

Medicine, Patients and Society I

2007-2008

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Medicine, Patients, and Society I

Introduction

Welcome to Medicine, Patients, and Society I (MPS I), your first clinical course. This course is designed to introduce you to important principles related to being a practicing physician. The knowledge and skills you will acquire in this course will form the foundation for building competence in professionalism, communication and interpersonal skills, patient care, medical knowledge, systems based practice and practice-based learning, and are important building blocks in the development of your professional identity.

Course Objectives

This course is designed to involve you in a structured curriculum to achieve the following objectives:

Knowledge

- appreciate the special nature of the physician patient relationship
- understand the structure of the medical interview
- define communication techniques and styles
- identify clinical reasoning strategies
- identify how patient care changes in the different stages of the life cycle
- outline types of complementary medicine
- describe the general principles of clinical nutrition in preventative medicine
- identify the core principles of global health initiatives

Skills

- take vital signs of adult and pediatric patients
- apply communication techniques to elicit medical histories
- elicit nutrition histories, evaluate patient diets, and provide dietary counseling
- provide patient education and counseling for behavior change
- apply the principles of biostatistics, epidemiology and evidence based medicine (EBM) to clinical scenarios

Attitudes

- appreciate different styles of medical practice
- recognize how age, social class, gender, race, ethnicity and culture influence health care delivery
- develop a professional identity and demeanor
- recognize and accept ambiguity and uncertainty in clinical situations and medical decision making

Medicine, Patients, and Society I Modules

The course consists of several modules listed below. Module leaders' names are in italics. The Medical Encounter module is divided into 4 sections: The Medical Interview, The Physician-Patient Interaction, Life Cycle and Socio-medical Issues.

The Medical Encounter	<i>Lyuba Konopasek, MD</i>
Biostatistics/Epidemiology	<i>Madelon Finkel, PhD</i>
Evidence Based Medicine	<i>Madelon Finkel, PhD</i>

Course Logistics

The course is held one day a week (one morning session and one afternoon session). In the morning, you will attend a large group session and participate in a small group (skills group/seminar). In the afternoon, you will be scheduled for an office preceptor session or lecture or have the opportunity to sign up for an elective activity. The course is held while the Medical College is in session, as per the course schedule.

Large Group Sessions

Large group sessions include lectures, interviews with patients, physician panels, video clips, and role-plays. They begin promptly at 8AM in A-250. Any changes will be announced and/or e-mailed to you. You are expected to dress professionally and wear your white coat, as you would for any clinical experience.

Skills Groups/Seminars

The skills groups serve as a laboratory to learn and practice your clinical skills and as a forum to reflect upon your office preceptor experiences. You will be divided into groups and will be supervised by a faculty member, the skills group facilitator. Seminars will also be held in Biostats/Epi and EBM modules.

Skills group will begin with a debrief of the office preceptor session in which you will be expected to report on your experience from the previous week. This discussion is designed to be brief but to allow your group to hear about the variety of experiences that are encountered in different office settings. In these debriefs, it is important not to be overly judgmental of your office preceptor's style. Rather, we hope that you can appreciate the wide range of interactions that occur in clinical medicine, see how some approaches work for certain individuals, and use the literature on patient-physician interactions and communication to help develop your own clinical style.

The skills groups are also designed to help you see the relevance and application of the reading materials to clinical medicine. The facilitators will provide a stimulating yet comfortable learning climate that will allow you the opportunity to express your opinions, back them up with literature, and problem solve in areas of uncertainty. As a professional, you will need to develop the ability to weigh competing factors, consider all sides respectfully, and support your decisions based on accepted principles. You will also need to be able to hear others' ideas, interact with those ideas respectfully, raise additional ideas,

and try to reach some consensus. Thus, your active participation in MPS skills group sessions is essential, as is your ability to hear other views and incorporate them into your discussions.

Finally, you will have the opportunity to practice your clinical skills in interviewing and patient counseling. This will allow you to develop interviewing skills in preparation for your office preceptor sessions.

Points will be deducted from the overall grade for poor attendance in skills group. Three unexcused absences will necessitate remediation for a grade of Pass.

Office Preceptor Sessions

This is an exciting opportunity to see clinical practice in action and to use your new clinical skills. It is also a chance to observe and discuss topics from the morning sessions. Each scheduled afternoon, you will go to the office of your assigned office preceptor. The session should begin with a discussion of the weekly clinical assignment with your preceptor, usually some aspect of the patient interview. You will then observe your preceptor's interactions with patients and staff and you will interview patients selected by your preceptor. The nature of these interviews will in part be negotiated by your preceptor, the patient, and you; however, they should include the weekly clinical assignment. You may be able to work with the patients while they are waiting to be seen by the preceptor or after they have been seen. These details will be clarified at the preceptor's office.

The flow of the office will continue as usual in most circumstances. We ask that you make every attempt to fit in to the schedule of the office activities. Occasionally, an office may be set up in a way that makes it difficult to carry out the exercise exactly as outlined. Also, emergencies may occur that interrupt the normal flow of patient care. In these circumstances, flexibility is the rule: try to fit in, find an opportunity to speak with patients or find a way to be helpful to the doctor. No matter what happens, it is likely you will learn something interesting, unexpected, and useful for the future. You will also be learning about the patient-physician interaction in the Skills Groups at Weill. Remember that this literature is relatively recent, and your particular office preceptor may not have had formal training in these areas. Nevertheless, try to appreciate how your office preceptor accomplishes his/her daily activities, note the skills that they use well, and learn as much as you can from observing the physician-patient interaction.

The reality of clinical practice is that it is usually very busy. Teaching students in the office setting always results in decreased clinical productivity for the office physician. The physicians participating in this course have been extremely generous with their clinical time in giving you this educational experience. In part as an expression of gratitude for their generosity, but also to foster a more collegial relationship between you and the physician, we encourage the development of the Educational Partnership in the clinical setting. The idea of the partnership is that in exchange for being able to work with the physician's patient population in his/her office, the student can find a way to be helpful to the physician. There are a variety of office activities that can be helpful and educational (helping with office functions, taking patient weights, helping the office preceptor with

literature searches on topics of interest, providing copies of some of your bibliographic references, etc.). The specific tasks or duties of the partnership are negotiated by the physician and the student. We expect that the partnership experiences will vary greatly and we look forward to seeing what kinds of activities you and your office practitioner negotiate.

Office Preceptor Documentation

You will document your office preceptorship experience in two ways, in your Clinical Record and in through Clinical Observations.

Each week you will document some aspect of the office preceptor assignment in your Clinical Record. In this way, you will be developing not only your interviewing skills, but also your skills of medical documentation. The Clinical record is a proxy for professional note writing and we will ask you to develop increasingly formal notes as the year goes on. Each entry in the Clinical Record should be signed by you and cosigned by your preceptor just as your notes in patients' charts will be signed and cosigned in the future.

You will also document your observations on specific weekly topics through Clinical Observation sheets. You do not need to share these with your office preceptor, but they will be used in your Skills Groups. These will be useful to you as a way of journaling your thoughts and concerns early in your medical career.

Course Requirements

Attendance

Attendance and punctuality at all sessions is mandatory and is a direct reflection of your professionalism. MPS I, like your other clinical rotations, is largely an experiential course. Reading on these topics is not equivalent to the experience of attending class. Participation is fundamental to the learning experience in this course. Missing a session not only affects your learning but detracts from the experience of your classmates. There will be a sign-in sheet at each lecture and small group session. All preceptor sessions must be attended on your scheduled day. You are not to make changes in the office preceptor schedule. If your preceptor requests a change, Ms. Davi must be notified prior to the date.

You must inform Ms. Davi and Dr. Konopasek of any absences immediately. Absences due to illness must be supported by a letter from Student Health, as per medical college policy.

Reading Assignments

You are expected to complete reading assignments that are specified as required in the syllabi of the individual modules. The readings are selected not only to provide you with important factual information, but also to serve as thought-provoking launching points for discussion. Readings that are not in the required texts will be scanned and accessible on the course web site.

Required texts:

- Coulehan JL, Block MR. The Medical Interview: Mastering Skills for Clinical Practice. Philadelphia: Davis, 2001.
- Groopman J. How Doctors Think. Boston: Houghton Mifflin, 2007.
- Hark L, Morrison, G. Medical Nutrition and Disease: A Case-Based Approach. Malden: Blackwell, 2003.
- Jekel JF, Elmore JG, Katz DL. Epidemiology, Biostatistics and Preventive Medicine. Third Edition. Philadelphia: WB Saunders, 2007.
- Madoff R. Leukemia for Chickens. New York, 2007.
- Reynolds R, Stone J. On Doctoring. Third Edition. New York: Simon & Schuster, 2001.
- Tierney LM, Henderson MC. The Patient History Evidence-Based Approach. New York: Lange, 2005.

Active and Respectful Participation in Large Group Sessions, Skills Groups and Seminars

You are expected to participate regularly in all sessions in all components of the course.

Written Reports

Some components of the course may require written reports. Reports are expected to conform to the guidelines for format, length, and due date that are specified in the individual syllabi provided. The Clinical Record (see Office Preceptor section) must be completed, reviewed with your preceptor, and signed by you and your preceptor at each session. It must be turned in each week to C-018. Your Clinical Records will also be reviewed by Dr. Konopasek and Dr. LaScalea on an ongoing basis and you will receive feedback on them. Clinical Observation sheets should be turned in to your Skills Group Facilitator at the end of each session.

Written Final Exams

The dates and format of written exams will be specified in the individual syllabi provided for each course component. You must pass the exam in order to receive a grade of Pass for each section.

Observed Structured Clinical Exam (OSCE)

Successful completion of an OSCE at the end of the year is required for passing the course.

Course Evaluation

We rely on your feedback to continue to improve the course. Completion of all course evaluations is a requirement of the course.

Student Assessment

Student assessment is based on attendance, participation, the quality of written reports, and performance on written examinations. The course is divided into 3 grading sections. The first grading section includes the Medical Encounter Part 1, Skills Group Session 1 and your first Office Preceptor evaluation. The second grading section includes assessments for performance in Biostats/Epi and EBM. The final grading section includes assessments for the Medical Encounter Part 2, Skills Group Session 2 and your second Office Preceptor evaluation.

You will receive a grade (Honors, Pass, Marginal, Fail) from each section of the course, as well as an overall grade at the end of the course. Only the overall grade will appear on your transcript.

Your final grade will be comprised of assessment of your performance in the following domains:

- Attendance
- Skills Group
- Office Preceptor Session
- Examinations/Written Reports

Poor attendance in any required component of the course will result in loss of points from the overall grade.

