematology.

LEARNING OBJECTIVES

General knowledge of Hem/Onc disease and treatment

Supervised contact with a wide variety of patients

Focused review of topic chosen by students

SCHEDULE OF ACTIVITIES

Daily outpatient office practice

DIDACTIC ACTIVITIES

Review in detail each case seen by student covering history and physical skills as well as patient management skills.

REQUIRED READING

Materials appropriate to the patients seen. These will be supplied by supervising physicians.

STUDENT EVALUATIONS

Based on interest and participation in elective.

Clinical Oncology (MED684)

Course Director:	Pradyumna Phatak M.D.
Contact Person:	Sherri Hill at 922-5387 email: sherri.hill@rochestergeneral.org
Location:	Rochester General Hospital
Block Length:	2 - 6 weeks
Dates Offered:	07/04/2011 - 06/10/2012
Students:	1 per Block
Prerequisites:	Medicine Clerkship (MED300)

GOAL

The student should be able to understand the database necessary to be gathered and the decision making criteria to consider in evaluation and treatment of patients with cancer.

LEARNING OBJECTIVES

By the end of the rotation the student should be able to: Perform a history with specific attention to areas concerning diagnosis (family history, environmental exposures, history of present illness) and physical examination directed to skin, lymph nodes, breast, liver, spleen, and tumor measurements. Become aware of the major oncologic emergencies such as spinal cord compression, tumor lysis syndrome, hypercalcemia and understand the principles of managing these conditions. Interact with other members of the multimodality oncologic team: radiation and surgical oncology, nursing, social work. Assess performance status and estimate the short and long-term toxicities of chemotherapy regimens.

SCHEDULE OF ACTIVITIES

Student will participate in outpatient office evaluation of patients with a wide range of malignant diseases. The student will evaluate out-patients and inpatients under the direct supervision of a faculty attending.

DIDACTIC ACTIVITIES

There are three scheduled conferences per week at which the student will learn about radiographic and pathologic evaluation of patients. There are also case-based didactic sessions after clinics.

REQUIRED READING

Articles and Texts recommended during elective.

STUDENT EVALUATIONS

The student will be evaluated by direct observation of the student's skills at taking a history, physical and problem solving.

Clinical Oncology/Hematology (MED685)

Course Director: Timothy Woodlock M.D.

Contact Person: Lilly Cornier, Course Coordinator, 368-3621 or Dr. T. Woodlock (email) twoodlock@unityhealth.

Location: St. Mary's Hospital

Block Length: 2 - 4 weeks

Dates Offered: 07/04/2011 - 06/10/2012

Students: 1 per Block

Prerequisites:

GOAL

Students will obtain a general knowledge of the medical care of cancer patients and patients with bleeding and clotting illnesses. We correlate basic science and psycho-social concepts with clinical problems and solutions. Much time is available for one-on-one contact with patients to grasp deeply the nature of their illness and treatment. Students also present a 20-minute seminar to our unit on a heme/onc topic of their choice with faculty supervision and aid.

LEARNING OBJECTIVES

1. General knowledge of heme-onc diseases and treatments.
2. Supervised in-depth contact with a wide variety of patients.
3. Focused review of topic chosen by student.
4. Availability to participate in procedures if desired by student.

SCHEDULE OF ACTIVITIES

1. Daily out-patient clinics - St. Mary's and Park Ridge.
2. Unity Dept. of Medicine grand rounds - Tues 8 a.m.
3. Tumor Conference- Wed 7:30 a.m.
4. Student - presented seminar.
5. Unity resident conferences as time allows.

DIDACTIC ACTIVITIES

(see schedule of activities)

The attending physicians in addition review in detail each case seen by the student, covering history and physical skills as well as patient management issues.

REQUIRED READING

Reading materials appropriate to patients seen will be supplied by supervising physicians.

STUDENT EVALUATIONS

Based on interest and participation in elective.

Multidisciplinary Oncology in Radiation Oncology (MED686)

Course Director: George Uschold M.D.

Contact Person: Erin Hodge, 275-5575, Erin_Hodge@urmc.rochester.edu

Location: Strong Memorial Hospital

Block Length: 2 - 4 weeks

Dates Offered: 07/11/2011 - 06/24/2012

Students: 1 per Block

Prerequisites:

GOAL

To provide students with an understanding of cancer management in a multidisciplinary setting with an emphasis on clinical radiation oncology.

LEARNING OBJECTIVES

By the end of the rotation the student should be able to: * Discuss the natural history of malignant disease * Describe standard work-up and diagnostic tests used in the evaluation of new patients and in follow-up clinic. * Discuss staging of the disease and its relationship to development of a treatment plan. * Explain indications for delivering radiation therapy. * Discuss the process leading up to and including formulation of a treatment plan. * Describe integration of other standard therapeutic modalities (surgery and chemotherapy) in cancer management. * Identify various side effects associated with radiation therapy treatments and explain management techniques.

SCHEDULE OF ACTIVITIES

Students are assigned to a radiation oncologist on a rotating basis at SMH from 8:00am - 5:00pm. Students will follow patients from consult through treatment with emphasis on all aspects of patient care, particularly on diagnostic evaluation of new patients leading to accurate staging of disease and formulation of a treatment plan, often multidisciplinary in character.

DIDACTIC ACTIVITIES

- New Patient Conference - 1 hour twice per week- Treatment Planning Rounds - 1 hour per week

REQUIRED READING

Clinical Oncology, 8 ed. By Philip Rubin, M.D. - major reference text.

STUDENT EVALUATIONS

To receive a grade of Pass, students must turn in all assigned case studies, attend new patient conferences and treatment planning rounds and receive a satisfactory clinical evaluation from their preceptors.

Inpatient Pulmonary Medicine (MED692)

Course Director:	David Trawick
Contact Person:	Ann Bauman 275-4861 ann_bauman@urmc.rochester.edu
Location:	Strong Memorial Hospital
Block Length:	2 - 4 weeks
Dates Offered:	07/11/2011 - 05/13/2012
Students:	1 per Block
Prerequisites:	

GOAL

At the end of this rotation, the student should be able to articulate the initial diagnostic approach to and management of patients with common respiratory problems such as asthma, COPD, interstitial lung disease and lung cancer. Other conditions likely to be encountered include obstructive sleep apnea, pulmonary hypertension, and unexplained dyspnea or hypoxemia. The student should also be familiar with basic pathophysiologic mechanisms of hypoxemia including the causes of a widened A-a gradient, and also principles of alveolar ventilation. Basic interpretation of the normal and abnormal chest X-ray will also be expected.

LEARNING OBJECTIVES

The student will accompany the inpatient Pulmonary Consult Team at Strong Memorial Hospital. The Consult Team consists of an Attending and Fellow that see 3-5 new consults per day with a variety of pulmonary diagnoses. An Internal Medicine Resident is also usually a part of the team during elective time. Consults vary in their acuity from acute respiratory failure to lung cancer, and more chronic problems including cough and unexplained dyspnea. The student will initially accompany the team on rounds and observe the process of consultation from initial evaluation to write-up of recommendations. By the end of the rotation the student will be expected to see new consults independently and initiate his/her own diagnostic plan. The student will be expected to provide a 5-10 minute overview of evidenced based management of one of his or her cases twice per week on rounds (total of four presentations). The student will be expected to attend regularly scheduled conferences (e.g. City Wide Chest Conference on Wednesday morning, and Pulmonary Clinic Conference on Fridays at Noon), and will also have the opportunity to present an interesting case at these conferences. The student will also have the chance to observe fiberoptic bronchoscopies (e.g. bronchoalveolar lavage or transbronchial biopsies) since the Pulmonary Team also performs this procedure on a regular basis. There may be limited possibilities to participate in outpatient Pulmonary clinic as well.

SCHEDULE OF ACTIVITIES

Daily rounds five days per week on the pulmonary inpatient consults service. Bronchoscopies scheduled throughout the day beginning at 8 a.m. Depending on volume of service, rounds can conclude after 6 p.m.

DIDACTIC ACTIVITIES

Formal didactic sessions include City Wide Chest Conference on Wednesday morning, and Pulmonary Clinic Conference Fridays at noon. Informal teaching sessions as part of rounds.

REQUIRED READING

STUDENT EVALUATIONS

Student's performance will be graded by: (i) their participation in rounds and ability to complete a coherent consult write-up on a timely basis; (ii) direct observation of their clinical skills including history taking and physical exam; and (iii) their presentations on rounds or at conferences.

Pulmonary Medicine (MED693)

Course Director:	Gary Wahl
Contact Person:	Susan Sutton, 922-4409, susan.sutton@rochestergeneral.org
Location:	Rochester General Hospital
Block Length:	2 - 6 weeks
Dates Offered:	-
Students:	1 per Block
Prerequisites:	Medicine Clerkship (MED300)

GOAL

The student will learn a systematic approach to the clinical evaluation of lung disease. If the student wishes, he or she may tailor their experience to emphasize either inpatients (including MICU patients), or outpatients.

LEARNING OBJECTIVES

By the end of the rotation the student should be able to: Evaluate common symptoms associated with lung disease such as dyspnea, cough and hemoptysis. Diagnose and treat common lung disorders, including COPD, asthma, pneumonia, and lung cancer. Interpret simple, commonly used pulmonary function tests. Better understand the role of bronchoscopy, chest x-ray, and lung biopsy in the evaluation of lung disease. Present a concise, focused presentation of a patient with respiratory symptoms or disease.

SCHEDULE OF ACTIVITIES

Daily rounds, conferences, and patient evaluations begin at 8:30 am and last until 5:00 pm. Students will interview and examine 3-5 new patients a week and make a presentation of the patient to one of the staff attendings. On most days, the students can expect to round and work closely with one of the staff attendings for 3-4 hours.

DIDACTIC ACTIVITIES

1. Daily interpretation of pulmonary function tests
2. Weekly x-ray conference
3. Weekly pathology conference
4. Monday, Wednesday, Friday ICU patient conference
5. Weekly city-wide case conference
6. Weekly review conference of pertinent journal articles

REQUIRED READING

Respiratory Disease section of the General Medical text. Pertinent review articles related to patients evaluated.

STUDENT EVALUATIONS

Students will be evaluated based on their close interaction with faculty. Particular attention will be paid to their ability to organize, analyze, and present clinical information. The importance of good case presentation skills will be emphasized.

Sleep Medicine Elective (MED695)

Course Director:	Joseph Modrak M.D.
Contact Person:	Joe Modrak, M.D.; 341-7575 joseph_modrak@urmc.rochester.edu
Location:	Private Office
Block Length:	1 - 2 weeks (4 weeks by arrangement)
Dates Offered:	-
Students:	1 per Block
Prerequisites:	Pediatrics Clerkship (PED300) Medicine Clerkship (MED300) Third Year Comprehensive Assessment (TYC300)

GOAL

To develop an understanding of the various sleep disorders and their treatment.

LEARNING OBJECTIVES

By the end of the rotation, the student should be able to:

- Take a comprehensive sleep history.
- Identify patients who likely suffer from a sleep disorder.
- Become cognizant of both the medical and societal cost of various sleep disorders.
- Be able to manage and counsel a patient suffering from obstructive sleep apnea.
- Be able to use behavioral therapy in treating patients suffering from insomnia.
- Be able to describe the normal stages of sleep as well as the physiologic changes that occur during sleep.
- Describe the underlying physiology of obstructive sleep apnea.

SCHEDULE OF ACTIVITIES

Students will rotate at the Strong Sleep Disorders Center of Rochester during their two-week elective. During this time, they will perform the initial evaluation on patients referred to the center. Many of these patients will suffer from obstructive sleep apnea, however, there is also exposure to patients with other sleep abnormalities such as narcolepsy, restless legs syndrome/periodic limb movements during sleep, and REM behavior disorder. Medical students will also rotate in the insomnia clinic, where they will be exposed to behavioral therapy in the treatment of chronic insomnia.

DIDACTIC ACTIVITIES

Students are expected to read about and discuss the learning objectives with their preceptor during the clinical day. The consults that the medical students are involved in will be discussed on a one-to-one basis and teaching points will be made about each case.

REQUIRED READING

·Current Concepts in Sleep Medicine by Peter Huari
·Principles and practices of Medicine by Kryger, Roth and Dement(selected chapters)
·Various articles from recent literature about sleep disorders
·These booklets will be provided to you at the beginning of your rotation.

STUDENT EVALUATIONS

To receive a grade of pass, students need to actively participate in the assessment and care of patients at the Sleep Disorders Center. They must also demonstrate an understanding of the learning objectives.

Physical Diagnosis (MED696)

Course Director: Bilal Ahmed

Contact Person: Bilal Ahmed, MD

Location: Highland Hospital

Block Length: 2-4 weeks

Dates Offered: -

Students: 1 per Block

Prerequisites:

GOAL

LEARNING OBJECTIVES

SCHEDULE OF ACTIVITIES

DIDACTIC ACTIVITIES

REQUIRED READING

STUDENT EVALUATIONS

Camp EAGR - Camp for Children with Epilepsy (MED697)

Course Director: Robert Gross M.D.

Contact Person: 585-442-4430 Ext. 2702, Email: M_Radell@epilepsy-uny.org

Location: School of Medicine

Block Length: 1 wk

Dates Offered: -

Students: 4 per Block

Prerequisites:

GOAL

To gain exposure and a better understanding of the medical management and the psychosocial impact of epilepsy in children and adolescents in a camp setting. <http://www.epilepsyfoundation.org/local/rochester/campeagr.cfm>

LEARNING OBJECTIVES

- Understand the medical management of epilepsy.
- Understand the potential limitations in activities of persons with seizures.
- Understand the basics of first aid for seizures.
- Understand common psychosocial issues for children and adolescents with seizures.

SCHEDULE OF ACTIVITIES

Specific details will be provided at the camp. Training will take place the day before camp begins and from this point on the students will be required stay overnight at camp for the duration of the elective. Students' time will consist of performing duties as a camp counselor and assisting the camp medical staff with medication distribution.

DIDACTIC ACTIVITIES

Informal, based on interactions with Camp medical and lay staff.

REQUIRED READING

Will be distributed at the camp

STUDENT EVALUATIONS

Written, if desired.

Community and Preventive Medicine (MED698)

Course Director:

Contact Person:

Location: School of Medicine

Block Length:

Dates Offered: -

Students: 0 per Block

Prerequisites:

GOAL

LEARNING OBJECTIVES

SCHEDULE OF ACTIVITIES

DIDACTIC ACTIVITIES

REQUIRED READING

STUDENT EVALUATIONS

Medical Entrepreneurship (MED699)

Course Director: Earl Ray Dorsey

Contact Person: Dr. Ray Dorsey @ ray.dorsey@ctcc.rochester.edu

Location: Not Available

Block Length: 1-4 weeks

Dates Offered: -

Students: 18 per Block

Prerequisites:

GOAL

To understand how new ideas in medicine and health care can be transformed into business or practice; educate medical technology innovators how to increase their likelihood of success in identifying important clinical needs, inventing new medical practices, devices and instruments, and transforming these advances into businesses that improve health

LEARNING OBJECTIVES

To develop ideas for transforming medicine or health care

To understand how those ideas can be translated into a business or practice

To create a business plan around an innovative idea with a team of business school and medical students

To present that idea and plan to third parties (e.g., venture capitalists, health care leaders) for consideration

SCHEDULE OF ACTIVITIES

The class is designed around innovation teams which should have differing backgrounds to foster the innovation process; therefore, the course will be comprised of students from the medical school and Simon business school. It will be taught by faculty from both schools as well as outside speakers. The first two weeks will be didactics presenting decision frameworks and case studies aimed at developing innovative and disruptive technologies, discussing how those innovations are brought to the market, and the development of a business plan supporting the implementation of these ideas. As part of the course, students from both schools will form mixed teams to develop their own ideas for transforming health care or medicine in the form of a business plan. Those plans will then be presented to an outside panel of 'Course Fellows' including venture capitalists, health care leaders, and entrepreneurs for evaluation. Ideally, some of these ideas will be developed further, and eventually adopted.

DIDACTIC ACTIVITIES

The first two weeks will be didactics and case studies enabling innovative teams to help develop their own transformative ideas. During the latter two weeks, students will together in teams developing their ideas into a business plan.

REQUIRED READING

Reading materials for the course will be presented on the first day and will be drawn from diverse sources, including case studies and sample business plans.

STUDENT EVALUATIONS

To receive a passing grade for this elective, students, working as team with students from multiple disciplines, must develop an idea for improving medicine or health care by developing a business plan suitable for external review.

Clinical Medical Ethics (MHU602)

Course Director: Jane Greenlaw J.D.

Contact Person: Andrea Ehmann, 585-275-5800, andrea_ehmann@urmc.rochester.edu

Location: Strong Memorial Hospital

Block Length: 2 weeks

Dates Offered: 07/04/2011 - 06/10/2012

Students: 1 per Block

Prerequisites:

GOAL

To learn the aspects of clinical ethics that are essential to good medical and surgical practice.

LEARNING OBJECTIVES

Capabilities the student is expected to acquire in this elective1. Identify situations/ cases in which ethics consultation is appropriate; identify the procedure for requesting an ethics consultation; describe who can request an ethics consultation2. Demonstrate the process of reviewing the medical record in an ethics consultation; identify the relevant components of the medical record for an ethics consultation3. Identify the relevant parties to be interviewed for the ethics consultation4. Demonstrate the process of the ethics interview with patient, family, members of the care team, and others5. Identify ethical issues presented in clinical cases6. Recognize the major methodologies for analysis of ethical problems in clinical practice7. Utilize the major methodologies to analyze clinical cases8. Distinguish ethical, legal, and clinical issues9. Analyze the special problems that exist in cases involving difficult and/or non-compliant patients or families10. Demonstrate familiarity with the relevant bioethics literature, including major journals and books applying ethics to the field of interest of the student11. Prepare written summaries of ethical issues in clinical cases, including analyses, recommendations, and references to the literature12. Identify and demonstrate the appropriate mechanisms for follow up in ethics consultation

SCHEDULE OF ACTIVITIES

The schedule of teaching and clinical activities for the Ethics Consultation Service varies. Therefore, the student should arrange by telephone in advance with the course director for the time and place of the first meeting and for each day's activities.

DIDACTIC ACTIVITIES

The student is expected to be familiar with the learning objectives and requirements before beginning this elective experience. The student will attend all classes and teaching rounds conducted by the course directors. The student will participate in all ethics consultations during the elective experience, including follow up.

REQUIRED READING

Students enrolling in this elective should have access to a copy of Resolving Ethical Dilemmas: A Guide for Clinicians (4th Edition) by Bernard Lo, M.D., available in in the library or in the Medical Humanities office. Other bioethics literature, including relevant chapters from the Lo text, will be selected according to the cases the student is working on.

STUDENT EVALUATIONS

To receive a passing grade for this elective, the student will actively participate in the full activities of the ethics team. The student will contribute to discussions about cases and issues, and will participate in the preparation of written case summaries.

Clinical Ethics Research Elective (MHU603)

Course Director: Jane Greenlaw J.D.

Contact Person: Andrea Ehmann 275-5800 andrea_ehmann@urmc.rochester.edu

Location: Strong Memorial Hospital

Block Length: 2 weeks

Dates Offered: 07/04/2011 - 06/10/2012

Students: 2 per Block

Prerequisites:

GOAL

This elective allows the third or fourth year student to identify an ethics topic of interest and conduct substantive independent research of that topic under the guidance of the ethics faculty. The student will produce a manuscript quality paper with input from faculty. (Examples of previous projects: transplant ethics; disclosure of positive HIV status to minors; death penalty and juvenile offenders; sale of organs for transplant; Nazi research. .)

LEARNING OBJECTIVES

This elective gives the student the opportunity to identify an ethics topic of interest, critically survey the relevant ethics literature, develop an argument, hypothesis, or position, and develop this into a manuscript quality paper.

SCHEDULE OF ACTIVITIES

The student will identify a topic before beginning the elective (this can be done in email correspondence with the course director). During the elective the student will meet with the course director, by arrangement, to review the progress of the research and writing. It is anticipated that at least two drafts will precede the final paper. The final paper does not need to be completed within the two week timeframe, but it is expected that the student will complete the majority of work on the paper during the two week timeframe.

DIDACTIC ACTIVITIES

The student will conduct library research and write a paper, as described.

REQUIRED READING

To be determined in the course of the research.

STUDENT EVALUATIONS

To receive a Pass grade, the student must attend all scheduled meetings and finish the research paper.

Palliative Care (MHU604)

Course Director:	Timothy Quill M.D.
Contact Person:	Barbara Burton, 273-1154, barbara_burton@urmc.rochester.edu
Location:	Strong Memorial Hospital
Block Length:	2 weeks (exceptions will be considered on a case-by-case basis)
Dates Offered:	08/08/2011 - 07/08/2012
Students:	2 per Block
Prerequisites:	

GOAL

PLEASE NOTE: AVAILABLE FOR 3rd AND 4th YEAR MEDICAL STUDENTS. NO COURSE PREREQUISITES. To learn the elements of palliative care which are essential to good medical and surgical practice.

LEARNING OBJECTIVES

Capabilities the student is expected to acquire in this elective: 1. Identify situations / cases in which a palliative care consultation is appropriate; identify the procedure for requesting a palliative care consultation; describe who can request a palliative care consultation. 2. Demonstrate the process of a palliative care consultation, including review of basic medical status, assessment of uncomfortable symptoms, review status of potentially life-prolonging therapies, assess relevant psychosocial and spiritual issues, and identify key palliative care issues. 3. Identify the most common symptoms for which patients with advanced illness, and recognize basic modalities of treatment. 4. Demonstrate the ability to speak honestly and compassionately with dying patients and their families about their illness.

SCHEDULE OF ACTIVITIES

Daily rounding with palliative care team, including evaluating new consultations and providing followup. Weekly attendance at team meeting for case discussion (Wednesdays 7:30-9:00am in the 4-1200 Conference Room) Weekly meeting with the Palliative care Pharmacist after the Wednesday team meeting to go over cases and questions about medication treatments

Meeting with senior attending every week to go over challenging cases, and to review answers to Palliative Care Workbook. Weekly attendance at Wednesday noon conference (alternating with palliative care, clinical ethics, Schwartz, medical humanities and spirituality). Attendance at Medical Grand Rounds (Tuesday mornings 8-9am, class of 62 Aud)

DIDACTIC ACTIVITIES

Attend the weekly Wednesday noon conference (alternating clinical ethics, palliative care, Schwartz Rounds, Medical Humanities, spirituality), Medical Grand Rounds, and Palliative Care Seminar with senior preceptor.

REQUIRED READING

Students will receive a copy of the Palliative Care Primer early in the rotation, which they are expected to read, and to complete the associated workbook. There will be one session with a senior palliative care consultant to review the material in the workbook, and to discuss difficult palliative care challenges encountered. Students are expected to read about the palliative care issues encountered by their patients, and to prepare a brief report about a topic of interest by the end of the rotation.

STUDENT EVALUATIONS

Students will be evaluated by the palliative care attendings and nurse practitioners with whom they work with.

Art, Medicine, and Literature (MHU605)

Course Director: Hannah Solky

Contact Person: Andrea Ehmann, 585-275-5800, andrea_ehmann@urmc.rochester.edu

Location: Memorial Art Gallery

Block Length:

Dates Offered: -

Students: 8 per Block

Prerequisites:

GOAL

To integrate a variety of "observational" skills developed at the Memorial Art Gallery with clinical skills in observing patient at the bedside, and the personal and humanistic skills of self-observation and reflection through a variety of experiences examining artworks, short literary works, and patients

LEARNING OBJECTIVES

to develop skills of observation at the gallery and at the bedside.

to describe these observations at art gallery and bedside to others.to reflect upon the insights and limitations of one's own observations.

SCHEDULE OF ACTIVITIES

Students will meet each day at the Memorial Art Gallery in the morning with Dr. Solky. Mornings will be spent in small group sessions; afternoons will be used for research at either library, or other work related to the elective. Students will arrange to meet with Dr. Solky before the first day of the elective. Minimum number of students for this elective is 6; maximum is 8.

DIDACTIC ACTIVITIES

Students will read assigned materials, prepare notes and commentary to be the basis of discussion during the tutorial.

REQUIRED READING

To receive a grade of Pass, the student(s) must participate in the discussions, complete the readings and prepare a write-up of one artwork and/or one patient at the end of the week which will be presented to the rest of the group.

STUDENT EVALUATIONS

To receive a grade of Pass, the student(s) must participate in the discussions, complete the readings and prepare a write-up of one artwork and/or one patient at the end of the week which will be presented to the rest of the group.

Literature and Medicine (MHU606)

Course Director: Stephanie Brown Clark M.D., Ph.D

Contact Person:

Location: Strong Memorial Hospital

Block Length: 2 weeks

Dates Offered: -

Students: 2 per Block

Prerequisites:

GOAL

To read, consider, and critique selected works of literature and poetry and their relation to the profession and practice of medicine.

LEARNING OBJECTIVES

By the end of the elective the student should be able to:

Understand the clinical importance of the narrative process between patient and physician.

Incorporate the reflections and insights of selected works of literature/poetry into the student's own personal experiences as a physician-in-training.

Integrate the reading of non-medical literature into their medical education.

SCHEDULE OF ACTIVITIES

PLEASE NOTE: This elective will be taught by Dr. Brown Clark.

Students (minimum of 5 students for session to run) will arrange to meet with Dr. Clark before the first day of the elective to decide on a list of readings. The students may choose to focus on literature written by physicians, or by medical students, or by patients; the students may choose materials on particular diseases or themes. The literature/poetry may be contemporary or historical. The students will meet with Dr. Clark 3 times per week for 1 - 2 hour tutorials, or similar schedule.

DATES/TIMES: MWF at time agreed by students and supervisor (typically 10 am - noon)

DIDACTIC ACTIVITIES

Students will read materials, prepare notes and commentary to be the basis of discussion during the tutorial.

REQUIRED READING

Each student will generate a "reading list" of works before the start date of the elective and email to Dr. Brown Clark. For reading ideas, students can look at the NYU database, Arts, Literature and Medicine <http://endeavor.med.nyu.edu/lit-med/lit-med-db/topview.html> or contact Dr. Brown Clark for suggestions.

STUDENT EVALUATIONS

To receive a Pass, each student must complete the readings and be prepared to discuss them at each tutorial. The student will keep a journal of comments and criticisms of the readings which will be handed in to the appropriate elective supervisor. Alternatively students may write a creative work or an analysis/review of a book(s) read and discussed during the elective and handed in on the last day of the elective.

Medical History (MHU608)

Course Director: Stephanie Brown Clark M.D., Ph.D

Contact Person: Andrea Ehmann, 585-275-5800, andrea_ehmann@urmc.rochester.edu

Location: Strong Memorial Hospital

Block Length: 2 - 4 weeks (may be split)

Dates Offered: -

Students: 2 per Block

Prerequisites:

GOAL

To contextualize and consider medical practices and theories by a close study of a topic in medical history chosen by the student

LEARNING OBJECTIVES

By the end of the rotation the student should be able to:

Understand some historical dimensions of medicine.

Learn about the basic resources, tools and approaches to research of a medical history topic

Utilize these resources to produce a short written paper.

SCHEDULE OF ACTIVITIES

The student(s) will arrange a meeting with Dr. Brown Clark before the start date of the elective to identify a specific topic, establish his/her learning objectives, and arrange a schedule. The topic may be related to a particular clerkship unit (i.e. in the history of neurology, psychiatry, obstetrics, gynecology, pediatrics, surgery, etc.), but is not restricted to these areas. The student will meet with Dr. Brown 3 times per week or on an alternate schedule to be arranged by the student with Dr. Brown

DIDACTIC ACTIVITIES

The student (s) will research their topic, using the resources of the History of Medicine Room in the Miner Library and elsewhere. The progress of the research will be discussed and modified at regular meetings with Dr. Brown Clark.

Students are strongly encouraged to attend the Corner Society medical history meeting coincident with their elective or interests.

REQUIRED READING

J. Duffin, "How to research a topic in medical history," in History of Medicine: a scandalously short introduction, University of Toronto Press, 1999. (photocopies available from Andrea Ehmann, Division of Medical Humanities).

STUDENT EVALUATIONS

To receive a Pass, student(s) must produce a short paper, or web-page on their topic, or a journal of their readings with commentary. Student(s) should demonstrate good preparation and participation during the meetings.

Creative Writing (MHU610)

Course Director: Stephen J. Lurie M.D., Ph.D.

Contact Person: Stephen Lurie 3-4323 stephen_lurie@urmc.rochester.edu

Location: Strong Memorial Hospital

Block Length:

Dates Offered: -

Students: 8 per Block

Prerequisites:

GOAL

Medical school tends to promote uniformity of thought and outlook. In this course, students will be encouraged to explore their own unique written voice, and to share this in a supportive small-group environment.

LEARNING OBJECTIVES

1. To discover and explore each student's unique written persona
2. To encourage ongoing reading of nonmedical literature
3. To learn to read more closely and to develop an ear for others' written voices

SCHEDULE OF ACTIVITIES

The course will be structured as a collegial writing workshop. Past activities have included in-class writing exercises, reading and feedback on students' outside writing, and group critique of published writing. The nature and balance of these activities will be decided by group consensus.

DIDACTIC ACTIVITIES

As above

REQUIRED READING

TBA

STUDENT EVALUATIONS

Students will be evaluated on the basis of their participation, attendance, and quality of feedback to one another.

Independent Creative/Research Humanities Project (MHU615)

Course Director:	Stephanie Brown Clark M.D., Ph.D
Contact Person:	Andrea Ehmann, Division of Medical Humanities
Location:	Strong Memorial Hospital
Block Length:	1-4 weeks
Dates Offered:	-
Students:	2 per Block
Prerequisites:	

GOAL

This elective is intended to give individual students an opportunity to undertake research or creative work on topics in medical humanities and/or ethics under the supervision of an appropriate faculty member from the Division of Medical Humanities. The elective is 2 - 4 weeks in length , and no pre-requisites are needed. (For example, students may develop and edit a research paper on a medical topic informed by philosophy, anthropology, cultural studies, ethics, literature, etc., or develop and organize a possible medical humanities seminar or elective, or complete their project for the Pathway in Medical Humanities/Clinical Ethics.

NOTE: Available throughout most of the academic year by special arrangement with Jane Greenlaw.
THIS ELECTIVES WAS FORMERLY TITLED MHU950.

Before the elective can be approved, students should contact J. Greenlaw to discuss their project idea and to identify the most appropriate supervisor.

LEARNING OBJECTIVES

To research and develop a humanities and/or ethics project (paper, anthology, film, performance, curricular piece) on a topic of particular interest to the individual medical student with oversight by an appropriate supervisor.

To create a "product" that will have been useful and important to the student -- ie a paper, a short film, a possible module, elective or seminar (including, learning objectives, speakers, field trips and syllabus etc) for the medical humanities curriculum.

SCHEDULE OF ACTIVITIES

Students will email Stephanie Brown Clark before the start date of the elective with a project topic, and provide a workplan for the elective.

DIDACTIC ACTIVITIES

This is an independent research project for self-directed learners. Students will identify their learning needs and then address them with appropriate resources with the help of their supervisor.

REQUIRED READING

As appropriate to the individual project of the student.

STUDENT EVALUATIONS

Students must have a "product" at the end of the elective, either as a substantial paper, a film, a possible curricular activity, elective or seminar outline.

The Anatomy of a Medical Malpractice Case: (MHU617)

Course Director:**Contact Person:** Zena Shuber, ESQ.**Location:** School of Medicine**Block Length:** 2 weeks**Dates Offered:** -**Students:** 20 per Block**Prerequisites:**

GOAL

To understand the legal elements of a medical malpractice case. To obtain a better understanding about the legal standards and methods that are used by lawyers who bring and defend medical malpractice lawsuits.

LEARNING OBJECTIVES

By the end of this elective, the student should be able to:

1. Discuss the legal elements of a medical malpractice case;
2. Discuss how a law firm generally manages a medical malpractice defense;
3. Discuss the tools used by lawyers to both defend as well as bring a medical malpractice case to court;
4. Discuss generally how a court room works in a medical malpractice case

SCHEDULE OF ACTIVITIES

Classes will be scheduled on Monday, Wednesday, Friday from 9:00 am to 11:00 am for two weeks.

DIDACTIC ACTIVITIES

This course is designed to give medical student a broader view of the legal world of medical malpractice. There is a heavy emphasis on class discussion with student facilitators. Assigned readings and guest speakers will be used to spark discussion. Reading materials will be selected from various legal texts, journals and documents.

REQUIRED READING

Students will receive handouts during the elective.

STUDENT EVALUATIONS

Students will be evaluated on their active participation in the class.

History of Psychiatry (MHU620)

Course Director: Laurence Guttmacher M.D.

Contact Person: Laurence Guttmacher

Location: School of Medicine

Block Length: 4 weeks

Dates Offered: -

Students: 2 per Block

Prerequisites:

GOAL

The history of psychiatry, like that of the rest of medicine, is filled with revealed truths that ultimately proved to be invalid. Students will better understand the social context of our current beliefs and practices, through reviewing historical approaches. This may be either through guided reading or working with primary source material. A written product will emerge at elective end.

Content of the elective is subject to negotiation.

LEARNING OBJECTIVES

To consider critically a number of key accepted theories and treatments offered in psychiatry, and understand them in their historical context.

To reflect on the ways in which an accepted theory and/or practice may become ultimately discredited as new technology, new scientific or empirical knowledge emerges.

To understand the ways in which diagnosis, treatment, and theories as to underlying causation are often socially and culturally dependent.

To recognize the cyclic features of certain approaches within the field of psychiatry: from categorical to individual diagnosis; from institutionalization to deinstitutionalization of the mad; from mindlessness to brainlessness; from theological to secular understanding of patients.

To learn about the key figures in the history of psychiatry.

To learn about the history of psychiatry in Rochester.

SCHEDULE OF ACTIVITIES

This can take two forms, both of which would be subject to negotiation between Dr. Guttmacher and the student:

A. A project with primary research using the rich historical records of the Rochester Psychiatric Center. Since RPC's history closely parallels that of American institutional psychiatry, exploration of commitment papers, data on admissions and discharges, etc can further our understanding of the history of American psychiatry.

B. A reading elective exploring in depth some aspect of the history of psychiatry.

Dr. Guttmacher will meet at least twice a week with the student engaged in this elective.

In either case, the rotation should lead to a presentation of the work, either to the Corner Society or to RPC and/or a paper.

DIDACTIC ACTIVITIES

See above

REQUIRED READING

See above. Dependent on the project.

STUDENT EVALUATIONS

Dr. Guttmacher will offer feedback on the final product which emerges from the rotation.

African American History--Indelible Impressions (MHU621)

Course Director: Brenda Lee M.Ed.

Contact Person: Mattie Brinson, Mattie_Brinson@urmc.rochester.edu, 273-4322

Location: School of Medicine

Block Length: 1 week

Dates Offered: 01/30/2012 - 02/26/2012

Students: 40 per Block

Prerequisites:

GOAL

After participating in the elective students will have a broader appreciation for the unique challenges select members of the African Diaspora in America have experienced and how these challenges may influence health and care delivery.

LEARNING OBJECTIVES

Recognize how bias has an impact on health and well being
Awareness of personal biases and how they influence your care delivery
Listen to patient and incorporate the worldview of the patient into the care delivery

SCHEDULE OF ACTIVITIES

Each week an excerpt of a documentary will be shown, followed by a discussion with a particular focus on how the referenced experiences might impact care delivery for patients in general and for select patients who are members of the African Diaspora in America.

.....
.....
.....
.....
.....
.....
.....
.....
.....

DIDACTIC ACTIVITIES

Week I - Friday February 4, 2011

Ethnic Notions - The documentary *Ethnic Notions* takes viewers on a voyage through American history that fueled anti-black prejudice and the evolution of racial consciousness in America. Dehumanizing caricatures of Black people permeated popular culture from the 1820s to the Civil Rights period and became implanted deep in the American psyche. **Source: California Newsreel**

Week II - Friday February 11, 2011

Race - The Power of Illusion - The documentary *Race - The Power of Illusion* challenges our assumptions about biology and race and traces the history of race in America. **Source: California Newsreel**

Week III - Friday February 18, 2011

Banished – The documentary *Banished* explores racial cleansing in Forsyth County Georgia and Pierce City Missouri and the forced expulsion of African Americans from their homes and land.

Guest respondent –

The Rev. Dr. Vera Evans Miller, Senior Pastor of the Genesee Baptist Church (family is featured in the documentary).

Week IV - Friday February 25, 2011

NO! Confronting Sexual Assault in Our Communities – the documentary discusses the impact of sexual violence on Black women and girls. **Source: California Newsreel**

REQUIRED READING

No supplementary reading will be assigned

STUDENT EVALUATIONS

Years III and IV students – will receive one week of elective credit for completing the seminar.

Orthopaedic Clerkship (MSK600)

Course Director: Benedict DiGiovanni M.D.

Contact Person: Ilse Hoff 585-273-1611 Ilse_Hoff@URMC.rochester.edu

Location: Strong Memorial Hospital

Block Length: 2 weeks

Dates Offered: 07/04/2011 - 05/06/2012

Students: 1 per Block

Prerequisites:

GOAL

To provide an overview of musculoskeletal medicine in an outpatient setting and to become familiar with diagnosis and treatment of common Orthopaedic problems.

LEARNING OBJECTIVES

By the end of the rotation the student should be able to:-Become familiar with the fundamentals of taking an accurate history from patients with musculoskeletal problems.-Learn basic physical examination of the musculoskeletal system.-Become familiar with the vocabulary of fractures and to be able to describe clinical and x-ray findings.-Apply splinting and casting techniques.-Learn situations where an Orthopaedics consultation is necessary.-Understand when surgical intervention is in the patient's best interest and when it is not and that different treatment methods can be appropriate for the same conditions in different patients.-Become aware and evaluate the functional outcomes possible with modern techniques in trauma and reconstructive surgery.-Assess the functional demands of the amateur and higher level athlete including their rehabilitation.

SCHEDULE OF ACTIVITIES

Students are assigned to one on one preceptors in the Westfall Building D Musculoskeletal unit with a balanced exposure to subspecialty service from 8:00 AM to 5:00 PM on weekdays. Students will be assigned to the Emergency Room one evening/week as part of their regular schedule to work with the Orthopaedic Resident in active care and procedural skills.

DIDACTIC ACTIVITIES

-Daily morning conference schedules are posted outside the Plato Schwartz Library.-Grand Rounds held every first Thursday at 7:00 a.m.and is required.-Daily fracture rounds, presentations of the previous day's Emergency Room fractures, at 7:15 AM (except Thursdays) is also required.-Attendance at resident conferences at 6:30 AM is required. Attendance at Monday Trauma conference at 6:30 AM is required. Other attendance depends on topics. This will be discussed at the start of the rotation.-Three Core textbooks are loaned to students, serve as reading reference for various musculoskeletal disorders encountered during elective.-The musculoskeletal pathophysiology of patients in the out patient Musculoskeletal Building will be used to its fullest emphasizing positive physical findings in the musculoskeletal system.-Students will have the opportunity to independently obtain histories, examine and present patients for review to their preceptor.-Injecting and aspirating of joints will be demonstrated including best techniques and approaches. Individual discussion with the preceptor will focus on differential diagnosis, assessment and evaluation, cost effective workup and treatment options, and coordination of the patient's overall care with primary care physician.

REQUIRED READING

Students are strongly encouraged to read and refer to the 3 Core Textbooks loaned to them:

- Hoppenfeld's text titled Physical Examination of the Spine and Extremities
 - Bernstein's textbook titled Musculoskeletal Medicine
 - American Academy of Orthopaedic Surgeons textbook titled Essentials of Musculoskeletal Care
- Students are welcome to browse amongst the collection of the Plato Schwartz Library as well.

STUDENT EVALUATIONS

Evaluations of students will be based on their performance with emphasis upon interests, conscientiousness, interpersonal skills with patients and mentors, and presentation of patients. .

Orthopaedic Surgery Externship (MSK601)

Course Director:	Benedict DiGiovanni M.D.
Contact Person:	Ilse Hoff 585- 273-1611 Ilse_Hoff@URMC.rochester
Location:	Strong Memorial Hospital
Block Length:	4 weeks
Dates Offered:	07/04/2011 - 10/23/2011
Students:	4 per Block
Prerequisites:	

GOAL

To provide an overview of Orthopaedic surgery on an active inpatient services including pre and postoperative evaluation and exposure to outpatient care of the musculoskeletal system.

LEARNING OBJECTIVES

By the end of the rotation the student should be able to:-Provide an overview in the field of Orthopaedic surgery and its division, i.e. Adult Reconstructive, Hand, Spine, Sports Medicine, Pediatrics, Tumor, Trauma, and Foot and Ankle.-Learn to reduce common fractures and principals of casting and fracture care.-Become familiar with the fundamentals of taking an accurate history from patients with musculoskeletal problems.-Become familiar with the vocabulary of fractures and to be able to describe clinical and x-ray findings.-Learn basic physical examination of the musculoskeletal system.-Assist in the Operating Room and become familiar with the objectives of modern techniques in trauma and reconstructive surgery.-Assist in the care of athletes and assist in interventions that restore their functional return to activity. This includes their rehabilitation.

SCHEDULE OF ACTIVITIES

Students are assigned to be part of the team of an inpatient service in Orthopaedics. Rotations are usually 2 weeks long and the student is part of the team. Students are expected to be present for all morning conferences as posted outside the Plato Schwartz Library. Students will be expected to participate in all aspects of Orthopaedic care of patients on their service. This will include preoperative, intraoperative and postoperative care. They are encouraged to also participate in the orthopaedic care of ambulatory patients by their presence with residents and preceptors in the Westfall Road Musculoskeletal Unit. Assignments to specific subspecialty teams is done by the course director, Dr DiGiovanni. Preferences noted in advance will be given consideration but not guaranteed. There will be emergency orthopaedics care with night coverage assigned, about once/week.

DIDACTIC ACTIVITIES

-Daily morning conference schedules are posted outside the Plato Schwartz Library. Attendance is required. -Grand rounds are held the first Thursday of each month at 7:00 AM.-Daily fracture rounds or presentation of the previous day's Emergency Room cases take place at 7:15 AM Monday thru Friday, except Thursday as posted.-Students will be expected to read and present information on the basic pathophysiology of orthopaedic illnesses that they encounter in the Operating Room and on their inpatients. Physical exams and physical findings of orthopaedic conditions will be emphasized.

-Three Core textbooks are available to students, serve as reading reference for various musculoskeletal disorders encountered during elective.

REQUIRED READING

Students are welcome to browse amongst the collection of the Plato Schwartz Library.

STUDENT EVALUATIONS

Evaluations of students will be based on their performance with emphasis upon interests, conscientiousness, interpersonal skills with patients and mentors, and presentation of patients.

Teaching Tutorial and Review in Human Structure (NAN601)

Course Director:	Barbara Davis Ph.D.
Contact Person:	Barbara Davis 3-4862
Location:	School of Medicine
Block Length:	2 weeks
Dates Offered:	09/12/2011 - 12/18/2011
Students:	10 per Block
Prerequisites:	

GOAL

Provide lab instruction, participate in small-group teaching, attend lectures and staff meetings, and assist in preparing and grading examinations in our first year Human Structure and Function course. This elective is designed for students who wish to review their anatomy, histology and physiology, or for students who wish to gain teaching experience in anticipation of an academic career.

PREREQUISITE: Ranked in the top 80% of HSF.

LEARNING OBJECTIVES

By the end of the rotation the student should be able to:

- Assist students in identifying key anatomical structures as pointed out in the anatomy dissector.
- Assist students in identifying histologic structures as pointed out in the histology lab manual.
- Help students with dissection in the anatomy lab and prepare prosected specimens for student study.
- Assist students in identifying key histologic features on microscope slides.
- Share with students the clinical relevance and applied importance of key histological, anatomical, and physiological concepts.
- Tutor students outside of formal class periods who need additional help learning human structure and function.
- Assist students in identifying key histology features as microscope slides
- Serve as an effective tutor in problem based learning (PBL)

SCHEDULE OF ACTIVITIES

Attend all class sessions according to the following class schedule: Mon. - Fri., 8-12 and Mon. or Wed., 1-4 as scheduled. Outside tutoring of students may be required. Additional afternoon sessions to prepare prosected material for anatomy lab may also be required.

DIDACTIC ACTIVITIES

Students are expected to read the Anatomy Dissector (copy provided), review in an Anatomy Atlas the material to be covered prior to each day's dissection, and review histology exercises related to lab. Students also attend all Human and Structure Function lectures and a weekly staff meeting. During examination periods, the students will help the teaching faculty set up laboratory examinations, and proctor the examinations.

REQUIRED READING

Relevant dissection instructions in the Dissector (provided), appropriate lab exercises in the histology manual (provided) and appropriate chapters in an Anatomy, Histology and Physiology textbook (texts you use in the course or one on open reserve in the Miner Library).

STUDENT EVALUATIONS

To receive a grade of Pass, students must attend all required lectures and lab sessions, and come prepared to assist students with their laboratories and their learning of human structure and function. When appropriate, tutor students outside of scheduled class periods, prepare prosection material, and assist the faculty in setting up lab practical exams.

Revisiting Applied Human Gross Anatomy (NAN603)

Course Director:	Diane Piekut Ph.D.
Contact Person:	Dr. Diane Piekut, x53330
Location:	Strong Memorial Hospital
Block Length:	1-3 wks
Dates Offered:	01/09/2012 - 01/29/2012
Students:	8 per Block
Prerequisites:	

GOAL

This elective is designed to provide 4th year UR medical students an opportunity to pursue advanced and specialized anatomical dissections. Dissections will focus on the special interest of the individual students with faculty supervision. This elective is offered to both fourth year medical students and advanced graduate students who have previously completed a course in Human Gross Anatomy. Students can enroll in this course for 1, 2, and/or 3 weeks.

LEARNING OBJECTIVES

By the end of this elective, the students should have: 1. Completed an advanced dissection of a specific, anatomical region relating to student's interest. 2. Presented dissections with clinical correlations to other students

SCHEDULE OF ACTIVITIES

This elective is intended to be a student directed course allowing individual students to focus on a review of human gross anatomy and pursue advanced dissections in areas of special interest. Time will be divided between dissections and preparation for presentations. The first days of the courses will be devoted to practicing emergency medicine procedures (i.e., central lines, thoracostomy tubes placement etc.). Students can enroll in this course for 1, 2, and/or 3 weeks. Students will meet on the first day of the course to select an area of interest on which they will dissect and present.

DIDACTIC ACTIVITIES

Based on the student's area of interest they will: 1. Present dissections of specific anatomical areas to the group. 2. Prepare and present clinical correlations (15-30 minute presentation) of their dissections and/or selected topics of interest. Examples may include: special surgical dissections, radiology correlations, descriptions of anesthetic blocks, histopathology, etc.

REQUIRED READING

Relevant dissection instructions and appropriate chapters in an anatomy textbook. Recommended textbooks include Essential Anatomy Dissector (by J.T. Hansen), Clinically Oriented Anatomy (by K.L. Moore and A.F. Dalley), Atlas of Human Anatomy (by F.H. Netter) and Langman's Medical Embryology (by T.W. Sadle).

STUDENT EVALUATIONS

Students will be evaluated based on their completed dissections as determined with the instructor on the first day of this elective, student presentations and attendance.

Ambulatory Neurology (NEU610)

Course Director:**Contact Person:** Nancy Benjamin, 275-6380 Nancy_Benjamin@urmc.rochester.edu**Location:** Strong Memorial Hospital**Block Length:** 2 weeks**Dates Offered:**

-

Students: 1 per Block**Prerequisites:** Mind/Brain/Behavior Clerkship (MBB300)

GOAL

To learn how to evaluate and treat neurological disorders seen in an outpatient neurology practice.

This elective is offered on a very limited basis and is reserved for students seriously considering a career in neurology.

Prior approval from course director is required before scheduling this elective.

LEARNING OBJECTIVES

To learn how to evaluate and treat common neurological outpatient problems, including headache, dizziness, back and neck pain, and peripheral nerve disorders. To learn how to evaluate and treat some of the disorders seen in a subspecialty neurology outpatient clinic, including epilepsy, multiple sclerosis, neuromuscular disorders including muscular dystrophy, peripheral neuropathies and amyotrophic lateral sclerosis; movement disorders, including Parkinson's disease, Huntington's disease, and Tourette's syndrome; and Alzheimer's disease and other dementias.

SCHEDULE OF ACTIVITIES

The student will spend each day in one of the subspecialty neurology outpatient clinics, with exposure to epilepsy, stroke, neuromuscular diseases, multiple sclerosis and movement disorders.

DIDACTIC ACTIVITIES

·Morning Report on Monday, Tuesday and Wednesday mornings.·Neuroradiology/Neurosurgery conference on Thursday mornings.·Noon clinical conferences.·Neurology Grand Rounds on Friday mornings.

REQUIRED READING

Journal articles provided by the attendings concerning the patients seen in clinic.

STUDENT EVALUATIONS

An evaluation committee consisting of Drs. Ralph Józefowicz, Fred Marshall, Anthony Maroldo, Lawrence Samkoff and a neurology chief resident reviews the narrative evaluations for each student and assigns a consensus grade. Each student will receive a letter containing a summary of his/her narrative evaluations and the final grade in the neurology elective approximately six weeks following completion of the Neurology experience.

General Neurology Consultation Service (NEU612)

Course Director:	Ralph Jozefowicz M.D.
Contact Person:	Nancy Benjamin, 275-6380 Nancy_Benjamin@urmc.rochester.edu
Location:	Strong Memorial Hospital
Block Length:	2 weeks
Dates Offered:	07/04/2011 - 07/08/2012
Students:	2 per Block
Prerequisites:	Neurology Clerkship (NEU300)

GOAL

To learn the principles and skills underlying the recognition and management of the neurologic diseases a general medical practitioner is most likely to encounter in practice.

LEARNING OBJECTIVES

1.To develop skills in obtaining complete neurological histories, in performing accurate neurological examinations, and in selecting appropriate therapies on a general neurology consultation service in a tertiary referral center.2.To gain in-depth knowledge of major categories of neurological disease, with special emphasis on stroke, epilepsy, coma and mental status changes, movement disorders, neuromuscular disorders, demyelinating disorders, infections of the nervous system, tumors of the nervous system, head trauma and dementia.3.To gain experience in the appropriate ordering and interpretation of neurodiagnostic tests, including head and spine CT and MR scans, EEG, Evoked Potential Testing, Neurovascular testing, and EMG and nerve conduction studies.4.To develop and improve written and oral communication skills.

SCHEDULE OF ACTIVITIES

The General Neurology Consultation Service provides neurology consultations to the medical and surgical services, emergency room and intensive care units. The service consists of a neurology Attending, a neurology PGY-3 and a medical student.Each student will evaluate, present and write-up approximately one new patient per day and will be responsible for following his/her patients during hospitalization. Student is encouraged to take Evening Call once or twice with his or her resident until 9:00 PM. Students are expected to attend either Saturday or Sunday morning rounds. The remainder of the weekend is free.The student on the neurology consultation service will be responsible for obtaining a complete history, performing a complete general and neurological examination, generating a differential diagnosis and formulating a plan of treatment for all patients that are assigned to him/her. He/she will be responsible for presenting each assigned patient as needed on rounds, and for completing the work-up on the same day that the patient is evaluated.The student will work as a member of the team to which he/she is assigned, and will participate in all work rounds, attending rounds, and resident conferences.The student is responsible for reviewing all laboratory studies obtained on his/her patients, including CT and MR scans, EEGs, EMGs, evoked potentials, and lumbar punctures.

DIDACTIC ACTIVITIES

Attend work rounds and conferences at the direction of the resident on the team.

REQUIRED READING

STUDENT EVALUATIONS

The final grade in the General Neurology Consultation Service is based on the narrative evaluations of clinical performance by faculty and residents. Each neurology attending and neurology resident who has had at least one week of contact time with the student is asked to complete a narrative evaluation form on-line. Evaluators are specifically asked to comment on the academic performance, clinical performance, and personal and professional qualities of the student.An evaluation committee consisting of Drs. Ralph Józefowicz, Fred Marshall, Anthony Maroldo, Lawrence Samkoff and a neurology chief resident reviews the narrative evaluations for each student and assigns a consensus grade.Each student will receive a letter containing a summary of his/her narrative evaluations and the final grade in the neurology elective approximately six weeks following completion of the General Neurology Consultation Service.

Pediatric Neurology (NEU615)

Course Director:	Jonathan W. Mink M.D.
Contact Person:	Nancy Benjamin 275-6380 Nancy_Benjamin@urmc.rochester.edu
Location:	Strong Memorial Hospital
Block Length:	2 - 4 weeks
Dates Offered:	07/04/2011 - 07/08/2012
Students:	2 per Block
Prerequisites:	Neurology Clerkship (NEU300)

GOAL

To become familiar with the important characteristics of the neurological history and examination in children of various ages.

LEARNING OBJECTIVES

1.To perfect the student's history-taking skills and neurologic exam in infants and children.2.To learn the interrelationship of abnormalities of the nervous system with normal growth and development of the nervous system.3.To provide the student with an exposure to and a forum for discussion of a wide variety of neurologic problems in pediatric patients.4.To develop and improve written and oral communication skills.

SCHEDULE OF ACTIVITIES

Students will be assigned to the inpatient and/or outpatient child neurology services for two weeks. Assignment will be based on several factors including, but not limited to, student preference, number of students, and whether the student has already spent time on the child neurology service during the MBB II clerkship.

INPATIENT CHILD NEUROLOGY While on the inpatient service, the student will work up at least three new inpatients or consultations per week. This will include a detailed neurologic history, examination, formulation of the case, and discussion of the problem, and will be done with guidance from the neurology resident on service. Patients will be presented to the neurology attending on rounds.

The student is expected to learn to make anatomical-physiological-pathological-biochemical formulations and correlations on each case evaluated. He/she is encouraged to ask questions regarding the patients he/she is involved with during rounds to both the neurology resident and the attending. The student may be asked to prepare and present a patient at the weekly Pediatric Neurology Conference.

OUTPATIENT CHILD NEUROLOGY

On the first day of the rotation, the student will meet briefly with Magda Ramzy in room 5-5511 (phone 5-4783) to review the clinic schedule for the week. The child neurology clinics meet on the 6th floor of the Ambulatory Care Facility with other pediatric specialties.

While on the outpatient service, the student will attend all of the outpatient child neurology clinics. The clinics meet Monday - Thursday from 8:30 or 9:00 am to 12:00 noon and from 1:00 - 5:00 pm. There is no clinic on Friday mornings due to Neurology Grand Rounds. Friday afternoon clinics are scheduled to see urgent patients as needed. The student will obtain the history and examine at least one new patient each clinic session. In addition, he/she will see a number of patients for follow-up visits. All patients will be reviewed with an attending child neurologist. The student may be asked to write up a discussion on the case.

The student is expected to learn to make anatomical-physiological-pathological-biochemical formulations and correlations on each case evaluated.

DIDACTIC ACTIVITIES

While on the inpatient service, the student will participate in the various teaching conferences of the Department of Neurology at Strong Memorial Hospital, including daily work rounds with the residents. While on the outpatient service, students will participate in select conferences, including morning report, noon conferences, the weekly Child Neurology conference, and Neurology Grand Rounds.

REQUIRED READING

Menkes, JH, Sarnat HB: Textbook of Child Neurology. 6th edition, Lippincott Williams & Wilkins, Philadelphia 2000

STUDENT EVALUATIONS

The final grade in the Pediatric Neurology Service is based on the narrative evaluations of clinical performance by faculty and residents. Each neurology attending and neurology resident who has had at least one week of contact time with the student is asked to complete a narrative evaluation form. Evaluators are specifically asked to comment on the academic performance, clinical performance, and personal and professional qualities of the student. An evaluation committee consisting of Drs. Ralph Józefowicz, Fred Marshall, Anthony Maroldo, Lawrence Samkoff and a neurology chief resident reviews the narrative evaluations for each student and assigns a consensus grade. Each student will receive a letter containing a summary of his/her narrative evaluations and the final grade in the neurology elective approximately one month following completion of the Pediatric Neurology Service.

Huntington Disease Camp (NEU616)

Course Director:**Contact Person:** Connie Orme, 275-3506, connie.orme@ctcc.rochester.edu**Location:** Away Elective or Student Fellowship**Block Length:** 1-4 wks**Dates Offered:** -**Students:** 3 per Block**Prerequisites:**

GOAL

During this elective, students will have the opportunity to acquire real life experience with adult patients with Huntington Disease, particularly those in early to middle stages of disease progression such as motor issues (gait, speech, swallowing), cognitive issues, and behavioral issues.

Contact Connie Orme directly for times when this elective is offered.

LEARNING OBJECTIVES

Learn real life lessons from people with chronic neurodegenerative conditions

Practice providing holistic care

Understand the physical and mental limitations that are characteristic of Huntington Disease

Experience the variety of disease presentations and appreciate the diversity of the disease

Gain a sense of the progression of disease

Learn about the role of social workers and nurses in providing holistic care

Hands on role in aiding campers in daily activities such as eating and toileting

Gain practice at running activities for groups of patients

SCHEDULE OF ACTIVITIES

Students who wish to take this elective should contact Connie Orme for the dates of the camp as well as the dates for planning meetings. Students do not have to attend all of the planning meetings, but should keep in contact with the camp organizers so that planning progresses smoothly. For those choosing a one-week elective, volunteering at camp with minimal preparation is all that is required. For the two-week elective, the week prior to camp is spent planning activities, preparing supplies, shopping for food, etc. The student will also run at least one activity for the campers. The camp runs for five days (Wednesday through Sunday) and consists of two smaller camps. Those with more severe disease come for one night. Those with more moderate disease come for the remainder of the week. In general, the student's role is to participate in activities with the campers throughout the five days (9:00 am to 6:00 pm, but schedules can be adjusted to benefit all parties). The student should behave as a volunteer, being respectful of others and eager to help campers or the camp director with any issues that arise. There is the option of staying overnight for one or two days but is not required.

This elective will be an immensely valuable experience, especially for those who may enter neurology. It is also quite fun getting to know the campers and staff while participating in an array of activities.

DIDACTIC ACTIVITIES

None. The learning is experiential.

REQUIRED READING

None.

STUDENT EVALUATIONS

Graded as Pass/Fail. Students will be evaluated by staff personnel who attend camp. Students may also wish to meet with Dr. Fred Marshall after completion of camp for feedback (students often have suggestions for improving camp).

Neuro-Oncology Elective (NEU617)

Course Director:

Contact Person:

Location:

Block Length: 2-4 wks

Dates Offered:

-

Students: 0 per Block

Prerequisites:

GOAL

LEARNING OBJECTIVES

SCHEDULE OF ACTIVITIES

DIDACTIC ACTIVITIES

REQUIRED READING

STUDENT EVALUATIONS

Advanced Obstetrics and Gynecology Externship (OBG601)

Course Director:	Adrienne Bonham
Contact Person:	Adrienne Bonham,341-6734, adrienne_bonham@urmc.rochester.edu
Location:	Highland Hospital
Block Length:	4 weeks
Dates Offered:	-
Students:	1 per Block
Prerequisites:	Medicine Clerkship (MED300) Women's and Children's Health (WCH300)

GOAL

The goal is to provide students with in-depth exposure to various aspects of in-patient and out-patient Obstetrics and Gynecology. It is appropriate for students considering or planning to enter OB-GYN, or for students entering other specialties who want further obstetrics and gynecology experience to improve their primary care skills.

Although this course based at Highland, it is possible to enroll in this course at Strong if advance approval is obtained from Dr. Christopher Glantz (275-6036 or chris_glantz@urmc.rochester.edu)

LEARNING OBJECTIVES

By the end of the rotation the student should be able to:-Manage normal labor and vaginal delivery-Interpret antepartum and intrapartum fetal heart rate tracings-Understand concepts of antepartum (prenatal) management of low risk and selected high-risk pregnancies-Refine breast and pelvic exam skills-Generate differential diagnoses for common gynecological symptoms (irregular or heavy bleeding, amenorrhea, pelvic pain, vaginal discharge, infertility, etc.) and formulate plans for evaluation and management-Assist on gynecological surgeries and cesarean deliveries.

SCHEDULE OF ACTIVITIES

OB-GYN residents and faculty oversee students on this rotation. The course is divided into 4 weeks on the Ob/ Gyn service including inpatient and outpatient services, OB-GYN ultrasound, emergency room, and operating rooms. The student will have opportunities to follow selected antepartum and intrapartum patients. Students are expected to care for patients at the level of an intern, and take night call 5-6 times over the 4 weeks (usually as a week of night float).

DIDACTIC ACTIVITIES

Weekly OB-GYN resident conferences, Grand Rounds, and weekly medical student small group discussions. I meet informally with students weekly to discuss topics of interest.

REQUIRED READING

There is no required reading per se, but familiarity with either Williams' or Gabbe's Obstetrics and either Hacker and Moore's or Droegemueller's Gynecology is expected.

STUDENT EVALUATIONS

Evaluations are based on assessments from the Ob/Gyn faculty and residents. Important elements are enthusiasm & interest, willingness to actively participate in patient care, availability in Labor and Delivery, operating rooms, and the Ambulatory Care Facility, and evidence of active learning through reading and discussion with faculty.

This course is essentially the same as the OBGYN Sub-Internship, except that the sub-internship is graded and the externship is pass-fail.

Ambulatory Ob-Gyn (OBG605)

Course Director:	Christopher Glantz M.D., MPH
Contact Person:	Chris Glantz, x56036, chris_glantz@urmc.rochester.edu
Location:	Strong Memorial Hospital
Block Length:	4 weeks
Dates Offered:	07/04/2011 - 06/17/2012
Students:	1 per Block
Prerequisites:	Medicine Clerkship (MED300) Women's and Children's Health (WCH300)

GOAL

The goal is to provide students with a variety of experiences in outpatient obstetrics, gynecology, and urogynecology.

LEARNING OBJECTIVES

Gain experience in performing pelvic examinations
Develop proficiency assessing pregnant women (high and low risk prenatal care)
Improve skill in triage and management of abnormal pap smears
Participate in the evaluation and management of women with urogynecologic conditions
Interpret basic obstetrical and gynecologic ultrasounds
Develop diagnostic and management skills for common gynecologic problems, particularly of the lower genital tract.

SCHEDULE OF ACTIVITIES

Students on this rotation work with General OB-GYN, Urogynecology, and MFM faculty as well as OB-GYN Ambulatory residents. The clinical experience is divided between outpatient gynecology, urogynecology, high-risk obstetrics, and OB-GYN ultrasound experiences, and usually encompasses the hours of 8:00 a.m. to 5:00 p.m. Most activities take place at the offsite office at 500 Red Creek Drive, but some take place at Monroe Community Hospital or in the OBGYN ultrasound/clinics on the 5th floor of the ambulatory building.

DIDACTIC ACTIVITIES

There are various educational conferences on Thursday mornings (Grand Rounds and Morbidity and Mortality: 7:30 a.m., resident education: 8:45-11:00 a.m). I meet with students weekly to discuss a variety of topics relevant to OBGYN.

REQUIRED READING

There is no required reading per se, but familiarity with either Williams' or Gabbe's Obstetrics, and Droegemueller's Gynecology is expected.

STUDENT EVALUATIONS

Evaluations are based on assessments from the faculty and residents. Important elements are enthusiasm and interest, willingness and availability to actively participate in patient care, and evidence of active learning through reading and discussion with faculty.

Gynecologic Oncology (OBG608)

Course Director:	Brent DuBeshter M.D.
Contact Person:	Deborah Bray 442-8020 125 Lattimore Road, Suite 258, Amyjo_hurley@urmc.rochester.edu
Location:	Highland Hospital
Block Length:	2-4 weeks
Dates Offered:	07/04/2011 - 06/17/2012
Students:	1 per Block
Prerequisites:	Medicine Clerkship (MED300) Adult Inpatient Clerkship (AIC300) Women's and Children's Health (WCH300)

GOAL

The gynecologic oncology elective provides experience in outpatient, inpatient, and operative management of women with gynecologic cancers. In the outpatient setting, students will learn the appropriate evaluations and testing necessary for women with suspected or known gynecologic cancers. Students will be active participants in the evaluation and treatment of women admitted for management. In addition, the student will be exposed to the radical surgery used in treating gynecologic cancer.

The student will prepare and present cases on daily rounds as well as at a monthly Tumor Board. In addition, the student will be given the opportunity to prepare an eTumor Board; a summary of a case that will be posted on the gynecologic oncology website.

LEARNING OBJECTIVES

SCHEDULE OF ACTIVITIES

Daily Rounds
Surgery (by assignment)
Clinic (by assignment)

DIDACTIC ACTIVITIES

REQUIRED READING

Posted on Blackboard - students doing an elective will be given access to articles

STUDENT EVALUATIONS

Students are evaluated by the resident and attending staff.

Reproductive Endocrinology and Infertility (OBG620)

Course Director:	John Queenan
Contact Person:	Course Director: John T. Queenan, Jr., MD; Contact: Anne Tedrow 275-7891
Location:	Strong Memorial Hospital
Block Length:	1-2 wks
Dates Offered:	07/18/2011 - 07/01/2012
Students:	1 per Block
Prerequisites:	Obstetrics and Gynecology Clerkship (OBG300) Medicine Clerkship (MED300) Adult Inpatient Clerkship (AIC300)

GOAL

You will gain experience in the evaluation and treatment of infertility patients. Students will be present at surgeries, in vitro fertilization procedures, office evaluations, and radiologic procedures. They will also have time to see activities that place in our Andrology lab and our Embryology lab which are both on site.

LEARNING OBJECTIVES

By the end of the elective the student should be able to: Perform a comprehensive reproductive history in the couple with infertility or the woman with a reproductive endocrinopathy. Describe the basic work up for infertility. Identify the indications for assisted reproductive technologies. Understand the role of surgery in the treatment of infertility. Explain the appropriate work up for anovulation.

SCHEDULE OF ACTIVITIES

Students will be expected to see patients with one of the attending physicians from 8:00am to 5:00pm, weekdays. On some days there will be surgery, ultrasound exams or hysterosalpingograms.

DIDACTIC ACTIVITIES

Resident lecture series: Thursdays: 9:00-11:00. These lectures are aimed at the residents, but students should be able to take advantage, as well. OB/GYN grand rounds: Thursdays, 7:30-8:30 a.m. IVF conference: Tuesday noon: review of patients in treatment, new patients and follow up. Division research seminars: Every Monday at noon. Joint conferences with medical endocrinology: Third Friday each month, 7:45 a.m. Urology conference: third Thursday of each month, 4:30 - 5:30 p.m. OB/GYN Journal Club: is part of Grand Rounds Schedule.

Chapter Review: Every Wednesday, Noon - 1:00 PM

REQUIRED READING

Speroff L, Glass RH, and Kase N. Clinical Gynecologic Endocrinology and Infertility, seventh edition: chapters 3,6, 11,12, 21,30,31, and 32. This book is available at Miner Library.* Other materials may be recommended to supplement the conferences.

STUDENT EVALUATIONS

Students should keep a log recording numbers and types of procedure to help document that learning objectives have been achieved. They will be expected to participate in conferences. They must receive a satisfactory evaluation from the attending physicians with whom they have worked.

Maternal-Fetal Medicine (OBG621)

Course Director:	Christopher Glantz M.D., MPH
Contact Person:	Chris Glantz, x56036, chris_glantz@urmc.rochester.edu
Location:	Strong Memorial Hospital
Block Length:	4 weeks
Dates Offered:	07/04/2011 - 06/17/2012
Students:	1 per Block
Prerequisites:	Medicine Clerkship (MED300) Women's and Children's Health (WCH300)

GOAL

The goal is to provide students with in-depth exposure to various aspects of Maternal-Fetal Medicine (MFM). Although the course is not a sub-I per se, the more responsibility the student assumes for patient care (i.e., the closer the student acts as a sub-I), the more the student will gain from the experience.

LEARNING OBJECTIVES

By the end of the rotation the student should be able to:-Manage normal and complicated labor and delivery.-Understand concepts of antepartum and intrapartum management of selected high risk pregnancies (e.g. preeclampsia, diabetes, preterm labor, premature rupture of membranes, multiple gestation, placental abruption, etc.)-Perform and interpret a basic obstetrical sonogram.-Interpret antepartum and intrapartum fetal heart rate tracings.-Understand the role of the Maternal-Fetal Medicine subspecialist.

SCHEDULE OF ACTIVITIES

Students on this rotation are overseen by the MFM faculty and OB Chief Resident at Strong Memorial Hospital. The clinical experience is divided between inpatient and outpatient management of high-risk (and some low-risk) pregnancies, and the student will have the opportunity to follow selected antepartum and intrapartum patients. The course entails rotations through the private and resident high-risk obstetrical clinics, Ob/Gyn ultrasound, Labor and Delivery, and the antepartum inpatient obstetrical service.

DIDACTIC ACTIVITIES

There are several meetings per week to discuss high-risk patient management, and weekly conferences in Genetics, Research, Ob/Gyn Grand Rounds, and combined Ob/Peds case presentations. There also are resident conferences that the student may attend. I meet with the students weekly to discuss topics of interest.

REQUIRED READING

There is no required reading per se, but familiarity with either Williams' or Gabbe's Obstetrics is expected, particularly the chapters on preterm labor, PROM, hypertension, diabetes, and multiple gestation.

STUDENT EVALUATIONS

Students must receive satisfactory evaluations from the MFM faculty and residents. Important elements include: evidence of active learning through reading and discussion with faculty, enthusiasm and interest, willingness to actively participate in patient care, and availability in Labor and Delivery and the Ambulatory Care Facility.

Family Planning (OBG622)

Course Director:	Sarah Betstadt MD
Contact Person:	Donna Darby, 585-273-2029, donna_darby@urmc.rochester.edu
Location:	SMH and Affiliated Hospitals
Block Length:	2 wks
Dates Offered:	07/04/2011 - 06/17/2012
Students:	2 per Block
Prerequisites:	Obstetrics and Gynecology Clerkship (OBG300)

GOAL

To become familiar with the epidemiological, psychosocial, medical and surgical aspect of abortion and contraceptive care.

LEARNING OBJECTIVES

In this Reproductive Health 2-week elective, we aim to teach you:

1. The epidemiology of unintended pregnancy and abortion care in the U.S
2. The medical evidence foundations of safe abortion care in the first and second trimesters
3. The psychosocial aspects of counseling and caring for women who are having abortions
4. The surgical process of first and second trimesters abortions, with hands on experience
5. Patient educational approaches to contraceptive counseling and care
6. The surgical process of contraceptive procedures (arm and uterine implant insertion) , with hands on experience

SCHEDULE OF ACTIVITIES

Week One

1. Monday Office preoperative patient visits
2. Tuesday AM: 1st trimester surgical abortion procedures. PM: Office preoperative patient visits
3. Wednesday Operating Room 2nd trimester surgical abortion procedures
4. Thursday Pending: Office preoperative patient visits **OR** Planned Parenthood session
5. Friday Pending: OR 2nd trimester surgical abortion procedures **OR** General Obgyn office **OR**

Ultrasound

Week Two

1. Monday Office preoperative patient visits. *Journal Club Presentation*
2. Tuesday AM: 1st trimester surgical abortion procedures. PM: Office preoperative patient visits
3. Wednesday Operating Room 2nd trimester surgical abortion procedures
4. Thursday Pending: Office preoperative patient visits **OR** Planned Parenthood session
5. Friday Pending: OR 2nd trimester surgical abortion procedures **OR** General Obgyn office **OR**

Ultrasound

DIDACTIC ACTIVITIES

Second Monday Journal Club presentation.

Thursday AM: Grand Rounds and Obgyn Resident Lectures pending schedule.

REQUIRED READING

1. On-line family planning curriculum
2. Ultrasound training CD

STUDENT EVALUATIONS

Students should log all procedures they attend during the rotation.

The attending(s) with whom the student worked will do an in-person evaluation during last day of rotation.

Professionalism in Medicine (OME605)

Course Director: David Lambert M.D.

Contact Person: Jane Risolo, 275-5910, jane_risolo@urmc.rochester.edu

Location: Strong Memorial Hospital

Block Length:

Dates Offered: 08/08/2011 - 08/14/2011

Students: 12 per Block

Prerequisites:

GOAL

To broaden the student's professional development and understanding of ethical dilemmas in medical education and careers in medicine.

Elective in Professionalism in Medicine

To broaden the student's professional development and understanding of ethical dilemmas in medical education and careers in medicine.

Second year students and forward are eligible to take the elective.

COURSE DIRECTORS David Lambert, M.D.

Brenda D. Lee. M.Ed.

LEARNING OBJECTIVES

- Identify and interpret the ethical dilemmas and professionalism concerns in the case scenarios
- Discuss and explain the subtle nuances in professionalism and ethical cases
- Develop skills in facilitating an orientation Professional Development Group

SCHEDULE OF ACTIVITIES

Most of the activities will occur during the Year I Orientation Week, August 8-12, 2011

DIDACTIC ACTIVITIES

- Attend the orientation for the new Professional Development Group facilitators
- Co facilitate an orientation Professional Development Group for the incoming medical students
- Attend the White Coat Ceremony
- Attend the Friday integration conference for the incoming class
- Prepare a one page summary on the lessons learned from co-facilitating the Professional Development Group and provide an assessment on how the week impacts on the incoming students' professional development
- Research, prepare and submit a professionalism case scenario for use in future Orientation Professional Development Groups, for the SMD Honor Board Educational sessions and/or in the Advisory Dean Groups.

REQUIRED READING

URSMD Professional Development Facilitator Guide and related documents

STUDENT EVALUATIONS

To receive a grade of Pass, student must attend all the scheduled sessions and prepare and submit a professionalism case scenario. The student must provide what topic of professionalism the case addresses - i.e. Issues of power differentials in the medical profession - and also provide a scholarly reference to support the information.

A summary of your experience as a PD instructor.

Basic Ophthalmology Elective (OPH600)

Course Director:	Holly Hindman
Contact Person:	Patty Deburro - Education Coordinator 273-3954
Location:	Strong Memorial Hospital
Block Length:	1 week
Dates Offered:	10/10/2011 - 05/27/2012
Students:	12 per Block
Prerequisites:	

GOAL

To provide an overview of concepts and techniques in Ophthalmology with are essential for all physicians.

LEARNING OBJECTIVES

By the end of the rotation the student should be able to: Recognize the significant external and internal structures of the normal eye and perform basic examinations. Evaluate a patient complaining of acute visual loss and construct the differential diagnosis, recognizing those situations where urgent action is necessary. Have familiarity with the major causes of chronic slowly progressive visual loss in adults, namely Glaucoma, Cataract, Macular Degeneration, and be able to identify the basic characteristics of each. Determine whether a patient with a red eye requires the prompt attention of an Ophthalmologist. Evaluate common ocular and orbital injuries and determine whether the problem requires the attention of an Ophthalmologist. Recognize the signs and symptoms of amblyopia and strabismus. Be able to perform the necessary tests to screen for these conditions, and if the patient is a child, be aware of the need to arrange for prompt ophthalmologic consultation, particularly when intraocular disease is suspected. Perform a basic neuro-ophthalmologic examination and recognize and interpret the more common symptoms and signs of neuro-ophthalmologic disorders. Determine when a patient with diabetes requires referral to an ophthalmologist, and to become familiar with the ocular findings associated with diabetes. Become familiar with the ocular findings associated with systemic hypertension, thyroid disease, Sarcoidosis, Acquired Immune Deficiency Syndrome, and Herpetic Eye Disease. Become familiar with the use of drugs to facilitate an eye examination, including how to stain the corneal surface with Fluorescein, anesthetize the cornea with topical anesthetic, and to dilate the pupils with one or more mydriatic agents. Become familiar with the use of basic examining and testing equipment in ophthalmology including visual acuity charts, direct ophthalmoscope, hand light, and slit lamp.

SCHEDULE OF ACTIVITIES

The clerkship will consist of approximately 50% didactic activities and skill building sessions and 50% clinical/OR time. During this period the student may be assigned to any combination of the following: a SMH full time attending practice, an Ophthalmology Resident- clinic practice, or the operating room. Students will accompany the preceptor through his/her day of practice, surgery, rounds, and conferences. During the week, the student is expected to read independently on specific topics which arise during their work week.

DIDACTIC ACTIVITIES

Students are required to participate in all didactic lectures. A schedule will be provided on the first day of the course.

REQUIRED READING

All students are required to read "Basic Ophthalmology" by Cynthia Bradford, MD. This book provides a broad overview to Ophthalmology for the medical practitioner.

STUDENT EVALUATIONS

It is expected that the student will pass the final written and practical examinations, complete a one-page paper based on a patient encounter, turn in a patient tracker log, and complete a course evaluation. The student will also be graded on their clinical skills, reasoning, and attendance.

Advanced Ophthalmology Elective (OPH601)

Course Director:	Holly Hindman
Contact Person:	Patty DeBurro, 273-3954
Location:	Strong Memorial Hospital
Block Length:	1-4 weeks
Dates Offered:	-
Students:	4 per Block
Prerequisites:	Basic Ophthalmology Elective (OPH600)

GOAL

The goal for this course is for the medical student to obtain more advanced skills and knowledge in Ophthalmology. This is provided through one on one instruction with a clinician. All students must have completed the prerequisite course, Ophthalmology 600, prior to enrolling in this course. Students also need approval of the course director. Students will be required to contact the director of the course to make suitable arrangements for their elective at least one month prior to their start date. Prerequisite - OPH600 Ophthalmology and with approval of the director.

LEARNING OBJECTIVES

The objectives in this course include acquiring more advanced skills for the diagnosis of Ophthalmological conditions, greater Ophthalmic knowledge, and a better understanding of the medical and surgical management of Ophthalmic conditions.

SCHEDULE OF ACTIVITIES

Students will work one-on-one with a clinical provider. They will be expected to attend the clinic, operating room, and conferences attended with the clinician to which they have been assigned. Every effort will be made to match a student with a clinician who works in their area of interest.

DIDACTIC ACTIVITIES

Students will also be asked to attend the a.m. and p.m. resident conferences along with the resident lecture series on Friday afternoons.

REQUIRED READING

Students are expected to read independently throughout the duration of their experience.

STUDENT EVALUATIONS

Evaluations will be made on based on attendance, knowledge, skills, and effort of the student. In addition, students will be expected to write a one page paper per week of the elective. This paper should be sparked by a patient encounter which has lead the student to do reading on the particular topic.

Pediatric ED (PED601)

Course Director: Geoffrey Everett M.D.

Contact Person: Geoffrey Everett, M.D., 922-3475, geoffrey.everett@viahealth.org

Location: Rochester General Hospital

Block Length: 4 weeks

Dates Offered: -

Students: 1 per Block

Prerequisites: Women's and Children's Health (WCH300)

GOAL

The pediatric Ed provides students ample opportunity to see pediatric patients with diverse diagnostic and therapeutic problems in a busy service area. The RGH pediatric ED sees about 21,00 cases a year and offers the student the opportunity to learn basic pediatric exam and treatment skills, as well as suturing and splinting/casting skills.

LEARNING OBJECTIVES

During this period the student will likely get exposure to the following conditions:|TRAUMATIC|?The evaluation and management of childhood sprains emphasizing the need to consider other diagnostic possibilities in the prepubescent population.?The evaluation and management of childhood fractures/dislocation emphasizing special considerations which are isolated to the pediatric population. Practice placing splints is encouraged. The student is responsible for reviewing all x-rays they personally order. The student will be offered indications for orthopedic consultation.?The evaluation and management of childhood burns including the grading of severity and the application of appropriate dressings.?The evaluation and management of head trauma including the indication for the use of cranial imaging studies.?The identification, evaluation and management of victims of child abuse including the definition of reasonable suspicion, understanding the process of being a mandated reporter, and the collection of forensic evidence.|NONTRAUMATIC|?The evaluation and management of childhood asthma including adjuncts used to assess severity.?The evaluation and management of abdominal/pain appendicitis.?The evaluation and management of seizures/altered mental status.?The evaluation and management of childhood poisonings/ingestion?s including the use of poison index.?The identification, evaluation and management of the dehydrated child.?The evaluation and management of the febrile child. The student must recognize the significance of a fever in a neonate and s/he must be able to develop a rational/systematic approach to the febrile child including the use of laboratory tests.?The student will be expected to identify subtle signs of respiratory distress and shock.

SCHEDULE OF ACTIVITIES

Students are assigned to work in the Rochester General Hospital pediatric ED either 8 AM to 4 PM or 4 PM to midnight, Monday through Friday, although flexibility is allowed in shift schedules. Student responsibility would approach that of an intern and include direct care of outpatients under resident and attending supervision. Emphasis is on active participation in all aspects of patient care, including procedural skills.

DIDACTIC ACTIVITIES

Students are expected to attend lectures/conferences which are tailored to the needs of pediatric residents and medical students. This includes morning report from 8 AM to 9 AM and noon conference. Furthermore, the student is expected to attend pediatric grand rounds (Tuesdays 8 AM to 9 AM)

REQUIRED READING

Students are encouraged to refer to the collection of pediatric textbooks which are made available in the pediatric ED.

STUDENT EVALUATIONS

The student?s grade is based upon satisfactory clinical evaluations from the preceptors during the elective rotation.

Pediatric Ambulatory Elective (PED602)

Course Director:	Neil Herendeen M.D.
Contact Person:	Neil Herendeen 273-4140 neil_herendeen@urmc.rochester.edu
Location:	Strong Memorial Hospital
Block Length:	1 - 4 weeks
Dates Offered:	07/04/2011 - 06/24/2012
Students:	1 per Block
Prerequisites:	Women's and Children's Health (WCH300)

GOAL

To develop skills and experience in the diagnosis and management of common pediatric illnesses and congenital disorders in the outpatient settings.

LEARNING OBJECTIVES

By the end of the rotation the student should be able to: Feel comfortable in evaluating children and adolescents with acute illnesses and injuries. Perform the initial assessment of newborn babies and recognize common newborn conditions. Counsel new parents on the care of their child including the psychosocial adjustment of the family. Recognize the impact of cultural and environmental factors and incorporate them into individual management plans. Demonstrate concise and complete oral and written patient evaluations. Demonstrate an understanding of the biopsychosocial model and its importance in pediatric practice. Develop problem solving strategies and treatment plans before consulting with the supervising pediatrician. Discuss appropriate antibiotic choices for the management of otitis media, pneumonia, and urinary tract infections. Discuss appropriate evaluation of the febrile infant.

SCHEDULE OF ACTIVITIES

Students should call 2 weeks before elective to assist in designing their own schedule to meet personal learning objectives. Practice sites include the acute illness clinic, subspecialty clinics and Pediatric Emergency Department at Strong Memorial Hospital. Private office settings can be included if advanced arrangements are made. Daily schedules typically start at 8:00 AM with morning report for all pediatric students and residents. Afternoon clinics finish at 5:30 PM.

DIDACTIC ACTIVITIES

Students are expected to read about and discuss the learning objectives with their preceptors during the clinical day. Morning report conferences are held each weekday at 8:00AM in the Bradford Library (4-3215) followed by outpatient conference for residents & students at 8:30 - 9:00 AM in AC6 on Tuesday, Thursday, and Friday. Pediatric Grand Rounds are held Wednesday 8:00-9:00 AM in the Whipple Auditorium (September - June).

REQUIRED READING

None. BUT there are reference materials in the AC-6 Conference Room and the Bradford Library that are easily accessible for patient centered reading.

STUDENT EVALUATIONS

To receive a grade of Pass, students must participate in the conferences and clinical sessions that they have scheduled. Clinical performance will be evaluated by the various preceptors the student works with. A summary evaluation will be completed by the course director.

Practice Based Experience in Med-Peds (PED604)

Course Director: Enrico Caiola M.D.

Contact Person: Enrico Caiola, MD, (585) 654-5432, enrico_caiola@urmc.rochester.edu;

Location: Private Office

Block Length: 2 - 4 weeks

Dates Offered: 07/04/2011 - 06/17/2012

Students: 1 per Block

Prerequisites:

GOAL

To expose the learner to the day-to-day life of a Med-Peds practitioner in a primary care setting.

LEARNING OBJECTIVES

To experience the outpatient management of common pediatric & internal medicine problems. The secondary objective is exposure to inpatient medicine and pediatrics.

SCHEDULE OF ACTIVITIES

Daily morning rounds with a Med-Peds attending followed by office hours paired with one of seven Med-Peds attendings seeing a mixture of adult and pediatric patients and problems.

DIDACTIC ACTIVITIES

Two half-hour teaching sessions per day, following the UR Med-Peds ambulatory curriculum.

REQUIRED READING

None required, but Allen Goroll's Primary Care Medicine and Dershewitz's Pediatric Primary Care are strongly suggested and are available in the office, so no need to purchase them.

STUDENT EVALUATIONS

An evaluation will be discussed half way through the rotation and a final evaluation will be written and submitted after it is discussed with the student. All seven attending physicians have equal input into the students evaluations.

Pediatric Developmental Disabilities (PED610)

Course Director:	Stephen Sulkes M.D.
Contact Person:	Phyllis Ives, 275-7383, phyllis_ives@urmc.rochester.edu
Location:	Strong Memorial Hospital
Block Length:	3 - 4 weeks
Dates Offered:	07/04/2011 - 07/01/2012
Students:	1 per Block
Prerequisites:	Women's and Children's Health (WCH300) Mind/Brain/Behavior Clerkship (MBB300)

GOAL

To acquaint students with an interdisciplinary approach to the diagnosis, treatment, and coordination of care for the child or adolescent with developmental disability. Students will also become familiar with normal/abnormal development, basic management strategies for common pediatric behavior problems, and community services and their coordination.

LEARNING OBJECTIVES

By the end of the rotation the student should be able to: Perform the medical part of an interdisciplinary diagnostic evaluation for a child with a developmental disability. Describe the roles of other interdisciplinary team professionals, including psychologist, educator, nurse, social worker, speech pathologist, occupational therapist, physical therapist, audiologist, and nutritionist. Participate in the process of care coordination for a child with complex developmental disability. Describe the necessary screening, diagnostic, and therapeutic tasks involved in appropriate primary care for children with spina bifida, cerebral palsy, autism, Down Syndrome, attention deficit disorder, and learning disabilities. List differential diagnoses for mental retardation, autism, attention deficits, and motor disability in children. Discuss appropriate use of pharmacologic agents such as muscle relaxants, anticonvulsants, psychostimulants, and other psychopharmacologic agents used in the care of children with developmental disabilities. Utilize standard developmental screening tools and recognize when further evaluation or developmental intervention is necessary.

SCHEDULE OF ACTIVITIES

Students will participate in all clinical activities of the Strong Center for Developmental Disabilities, including Kirch Center, as well as visiting community agencies such as schools, residences, and other clinics for guided observations and patient screenings/work-ups.

DIDACTIC ACTIVITIES

Weekly SCDD Core Lecture Series on research and leadership in the care of children with neurodevelopmental disorders; weekly pediatric discipline conference; computer-aided instruction; individualized teaching; and a brief, informal talk based on reading on a related subject of the student's choice.

REQUIRED READING

Handbook of Developmental and Behavioral Pediatrics, 2nd ed, Parker and Zuckerman; handouts.

STUDENT EVALUATIONS

Students will be evaluated based on the quality and completeness of their patient workups (Objectives 1, 4, 5, 6), their ability to participate as members of interdisciplinary teams (Objectives 2, 3), and their well-child screenings (Objective 7), as well as on their informal talks (Objectives 1-7).

Adolescent Medicine (PED615)

Course Director:	Cheryl Kodjo M.D., MPH
Contact Person:	Donna Spencer 275-7760, donna_spencer@urmc.rochester.edu
Location:	Strong Memorial Hospital
Block Length:	2 weeks
Dates Offered:	07/04/2011 - 06/10/2012
Students:	1 per Block
Prerequisites:	Women's and Children's Health (WCH300) Mind/Brain/Behavior Clerkship (MBB300)

GOAL

To become more familiar with the care of adolescents as many specialties interact with this patient population.

LEARNING OBJECTIVES

By the end of the rotation the student should be able to:
Knowledge of normal physical and psychological development of adolescents
Understand consent and confidentiality as it pertains to the adolescent
Demonstrate ability to perform a comprehensive interview of the adolescent

SCHEDULE OF ACTIVITIES

This elective is structured into inpatient and outpatient experiences. Mornings are generally spent at Strong Memorial Hospital, doing patient rounds and consults. The afternoons are spent at different clinical sites at the hospital and in the community. The schedule for clinical assignments will be sent to the students via email the week prior to starting the elective.

DIDACTIC ACTIVITIES

The students are also expected to attend several adolescent medicine didactic sessions that take place over the course of the week, involving a seminar, case presentations, and journal club. Please refer to the schedule.

REQUIRED READING

Readings available on URM Golisano Children's Hospital Resident Website Homepage at <https://intranet-secure.urmc.rochester.edu/Depts/PedsResidency/index.asp>. In order to enter the website, please enter your username and password. Click on the Rotation-Specific Information icon at the far left. Then click on Adolescent Medicine. There are readings, websites, and other resources available here.

STUDENT EVALUATIONS

To receive a grade of Pass, students must attend clinical sessions, demonstrate enthusiasm, and be open to feedback and learning. The student should also demonstrate increasing communication skills and knowledge of adolescent health.

Pediatric Gastroenterology/Nutrition (PED620)

Course Director:	Marilyn Brown M.D.
Contact Person:	Marilyn_brown@urmc.rochester.edu 275-2647
Location:	Strong Memorial Hospital
Block Length:	2 or 4 weeks
Dates Offered:	07/04/2011 - 07/08/2012
Students:	1 per Block
Prerequisites:	Women's and Children's Health (WCH300)

GOAL

To become more familiar with the practice of Pediatric Gastroenterology, an essential pediatric subspecialty

LEARNING OBJECTIVES

By the end of the rotation the student should be able to:1.) Be able to identify patients for whom consultation with a pediatric gastroenterologist is indicated.2) Have had experience of seeing patients in the outpatient or inpatient setting with the following diagnoses: Constipation/encopresis, gastroesophageal reflux, chronic inflammatory bowel disease, chronic abdominal pain.3) Have read about a few common topics in Pediatric GI/Nutrition

SCHEDULE OF ACTIVITIES

Students will follow a few inpatients, and assist in the outpatient clinics. They will observe procedures such as upper endoscopy and colonoscopy. The student will be encouraged to give a talk on a Pediatric GI topic.

DIDACTIC ACTIVITIES

Students will attend Pediatric Morning report and Pediatric Grand Rounds. They are also expected to attend the weekly Pediatric Nutrition Support Service Rounds, weekly adult GI Clinical Conference, the bi weekly Pediatric GI Pathology Conference, and the biweekly Pediatric GI/Nutrition Fellows conference

REQUIRED READING

Copies of specific articles will be handed out - these cover the following topics: Pediatric Parenteral and Enteral Nutrition, Neonatal Cholestasis, Chronic Diarrhea, Chronic Inflammatory Bowel Disease, Constipation/Encopresis, Chronic Abdominal Pain, Hepatitis A-G, Gastroesophageal Reflux. Further reading will be encouraged regarding specific patient topics, as well as the major texts: Pediatric Gastrointestinal Diseases Volumes 1 & 2, Allen Walker, and Pediatric Liver Disease by Fred Suchy.

STUDENT EVALUATIONS

The student will be evaluated on interest, enthusiasm, and participation in learning the skills important in the diagnosis and management of pediatric GI diseases.. The student should show ability to perform literature searches on interesting patient topics.

Pediatric Intensive Care (PED625)

Course Director:	Jeffrey Rubenstein M.D., M.B.A.
Contact Person:	Stacy L Smith
Location:	Strong Memorial Hospital
Block Length:	4 weeks
Dates Offered:	-
Students:	1 per Block
Prerequisites:	Women's and Children's Health (WCH300)

GOAL

To acquaint the student with the approach to a critically ill infant, child, or adolescent and to understand the rationale for the initial treatment of critically ill pediatric patients with common disease processes.

LEARNING OBJECTIVES

By the end of the rotation the student should be able to: Identify pediatric patients with shock when they present. Discuss the common causes of shock in the pediatric patient, their pathophysiology, and the initial treatments for children in shock. Identify pediatric patients with respiratory failure when they present. Discuss the common causes of respiratory failure in the pediatric patient, their pathophysiology, and the initial treatments for children with respiratory failure. Identify neurologic disease that requires intensive care therapies in pediatric patients. Discuss the common neurologic crises that occur in the pediatric patient, their pathophysiology, and their initial treatments. Understand the principles of positive pressure mechanical ventilation in pediatric patients. Be able to differentiate between pressure and volume modes of mechanical ventilation. Be able to analyze blood gas results; understand acid-base disorders. Describe the effects of critical pediatric illness on parents and families.

SCHEDULE OF ACTIVITIES

Students will function as members of the care team in the PICU. They will be responsible for the direct care (under close supervision) of one or more patients. They will round with the care team (at 7:30 a.m. on weekdays) and provide care during the remainder of the day. They will attend the daily teaching conference and afternoon sign-out rounds. Each student will present at this conference once during their rotation. This presentation will make reference to a specific interesting patient. Support and guidance about this presentation is available from members of the PICU faculty. Every third or fourth night call is optional, but is strongly encouraged.

DIDACTIC ACTIVITIES

REQUIRED READING

Resource reading material is available in the PICU. Readings will be patient-focused, and will concentrate on making clear evidenced-based approaches to the care of patients. The two major texts in Pediatric Critical Care are: Pediatric Critical Care (Fuhrman and Zimmerman); Textbook of Pediatric Intensive Care (Rogers). These books are available in the intensive care unit.

STUDENT EVALUATIONS

To receive a grade of pass, students must participate in the PICU program and demonstrate a beginning understanding of pediatric critical illness.

Pediatric Pulmonology (PED628)

Course Director:	Karen Voter M.D.
Contact Person:	Debbie Longbine
Location:	Strong Memorial Hospital
Block Length:	2 or 4 weeks
Dates Offered:	07/04/2011 - 07/01/2012
Students:	1 per Block
Prerequisites:	Women's and Children's Health (WCH300)

GOAL

To diagnose and provide care for children with difficult asthma, cystic fibrosis, bronchopulmonary dysplasia and technology dependence.

LEARNING OBJECTIVES

By the end of the rotation the student should be able to: Perform relevant history and physical examinations for pulmonary diagnoses, interpret pediatric pulmonary function tests, and appreciate indications for bronchoscopy in children. The student should be able to develop a differential diagnoses and preliminary treatment plan for children with pulmonary diagnoses.

SCHEDULE OF ACTIVITIES

Attend Pediatric Pulmonary Clinics in ACF-1 three half-days per week (1:00-5:00 p.m. on Tuesdays, 8:30-12:00 a.m. on Monday, and Thursdays) and one half day per week at the Mary Parkes Asthma Center (8:30 - 12 on Fridays), make rounds daily on hospitalized patients and consults on hospitalized children with respiratory disorders.

DIDACTIC ACTIVITIES

Attend Pediatric Morning Report (daily, 8:00-8:30 a.m.), and Pediatric Pulmonary Interdisciplinary Rounds (Mondays, 1:00-2:00 p.m., Tuesdays, 12:00-1:00 pm, and Thursdays 1:00-2:00), attend Pulmonary Teaching Conference on Wednesdays 1:00 - 2:00 pm and attend Radiology rounds Wednesdays 11:00 - 11:30.

REQUIRED READING

A core reading notebook located in the Pediatric Pulmonary Conference Room has articles on key and basic topics in pediatric pulmonology. This info is also stored on S: Drive

STUDENT EVALUATIONS

Evaluations will be completed by the attending physician in clinic and on the inpatient service based on the student's ability to evaluate and follow patients with lung disease.

Pediatric Nephrology (PED630)

Course Director:	George Schwartz M.D.
Contact Person:	Ms. Clara Washington 275-9784 Clara_Bennett@urmc.rochester.edu
Location:	Strong Memorial Hospital
Block Length:	3 - 4 weeks
Dates Offered:	07/11/2011 - 06/17/2012
Students:	1 per Block
Prerequisites:	Pediatrics Clerkship (PED300)

GOAL

To better understand the diagnosis and management of kidney disease, hypertension, and fluid/electrolyte problems in children.

In contrast with adult nephrology, there is more emphasis on a variety of kidney diseases and fluid/electrolyte problems and less effort on dialytic management of acute kidney failure.

LEARNING OBJECTIVES

By the end of the rotation the student should be able to:-Identify patients for whom consultation with a pediatric nephrologist is indicated.-Attempt to focus on specific aspects of diagnosis and management.-Become familiar with basic aspects of fluid and electrolyte disturbances, as they relate to renal and nonrenal patients.-Develop familiarity in analyzing urine under the microscope.-Become familiar with normality in growing children as it pertains to blood pressure, protein excretion, and growth and development.-Become familiar with the most common types of referrals to a pediatric nephrology practice, including the diagnosis of persistent microscopic hematuria and proteinuria.-Develop a familiarity in reviewing renal ultrasounds.-Become familiar with end-stage renal patients, particularly those who have been transplanted or are on peritoneal/hemodialysis.-Become acquainted with non-dialytic modes of supporting renal insufficient children during growth.-Better understand the relevance of adequate renal function in the process of growth and development in children.

SCHEDULE OF ACTIVITIES

Students are assigned to SMH under the direction of the faculty member and/or fellow on service from approximately 8 a.m. to 5 p.m. on weekdays. The student will participate in rounding on inpatients, compiling a summary of the results in the past 24 hours with recommendations for subsequent diagnosis and management in consultation with the faculty member. On one or two mornings per week, the student will participate in outpatient clinic, seeing patients, making his/her own formulations prior to reviewing and seeing the patient with an attending nephrologist. During outpatient clinic the student will have an opportunity to review the urinalysis on each patient that he/she has seen with the help of the faculty member.

DIDACTIC ACTIVITIES

The students are expected to attend major divisional educational conferences, including weekly clinical conferences and journal clubs as well as monthly scheduled conferences when they occur, including Pediatric Renal/GU, research, and pathology conferences.

REQUIRED READING

A syllabus of major important articles to the pediatric nephrology literature is available on loan from the divisional secretary in 4-8116, ext. 5-9784.

STUDENT EVALUATIONS

Students will receive a satisfactory evaluation if they keep a log noting that they have seen each of the inpatients and at least three outpatients per week and that they have indicated that they have learned about each of the specific objectives listed above, and, finally, that they have read at least ten articles from the syllabus provided by the division.

Pediatric Genetics (PED635)

Course Director:	Chin-To Fong M.D.
Contact Person:	Chin-To Fong, MD or Susan Aldridge 275-5857
Location:	School of Medicine
Block Length:	Minimum 2 weeks, 4 weeks preferred
Dates Offered:	07/04/2011 - 07/08/2012
Students:	2 per Block
Prerequisites:	

GOAL

To understand the applications of genetic principles in medical practice. To gain familiarity with common genetic conditions. To experience all aspects of clinical genetics including genetic counseling, prenatal genetics, inborn errors of metabolism and dysmorphology. Although listed as a pediatric elective, this elective will offer experience in genetic practice in a wide range of age groups and specialties.

LEARNING OBJECTIVES

By the end of the rotation the student should be able to: Obtain an accurate three generation pedigree. Obtain an appropriate genetic history. Observe and understand the genetic physical examination. Understand the role of genetic testing in diagnosis. Observe genetic counseling in several situations including prenatal diagnosis and clinical dysmorphology. Assist with inpatient consultations. Demonstrate use of the genetic literature. Understand the concepts of alpha-feto-protein testing, chromosome testing, DNA testing and other genetic testing. Develop an area of interest and present a 15-30 minute presentation on this topic or develop a case report for publication.

SCHEDULE OF ACTIVITIES

General Genetics Clinic Monday afternoon, Wednesday afternoon, Thursday afternoon and Friday morning.
Inherited Metabolic Disorders Clinic Monday and Tuesday mornings
Cancer Genetics Clinic: Thursday and Friday afternoons
Pediatric Cardiogenetics Clinic: first Wednesday afternoon of each month
Adult Cardiogenetics Clinic: first Thursday afternoon of each month
Adult Cardiogenetics Clinic: first Thursday afternoon of each month
Craniofacial Team Clinic: last Friday of each month
Various meetings: Thursday mornings, and at other times subject to change

DIDACTIC ACTIVITIES

Ad hoc lectures

REQUIRED READING

A syllabus will be provided.

STUDENT EVALUATIONS

The student should participate in patient care and discussions to demonstrate a growing expertise in genetics, be available for consultations, research patient problems encountered during the rotation, and present a topic of interest in Genetic rounds.

Team Care of the Pediatric Craniofacial Patient (PED637)

Course Director:	John Girotto M.D.
Contact Person:	Beth Jocolano; 273-3656; beth_jocolano@urms.rochester.edu
Location:	Strong Memorial Hospital
Block Length:	2 - 4 or more weeks
Dates Offered:	07/04/2011 - 06/24/2012
Students:	1 per Block
Prerequisites:	Adult Inpatient Clerkship (AIC300)

GOAL

Students should be able to experience and understand the multi-disciplinary treatments of children with facial differences.

LEARNING OBJECTIVES

Medicine is becoming disease focused rather than specialty focused. Caring for children with complex facial anomalies requires a multidisciplinary approach. The student should:

1. understand the breadth of issues associated with cleft lip and palate and other facial differences
2. be able to identify who would benefit from referral to a craniofacial team
3. experience the interplan and information transfer that is essential to team care.

SCHEDULE OF ACTIVITIES

Daily time with all members of the craniofacial team. Includes conferences, clinics and operating time. Time will be spent in the areas of genetics, ENT surgery, Oral surgery, dentistry, and plastic surgery.

DIDACTIC ACTIVITIES

Presentation at monthly craniofacial team is required.

REQUIRED READING

Provided

STUDENT EVALUATIONS

Students will be evaluated by multiple faculty members in the areas of genetics, oral surgery, ENT, and plastic surgery. The end of month presentation will be graded by our team.

Pediatric Cardiology (PED643)

Course Director: Rae-Ellen Kavey

Contact Person: Pearl Bloom, 275-6090, pearl_bloom@urmc.rochester.edu

Location: School of Medicine

Block Length: 4 - 8 weeks

Dates Offered: 07/04/2011 - 06/17/2012

Students: 1 per Block

Prerequisites:

GOAL

To understand how to distinguish normal from abnormal cardiovascular signs and symptoms, understand how to recognize, manage, and, if necessary, refer cardiovascular conditions in children, understand key principles related to the use of cardiovascular drugs, and understand the role of prevention of cardiovascular disease in pediatric patients.

LEARNING OBJECTIVES

By the end of the rotation the student should be able to:

Recognize normal age-related changes in heart rate and blood pressure.

Describe the mechanisms of production of heart sounds and murmurs and recognize classic auscultatory findings of innocent and pathologic murmurs.

Differentiate between physiologic and pathologic variations in cardiac rhythm.

Describe the normal perinatal circulation and its influence on the development of signs and symptoms of heart disease in the neonate.

Describe the use and indications for electrocardiography, echocardiography, exercise testing, ambulatory electrocardiographic monitoring and cardiac catheterization.

Identify and describe the management of functional heart murmurs, musculoskeletal chest pain, and mild labile hypertension.

Describe the initial evaluation and management of the child presenting with serious signs and symptoms related to the cardiovascular system such as cyanosis, palpitations and/or arrhythmias, congestive heart failure, syncope, abnormal heart sounds, and pathologic murmurs.

Describe the physical findings, pathophysiology, genetics, usual treatments, and prognosis for common cardiovascular conditions including ventricular septal defect, atrial septal defect, tetralogy of Fallot, patent ductus arteriosus, coarctation of the aorta, aortic and pulmonary stenosis, mitral valve prolapse, supraventricular tachycardia, Kawasaki disease, acute rheumatic fever, bacterial endocarditis, and cardiomyopathy.

Describe the physiology, indications, and contraindications of commonly used cardiovascular drugs including antiarrhythmics, chronotropes, inotropes, diuretics, vasodilators, vasopressors.

Recognize the risk factors and identify appropriate screening and prevention strategies for atherosclerotic heart disease.

SCHEDULE OF ACTIVITIES

The student will participate in all activities and conferences of the division including time in the outpatient clinic, inpatient consultations, observation/participation in performing electrocardiograms, exercise testing, echocardiography.

Opportunity will be provided to observe in the cardiac catheterization lab and operating room.

DIDACTIC ACTIVITIES

Students are expected to read about and discuss the learning objectives with their mentor throughout the rotation. In addition, students are expected to attend the daily Pediatric Cardiology morning conferences.

REQUIRED READING

Myung K. Park. Pediatric Cardiology for Practitioners. 5th edition. Mosby Elsevier, 2008.

Rudolph CD, Rudolph AM, ed. Rudolph's Pediatrics. 21st ed. New York: McGrae-Hill, Medical Pub. Division; 2003.

McMillian JA, ed. Oski's Pediatrics: Principles & Practice. 4th ed. Philadelphia: Lippincott Williams & Wilkins; 2006.

Kliegman RM, et al., ed. Nelson Textbook of Pediatrics. 18th ed. Philadelphia: Saunders; 2007.

STUDENT EVALUATIONS

To receive a grade of pass, students must have demonstrated active participation in the clinical activities of the division, and in consultation with the pediatric cardiology attending on service, document that the learning objectives have been covered and met.

Pediatric Infectious Diseases (PED645)

Course Director:	Mary Caserta
Contact Person:	Susan Ames
Location:	Strong Memorial Hospital
Block Length:	2 -4 weeks
Dates Offered:	07/04/2011 - 07/08/2012
Students:	1 per Block
Prerequisites:	

GOAL

To become familiar with and gain an initial understanding of the practice of Pediatric Infectious Diseases

LEARNING OBJECTIVES

- 1. Explain the symptoms and physical findings that suggest the presence of an infectious disease and perform a PE appropriate for an ID consult.**
- 2. Take an exposure history that provides clues to a specific diagnosis (ill contacts, travel, pets or other animal exposures, occupation, insect bites and diet).**
- 3. Identify standardized guidelines for diagnosis and treatment of conditions common to this subspecialty area and adapt them to the individual needs of specific patients (i.e. catheter assoc infect guidelines)**
4. Relate the importance of proper specimen collection and its effect on results, explain the limitations of those tests (sensitivity, specificity, predictive values, cost).

SCHEDULE OF ACTIVITIES

!) Daily work rounds and teaching rounds with the Attending and Peds ID team.2) Conference participation including Pediatric Morning Report (three times per week), and weekly Peds ID clinical conference, and joint Medicine and Pediatric ID clinical conference,

DIDACTIC ACTIVITIES

As above, Peds ID clinical conference and joint Medicine and Pediatric ID clinical conference.

REQUIRED READING

Selected papers on important and/or frequent clinical problems encountered in Peds ID are available on the Pediatric Shared drive for the residents and medical students to read. In addition, daily reading based upon questions related to ongoing patient care is expected.

STUDENT EVALUATIONS

Students will be evaluated by the Pediatric ID attending using the standard format provided by the School of Medicine. In addition, verbal feedback will be provided on an on-going basis by the residents, fellow, and attending on the service as applicable.

Pediatric Hematology/Oncology (PED647)

Course Director:	Craig Mullen MD
Contact Person:	Dolores DiCesare, 52981, dolores_dicesare@urmc.rochester.edu
Location:	Strong Memorial Hospital
Block Length:	2 weeks
Dates Offered:	-
Students:	1 per Block
Prerequisites:	Pediatrics Clerkship (PED300)

GOAL

To provide an intensive experience in clinical Pediatric Hematology/Oncology in which students will acquire an understanding of the diagnosis, pathophysiology, and management of the common hematologic and oncologic diseases of childhood with an appreciation for the effect of these serious diseases on the patients and their families.

LEARNING OBJECTIVES

By the end of the rotation the student should be able to: Explain the physiology of normal blood formation and destruction. Accurately diagnose common causes of cytopenias (i.e., neutropenia, anemia, thrombocytopenia) in children. Given history and physical exam, efficiently utilize laboratory tests in the diagnostic work-up and be able to evaluate a blood smear. Describe the pathophysiologic mechanisms of the anemia and the different types of crises in sickle cell disease. Describe in a step-wise manner, the work-up for a prolonged PTT, a prolonged PT, and a prolonged bleeding time. Accurately apply the various bleeding tests in the light of the patient history and physical findings. Describe childhood ALL in terms of its incidence, peak age range, common signs and symptoms and general treatment concepts. Explain how prognostic factors have been used to define tailored therapy for ALL. Be familiar with common forms of cancer in children in terms of peak age, clinical presentation, staging and common sites of metastatic spread. These forms of cancer include Wilms tumor, Non-Hodgkin and Hodgkin Lymphoma, Neuroblastoma, Osteogenic Sarcoma, Ewings sarcoma family of tumors, Rhabdomyosarcoma, Medulloblastoma and other brain tumors. Describe a blast cell and be able to differentiate between a blast cell and reactive lymphocyte, and be familiar with the morphology of hematopoietic cells. Using clinical and laboratory data, differentiate between ALL and ITP, acute mononucleosis and iron deficiency anemia.

SCHEDULE OF ACTIVITIES

Students work on the outpatient (AC-6) and inpatient (4th floor SMH) service of the Pediatric Hematology/Oncology. Clinic is currently scheduled Mon, Wed and Thurs 8:30-5:00, Tues and Fri 8:30-1:00. Students perform initial consultations (history, physical, collect lab data, followed by presentation to attending, including impression and plan. Also may be responsible for dictating patient care note.) and follow-up evaluations in clinic, with an attending preceptor. They may also attend inpatient rounds each morning, see inpatient consults as appropriate, and may see limited inpatients with the attending. The elective is primarily outpatient based. Students who desire a more intensive inpatient experience may apply to do a externship on the Pediatric Heme/Onc service. Emphasis is on active participation in all aspects of patient care.

DIDACTIC ACTIVITIES

Inpatient housestaff rounds (Tue-Fri 7:30-8:30 am), Morning report (Tue., Th., Fri. 8:30-9:00 a.m.); Attending Rounds (scheduled with each housestaff rotation); Academic conference (variable Tues. 3:00-4:00 p.m.); Sign-in Conference (Mon. 8:00-9:00 a.m.). Patient conference (Fri., 3:30-5:30 p.m.)

REQUIRED READING

Textbooks can be borrowed from the Peds Hem/Onc Library. Principles and Practice of Pediatric Oncology 2nd ed., by P. Pizzo and D. Poplack (also on line); Hematology of Infants and Children, 5th ed. By D. Nathan and F. Oski.

STUDENT EVALUATIONS

To receive a grade of pass, students must receive a satisfactory clinical evaluation from their preceptors during the elective. It is preferred that student's also do a short presentation at one of the division clinical conferences or housestaff teaching sessions.

Pediatric Endocrinology (PED649)

Course Director:	Nicholas Jospe M.D.
Contact Person:	Nicholas Jospe, MD 275-7744 Nicholas_Jospe@urmc.rochester.edu
Location:	Strong Memorial Hospital
Block Length:	2 - 4 weeks
Dates Offered:	07/04/2011 - 07/08/2012
Students:	1 per Block
Prerequisites:	Women's and Children's Health (WCH300)

GOAL

To expose the student to a wide variety of pediatric endocrine disorders.

LEARNING OBJECTIVES

Normal growth patterns for infants, children and adolescents. The student will become familiar with the differential diagnosis of disturbances of growth. The student will become familiar with hormones that influence growth rates, such as growth hormone, thyroid hormone, glucocorticoid, and hormone sex steroids. Finally, the student will become familiar with modes of administration, indications and potential side effects of growth promoting therapy. The student will become familiar with the physiology of the posterior pituitary, with specific attention to the role of vasopressin. The differential diagnosis of diabetes insipidus will be discussed, as well as the modes of therapy. Role and regulation of thyroid hormone. Thyroid function tests will be discussed, along with tests for the integrity of the hypothalamic pituitary thyroid axis. The differential diagnosis of hypothyroidism and hyperthyroidism and the various forms of therapy will be discussed. The student will be taught how to recognize signs and symptoms of thyroid disease. Didactic sessions will be devoted to exposing the student to the broad range of phenotypic findings in thyroid disease. Diabetes. Etiology, genetics, and pathogenesis of Type I and Type 2 diabetes will be discussed. The diagnosis and treatment of diabetic ketoacidosis will also be discussed. The inpatient and outpatient management of diabetes will be carefully reviewed. The long-term outcome of diabetes in children as well as future directions will be reviewed. Disorders of the adrenal cortex. The pathophysiology of disorders of adrenal steroidogenesis resulting in congenital adrenal hyperplasia will be discussed. Biochemical and clinical features of each of the disorders will be discussed. The signs and symptoms, laboratory tests and treatment for Cushing syndrome and Addison disease will be reviewed. Disorders of pubertal development. Normal variations in developmental patterns and abnormal pubertal development (early or delayed) will be discussed. Tanner staging will be carefully reviewed. The effect of excess or deficient adrenal or gonadal steroids will be reviewed. Disorders of sexual development in the newborn infant. Normal sexual differentiation will be reviewed, followed by a discussion of gonadal or chromosomal disorders of sexual differentiation and their biochemical and phenotypic consequences. Parathyroid and vitamin D-related disorders. Parathyroid physiology will be discussed and clinical entities including hypoparathyroidism and hypocalcemia or hyperparathyroidism will be discussed, along with their modes of therapy.

SCHEDULE OF ACTIVITIES

Students will participate in all inpatient and outpatient pediatric endocrine activities. The students will participate in outpatient endocrine clinics on two half-days per week and pediatric diabetes clinics on one full day per week, as well as journal clubs and clinical conferences. The student will act as the primary source for all consultative and inpatient clinical work.

DIDACTIC ACTIVITIES

Students are expected to read about and discuss the learning objectives with their preceptor during the day.

REQUIRED READING

Selected chapters in Clinical Pediatric Endocrinology, 2nd Ed., Editor: Solomon A. Kaplan and additional reading material is supplied by the preceptors.

STUDENT EVALUATIONS

The preceptor writes evaluation of the student. It is based on an assessment of fund of knowledge, acquisition of new knowledge, and improvement in reasoning ability and over.

Diabetes Camp (PED649A)

Course Director: Nicholas Jospe M.D.

Contact Person: Trish Donahue, American Diabetes Association 585-458-3040, Ext. 3477, trishd55@frontiernet.net

Location:

Block Length: 1 or 2 weeks

Dates Offered: 07/04/2011 - 07/17/2011

Students: 10 per Block

Prerequisites: Pediatrics Clerkship (PED300)

GOAL

First week is **Sunday, July 3th through Friday, July 8th, 2011** (ages 13 - 17); second week is **Sunday, July 10th through Friday, July 15th, 2010** (ages 8 -12). Students can work either one or both weeks. Attendance at a pre-camp training session is required. Training dates are: Saturday, June 11, & Saturday July 2 just before camp. Students can attend either session but do not need to attend both. A maximum of 10 students per week will be accepted on a first come, first serve basis. Exposure to Pediatric and adolescent diabetes management in a camp setting. Involvement in glucose and calorie intake and general diabetes management in children and adolescents. Hours are daily 7am to 9:30PM on most days One or two over night stays. Meals provided. Every evening 5-8 PM, review of glucose logs on all campers. Didactic sessions with endocrinologist and literature review will be supplied during the elective.

LEARNING OBJECTIVES

diabetes management in children and adolescents

SCHEDULE OF ACTIVITIES

Details will be provided.

DIDACTIC ACTIVITIES

Early evening, 90 minutes: discussion and glucose and insulin review.

REQUIRED READING

will be provided at camp

STUDENT EVALUATIONS

written, if desired.

Pediatric Neonatology (PED650)

Course Director:	Robert Swantz M.D.
Contact Person:	Dr. Robert Swantz, 275-2972, robert_swantz@urmc.rochester.edu
Location:	Strong Memorial Hospital
Block Length:	2 - 4 weeks
Dates Offered:	07/04/2011 - 06/24/2012
Students:	1 per Block
Prerequisites:	Obstetrics and Gynecology Clerkship (OBG300) Pediatrics Clerkship (PED300)

GOAL

To understand how to resuscitate and stabilize a critically ill neonate, to appreciate the pathophysiologic basis for common disorders of the newborn, and to understand how to evaluate and manage common diseases of the newborn.

LEARNING OBJECTIVES

By the end of the rotation the student should be able to:

Describe the physiologic adaptation of the newborn to extrauterine life and the steps in neonatal resuscitation and stabilization.

Demonstrate proper and effective delivery room resuscitation techniques for newborns.

Perform an appropriate assessment (history, physical examination and initial diagnostic studies) and formulate a differential diagnosis for the following common signs and symptoms: prematurity, growth failure, respiratory distress, cyanosis, heart murmur, apnea/bradycardia, abdominal distension, hepatosplenomegaly, dysmorphic features, hypoglycemia, jaundice, anemia, and thrombocytopenia.

Describe the pathophysiologic basis of and key principles of management for the following common conditions: respiratory distress syndrome, transient tachypnea, pneumonia, aspiration, bronchopulmonary dysplasia, congenital heart disease, infant of diabetic mother, hyperbilirubinemia, neonatal sepsis, necrotizing enterocolitis, apnea of prematurity.

Explain the indications for ordering, and interpret the results of the following laboratory and radiology tests:

CBC/differential, hematocrit, blood type, Coomb's, serum electrolytes, fractionated bilirubin, blood gas, EKG, urinalysis, bacterial/viral cultures of blood/CSF/urine, CSF cell count, serologic tests, neonatal drug screening, NYS newborn screen, chest/abdomen radiographs, and head ultrasound.

Discuss the indications for, and demonstrate proper technique in performing the following procedures: physiologic monitoring, endotracheal intubation, mechanical ventilation, venipuncture, arterial puncture, umbilical catheterization, urethral catheterization, lumbar puncture, phototherapy, pulse oximetry.

Communicate and work effectively with members of the NICU patient care team, and with parents and families of critically ill neonates.

SCHEDULE OF ACTIVITIES

The student is assigned to the SMH Neonatal Intensive Care Unit (3-3400) and works with the housestaff team. The student will function as an acting intern, assuming primary responsibility for his/her patients under the supervision of the housestaff, neonatology fellows, and attending neonatologist. For rotations of 2 week duration the student will work M-F, 6:00am-5:00pm. Rotations of 4 week duration for Sub-I credit, will include weekend responsibilities and in-house night call every fourth night.

DIDACTIC ACTIVITIES

Students will participate in the daily educational activities for the pediatric housestaff in the NICU, including morning report, attending rounds, bedside work rounds, radiology conference, and sign-out rounds. Additionally, the student will attend the weekly perinatal conference, and health team rounds.

REQUIRED READING

The following reading materials are available in the Division of Neonatology: "Guidelines for Housestaff in the NICU" and numerous general and specialty neonatology textbooks. In addition the SMH NICU Website has direct links (via Miner Library, PDF files) of pertinent journal articles and reviews.

STUDENT EVALUATIONS

The student will review their experience with the attending neonatologist and course director. To receive a grade of satisfactory, the student must be judged by them to have appropriately achieved the learning objectives

Pediatric Radiology (PED653)

Course Director:	Johan Blickman
Contact Person:	Holly Stiner, holly_stiner@urmc.rochester.edu, phone: 273-5476
Location:	Strong Memorial Hospital
Block Length:	2 weeks
Dates Offered:	08/01/2011 - 05/20/2012
Students:	1 per Block
Prerequisites:	Diagnostic Radiology (RAD602)

GOAL

The goal of this elective is to appreciate that Pediatric Imaging is more than just imaging of small adults.

LEARNING OBJECTIVES

The learning objectives of this elective are to:

Learn a logical approach to pediatric imaging studies

To acquire an understanding of the role of the radiologist as a consultant involved in the patient care team.

SCHEDULE OF ACTIVITIES

During the elective your major assignment is to observe image interpretation and various procedures in the pediatric radiology imaging suite.

In the morning there will be case reviews by the radiology resident and attending. The medical student will be observing fluoroscopic procedures and special imaging studies, such as CT and ultrasound.

Attendance at the daily radiology resident conference is not required but is strongly encouraged.

The medical student will be responsible for writing up at least one interesting patient case per week that they have observed. The case write up should include:

Indications for exam Radiologic findings

Patient history Interpretation of findings

Type of exam performed Differential diagnosis

Diagnostic options Follow-up

Key images (include copies of films)

Appropriate literature references

DIDACTIC ACTIVITIES

Daily Resident Conference, 11:45-1:15 PM

REQUIRED READING

Squire's Fundamentals of Radiology. Robert Novelline, 6th Edition.

Pediatric Radiology; The Requisites. Johan Blickman, 3rd Edition.

Pediatric Imaging: The Fundamentals. Lane Donelley.

STUDENT EVALUATIONS

Students will be evaluated on their participation in film review sessions and on case write-ups regarding knowledge, clinical skills, problem-solving and clinical reasoning abilities, communication skills and interpersonal and professional qualities, including dependability, motivation, and interpersonal relationships.

Integrative/Complementary and Alternative Medicine (PED660)

Course Director:	O.J. Sahler M.D.
Contact Person:	O.J.Sahler, MD 275-3935
Location:	
Block Length:	2 weeks
Dates Offered:	09/26/2011 - 05/27/2012
Students:	1 per Block
Prerequisites:	Adult Inpatient Clerkship (AIC300)

GOAL

The goal of this elective is to acquaint participants with the broad area of CAM and ways to incorporate CAM into their practice where appropriate.

LEARNING OBJECTIVES

*Locate and critically evaluate the literature in CAM*Describe the major features and underlying philosophy of at least one alternative system of healthcare (e.g. traditional Chinese medicine, ayurvedic medicine, naturopathy)*Develop a logical evidence-based strategy for incorporating a complementary medicine modality into the healthcare plan of a patient.

SCHEDULE OF ACTIVITIES

The two-week block is divided into 20 half-days of didactic or experiential activities. At least three half-days per week will be spent in the offices of properly credentialed CAM practitioners. Individuals on elective will also be able to learn meditation, yoga, or other relaxation techniques for personal use.

DIDACTIC ACTIVITIES

Didactic sessions will focus on:*Epidemiology of CAM use among adults and children;*History of the development of the National Center for CAM (NCCAM);*Overview of the NIH Model of CAM classification;*Overview of CAM therapies;*History of the development and evolution of Western Medicine;*Evidence-based approach to CAM including hands-on work with relevant databases and resources on the Internet and within the community.

REQUIRED READING

Eisenberg DM et al. Unconventional medicine in the United States: Prevalence, costs, and patterns of use; New England Journal of Medicine 328(4):246-252, 1993.Eisenberg DM et al. Trends in alternative medicine use in the United States, 1990-1997: Results of a follow-up national survey; JAMA, 280(18): 1569-1575, 1998.Selected readings from Novey, DW. Clinician's Complete Reference to Complementary & Alternative Medicine. Mosby: St. Louis; 2000.
Kemper, K The Holistic Pediatrician A Pediatrician's Comprehensive Guide to Safe and Effective Therapies for the 25 Most Common Ailments. (2nd Ed) 2002.Hart J. CAM and medical education. Altern Compl Therap 15:288-291;2009
Yarnell E, Abascal K. Drugs that interfere with herbs. Altern Compl Therap 15:299-301;2009
Schofield P, et al. Effectively discussing complementary and alternative medicine in a conventional oncology setting: Communication recommendations for clinicians. Patient Educ Counsel 2009
www.cpmcnet.columbia.edu/dept/rosenthal/MDCourses.htmlwww.nccam.nih.gov

STUDENT EVALUATIONS

To receive a grade of pass, students must attend all scheduled activities, contribute to discussions, and prepare a critique of the experience at each clinical site.

CARE (PED661)

Course Director: C. Andrew Aligne

Contact Person: Sandi Tu ~ x3-3737 ~ Santina_Tu@urmc.rochester.edu

Location: Strong Memorial Hospital

Block Length: 2-4 weeks

Dates Offered: -

Students: 5 per Block

Prerequisites:

GOAL

- v To enhance knowledge of community health
- v To practice and learn new skills in community health leadership
- v To design a community health project in collaboration with community-based partners
- v To become lifelong leaders committed to improving the health of all children and families

LEARNING OBJECTIVES

By the end of the rotation, the student(s) will have enhanced knowledge, attitudes, skills & habits in the areas listed below

SCHEDULE OF ACTIVITIES

Please contact me directly for a confirmed schedule, but please note that the CARE block will be held July 25 - August 5, 2011 from 8-5 p.m. M-F.

DIDACTIC ACTIVITIES

Series of lectures/workshops to include:

- v Population Perspectives on Health and Disease
- v Evidence-Based Public Health
- v Moving from the Clinic to the Community
- v Working with CBOs
- v Mini-Proposal Writing
- v Going Upstream/Project Planning
- v Mind-Mapping/Brainstorming
- v Grant-writing
- v Public Speaking/One-Minute Talks
- v How to Speak to the Media
- v Behavior Change
- v Leadership/Change the World
- v Teamwork
- v Advocacy: Letter Writing, etc.
- v Evaluation of Programs
- v Global Health

REQUIRED READING

The CARE Track Handbook: Leadership in Community Pediatrics (provided) Additional articles and books available, but not required for participation.

STUDENT EVALUATIONS

Will formulate an evaluation to be set-up on the E-value system

Child and Adolescent Psychiatry (PSY606)

Course Director: Michael Scharf

Contact Person: Jeffrey Lyness, MD, and Michael Scharf, MD, 275-6741, Jeffrey_Lyness@urmc.rochester.edu, M

Location: Strong Memorial Hospital

Block Length: 4 weeks or negotiable

Dates Offered: 07/11/2011 - 06/24/2012

Students: 2 per Block

Prerequisites: Psychiatry Clerkship (PSY300)

GOAL

* All psychiatry electives must be approved in advance by Dr. Lyness and elective director*

Students will acquire basic skills for the child and adolescent psychiatric work-up, and understand the role of the child psychiatrist both as a primary caregiver and as a consultant involved in the patient care team.

LEARNING OBJECTIVES

By the end of the rotation the student should be able to: 1) Interact with children/adolescents and their families, obtain full psychiatric history, and complete a written psychiatric evaluation. 2) Understand basic psychopathology in children and adolescents, including mood disorders and developmental disorders. 3) Demonstrate basic understanding of treatments in child and adolescent psychiatry, including psychotherapies (individual, group, family; supportive and behavioral) and pharmacological treatments. 4) Understand the systems that provide psychiatric and related care services to children, adolescents, and their families.

SCHEDULE OF ACTIVITIES

The student will observe and participate in diagnostic evaluations, treatment team meetings, and group, family, and individual therapies. Specific site/service assignments will be based on student interest and availability; potential options include the Pediatric Psychiatry Consultation and Liaison Team (Golisano Children's Hospital), Child and Adolescent Outpatient Service, Child and Adolescent Partial Hospital Service, and Child and Adolescent Inpatient Service (or a combination thereof).

DIDACTIC ACTIVITIES

Students will attend a weekly seminar. Students also will meet individually with his/her preceptor to discuss patients, write-ups, and topics of mutual interest.

Students are expected to complete an independent study project and present it to the clinical team they are working with by the end of their rotation. Most students prepare and present a 30 minute Powerpoint presentation, but specific details are individualized based on the nature of the project and will be determined with Rotation Preceptor.

REQUIRED READING

Selected chapters from: M Lewis (Ed): Clinical and Adolescent Psychiatry: A Comprehensive Textbook, 2nd Edition; Williams and Wilkins, Baltimore, 1996. Additional articles provided by preceptors and therapists related to cases seen.

STUDENT EVALUATIONS

Clinical evaluations by preceptor and other clinicians with whom the student works.

Inpatient Psychiatry (PSY610)

Course Director: Telva Olivares M.D.

Contact Person: Jeffrey Lyness, MD, 275-6741, Jeffrey_Lyness@urmc.rochester.edu; Vicki Perry, vicki_perry@u

Location: Strong Memorial Hospital

Block Length: 4 weeks

Dates Offered: 09/12/2011 - 07/01/2012

Students: 1 per Block

Prerequisites: Psychiatry Clerkship (PSY300)

GOAL

* All psychiatry electives must be approved in advance by Dr. Lyness and elective director *

To gain experience and skills in evaluating and caring for patients admitted to acute psychiatric services

LEARNING OBJECTIVES

The student will be able to: 1. Gather a complete clinical database for psychiatric inpatient unit, including patient interview and mental status examination, discuss with collateral informants as indicated and record review. 2. Present the clinical databases in oral and written formats. 3. Generate and discuss a differential diagnosis and formulation. 4. Help implement needed treatments as a part of multidisciplinary inpatient care team.

SCHEDULE OF ACTIVITIES

The emphasis is on active participation in all aspects of patient care. Students will work a minimum of 8:00 a.m. - 5:00 p.m. 5 days/week. The student will be assigned to a specific inpatient unit, based on planning with the course director, available options including general psychiatry, MICA (Mental Illness-Chemical Abuser), geriatrics and neuropsychiatry, and child and adolescent.

DIDACTIC ACTIVITIES

Students will be expected to read about and discuss the learning objectives with their inpatient attending. They will attend Psychiatry Grand rounds (Wednesdays 9:00 - 10:00 a.m.)

REQUIRED READING

Case-based reading assignments will be taken from Synopsis of Psychiatry 8th edition (Kaplan and Sadock), as well as from case-based review of primary literature.

STUDENT EVALUATIONS

Students will be evaluated by their inpatient attending psychiatrist. To receive a grade of pass, the student must demonstrate achievements of the learning objectives to the course director, based on receiving a satisfactory clinical evaluation.

Consultation Psychiatry (PSY612)

Course Director: Michael Privitera

Contact Person: Jeffrey Lyness, M.D. , Mike Privitera, M.D., 275-6741, Jeffrey_Lyness@urmc.rochester.edu Mi

Location: Strong Memorial Hospital

Block Length: By arrangement. Minimum of two full weeks.

Dates Offered: 09/12/2011 - 07/08/2012

Students: 1 per Block

Prerequisites: Psychiatry Clerkship (PSY300)

GOAL

All psychiatry electives must be approved in advance by Dr. Lyness and the elective director

To gain skills in diagnosing and treating various psychiatric disorders that occur in the general hospital; to develop skills functioning as a psychiatric consultant in this setting.

LEARNING OBJECTIVES

By the end of the rotation the student should be able to: Become more comfortable with the evaluation and management of depression in the medically ill, the interactions between medical illness and psychiatric symptoms, neuropsychiatric disorders such as delirium and dementia, somatoform disorders, suicidal behavior, anxiety or agitation with medically ill patients, the use and management of psychopharmacologic agents in the elderly or medically ill, and the assessment of capacity in such patients.

SCHEDULE OF ACTIVITIES

DIDACTIC ACTIVITIES

REQUIRED READING

STUDENT EVALUATIONS

Emergency Psychiatry (PSY615)

Course Director:

Contact Person: Jeffrey Lyness, MD, and Mary Lou Meyers, MD, 275-4501, Jeffrey_Lyness@urmc.rochester.edu,

Location: Strong Memorial Hospital

Block Length: Variable by arrangement

Dates Offered: 07/11/2011 - 06/24/2012

Students: 1 per Block

Prerequisites: Psychiatry Clerkship (PSY300)

GOAL

* All psychiatry electives must be approved in advance by Dr. Lyness and the elective director*

To gain experience and skills in rapid and accurate assessment of patients presenting to a psychiatric emergency room

LEARNING OBJECTIVES

By the end of the rotation the student should be able to:-Gather a complete clinical database for a psychiatric emergency room visit, including patient interviews and mental status examination, discussion with collateral informants as indicated and record review.-Present the clinical database in highly focused oral and written formats.-Generate and discuss a differential diagnosis and formulation.-Discuss the recommendations and treatment options provided to the patient.

SCHEDULE OF ACTIVITIES

The emphasis is on active participation in all aspects of the patient evaluations. Students will work a minimum of 5 shifts/week, a combination of day and evening shifts to be scheduled on an individual basis.

DIDACTIC ACTIVITIES

Students are expected to read about and discuss the learning objectives with the psychiatric emergency room faculty, residents, and staff during their clinical day. They will attend Psychiatry Grand Rounds Wednesdays 9:00 - 10:00 a.m. This is an active research site, and there are numerous opportunities for medical students to engage in research activities if desired.

REQUIRED READING

Case-based reading assignments will be taken from Synopsis of Psychiatry 8th edition (Kaplan and Sadock), as well as from case-based review of primary literature.

STUDENT EVALUATIONS

Students will be evaluated by faculty for each shift worked, as well as by the course director. To receive a grade of pass, the student must demonstrate achievement of the learning objectives to the course director, based partly on receiving satisfactory clinical evaluations from their attending and residents

Geriatric Psychiatry (PSY616)

Course Director: Jeffrey Lyness M.D.

Contact Person: Lisa Boyle, MD, 275-2824, lisa_boyle@urmc.rochester.edu

Location: SMH and Affiliated Hospitals

Block Length: By arrangement. Minimum of two weeks

Dates Offered: 07/11/2011 - 06/24/2012

Students: 1 per Block

Prerequisites: Psychiatry Clerkship (PSY300)

GOAL

* All psychiatry electives must be approved in advance by Dr. Lyness and the elective director *

The purpose of this elective is to give the student knowledge and clinical skills related to the assessment and treatment of mental disorders in older adults.

LEARNING OBJECTIVES

1. The student will understand the broad range of psychopathology manifested in older adults, and the range of treatment options available to such patients, including how such conditions and their treatments may differ from those in younger adults. 2. The student will gain experience and skills in working with selected geriatric patient populations, including mood disorders, cognitive disorders, and disorders secondary to general medical conditions, as seen in inpatient, outpatient, and consultative settings.

SCHEDULE OF ACTIVITIES

Depending on each student's specific interests, an individualized schedule will be created that will include supervised clinical experiences together with a program of seminars and guided independent readings. Block length: 2 - 4 weeks.

DIDACTIC ACTIVITIES

As per above; didactics will be chosen from our program's broad range of clinical and research seminars and case conferences.

REQUIRED READING

Individualized reading list from primary literature, together with relevant chapters from geriatric psychiatry texts such as the American Psychiatric Publishing Textbook of Geriatric Psychiatry (Blazer, Steffens, Busse, eds).

STUDENT EVALUATIONS

Evaluation form completed by supervisor(s) at the end of the rotation; feedback given on an ongoing basis during the rotation.

Forensic Psychiatry (PSY617)

Course Director:	Richard Ciccone
Contact Person:	J. Richard Ciccone, MD; Jeffrey Lyness, MD
Location:	SMH and Affiliated Hospitals
Block Length:	2-4 wks
Dates Offered:	07/11/2011 - 06/24/2012
Students:	2 per Block
Prerequisites:	Psychiatry Clerkship (PSY300)

GOAL

* All psychiatry electives must be approved in advance by Dr. Lyness and the elective director *

The purpose of this elective is to give the student knowledge and clinical skills related to the care and treatment of patients in forensic psychiatric settings. Prior approval for this elective must be obtained from Jeffrey Lyness, MD.

LEARNING OBJECTIVES

The student will be able to: 1) Gain experience and basic skills in working with psychiatric patients who have involvement with the legal system 2) Gather a complete clinical database for forensic psychiatric inpatient/outpatient unit, including patient interview and mental status examination, discuss with collateral informants as indicated and record review 3) Present the clinical databases in oral and written formats 4) Generate and discuss a differential diagnosis and formulation

SCHEDULE OF ACTIVITIES

The student will work closely with the Forensic Psychiatry Fellows and rotate to the Forensic Psychiatry rotation sites at Rochester Psychiatric Center's Regional Forensic Unit; Monroe County Sociolegal Center and Unity Health System's Evelyn Brandon Health Center.

DIDACTIC ACTIVITIES

The student will participate in psychiatry and law seminars, landmark case seminars and clinical case conferences that occur during the student's rotation.

REQUIRED READING

Individualized reading list from primary literature, relevant chapters from Forensic Psychiatry texts and Landmark Cases supplied in the American Academy of Psychiatry and the Law's Landmark Cases, Volumes I - III, as appropriate to the seminars.

STUDENT EVALUATIONS

Evaluation form completed by supervisor(s) at the end of the rotation; feedback given on an ongoing basis during the rotation.

Addiction Psychiatry (PSY620)

Course Director:

Contact Person: Jeffrey Lyness, MD, 275-6741 jeffrey_lyness@urmc.rochester.edu , Gloria Baciewicz, MD

Location: Strong Memorial Hospital

Block Length: 1-2 Weeks

Dates Offered: 07/11/2011 - 06/24/2012

Students: 1 per Block

Prerequisites: Psychiatry Clerkship (PSY300)

GOAL

* All psychiatry electives must be approved in advance by Dr. Lyness and the elective director*

The Department of Psychiatry offers a comprehensive range of services to people suffering from addictions to alcohol and drugs. This elective offers students the opportunity to evaluate patients newly presenting for treatments, and to observe and participate in a range of clinical services including outpatient psychiatric consultation, group therapy with addictions counselors, and methadone clinic.

LEARNING OBJECTIVES

SCHEDULE OF ACTIVITIES

DIDACTIC ACTIVITIES

REQUIRED READING

STUDENT EVALUATIONS

Inpatient Medicine-Psychiatry (PSY621)

Course Director:	Telva Olivares M.D.
Contact Person:	Vicki Perry, 275-4293 vicki_perry@urmc.rochester.edu
Location:	Strong Memorial Hospital
Block Length:	4 wks
Dates Offered:	09/12/2011 - 07/01/2012
Students:	1 per Block
Prerequisites:	Medicine Clerkship (MED300) Psychiatry Clerkship (PSY300)

GOAL

** Please obtain approval from Drs. Olivares and Lyness before committing to this elective **

Goal:

To gain experience and skills in evaluating and caring for patients with acute medical conditions complicated by co-existing mental illness and disordered behaviors.

Inpatient rotation in the Behavioral Medical Surgical Unit, a 20-bed medical unit caring for the acute medical needs of patients with psychiatric and/or behavioral comorbidities. The student will be responsible for the medical/psychiatric care delivered to patients under the supervision of the unit attending physicians.

LEARNING OBJECTIVES

The student will be able to :

Gather and complete the clinical database relevant for an acute medical unit, including interview, physical assessment, and discussion with collateral informants as indicated and record review

Present the clinical database in oral and written formats to the attending

Generate and discuss a differential diagnosis and formulation that will help guide treatment

Help implement needed and appropriate treatments including behavioral plans as part of a multidisciplinary inpatient care team

SCHEDULE OF ACTIVITIES

The emphasis is on active participation in all aspects of patient care. Students will work a minimum of 8:00 am - 5:00 pm, 5 days/week and one day (either Saturday or Sunday) every other weekend as determined by the attending. The student will be assigned to 1-9200 unit and will generally work with one main teaching attending although several other attendings and midlevel providers participate on the service.

DIDACTIC ACTIVITIES

Students will attend Psychiatry Grand Rounds (Wednesday, 9:00 - 10:00 am) and/or Medicine Grand Rounds (Tuesday, 8:00 - 9:00 am). There are daily teaching rounds with students and residents and the student will be asked to give a presentation and/or work on a small project related to their experience.

REQUIRED READING

Case-based reading assignments will be taken from Harrison's Principle of Internal Medicine and UpToDate, as well as from case-based primary literature.

STUDENT EVALUATIONS

Students will be evaluated by their inpatient attending. To receive a grade of pass, the student must demonstrate achievements of the learning objectives to the course director, based on receiving satisfactory clinical evaluations.

Outpatient Psychiatry (PSY622)

Course Director: Sue DiGiovanni

Contact Person: Vicki Perry, Coordinator: 275-4293 vicki_perry@urmc.rochester.edu

Location: SMH and Affiliated Hospitals

Block Length: 2 weeks

Dates Offered: 07/11/2011 - 06/24/2012

Students: 1 per Block

Prerequisites: Mind/Brain/Behavior Clerkship (MBB300)

GOAL

To gain understanding and experience in diagnosing and treating various psychiatric disorders in an outpatient setting utilizing different modalities of treatment and community resources.

LEARNING OBJECTIVES

The student will be able to:
learn assessment and management of psychiatric disorders of all age groups in different ambulatory settings
understand the differences in the ambulatory system versus other service systems within a behavioral health care setting
understand the role of psychiatrist and different models of care in ambulatory settings

SCHEDULE OF ACTIVITIES

Half day supervised clinics at Olders Adults Clinic, Child Outpatient Clinic, Adult Ambulatory Clinic (Strong Ties, General Adult Ambulatory), and nursing home consultation

DIDACTIC ACTIVITIES

Varies per clinic site

REQUIRED READING

DSM-IV: Synopsis of Psychiatry; additional recommended readings available at service sites

STUDENT EVALUATIONS

Mid-rotation feedback. A written evaluation will be completed by the preceptor at the end of the elective. End of rotation review.

Collaborative Problem Solving (PSY623)

Course Director:	David M Garrison MD
Contact Person:	Vicki Perry, 275-4293, vicki_perry@urmc.rochester.edu
Location:	Strong Memorial Hospital
Block Length:	
Dates Offered:	07/11/2011 - 06/24/2012
Students:	1 per Block
Prerequisites:	Psychiatry Clerkship (PSY300)

GOAL

To work directly with children and families admitted to the Child and Adolescent Inpatient Psychiatry Unit in the application of the parenting approach, Collaborative Problem Solving (CPS).

LEARNING OBJECTIVES

1. To learn and apply the CPS techniques of de-escalating children with severe aggression
2. To learn and apply the CPS techniques of skill building with children to help them anticipate their triggers and improve their vulnerabilities
3. To teach families and other care providers, including teachers, the techniques of CPS to extend its use beyond the inpatient setting

SCHEDULE OF ACTIVITIES

Rounding with attending teaching team led by Dr. Garrison in the mornings
Post-rounding with patients with focus on the use of Proactive Plan B and a Pathways Report Card
Participating in daily programming with nurses and psychiatric technicians
Working with treatment team in direct work with families and others on the implementation of CPS techniques beyond the inpatient setting

DIDACTIC ACTIVITIES

Attending didactics with 1st year Child and Adolescent Psychiatry Fellows
Classic Readings and Formulation Seminar 9:00 AM - 12:00 PM Thursdays
Department Grand Rounds 9 - 10 AM Wednesdays

REQUIRED READING

Greene R. The Explosive Child, Revised Upd Edition, Harper Paperbacks, 2010
Greene et al. Effectiveness of Collaborative Problem Solving with Affectively Dysregulated Children with Oppositional Defiant Disorder: Initial Findings. Journal of Consulting and Clinical Psychology. 72:1157, 1164, 2004
Greene et al. Use of Collaborative Problem Solving to Reduce Seclusions and Restraints in Child and Adolescent Inpatient Units. Psychiatric Services. 57:610-612, 2006
Martin et al. Reduction in Restraint and Seclusions with Collaborative Problem Solving: A Five-Year Prospective Inpatient Study. Psychiatric Services. 59: 1406-1412, 2009

STUDENT EVALUATIONS

Narrative evaluation from Dr. Garrison at completion of elective

Surgical Pathology (PTH602)

Course Director: Linda Schiffhauer

Contact Person: Betsy McDonald 273-4580; betsy_mcdonald@urmc.rochester.edu

Location: Strong Memorial Hospital

Block Length: 4 - 8 weeks

Dates Offered: -

Students: 1 per Block

Prerequisites:

GOAL

To function as a junior house officer and to actively participate in the workup and signout of surgical pathology specimens under the guidance and close supervision of senior residents and attendings. To attend and participate in frozen sections. To present at one weekly surgical pathology conference. To become familiar with the role of an academic surgical pathologist.

LEARNING OBJECTIVES

By the end of the rotation the student should be able to:Gross in simple specimens.Make basic pathological diagnoses.Understand the process by which a pathologist acts as a consultant to the clinician and the interactive process involved.

SCHEDULE OF ACTIVITIES

The hours of the rotation are 8 a.m. to 5 p.m. For the first week or two, the student will observe grossing in of specimens, slide sign out, and frozen sections. When it is felt that the student has learned a sufficient amount of information, he/she will then be allowed under close supervision to gross in specimens and sign them out with the attending. They will present at one weekly surgical pathology teaching conference.

DIDACTIC ACTIVITIES

Weekly surgical pathology teaching conference.Daily 3 p.m. consensus conference.Formal weekly presentations by surgical pathology faculty.Other relevant anatomic pathology conferences.

REQUIRED READING

Relevant sections of the textbook of pathology (Sternberg, et.al., Diagnostic Surgical Pathology) related to the cases they are working up and are exposed to.

STUDENT EVALUATIONS

The student will be evaluated when the faculty meet monthly. They will be evaluated in reference to attendance on the rotation, their understanding of the various policies and procedures involved in surgical pathology, their grossing and diagnostic skills, and their presentation at the weekly surgical pathology conference.

Clinical Pathology (PTH603)

Course Director: Linda Schiffhauer

Contact Person: Betsy McDonald

Location: Strong Memorial Hospital

Block Length:

Dates Offered: -

Students: 1 per Block

Prerequisites:

GOAL

Introduction to clinical pathology.

LEARNING OBJECTIVES

SCHEDULE OF ACTIVITIES

DIDACTIC ACTIVITIES

REQUIRED READING

None at this time

STUDENT EVALUATIONS

Anatomic Pathology (PTH605)

Course Director: Linda Schiffhauer

Contact Person: Betsy McDonald 273-4580; betsy_mcdonald@urmc.rochester.edu

Location: Strong Memorial Hospital

Block Length:

Dates Offered: 09/05/2011 - 02/26/2012

Students: 1 per Block

Prerequisites:

GOAL

Elective blocks of four weeks are available in Autopsy Pathology, Forensic Pathology at the Monroe County Medical Examiner's office or Neuropathology.

LEARNING OBJECTIVES

Introduction to anatomic pathology subspecialties.

SCHEDULE OF ACTIVITIES

When rotating through Autopsy Pathology or Neuropathology, the student will be exposed to post mortem examinations and presentations of organs to the clinical attending, and participate in sign-out sessions with the attending pathologist. While participating on the Forensic Pathology rotation at the Medical Examiner's Office, the student may visit the scene of the crime or attend court to observe testimony. Due to the litigious nature of the forensic cases, this is an observation-type rotation only.

DIDACTIC ACTIVITIES

Attendance would be required at all didactic conferences, subspecialty presentations and mandatory resident conferences.

REQUIRED READING

Although there is no required reading, reference books will be available on all rotations for the medical student to access.

STUDENT EVALUATIONS

The student will be evaluated using the ACGME competencies as a benchmark.

Hematopathology (PTH606)

Course Director: Linda Schiffhauer

Contact Person: Betsy McDonald 273-4580

Location: Strong Memorial Hospital

Block Length: 2 or 4 weeks

Dates Offered: -

Students: 1 per Block

Prerequisites:

GOAL

LEARNING OBJECTIVES

SCHEDULE OF ACTIVITIES

DIDACTIC ACTIVITIES

REQUIRED READING

STUDENT EVALUATIONS

The student will be evaluated using the ACGME competencies.

Diagnostic Radiology (RAD602)

Course Director:**Contact Person:** Holly Stiner@urmc.rochester.edu, 273--5476**Location:** Strong Memorial Hospital**Block Length:** 2 Weeks**Dates Offered:** 08/01/2011 - 05/20/2012**Students:** 4 per Block**Prerequisites:**

GOAL

This general radiology elective is structured to provide an overview of the breadth of diagnostic imaging, invasive radiology and an introduction to the fundamentals of diagnostic radiology. This includes the basics of chest, skeletal, gastrointestinal, and genitourinary system imaging; and introduces angiography, nuclear medicine, magnetic resonance imaging, computed tomography, ultrasound, and neuroradiology.

It is not the purpose of the elective to have the student become a skilled interpreter of imaging studies. A familiarity will be established, but directed to the use of the technologies involved.

LEARNING OBJECTIVES

1. The student will develop an understanding of the differences between, and interactions among, each of the imaging specialties and the operation of these radiologic subspecialties in the context of modern radiologic and medical practice.
2. Learn very basic plain film and CT interpretation and become familiar with sonography and MR, and recognize limitations in knowledge and understanding of radiological interpretation.
3. Gain an understanding of the clinical indications for obtaining studies, the relative risk/benefit of radiologic procedures and the basic technical aspects of how examinations are performed.

SCHEDULE OF ACTIVITIES

1. (1) Interesting Case Per Week of Rotation. This will be presented to the Director and other students rotating through.
2. Attendance at Daily Didactic Conference from 11:45-1:15PM

DIDACTIC ACTIVITIES

REQUIRED READING

Squire's Fundamentals of Radiology. Textbook can be loaned out upon request.

STUDENT EVALUATIONS

Evaluations will be done on daily basis by the radiology faculty/resident/Fellow. The forms are then turned in to the coordinator at the end of the elective.

Nuclear Medicine (RAD603)

Course Director:	Vaseem Chengazi M.D., Ph.D.
Contact Person:	Shirley Tracey, x5-4741, shirley_tracey@rochest
Location:	Strong Memorial Hospital
Block Length:	Negotiable
Dates Offered:	07/04/2011 - 06/24/2012
Students:	2 per Block
Prerequisites:	

GOAL

: To understand the basics for the clinical application of diagnostic and therapeutic nuclear medicine procedures to the patient population.

LEARNING OBJECTIVES

By the end of the rotation the student should be able to: Understand the clinical basics for functional imaging in diagnostic nuclear medicine procedures such as bone scans, infectious disease localization, papillary studies, cardiac procedures, ventilation perfusion scan and tumor and endocrine imaging. Establish an understanding of the basic requirements for radiation safety for workers and patients. Be able to describe the differences in approach and calculation of dose for various radioisotopic therapeutic procedures. Develop at least a basic approach to the evaluation of the correlated and competitive modalities in their application to various disease states.

SCHEDULE OF ACTIVITIES

During the morning, the students will participate in a basic activity with the residents and attending faculty in the diagnostic/therapeutic clinic activity. In the afternoons, students will be expected to participate in the daily reading/instructional session from 2:30-5:00 p.m. in which the day's caseload is used as a springboard for discussion of diagnostic and therapeutic problems and applications. Students will also be expected to participate in the routine conference schedule of both the Division of Nuclear Medicine and the Department of Radiology.

DIDACTIC ACTIVITIES

Regular conference schedule of Nuclear Medicine and Radiology.

REQUIRED READING

A Clinician's Guide to Nuclear Medicine. Edited by Andrew Taylor, M.D., and David M. Schuster and Naomi Alazraki

STUDENT EVALUATIONS

Student evaluations will be collated by the course director utilizing reports from both attending and resident faculty as to student participation and development.

Advanced Diagnostic Radiology (RAD610)

Course Director: Holly Stiner

Contact Person: Holly Stiner, Imaging Sciences, Box 648 - 273-5476, Holly_Stiner@urmc.rochester.edu

Location: Strong Memorial Hospital

Block Length: 2 Weeks

Dates Offered: 08/01/2011 - 05/20/2012

Students: 1 per Block

Prerequisites: Diagnostic Radiology (RAD602)
Diagnostic Radiology (RAD602)

GOAL

This elective is intended for students who are either preparing for a career in radiology or have a particular interest in a subspecialty area of radiology. Students are given the opportunity to design a more intensive, independent-study elective by rotating through specific individual subspecialty section(s) of the department.

Prerequisite: Completion of Rad602 Radiology Elective or prior completion of a rotation through radiology.

LEARNING OBJECTIVES

By the end of the rotation the student should be able to: 1. Increase the student's understanding of the subspecialties of diagnostic radiology by supplementing the student's exposure to radiology from didactic material taught in the first three years of medical school as well as from their initial rotation in radiology. This includes:

Identify indications for the exams based on clinical, lab, and prior radiographic information.

Describe how the exam is performed and necessary patient preparations.

Identify what alternative diagnostic procedures exist.

Understand the general principles of interpretation.

SCHEDULE OF ACTIVITIES

The student will write up at least one interesting case per week for teaching file and/or publication.

DIDACTIC ACTIVITIES

Attendance of Radiology lectures from 11:45 am to 1:15 pm

REQUIRED READING

Squire's Fundamentals of Radiology.

STUDENT EVALUATIONS

Physical Medicine and Rehabilitation (RHB600)

Course Director:	Douglas Fetkenhour
Contact Person:	Dianne Rotella 5-3272 or Krista Pike 5-3274
Location:	SMH and Affiliated Hospitals
Block Length:	2 - 4 weeks
Dates Offered:	07/04/2011 - 07/08/2012
Students:	2 per Block
Prerequisites:	

GOAL

To develop an appreciation of the impact of disease and injury on function, and to understand the application of physical medicine approaches and rehabilitation strategies to the alleviation of functional impairments.

LEARNING OBJECTIVES

By the end of the rotation the student should be able to: Demonstrate proficiency in examination of the musculoskeletal system. Integrate neurologic and musculoskeletal findings into the development of functional assessments. Predict the nature of functional impairment resulting from specific neurologic or anatomic injuries. Understand the roles of each of the members of the rehabilitation team. Order appropriate tests as required to develop a musculoskeletal or neurologic diagnosis, as well as a rehabilitation diagnosis. Order appropriate therapeutic interventions based on functional diagnoses. Order appropriate interventions in the face of acute illness or injury to prevent unnecessary complications that frequently lead to disability. Describe the breadth of the field of PM&R, and discuss the roles of various settings, including acute inpatient, subacute/SNF and outpatient rehabilitation.

SCHEDULE OF ACTIVITIES

This elective is designed with flexibility in mind. Inpatient, outpatient, or a combination of experiences are possible. The elective will focus on providing students with an education and an exposure to the broad field of Physical Medicine and Rehabilitation. Students who desire to rotate on an inpatient service will become a part of the rehabilitation team, serving with a resident and an attending physician. Students will round with the team, as well as evaluate and manage their own patients. They will observe their patients as they undergo rehabilitation, gaining an understanding of the variety of therapeutic approaches used. Students assigned to SMH will see patients recovering from spinal cord injury, stroke, amputation, orthopaedic surgery, burns, multiple trauma and a variety of neurologic conditions. Students assigned to St. Mary's will work with adult and pediatric patients recovering from traumatic brain injury, intracerebral hemorrhage, stroke, brain neoplasm, in addition to the rehabilitation diagnoses described for SMH. Students who desire to rotate through the outpatient clinics will work with patients with a variety of needs including but not limited to: musculoskeletal injuries, electrodiagnostic consultation, pain management, post concussive syndrome, spinal cord injury, stroke, amputee care, arthritis, and the evaluation and management of rehabilitation needs in the outpatient setting. Clinic sites include SMH, St. Mary's Hospital, Comprehensive Rehabilitation Center, Rochester Rehabilitation Center, and the VA Outpatient clinic.

DIDACTIC ACTIVITIES

Students will attend Rehabilitation Grand Rounds, journal club, and didactic sessions which occur on Thursday mornings.

REQUIRED READING

Materials given on first day of rotation.

STUDENT EVALUATIONS

To receive a grade of satisfactory, students must see all assigned patients, write or dictate admission, discharge and progress reports in a timely fashion and demonstrate proficiency in the examination of their patients, with particular emphasis on the musculoskeletal and neurologic exams, in the evaluation of functional deficits and in the formulation of appropriate treatment plans. A faculty preceptor will observe each student, and the preceptor and student at the end of the rotation will complete a written evaluation.

Surgical Intensive Care Unit (SUR606)

Course Director:	David Kaufman M.D.
Contact Person:	Marge Roberts, 273-1841, marjorie_roberts@urmc.rochester.edu
Location:	Strong Memorial Hospital
Block Length:	4 weeks
Dates Offered:	07/04/2011 - 06/24/2012
Students:	4 per Block
Prerequisites:	Adult Inpatient Clerkship (AIC300)

GOAL

To understand the pathophysiology of critically ill patients.

LEARNING OBJECTIVES

By the end of the rotation the student should be able to:

Recognize critically ill patients and learn to prioritize problems.

Explain fluid shifts and fluid management in critically ill patients.

Solve acid/base problems.

Understand when to use the different modalities of mechanical ventilation.

Identify arrhythmias.

Explain and use all the hemodynamic parameters which can be obtained from a pulmonary artery catheter.

Identify the causes and manage hypoxia.

Identify the causes and manage hypercarbia

Identify the causes and manage oliguria.

Appreciate the pharmacokinetics and pharmacodynamics of drugs used in the ICU.

Identify and treat the various forms of shock.

Write appropriate total parenteral nutrition/total enteral nutrition orders.

SCHEDULE OF ACTIVITIES

Students participate in the daily rounds in the Intensive Care Unit. They follow and present patients to the ICU Attending and participate in all didactic sessions. You will be expected to take call approximately every third or fourth night. Nights that you take call you will work directly with the ICU residents. You will leave after morning rounds, or no later than 9:00 a.m.

DIDACTIC ACTIVITIES

Students participate in the daily lectures given in the unit by the ICU attending or fellow and selected personnel.

REQUIRED READING

STUDENT EVALUATIONS

To receive a grade of Pass, the student must participate in ICU activities and present their assigned patients on rounds. If taken as a subinternship, additional requirements will be discussed with Dr. Kaufman directly.

Vascular Surgery (SUR630)

Course Director:	Michael Singh
Contact Person:	Susan Edwards, 5-6772/Julie K. Burkhart, 31712
Location:	Strong Memorial Hospital
Block Length:	2 or 4 weeks
Dates Offered:	09/05/2011 - 07/01/2012
Students:	2 per Block
Prerequisites:	Surgery Clerkship (SUR300)

GOAL

To gain an appreciation of the principles of vascular surgery, and experience in the care of relatively sick surgical patients in general.

LEARNING OBJECTIVES

This is a clinical, "hands-on" rotation, where students will be expected to be a member of the normal operative team. Although rounds and patient care will be an integral part of the rotation, the student is expected and encouraged to spend as much of his or her time as possible in the operating room. If time and interest permits, outpatient office experience is available (particularly for students spending more time on the rotation), although the focus of this elective is inpatient care of sick patients. By the end of this rotation, the student should be able to: -Describe basic relevant clinical vascular anatomy -Begin to understand basic concepts and decision-making in patients with vascular problems -Gain experience in the acute management of pre- and postoperative surgical patients with a generally high level of acuity -Be able to describe the basic vascular surgical procedures: Open and endovascular aortic surgery, carotid surgery, lower extremity bypass and amputation, and other operations This rotation can be performed in two ways. Third-year students or those without extensive experience can do a two-week rotation. Fourth-year students or those interested in general or vascular surgery as a career are encouraged to spend four weeks with us on a formal subinternship. Although the student will work with and have the full support of the interns and housestaff, he/she will be encouraged to take primary responsibility for his/her own patients, acting as their intern (with appropriate supervision and backup). Our goal is to have the student learn to perform at an intern's level, the only difference being that he/she will have responsibility for fewer patients.

SCHEDULE OF ACTIVITIES

As above, students will work as a member of the surgical team. Rounds generally begin at 6am, and the entire team meets informally at 6:45 to go over patient status and plans for the day, followed by conference at 7am. Surgery starts at 7:30 or 8am, with rounds taking place at 8am every day for those not in the operating rooms. Days end when the work is done, generally between 6 and 8pm. Evening call will not be required, but can easily be arranged if interest permits

DIDACTIC ACTIVITIES

Mondays: 7am: Indications Conference

Wednesdays: 7am: Interventional Cardiology Conference (first of the month only), M+M otherwise

Thursdays: 7-10am: Grand Rounds, M+M, CPC, and Basic Science 5pm: "Big Boy Rounds," 7-1400 (interns, students present cases)

Fridays: 7am: Basic Science and Journal Club alternating

REQUIRED READING

"Vascular Surgery" chapter in Schwartz, "Principles of Surgery." Additional sources can be assigned as individual interest permits

STUDENT EVALUATIONS

The student will be evaluated based on interest, attendance, and participation, and on whether he/she has accomplished the objectives discussed above.

Comprehensive Burn Care (SUR640)

Course Director:	Derek Bell
Contact Person:	Beth Jocolano/273-3656/beth_jocolano@urmc.rochester.edu
Location:	Strong Memorial Hospital
Block Length:	2-4 weeks
Dates Offered:	07/04/2011 - 06/17/2012
Students:	2 per Block
Prerequisites:	Surgery Clerkship (SUR300)

GOAL

This rotation will expose students to the pathophysiology, assessment, treatment and rehabilitation of the burn victim.

LEARNING OBJECTIVES

The purpose of this elective is to acquaint future physicians with a scientific and rational approach to wound care in these complex patients. Also, it is the intention of this course to dispel the frequently associated myths and fears associated with burn care. Students will also gain experience with surgical critical care including ventilator management, resuscitation and nutritional support as well as out-patient management of thermal injury.

SCHEDULE OF ACTIVITIES

Students on this elective will be expected to be a part of the Burn Care Team. They will participate in intensive care delivery, wound management techniques, surgical procedures. They will also attend rounds, multi-disciplinary conferences and burn specific lectures.

DIDACTIC ACTIVITIES

Lectures are given on Tuesdays and during the week as time permits.

REQUIRED READING

Will come from Total Burn Care (ed. Herndon) and the Burn Section from the American College of Surgeons Care of the Surgical Patient

STUDENT EVALUATIONS

Wound Care and Hyperbaric Medicine (SUR645)

Course Director: Kitima Boonvisudhi

Contact Person:

Location: Clifton Springs Hospital and Clinic

Block Length: 4 weeks

Dates Offered: -

Students: 1 per Block

Prerequisites:

GOAL

The student will learn evaluation and management of patients with wound healing problems and the appropriate application of hyperbaric oxygen treatment.

LEARNING OBJECTIVES

Know the assessment steps for wound evaluation, local and systemic factors affecting wound healing, and indications for secondary testing.

Know the essentials of initial excisional wound debridement and the principles of limited local wound debridement.

Review wound dressings and acquire a plan for wound dressing selection based on wound characteristics.

Learn management of arterial insufficiency ulcers, venous leg ulcers, and diabetic foot ulcers.

Learn the rationale for hyperbaric oxygen treatment.

Understand the role of hyperbaric oxygen in the enhancement of healing in selected symptoms based on evidence based reviews.

SCHEDULE OF ACTIVITIES

Students will work with patients in the outpatient wound care and hyperbaric oxygen clinic.

DIDACTIC ACTIVITIES

The attending physician review in detail each case seen by the student, covering wound assessment and management skills.

REQUIRED READING

Reading materials will be given on first day and during rotation.

STUDENT EVALUATIONS

Based on interest and participation in the elective.

Thoracic Surgery (SUR650)

Course Director:	Carolyn Jones
Contact Person:	Julie K. Burkhart/273-1712/ julie_burkhart@urmc.rochester.edu
Location:	Strong Memorial Hospital
Block Length:	2 - 4 weeks
Dates Offered:	09/05/2011 - 07/01/2012
Students:	2 per Block
Prerequisites:	Adult Inpatient Clerkship (AIC300)

GOAL

1.To understand common thoracic surgical disease processes and their management.2.To provide exposure to a general thoracic surgical practice for students potentially interested in pursuing this specialty.

LEARNING OBJECTIVES

By the end of the rotation the student should be able to:1.List the common types of thoracic malignancies, understand the relevant work-up and potential treatment strategies, and participate in outpatient follow-up.2.Recognize various benign esophageal and pulmonary diseases that may require surgical intervention, the appropriate diagnostic and therapeutic considerations, and proper patient selection.3.Understand the variety of operative techniques, including open and minimally invasive approaches, and the conduct of safe surgery.

SCHEDULE OF ACTIVITIES

Monday 7:00 ? 8:00 a.m. ? Didactic teaching conference (resident lectures, morbidity/mortality conference case presentation, review questions.)Clinics: Monday, p.m., Tuesday/Wednesday/Thursday a.m.OR: Every Tuesday/Wednesday/Friday (all day); other cases as permittedEndoscopy/Manometry Lab: As scheduledA.M. Rounds Daily

DIDACTIC ACTIVITIES

Mondays ? 7:00 ? 8:00 a.m. (as per above)One Wednesday evening per month (6:30 ? 9:00 p.m.): Grand RoundsThursday 7:00 a.m. (except summer months): Surgery Grand RoundsSaturday 8:00 a.m. (every other week): Thoracic Oncology Conference

REQUIRED READING

No required text/syllabus. Students are expected to come to the operating room having familiarized themselves with the patient?s history & disease process, having read about the disease and planned operative procedure, and understand appropriate consideration in their postoperative management. Recommended text can be suggested by the faculty.

STUDENT EVALUATIONS

Students will be evaluated by all faculty members on the Thoracic Surgical team. Characteristics assessed will be: 1) Fund of knowledge as demonstrated by case specific reading and general medical base; 2)Enthusiasm/motivation/work ethic; 3)Integrity/reliability; 4)Interpersonal skills and relationships with faculty, house staff and nurses.

Neurosurgery Elective (SUR651)

Course Director: Edward Vates
Contact Person: Melanie Zandvoort, 275-0060
Location: Strong Memorial Hospital
Block Length: 2 - 4 weeks
Dates Offered: 07/04/2011 - 07/01/2012
Students: 2 per Block
Prerequisites:

GOAL

Introduction to evaluation of neurosurgical diseases, neurosurgical interventions and evaluation to treat neurosurgical patients. For further information please log on to: <http://www.urmc.rochester.edu/neurosurgery/>

LEARNING OBJECTIVES

By the end of the rotation the student should be able to: Evaluate neurosurgical patients. Evaluate and choose neurosurgical procedures appropriate to treat a variety of conditions.

SCHEDULE OF ACTIVITIES

Accompany attending MD in OR, evaluation of new patients in resident clinic, and reviewing of diagnostic studies.

DIDACTIC ACTIVITIES

Will shadow with attending, MD in his practice. Students are expected to attend weekly academic conferences, Thursdays, 7:30 - 8:15 a.m. and Fridays, 6:30- 11:00 a.m.

REQUIRED READING

No required reading. Will recommend readings.

STUDENT EVALUATIONS

The student will be evaluated on their participation in the above referenced activities.

Neurosurgery Elective (SUR652)

Course Director: James Maxwell M.D.

Contact Person:

Location: Rochester General Hospital

Block Length: 2 weeks

Dates Offered: -

Students: 1 per Block

Prerequisites:

GOAL

Introduction to evaluation of neurological diseases, neurosurgical interventions and evaluation to treat neurological diseases.

LEARNING OBJECTIVES

By the end of the rotation the student should be able to: Evaluate neurological diseases. Evaluate and choose neurosurgical procedures appropriate to treat neurological diseases.

SCHEDULE OF ACTIVITIES

Accompany Dr. Maxwell in OR, evaluation of new patients in office, doing consults, and review x-rays.

DIDACTIC ACTIVITIES

Will shadow with Dr. Maxwell in his practice. On Tuesdays, the students are expected to attend the weekly Neuroradiology conference

REQUIRED READING

No required reading. Will recommend readings.

STUDENT EVALUATIONS

The student will be evaluated on their participation in the above referenced activities.

Cardiac Surgery (SUR656)

Course Director: George Hicks M.D.

Contact Person: Kathleen 275-5384 Kathleen_Leveque@urmc.rochester.edu/Julie K. Burkhart 273-1712

Location: Strong Memorial Hospital

Block Length: 2 weeks

Dates Offered: 07/11/2011 - 07/01/2012

Students: 2 per Block

Prerequisites: Adult Inpatient Clerkship (AIC300)

GOAL

To provide a comprehensive exposure to cardiac surgery, with special emphasis on anatomy, physiology and surgical care of patients with all aspects of adult cardiac disease.

LEARNING OBJECTIVES

By the end of the rotation the student should be able to: Understand coronary anatomy and indications for coronary artery surgery. Understand basic cardiac and pulmonary physiology and how it is applied to patients after cardiac surgery. Understand indications for valvular and thoracic aneurysm surgery. Understand arrhythmias and their treatment. Understand the patient care protocols for post-operative patients. Be exposed to patient's evaluation and follow-up in out-patient setting.

SCHEDULE OF ACTIVITIES

? Exposure to one service in cardiac surgery? A.M. Resident rounds/ Week-end optional? P.M. Attending Rounds mandatory? Tuesday A.M. Cardiac Service? Wednesday A.M. Cardiac Cath Rounds

DIDACTIC ACTIVITIES

? Friday A.M. Cardiac Didactic Conference? Daily O.R. exposure? Wednesday A.M. Outpatient office exposure

REQUIRED READING

Ciba Collection of Medical Illustrations Vol 5 Heart and Coronary Anatomy and Pathology Glenn's Thoracic and Cardiovascular Surgery 6th edition, Chapters 95, 96, 97, 108, 119, 123, 124, 125, 133, 135, 136, 138

STUDENT EVALUATIONS

Evaluation of students will be based on their team participation, interest in learning, and fund of knowledge regarding cardiac anatomy, physiology and treatment.

Clinical Otolaryngology (SUR661)

Course Director:

Contact Person: Sheila K. McCart, 585-276-5181, sheila_mccart@urmc.rochester.edu

Location: Strong Memorial Hospital

Block Length: 2 - 4 weeks

Dates Offered: 07/04/2011 - 06/24/2012

Students: 2 per Block

Prerequisites:

GOAL

To provide an overview of a wide range of disease and problems of the ear, nose, and throat, and related structures of the head and neck. To provide clinical experience in primary care otolaryngology.

LEARNING OBJECTIVES

By the end of the rotation the student should be able to:

Identify common otolaryngologic disorders and have basic knowledge of therapy for common situations, including neoplastic, inflammatory, congenital, traumatic and allergic immune diseases.

Be competent to complete a comprehensive examination of the head and neck.

Be skilled in the use of the following instruments: otoscope, laryngoscope, nasal speculum, and head light.

Be competent to treat acute infection of the ear, nose, and throat.

Be able to determine when a patient needs further evaluation or treatment.

Be able to identify otolaryngologic emergencies and triage them appropriately.

Have a basic working knowledge of head and neck surgical anatomy.

SCHEDULE OF ACTIVITIES

All students will be expected to view the following videos in our video library: Examination of the Head and Neck and the Ear. Cummings, Smith and Davidson; Head and Neck Surgery, Common Procedures. Coulthard and Davidson.

DIDACTIC ACTIVITIES

Typically, the student will report to Clinton Woods at 8:00 a.m. on the Monday beginning their clerkship. The student will accompany the preceptor through his day of practice, surgery, rounds, and conferences. Students will be required to attend all formal teaching rounds, journal club, and divisional conferences, which are held during their ENT clerkship. Please contact chief residents with any questions or concerns before or during clerkship.

REQUIRED READING

All students will be expected to obtain and read about specific patients/cases in a standard textbook in otolaryngology. (Several copies are available on loan in our library).

"Otolaryngology for Primary Care Physicians" will be provided to you by the chief resident.

STUDENT EVALUATIONS

A satisfactory performance will be based on evaluations by faculty preceptor, based on learning objectives, and each student's clinical performance, with particular emphasis on interest, initiative, conscientiousness and inter-personal skills with faculty member and patients.

Clinical Experience in Basic Plastic Surgery (SUR671)

Course Director:	Jeffrey Gusenoff
Contact Person:	Beth Jocolano; 273-3656; beth_jocolano@urmc.rochester.edu
Location:	SMH and Affiliated Hospitals
Block Length:	2 - 4 or more weeks
Dates Offered:	07/04/2011 - 06/17/2012
Students:	4 per Block
Prerequisites:	

GOAL

To understand the nature and scope of plastic surgery and be able to function at the R-1 level while on Plastic Surgery.

LEARNING OBJECTIVES

By the end of the rotation the student should be able to: 1. Identify which patients would benefit from care by a plastic surgeon. 2. Evaluate the patient presenting for plastic surgical evaluation. 3. Render clinical and surgical care (evaluate disorders, discuss treatment options, write history and physicals, write post-operative orders, write hospital progress notes, formulate treatment plans). 4. Management of post-operative complications. 5. Demonstrate clear understanding of a topic of interest to be presented at grand rounds.

SCHEDULE OF ACTIVITIES

Students are assigned to the Strong Memorial Hospital. Day begins with morning rounds, usually around 6:30 a.m. Clinical or surgical activities (outpatient clinic, operating room, ambulatory surgical center, inpatient floor consults, emergency room) are followed by evening rounds, usually finishing by 5 or 6 p.m. 4 week rotations will be apprenticeship style, spending a week with each attending learning general plastic surgery, breast and microsurgery, aesthetic surgery, burn surgery, pediatric and craniofacial surgery, and body contouring after massive weight loss.

DIDACTIC ACTIVITIES

Attendance is mandatory at Monday morning didactic core conference from 6:30 to 7:30 a.m. in the Bales Library. Thursday morning grand rounds is a city wide conference in the Bales Library from 7-8 a.m., and includes morbidity and mortality conference as well as indications conferences. Journal club is typically held on the last Friday of every month in the evening at an attending's home or local restaurant. Attendance at other didactic opportunities such as hand conference or craniofacial team conference is strongly recommended.

REQUIRED READING

Plastic and Reconstructive Surgery – Essentials for Students. This is available for free at:
http://www.plasticsurgery.org/Medical_Professionals/Publications/Plastic_and_Reconstructive_Surgery_Essentials_for_Students.html

STUDENT EVALUATIONS

The student's performance will be evaluated by all faculty, house officers, and staff who are assigned to the Division of Plastic Surgery. A concise, 20 minute grand rounds presentation on a subject of interest to the student will be evaluated. One on one questioning by faculty members in particular will be used to evaluate the accomplishment of the learning objectives.

Plastic Surgery (SUR673)

Course Director:	Ralph Pennino M.D.
Contact Person:	Dr. Ralph Pennino
Location:	Rochester General Hospital
Block Length:	4 weeks
Dates Offered:	07/04/2011 - 07/08/2012
Students:	1 per Block
Prerequisites:	Surgery Clerkship (SUR300)

GOAL

The student will act as a sub-intern on the Plastic Surgery Service at RGH. The service includes a plastic surgery resident, 2 PA's and 6 full time attendings. They will participate in all aspects of the service which includes reconstructive surgery, hand surgery, wound care and cosmetic surgery. They will be required to make a power point presentation on a topic of their choice in plastic surgery.

LEARNING OBJECTIVES

By the end of the rotation the student should be able to: Obtain history and perform examination of patients seen in the hospital setting. Have active participation in the surgical cases and determine options of treatment. Discuss techniques and complication of cases (wound healing, scars, etc.) Recognize more surgical diseases and the indications for or against surgical treatment of several conditions.

SCHEDULE OF ACTIVITIES

Students will report to RGH hospital and contact the Plastic Surgery Team. They should contact Dr. Pennino's office the week before for instructions.

DIDACTIC ACTIVITIES

The student will make rounds with the attendings and residents. They may attend any seminars that might occur during their rotation.

REQUIRED READING

Plastic Surgery: A Concise Guide to Clinical Practice by William G. Grabb, M.D. and James W. Smith, M.D.

Student should bring a thumb drive to load power point presentations on various aspects of plastic surgery.

STUDENT EVALUATIONS

The student will be evaluated on their interest, basic science knowledge and clinical applications, promptness and participation.

Body Contouring After Massive Weight Loss (SUR674)

Course Director:	Jeffrey Gusenoff
Contact Person:	Beth Jocolano, 273-3656 beth_jocolano@urmc.rochester.edu
Location:	SMH and Affiliated Hospitals
Block Length:	2-4 weeks or more
Dates Offered:	07/04/2011 - 06/17/2012
Students:	1 per Block
Prerequisites:	

GOAL

This multidisciplinary rotation provides a broad experience in the management of obesity, bariatric surgery, state-of-the-art post-bariatric body contouring, and practice management.

LEARNING OBJECTIVES

By the end of the rotation, the student should be able to: 1. Identify which patients are candidates for body contouring surgery. 2. Evaluate the patient presenting for body contouring, devise treatment options and plan staging of procedures, and understand safety in body contouring surgery. 3. Understand obesity, treatment options for obesity, and nutritional impacts of obesity and weight loss. 4. Management of patient expectations and post-operative complications. 5. Demonstrate clear understanding of a topic of interest to be presented at grand rounds.

SCHEDULE OF ACTIVITIES

Students are assigned to Highland and Strong Memorial Hospital. New patients are seen at the Highland Bariatric Center where patients receive comprehensive evaluations including nutrition, exercise, lifestyle, and support system evaluation. Rounding is required only for body contouring patients, which usually begins at 6:30 a.m. Clinical or surgical activities (outpatient clinic, operating room, ambulatory surgical center, inpatient floor consults, emergency room) are followed by evening rounds, usually finishing by 5 or 6 p.m. Observation of bariatric procedures including laparoscopic gastric bypass, gastric banding, and hernia repair is required.

DIDACTIC ACTIVITIES

Attendance is mandatory at Monday morning didactic core conference from 6:30 to 7:30 a.m. in the Bales Library. Thursday morning grand rounds is a city wide conference in the Bales Library from 7-8 a.m., and includes morbidity and mortality conference as well as indications conferences. Journal club is typically held on the last Friday of every month in the evening at an attending's home or local restaurant. Students will attend prospective bariatric patient information sessions and nutritional seminars. Research opportunities are available and encouraged.

REQUIRED READING

Plastic and Reconstructive Surgery – Essentials for Students. This is available for free at: http://www.plasticsurgery.org/Medical_Professionals/Publications/Plastic_and_Reconstructive_Surgery_Essentials_for_Students.html

Body Contouring Surgery after Weight Loss: J.L. Sebastian, J.F. Capella, and J.P. Rubin

STUDENT EVALUATIONS

The student's performance will be evaluated by all faculty, house officers, and staff who are assigned to the Division of Plastic Surgery. A concise, 10 minute grand rounds presentation on a subject of interest to the student will be evaluated. One on one questioning by faculty members in particular will be used to evaluate the accomplishment of the learning objectives.

Elective in Urology (URO601)

Course Director: William Hulbert M.D.

Contact Person: Stephany Greenough, 273-1904, stephany_greenough@urmc.rochester.edu

Location: Strong Memorial Hospital

Block Length: 4 weeks

Dates Offered: 07/04/2011 - 07/01/2012

Students: 1 per Block

Prerequisites:

GOAL

To offer fourth year students a broader and more concentrated exposure to the diagnosis and management of patients with urologic problems than is encountered in the Primary Care Clerkship rotation or the one-week urology elective (URO 604).

LEARNING OBJECTIVES

By the end of the rotation the student should be able to: 1. Obtain a complete and accurate history from a patient or parent in a respectful manner. 2. Perform a satisfactory urologic physical examination and urinalysis. 3. Identify and order appropriate diagnostic laboratory and imaging studies for the clinical problem at hand, after formulating a differential diagnosis. 4. Interpret the studies, which have been ordered and arrive at a diagnosis. 5. Suggest medical or surgical management. 6. Give a presentation to faculty and resident staff (with guidance from the Chief Resident).

SCHEDULE OF ACTIVITIES

Students will actively participate with selected faculty members and the inpatient resident staff in the ambulatory setting, lithotripter area and the operating rooms as a member of the team. Attending and house staff supervision and teaching will be part of all aspects of the rotation, as well as an opportunity for independent activity.

DIDACTIC ACTIVITIES

Students will attend and participate in scheduled seminars, Journal Club, Resident Conferences, Grand Rounds and lectures given by staff and visiting guests.

REQUIRED READING

Recommended Resources: Smith's General Urology, 17th edition by Tanagho and McAninch and selected readings. Manual of Urology: Diagnosis and Therapy, 2nd edition by Siroky, Edelstein and Krane (to be used as a reference for clinical assessment).

STUDENT EVALUATIONS

Satisfactory completion of the elective requires completion of the learning objectives as stated above. These should be accomplished in a timely and acceptable manner as documented by the attending and resident staff as well as the student receiving a passing grade on a written examination.

Surgical Specialties: Urology Clerkship (URO604)

Course Director: William Hulbert, Jr M.D.

Contact Person: Stephany Greenough, 273-1904 stephany_greenough@urmc.rochester.edu

Location: Strong Memorial Hospital

Block Length: 1 week

Dates Offered: 07/04/2011 - 07/01/2012

Students: 2 per Block

Prerequisites:

GOAL

To prepare students to evaluate and manage urology problems at a primary care level, and to recognize those problems which need further specialty consultation. To facilitate this, the student is attached to the Urology resident team, working side by side with them, rounding on the inpatients, accompanying residents and faculty to the operating room, emergency room and hospital consults, attending the departmental conferences, and spending approximately 8 hours working in the office with one of the Urology attendings.

LEARNING OBJECTIVES

By the end of the rotation the student should be able to:1) Obtain an accurate history from patients with a urologic complaint2) Perform a focused examination including the male genitalia and rectal/prostate exam3) Exhibit knowledge of the basic urologic laboratory exams, urine analysis, PSA, renal function tests, imaging studies, endoscopy, extracorporeal shockwave lithotripsy (ESWL), urodynamics4) Demonstrate an understanding of common urologic problems:Cancer bladder, prostate, renal Stones, Urinary incontinence (male and female), Male erectile dysfunction, Male infertility, Urinary obstruction (BPH, strictures), Urinary tract infections, Prostatitis and epididymitis, Cystitis and pyelonephritis, Significance of hematuria (microscopic and gross)Intrascrotal lesions and how to differentiate between them.5) Formulate an appropriate differential diagnosis for common clinical problems encountered.

SCHEDULE OF ACTIVITIES

Each student is given a schedule including approximately 8 hours of faculty-supervised evaluation, examination and treatment of patients in the ambulatory setting. In addition, observation of ESWL for stone treatment is part of the week, along with didactic activities. There are multiple opportunities to participate in the operating room. The typical hours are Monday through Friday, 7:00 a.m. 5:00 p.m.

DIDACTIC ACTIVITIES

Weekly Urology Conference of which includes reviews of journals, visiting professor's lectures and monthly quality assurance meetings. Weekly Uro-Radiology Conference which include x-rays from 4 hospitals.

REQUIRED READING

Distributed at beginning of rotation.

STUDENT EVALUATIONS

Final grading is done by the coordinator of the clerkship and is based mainly on a 3 question essay type test at the end of the rotation. Also, satisfactory completion of a skills log is required.