

PED 7970 Child Neurology Sub-Internship for Underrepresented in Medicine Syllabus

Credit Hours: 2 or 4

Contact Information

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Course Information

Brief Description of Course

The sub-internship in Pediatric Neurology is a 4-week rotation that prepares MSIV students to be successful first year residents with a combination of inpatient and outpatient Pediatric Neurology settings. Building on the skills and knowledge acquired during the required MSIII Neurology Clerkship, the sub-internship emphasizes professional development in the areas of medical competence:

- 1) **Clinical responsibilities** will focus on increasing levels of independence and responsibility.
- 2) The student will develop his/her **communication skills** through daily interactions with patients, families, and health care team members.
- 3) The sub-internship will foster **lifelong learning skills** through development of a self-directed study program and through structured feedback during the rotation.

Course Goals

As a result of successfully completing the Pediatric Neurology Sub-Internship students will:

- 1) Students will be able to perform with an increased level of independence and responsibility in the clinical setting. They will be able to manage more patients and more complex patients than they did on their Neurology clerkship.
- 2) Students will be able to effectively communicate with patients, families, and health care team members. Students will learn when and how to utilize other consulting services.
- 3) Students will be able to localize neurological lesions, provide a differential diagnosis and determine the most likely diagnosis based on patient presentation.
- 4) Students will be able to select imaging or diagnostic testing that will help evaluate the differential diagnosis.
- 5) Students will be able to counsel families with presentation of first seizure, select appropriate seizure medication, discuss seizure precautions, and rescue medication.

Course Format & Schedule

Timeline

- 4-week rotation
- Monday- Friday starting however early is needed to complete pre-rounding before Team Rounds; and ending in the evening when work is done, typically 6-7pm.
- One weekend day per week while on general inpatient service, hours as during a weekday.
- Pediatric Neurology conferences and Neurology conferences.
 - Neurology Grand Rounds (Wednesdays at 9am)
 - Neurology 10am teaching conference (Wednesdays at 10am)
 - Pediatric Neurology Grand Rounds (Wednesdays at noon)
 - Pediatric Neuroradiology (Fridays at 8am while on inpatient service)
 - Pediatric Neurology Sign-out conference (Fridays 12:15pm while on inpatient service)

Educational and Instructional Modalities

Modality	Percentage
Didactic	10%
Clinic Time	90%

Role of the Student in this Course

The student will work on the inpatient service and assume primary responsibility for the initial evaluation and on-going care of 2-4 patients per day, under the supervision of the senior Neurology residents and the attending. This will include:

- Independently performing the initial history and exam, generating a differential diagnosis and diagnostic and treatment recommendations.
- Following up promptly on all results (labs, imaging, consults, etc.), and discussing with the senior resident or attending.
- Coordinating care for patients in the hospital, including assuming the primary responsibility of communication with the patient and family, nursing staff, other services or consultants as appropriate, and the primary care provider on discharge.

In-line with the expectations of Pediatric Neurology residents, the sub-internship students will be available (i.e., on call) to admit patients all day, every day of their rotation. Like the residents they will not take in-house, overnight call. Students will be responsible for transferring care (sign out) of their patients to and from the appropriate Neurology team member when they arrive and leave the hospital. This focus on developing the communication skills for transferring patient care will prepare the student for their clinical responsibilities during their intern year.

In the outpatient Neurology clinic, the student will be expected to obtain the clinical history, perform a neurologic exam and present the patient to the Neurology attending they are scheduled to work with for the day. Additionally, students will complete documentation (i.e., clinic notes) for all the patients they see in the outpatient setting.

The student will demonstrate accountability to the health care team by being present during required work hours, and promptly returning pages.

Suggested Textbook(s)/Readings

For each patient seen, students are expected look up the diagnosis in a textbook or other source (UpToDate®, as the name implies, is a current and easy-to-consult source of medical information; access is available without charge when logged onto the University Computer) and consult PubMed for literature on the specific clinical aspects of patient care.

Additional Resources

Resources are available on-line (PubMed, genetests.org, SimulConsult.com, childneurologysociety.org) and textbooks are available in the Pediatric Neurology team room.

Assessment & Grading

Preceptor Evaluations

Students will be evaluated by the primary attendings/residents with whom they work throughout the rotation. All Clinical Courses employ a common preceptor evaluation form that instructs evaluators to select performance-based behaviors along multiple dimensions that best represent the student's highest sustained performance during the preceptor's period of observation.

Additionally, any home institution evaluation forms must be provided to the course coordinator at the beginning of student's rotation. We will fill out home institution evaluation forms in a timely manner and return to appropriate home administrative staff.

Feedback and Improvement Plan

The student will develop a plan to obtain feedback and use this to improve performance. At the beginning of each week, the student will identify 1 area below for evaluation (2 from the 'required' list and 2 from the 'options' list over the 4-week

period) and tell the senior Neurology resident or attending that they would like feedback in that area. At the end of each week, the student will ask the same resident or attending for feedback in the area that they identified, and if improvement has been noted.

Required

- Oral presentations
- Observed history and neurological exam

Optional

- Notes/documentation
- Communication with families
- Communication with other health care professionals.
- Ability to work effectively on the team
- Reliability in following up patient results
- Sign out

Rotation Log

During the course the student will keep a log of all the neurologic issues they have personally cared for.

Self-Study Program

The student will create a self-study program that includes at least 4 of the topics below. These topics focus on neurological problems common or unique to hospitalized patients and are thus likely to be seen by the student during this rotation.

- New onset seizure
- Migraine headaches
- Acute weakness
- Altered mental status
- Status epilepticus
- Newborn with encephalopathy
- Ataxia

Neurology Talks

Teaching is an important way of increasing one's own medical knowledge as well as disseminating knowledge. Students are required to give at least 1 talk to their team about a Pediatric Neurological topic.

Assessment of Student Goals and Objectives

Throughout the rotation, students should consider and discuss the written goals and objectives that they established at the beginning of the rotation with their attending(s) to ensure progression and completion. At the conclusion of the rotation, the student should meet with the course director to review their progress.

Grading System

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

PASS: A student who achieves all the criteria with a final numerical score of greater than or equal to 2.0, will be assigned a grade of PASS for the course.

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

Student Feedback

Student feedback is an important aspect of curriculum quality improvement. Thus, students are expected to complete all assigned feedback surveys specific to a course by the due date.

Standard Policies

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

Accommodations

Addressing Sexual Misconduct

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

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 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.

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