

**Gastroenterology Clinical Clerkship
INTMD 7630
Syllabus**

Academic Year 2020-2021

Contact Information

Name	Position	Phone/Pager	email
Douglas G. Adler, MD, FACP, AGAF, FASGE	Program Director	801.585.1095	Douglas.adler@hsc.utah.edu
Kathryn Byrne, MD	Associate Program Director	801.585.1095	kathryn.byrne@hsc.utah.edu
Lisa Sumner	Program Coordinator	801.585.1095	Lisa.sumner@hsc.utah.edu

Clinical Course Information

INTMD 7630 Course Description:

On this elective rotation the 4th Year Medical Student will be supervised by the GI Fellow and Faculty Attending and will assist in providing timely GI inpatient consultations, and if indicated, observe endoscopy services as requested by referring physicians or as recommended by GI Providers. General GI inpatient consultations are first seen by the GI Fellow, Resident and medical student. All patients are then seen by the attending faculty physician and discussed at length with the consult team. A diagnostic and therapeutic plan is then formulated. Patients are followed closely throughout their hospitalization by the consult team in consultation with the GI attending. Upon discharge, the GI patient is typically followed by the GI Fellow in the outpatient GI Clinic. Formal attending teaching and discussion rounds are conducted daily.

Clinical Course Goals

1. Knowledge:

Students should be able to define the common causes for and symptoms of common GI disorders, including:

- anal fissures
- Crohn's disease
- upper GI bleeding
- diverticulitis
- esophagitis
- esophageal/gastric varices
- gastritis
- hemorrhoids
- indications for inpatient versus outpatient evaluation and treatment
- ischemic colitis
- lower GI bleeding
- Mallory-Weiss tear
- malignancy
- peptic ulcer disease
- protocols of stabilization and treatment of acute GI blood loss
- the role of contributing factors in GI bleeding such as:
 - H. pylori infection
 - NSAIDs
 - alcohol
 - chronic liver disease

2. Skills

- Students should be able to obtain, document, and present a medical history that differentiates the causes and contributing factors for each of the disorders as outlined above
- Students should be able to perform a physical examination appropriate for a GI patient which includes:
 - postural blood pressure and pulse and their interpretation
 - abdominal palpation of organomegaly, masses and tenderness
 - identification of the stigmata of chronic liver diseases
 - anal and rectal examination
- Students should be able to generate a prioritized differential diagnosis
- Students should be able to interpret the results/findings of:
 - stool and gastric fluid tests for occult blood
 - hemoglobin and hematocrit
 - platelet count
 - protime and partial thromboplastin time
 - liver function tests
 - tests for H. pylori.
- Students should understand and be able to recommend when each of the following test should be ordered:
 - Colonoscopy
 - EGD
 - Motility studies of the gastrointestinal tract.

3. Attitudes

Students must understand and be able to demonstrate the attitudes and behaviors necessary to provide patient evaluation and care. Specifically, students must understand the importance of and display the following attitudes and behaviors.

- Independent, self-directed learning
- Reliability
- Integrity
- Compassion
- Tolerance
- Respect for patient privacy and confidentiality
- Recognition of personal limitations in knowledge and skills and work towards improvement
- Provide patient care without bias
- Advocate for under-served populations
- Respect for the roles of other health care professionals
- Understand the importance of teamwork in patient care and how to function as a member of a clinical care team

Clinical Course Format/Schedule

Timeline

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
AM	0800 – 1800 IP Consults	0800 – 1800 IP Consults	0800 – 1800 IP Consults	0800 – 1500 IP Consults	0800 – 1800 IP Consults
PM				1500-1800 GI Didactic Conferences	

Educational and Instructional Modalities

- **Clinical Performance with Direct Observation:**
Patients are seen daily in the in the inpatient in the consult setting.
Each typical educational encounter consists of:
 - The medical student seeing the patient with the GI Fellow.
 - The medical student presenting the findings to the GI Fellow with the GI Fellow asking questions of the medical student.
 - Teaching points and discussion with GI Fellow and Attending.
 - The medical student, GI Fellow and attending conduct a focused exam/history on the patient together at the bedside.
 - The medical student, GI Fellow and attending and patient making decisions regarding health care plan and follow up.
- **Teaching Rounds**
Daily supervised care of GI Patients
 - These educational encounters are supplemented with short teaching rounds given by the attending.
 - In addition to daily supervised consult rounds, a considerable amount of time is spent by the attending faculty teaching GI Fellows and medical students on a one to one basis

Role of the Student in this Clinical Course

The GI Clinical Clerkship is an inpatient elective. Students on the on this service are expected to follow the patients on the GI Treatment Team list as directed by the GI Fellow and GI Attending. For each new patient the student should be able to perform a history and physical examination, retrieve clinical information from the EPIC and other electronic sources within the UHealth system, present the patient to the supervising Fellow and Attending, enter orders for additional diagnostic testing or therapies, and enter the History and Physical in the student section of the EMR. Each day the student should pre-round on his/her panel of patients (i.e. gather interval history and data, perform a focused physical examination, present the patient during rounds, enter new orders, and construct a daily progress note as directed by the supervising Fellow and Attending).

Required Reading List

- [Ulcerative colitis.](#)
- [Crohn's disease.](#)
- [Management of Nonvariceal Upper Gastrointestinal Bleeding: Guideline Recommendations From the International Consensus Group.](#)
- [Coeliac disease.](#)
- [Celiac Disease and Nonceliac Gluten Sensitivity: A Review.](#)
- [Colorectal Cancer Screening: Recommendations for Physicians and Patients from the U.S. Multi-Society Task Force on Colorectal Cancer.](#)

Additional Web-Based Resources

- American Gastroenterological Association
www.gastro.org/practice/medical-position-statements
- American College of Gastroenterology
<http://gi.org/clinical-guidelines/clinical-guidelines-sortable-list/>
- American Society for Gastrointestinal Endoscopy
<http://www.asge.org/clinicalpractice/clinical-practice.aspx?id=352>
- American Association for the Study of Liver Diseases
<http://www.aasld.org/practiceguidelines/Pages/guidelinelisting.aspx>

Assessment and Grading

Preceptor Evaluations

All Clinical Courses employ a preceptor evaluation which contributes to the student's overall course grade

Assessment	Weight towards Final Grade
PATIENT CARE ACTIVITIES	50%
CLINICAL KNOWLEDGE	40%
PROFESSIONALISM	10%

Grading System & Remediation

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

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

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

Student Feedback

Student feedback is important and helps identify opportunities to improve the course

- At the conclusion of each course, clerkship or rotation medical students are required to complete a evaluation. Evaluations are completed electronically and remain confidential.

Standard Policies

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

Accommodations
Attendance policy
Dress Code
Examination and Grading Policies
Grade or Score Appeal
Professionalism, Roles & Responsibilities
Mistreatment

Center for Disability & Access Services

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 and to request accommodation are required to meet with the CDA Director for recommended 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

1C047 SOM Office: 801-587-9797

Email: Steven.Baumann@hsc.utah.edu

University of Utah Center for Disability and Access

Olpin Student Union Building, Room 162 Phone (Voice/TDD): (801) 581-5020

<http://disability.utah.edu>