

Reflective Practices for Clerkship and Beyond
COURSE NUMBER: MDID 6220
Syllabus

4/13/2020- 5/15/2020

Credit Hours: 2

Contact Information

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Course Information

Brief Description of Course

This course will introduce students to narrative practices, including narrative medicine in particular and medical/health humanities in general, providing them with tools to reflect upon and understand unique personal and professional challenges of clinical training. Students will read and write about their individual and shared experiences, and engage in a series of online discussions that faculty will facilitate.

Who should take this course?

- Students interested in reading, writing, and critical reflection about their formative experiences in clerkships and other clinical training.
- Students who are in the process of making decisions about their clinical careers and want guidance from the narratives and experiences of scholars, clinicians, and patients from around the world.
- Students who want to know why so much of medicine revolves around stories and narrative elements.
- Students who have completed Phase 1 and 2 and some clinical training.
- Students who are looking for a mixed asynchronous/independent and synchronous/discussion course experience.

Course Objectives

As a result of successfully completing Narrative and Medicine, students will be able to:

1. Understand the role of narrative in medicine as a means to improve clinical understanding of patients and the patient experience
2. Engage with reflective writing as a tool for increasing self-awareness, professional growth, and exploration of ethical questions and issues
3. Improve communication and critical thinking skills through writing, reading, and listening to narratives of others

Course Format & Schedule

Timeline

Week 1 (4/13-4/17): Roles of Narrative in Medicine: Students will learn what narrative means, and how it works, alongside medicine.

- **Required readings** (in Canvas Files):
 - Brody, *Stories of Sickness*, 2nd ed., New York: Oxford University Press, 2003. Chapter 1: "Storytelling in Medicine," 5-22.
 - Charon, Narrative medicine: A model for empathy, reflection, profession, and trust. *JAMA*, 286:15, 1897-1902.
 - T Greenhalgh, Why study narrative? In *Narrative Based Medicine: Dialogue and Discourse in Clinical Practice*, T Greenhalgh and B Hurwitz, Eds., London: BMJ Books, 2004. 3-16.
 - Kleinman, *The Illness Narratives: Suffering, Healing & the Human Condition*. New York: Basic Books, 1998. Chapter 1: "The Meaning of Symptoms and Disorders"
- **Zoom Session: TBD, based on shared availability. More than one session may be offered.**
- **Reflective Writing Prompt (select one):**
 - *What new understanding of narrative have you taken away from this week's readings? How do you anticipate putting this into your medical practice? Be specific in your response by naming and defining the concept. Include a quote from one or more of the articles to help explain your point.*
 - *What concept related to narrative explained in or argued for in one of the readings did you find most challenging to accept or understand? Identify a specific proposal/definition/concept and explain as best you can what you think the author (whom you are to name) intends. Then, pose at least two questions that you would ask the author and explain why you're asking.*

Week 2 (4/20-4/24): Patient Narratives: Students will read, and write, narratives from the perspective of patients.

- **Required readings** (in Canvas Files) :
 - Frank, *The Wounded Storyteller: Body, Illness, and Ethics*. Chicago: University of Chicago Press, 1995. Chapter 3: "Illness as a Call for Stories," 53-73.
 - R Charon, "Close Reading: The Signature Method of Narrative Medicine" in *The Principles and Practice of Narrative Medicine*, R Charon et al, Eds., New York: Oxford University Press, 2017. 164-179.
 - Dean, "Saving My Breath" in *Silence Kills: Speaking Out and Saving Lives*, Lee Gutkind, Ed., Dallas: Southern Methodist University Press, 2007, 58-69.
 - Selected poems from KW Brewer, *Whale Song: A Poet's Journey into Cancer*. Salt Lake City: Dream Garden Press, 2007
- **Zoom Session: TBD, based on shared availability. More than one session may be offered.**
- **Reflective writing prompt:**
 - *Write a "parallel chart" about a memorable patient or patient experience from one of your clerkships. A parallel chart, developed by Charon, is information not allowed in the EMR that is nonetheless critical to note, because those details matter to you in ways that you may not even realize until you write them*

down. For instance, do you worry about a dying patient's cat they told you about? Do you have difficulty forgetting a patient's spouse that looked like your grandfather?

Week 3 (4/27-5/1): Medical student narratives: Students will write personal reflections/parallel charts about clerkship experiences and respond to other participants' narratives

- **Required readings** (in Canvas Files) :
 - D Ofri, Physician writers, *The Lancet*, Vol. 361, May 3, 2003, 1572.
 - M. Vallurupalli, Mourning on Morning Rounds, *New England Journal of Medicine*, 369:5, August 1, 2013, 404-405.
 - Selected poems from *Body Language: Poems of the Medical Training Program*, N Jain, D Coppock & SB Clark, Eds., Rochester, NY: BOA Editions, 2006.
- **Zoom Session: TBD, based on shared availability. More than one session may be offered.**
- **Reflective writing prompt:**
 - Reflect upon your past academic year. Which experiences inside the hospital are most memorable for whatever reason? Make a list of 5. Write a word next to each experience that captures the primary emotion associated with the event, such as "perplexing," "ridiculous," "deeply unsettling." Select one of these and think of a metaphor that conveys that emotion without using the word you wrote. Does this change your understanding of the experience? Why or why not?

Week 4 (5/4-5/8): Narrative and ethics: Students will read narratives by physicians and patients to explore ethical complexities and emotional challenges

- **Required readings** (in Canvas Files) :
 - AH Jones, "Narrative in medical ethics" in *Narrative Based Medicine: Dialogue and Discourse in Clinical Practice*, London: BMJ Books, 2004. 217-224.
 - TE Quill, A case of individualized decision making, *New England Journal of Medicine*, 1991: Vol. 24, No. 10, pgs. 691-694
 - L Birk, The listening room in *Stories of Illness and Healing: Women Write Their Bodies*, S DasGupta & M Hurst, Eds., Kent, OH: Kent State University Press, 2007, pgs. 35-38.
 - J Tsai, "Broken" in *In-Training: Stories from Tomorrow's Physicians*, Pager Publications 2016, 101-103.
- **Zoom Session: TBD, based on shared availability. More than one session may be offered.**
- **Reflective Writing Prompt:**
 - Think of a health-related event that you experienced either **as** a child or **with** a child. In the first scenario, you might have been with one of your parents; in the second, the child could have been your own son/daughter or one of your friends' children. Whichever scenario you choose, write a short narrative (less than 100 words) recounting what happened using first person (I, we) to tell the story. Then, write another short narrative using second person (you). Does one feel more truthful than another? Why or why not?

Educational and Instructional Modalities

Modality	Percentage
Synchronous Zoom reading & writing sessions	25%
Asynchronous independent reading & writing sessions	75%

Role of the Student in this Course

Students are expected to complete weekly readings, participate in Zoom discussion sessions, respond to reflective writing prompts, and provide peer feedback to classmates' work and facilitators' comments on the virtual Discussion Board.

Required Textbooks/Readings

All readings will be available through Canvas Files.

Additional Resources
Assessment & Grading

	Weight	Must Pass/ Must Complete	Due Date
Course Assessments/Narrative Assessments			
See Assignments below: all receive narrative			
Assignments and Must Complete Elements			
4 Written responses to reflective prompts	40%	Yes	Weekly, as assigned, no later than May 8, 2020.
6 Submissions of Peer feedback	40%	Yes	Weekly, as assigned, no later than May 8, 2020.
Participation in 4 Zoom course discussions	20%	Yes	As scheduled, no later than May 15, 2020

Grading System

Students will receive a final letter grade of PASS (P) or FAIL (F) for this course:

PASS: A student who achieves all of the criteria will be assigned a grade of PASS for the course.

FAIL: A student who fails to achieve all of the criteria for PASS will be assigned a grade of FAIL for the course.

Criteria to Pass include: Students will complete 10 written assignments total: 4 reflective responses to weekly readings and related Zoom discussions and 6 posted replies providing constructive feedback to peer reflections on the Canvas Discussion Board online. Students will complete assigned readings and actively engage with classmates and course facilitators during weekly Zoom discussions of the readings and topics covered.

Student Feedback

Providing feedback is an important aspect of your professionalism expectation, and helps with our curriculum quality improvement process. Your elective course director or coordinator will inform you of any course feedback surveys. Surveys must be completed by the due date to demonstrate reliability for the professionalism competency.

Standard Policies

Please refer to the Student Handbook (on the Student Affairs website) for these policies:

Accommodations

Addressing Sexual Misconduct

Dress Code

Examination and Grading Policies

Grade or Score Appeal

Professionalism, Roles & Responsibilities

Mistreatment

Infectious, Environmental and Bloodborne Pathogen Exposures Policy

Alternate Name and/or Personal Pronoun

Class rosters are provided to the instructor with the student's legal name as well as 'Preferred' first name (if previously entered by you in the Student Profile section of your CIS account). While CIS refers to this as merely a preference, we will honor you by referring to you with the name and pronoun that feels best for you in class, on papers, exams, group projects, etc. Please advise us of any name or pronoun changes (and please update CIS) so we can help create a learning environment in which you, your name, and your pronoun will be respected.

Center for Disability & Access

The School of Medicine seeks to provide equal access to its programs, services and activities for all medical students. The Center for Disability and Access (CDA) provides accommodations and support for the educational development of medical students with disabilities. Medical students with a documented disability, and students seeking to establish the existence of a disability, that would like to request accommodations are required to meet with the CDA to establish accommodations. The CDA will work closely with eligible students and the Academic Success Program to make arrangements for approved accommodations. The School of Medicine and CDA maintain a collegial, cooperative, and collaborative relationship to ensure compliance with federal and state regulations for students with disabilities.

Steven Baumann EdD, School of Medicine Senior Director of Academic Success Program, serves as the liaison between the School Of Medicine and the CDA.

Contact Information:

Dr. Steven Baumann, Senior Director of Academic Success Program

Safety Statement

The University of Utah values the safety of all campus community members. To report suspicious activity or to request a courtesy escort, call campus police at 801-585-COPS (801-585-2677). You will receive important emergency alerts and safety messages regarding campus safety via text message. For more information regarding safety and to view available training resources, including helpful videos, visit safeu.utah.edu.