BCC 7113
Internal Medicine Sub-Internship
2018-2019

**Education Director**
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<thead>
<tr>
<th>Campus</th>
<th>Clerkship Director</th>
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<tbody>
<tr>
<td>Fort Pierce</td>
<td>William Hood, MD</td>
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<tr>
<td>Daytona</td>
<td>Vinayak Purandare, MD</td>
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<tr>
<td>Orlando</td>
<td>Ben Kaplan, MD</td>
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<tr>
<td>Pensacola</td>
<td>Robert Anderson, MD</td>
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<tr>
<td>Sarasota</td>
<td>Kathleen Kennedy, MD</td>
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<td>Tallahassee</td>
<td>Gregory Todd, MD</td>
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Overview

Description
The Internal Medicine Sub-Internship is a competency-based internal medicine acting internship, designed to allow students the opportunity to actively participate in the management of patients with common clinical presentations encountered in the practice of hospital-based internal medicine. Each student will have the opportunity to experience a broad range of illness severity ranging from acute care upon presentation to the emergency department to life threatening processes in the intensive care unit. Many of these patients will not be previously worked up. Students will have the opportunity to improve their basic clinical skills, learn new inpatient procedures and examination techniques, and assess the effectiveness of their clinical interventions and work with an interdisciplinary team. The student will have increasing responsibility for the care of patients during the course of this clerkship.

Orientation
Students are required to review the Internal Medicine Sub-Internship Introduction video PRIOR to the first day of the rotation.

Scheduled Hours/On-Call
The clerkship is four weeks in duration and will consist of inpatient shifts, in-house call, lectures, conferences, and reading assignments. However, it is expected that the student will work at least 10 hours per day for 6 days per week. No overnight inpatient call is required for this clerkship. However, students are encouraged to work during an overnight shift if possible. The student will be expected to be on call with their team/faculty, which may include weekend days. The call schedule will be determined by the faculty member.

Student Workhour Policy
The FSU College of Medicine adheres to the ACGME requirements regarding clinical work and education. This includes working no more than 80 hours per week and no more than 24 hours continuously, except an additional 4 hours may be added to the 24 to perform activities related to patient safety, such as transitions of care or education. Additional patient care responsibilities must not be assigned during this time. Students will have at least one out of every 7 days off, completely free from clinical and educational duties, when averaged over 4 weeks.

Absences
Extended absences from the clerkship are not permitted. Any absence from the clerkship must be pre-approved by the regional campus dean prior to the beginning of the clerkship, using the student absence request form. Even with an excused absence, the student will complete the scheduled work as outlined.

The Clerkship Faculty, Clerkship Director and Education Director must be notified of any absence in advance by the student. In the case of illness or other unavoidable absence, follow the same procedure outlined above, and notify everyone as soon as possible. Unapproved absences during the clerkship will result in a grade of “incomplete” until remediated, and may result in a grade of “fail” for the clerkship.

Components

Required Assignment: Start of Clerkship Educational Objectives
At the start of the clerkship, each student will identify at least three specific educational objectives within internal medicine that he/she hopes to learn during this rotation, along with a specific plan to achieve these objectives, such as extra readings or following extra patients. The student must list the EBM sources he/she will
use to achieve these goals. The student can also work with the Clerkship Director and faculty to gain knowledge about these topics. The student will submit these as a Microsoft Word document through Student Academics. The Education Director will review them and return them with comments.

- **These three specific educational objectives must be submitted by 5 pm on Friday of the first week of the clerkship.**

**Required Assignment: End of Clerkship Educational Objectives**

At the end of the clerkship, the student will briefly report on the extent to which these educational objectives were achieved and by what means, in a submission as a Microsoft Word document through Student Academics. This will be reviewed by the Education Director.

- **This is due by 5 pm on last Friday of the clerkship.**

**Inpatient Care**

This clerkship will be conducted at hospitals chosen to provide students comprehensive experiences with hospitalized patients on internal medicine services. The students will spend four weeks with clerkship faculty physicians who care for hospitalized patients. Under the direct supervision of the clerkship faculty physician, each student will learn to identify, evaluate and prioritize treatment of medically complex inpatients.

The Internal Medicine Sub-Internship is primarily an **apprenticeship style experience** with an IM clerkship faculty member. The clinical faculty will have primary responsibility for assessing the achievement of the clerkship competencies. Students will also have the opportunity to learn about many of the ancillary services that occur inside and outside the hospital setting through the interactions with other professionals. Students will learn and evaluate the basics of patient safety and the hazards of hospitalization as well as review ethical issues that arise with their patients.

**Patient Log (ETS)**

Students will be required to work up a **minimum of 3 new/undifferentiated patients each week** in the inpatient setting. During the 4 week block, students will see 6-10 follow-up/established patients each week. If at any point the student is carrying less than 2 patients per day (follow-ups) s/he will pick up and assume care of a patient who is not a new admission to the hospital. Students are expected to have and record **at least 55 patient encounters** during the 4 week clerkship.

The number of patients each student has responsibility for will be determined by the complexity of cases and the student’s demonstrated ability to assume a role in the care of additional patients. Students will be expected to demonstrate involvement at the **full level of participation in at least 80% of their patient encounters. All patient documentation must be completed by 5 pm on the final day of the clerkship.**

Level of participation in patient care is determined by the effort a student puts forth during the data-gathering phase, assessment and development of a treatment plan. Typically, the data-gathering phase includes history, physical examination and review of diagnostic tests available. The assessment phase includes creating a problem list, as well as developing a prioritized differential diagnosis for a problem. The treatment plan includes therapeutics, diagnostic evaluation, patient education and follow-up. The complexity of these components will vary, but for the purposes of **choosing a level of participation, three basic tasks have been created. These include gathering history, performing a physical exam (full or focused/targeted), and developing assessment and plan of care.** For “Level of Participation in Patient Care” the levels have been defined as follows:

- **Minimal**: perform one of the aforementioned tasks (either history or physical)
- **Moderate**: perform two of the aforementioned tasks (both history AND physical)
- **Full**: perform all three tasks

Students should see at least 12 of the 18 of the conditions listed, and record in patient log (ETS).

1. Abdominal Pain
2. Acute gastrointestinal bleeding
3. Acute neurologic changes, including seizure, stroke, TIA
4. Acute pulmonary edema
5. Acute renal failure
6. Altered mental status
7. Arrhythmias
8. Chest Pain
9. Electrolyte disorders
10. Fever
11. Glycemic control, including diabetic ketoacidosis
12. Hypertensive emergencies
13. Nausea and vomiting
14. Pain Management
15. Respiratory distress
16. Shock and sepsis
17. Substance abuse/overdose/drug withdrawal
18. Syncope

Documentation of Workhours
Students will use ETS to document by self-report their daily work hours. Students must enter daily work hours that includes both clinical experience and educational activities. Failure to report work hours is considered a breach of professionalism.

- Clinical care, including documentation in medical record
- Required educational meetings (i.e. Doctoring 3, clerkship meetings, educational meetings at residency programs)

Hours that should not be included in self-reported work hours include reading about patient conditions and procedures, self-directed study for clerkships/courses, work completed for assignments, learning modules and assigned reading.

Written Documentation of Patient Encounters
Students will be expected to have progressively more autonomy in management of their patients during the clerkship. Patient encounters can be newly admitted patients, or patients seen in follow-up during their hospitalization. Students are expected to document patient encounters in the appropriate format (admission note, SOAP note, discharge summary) either in the EHR or in a Word document submitted to their faculty for review. Evaluation of student’s charting of admissions, daily progress notes and discharge summaries will be done by the clerkship faculty member in the course of patient care activities.

Meetings and Lectures
Students are required to attend lectures and conferences where available. In settings where lectures and conferences are not available, students will acquire learning materials via reading and case assignments arranged by the clerkship director, using the Student Guide from the CDIM Sub-Internship Curriculum or other sources.

In addition, each student will meet with the clerkship director once per week during the clerkship for case presentations and discussions. The clerkship director will oversee student patient-log entries, assuring breadth of experience and avoiding duplication. The student will give a case presentation of a selected case at this weekly meeting which will be assessed by the clerkship director. In addition, the student will discuss issues of biomedical ethics which arise during his/her care of patients, using the curriculum and resources posted on Canvas. During the final week of the clerkship, the student will present a case where the principals of patient safety are outlined and addressed in a patient-centered manner. The student will be expected to have
completed the readings posted on Canvas in preparation for this presentation. Students are also expected to learn and understand the indications and contraindications, risks and benefits for each of the listed procedures. They must come to the weekly educational meeting prepared to discuss with clerkship director and peers.

1. Thoracentesis
2. Paracentesis
3. Insertion and maintenance of central lines
4. Insertion and maintenance of arterial lines and arterial blood gases
5. Nasogastric tubes
6. Lumbar puncture
7. Insertion and maintenance of urinary (Foley) catheters

Didactic sessions will be available through morning report, grand rounds, morning lectures and/or a noon lecture series. These sessions will be available based on location and clerkship faculty’s schedule. These sessions will be considered supplementary to the learning objectives of the clerkship and will be substituted with assigned readings and/or sessions with the clerkship director if needed.

Each student will be required to meet with the clerkship director during the final week of the clerkship to debrief the clerkship director about the student’s experiences on the clerkship.

Exam
The 100 question, web based NBME Internal Medicine Advanced Clinical examination will be given on the last day of the clerkship.

Readings
All textbooks linked below are available through the “Internal Medicine: Books” section of the FSUCOM Medical Library:

- **Cecil Essentials of Medicine** (Andreoli, Benjamin et al) Saunders Elsevier, Inc.
- **The Washington Manual of Medical Therapeutics** (Cooper, Krainik, Lubner, Reno, Micek) (Also available as a mobile resource through the UCentral app)
- **IM Essentials Text and Questions** (Masters, et al) American College of Physicians

Learning Resources
The following resources are available on Canvas.

- Sub-internship Primer
- CDIM IM Sub-internship Student’s Guide Cases
- Procedures from St. Frances Guide to Clinical Clerkship in Inpatient Medicine, 3rd edition (Sanjay Saint) Lippincott Williams & Wilkins, 2010
- Video clips from NEJM series on procedures
- Additional readings on patient safety and the hazards of acute hospitalization
- Ethics curriculum regarding futility

Mobile device resources for are available under Point of Care. There are also other electronic resources available through the [COM Charlotte Edwards Maguire Medical Library](http://www.comlibrary.fsu.edu). 

Institutional Resources
The [COM Charlotte Edwards Maguire Medical Library](http://www.comlibrary.fsu.edu) is primarily a digital library that is available 24/7 through secure Internet access. Library resources that support this course are available under “Subject Guides” under the Resources by subject from the main menu on the library website. In addition, many of the point-of-care
resources are available for full download to mobile data devices. Upon student request, items not found in the library collection may be borrowed through interlibrary loan.

**Evaluation and Grading**

*Mid-Clerkship Feedback*

The clerkship director will assess progress on the student’s self-learning and achieving the clerkship competencies. A **mid-point (formative) evaluation** will be completed by the clerkship director. A **daily electronic log of patients** will be kept by the students and reviewed weekly by the Clerkship Director, who will insure that appropriate numbers of patients are being seen, and that the patient mix reflects the breadth of inpatient diagnoses required for completion of the Internal Medicine Sub-Internship without undue duplication.

**Evaluation**

An evaluation of student clinical performance will be completed by the assigned Clerkship Faculty at the end of the clerkship. A final summative report will be completed by the Clerkship Director at the end of the clerkship. The Education Director will review all components of sub-internship and include an assessment of each in the final grade summary.

**College of Medicine Standard Clerkship Grading Policy**

The standardized clerkship policy can be found on the [Office of Medical Education website](http://fda.fsu.edu/academic-resources/academic-integrity-and-grievances/academic-honor-policy).

**Clerkship Specific Grading**

1. If any remediation is required, the student is no longer eligible for “honors”, and will be assigned an initial grade of “IR” until remediation has been completed
2. Any breech in professionalism renders a student ineligible for honors
3. 55 patient encounters, 80% of which must be full involvement (pass/fail)
4. Submission of self-assessment (Assignment 1) by the end of Week 1 (pass/fail)
5. Submission of end-of-clerkship assessment (Assignment 2) by 5 pm on the last day of the block (pass/fail)
6. Presentation of patient safety case to clerkship director (pass/fail)
7. Active participation in clerkship director meetings (pass/fail)
8. Faculty evaluations and clerkship director evaluations documenting competency in all required domains.
9. NBME Advanced Clinical Examination in Internal Medicine (you must pass with a score >10th percentile to pass the clerkship, greater than 75th percentile to be honors eligible)

**Policies**

*College of Medicine Attendance Policy*

The College of Medicine has detailed attendance policies as they relate to each cohort and events that conflict with course schedules. See [FSUCOM Student Handbook](http://fda.fsu.edu/academic-resources/academic-integrity-and-grievances/academic-honor-policy) for details of attendance policy, notice of absences and remediation. Students must use the absence request form that is located on Student Academics.

*Academic Honor Policy*

The Florida State University Academic Honor Policy outlines the University's expectations for the integrity of students' academic work, the procedures for resolving alleged violations of those expectations, and the rights and responsibilities of students and faculty members throughout the process. Students are responsible for reading the Academic Honor Policy and for living up to their pledge to "...be honest and truthful and...[to] strive for personal and institutional integrity at Florida State University." (Florida State University Academic Honor Policy, found at [http://fda.fsu.edu/academic-resources/academic-integrity-and-grievances/academic-honor-policy](http://fda.fsu.edu/academic-resources/academic-integrity-and-grievances/academic-honor-policy))
Americans with Disabilities Act

Students with disabilities needing academic accommodation should: (1) register with and provide documentation to the Student Disability Resource Center; and (2) bring a letter to the instructor indicating the need for accommodation and what type.

Please note that instructors are not allowed to provide classroom accommodation to a student until appropriate verification from the Student Disability Resource Center has been provided.

This syllabus and other class materials are available in alternative format upon request.

For more information about services available to FSU students with disabilities, contact the:

Student Disability Resource Center
874 Traditions Way
108 Student Services Building
Florida State University
Tallahassee, FL 32306-4167
(850) 644-9566 (voice)
(850) 644-8504 (TDD)
sdrc@admin.fsu.edu
http://www.disabilitycenter.fsu.edu/

College of Medicine Student Disability Resources

Candidates for the M.D. degree must be able to fully and promptly perform the essential functions in each of the following categories: Observation, Communication, Motor, Intellectual, and Behavioral/Social. However, it is recognized that degrees of ability vary widely between individuals. Individuals are encouraged to discuss their disabilities with the College of Medicine’s Director of Student Counseling Services and the FSU Student Disability Resource Center to determine whether they might be eligible to receive accommodations needed in order to train and function effectively as a physician. The Florida State University College of Medicine is committed to enabling its students by any reasonable means or accommodations to complete the course of study leading to the medical degree.

Competencies

The following table outlines the Internal Medicine Sub-Internship clerkship competencies and the assessment method for each, intended to be used as a guide for student learning. For a more detailed view on how these competencies map to the educational program objectives (EPO) and entrustable professional activities (EPA), as well as an overview of the curricular map for the clinical years at the Florida State University College of Medicine, please follow this link: https://med.fsu.edu/index.cfm?page=medicalEducation.syllabi#clerkships.
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<thead>
<tr>
<th>Clerkship Competency</th>
<th>Assessment</th>
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<tr>
<td><strong>Internal Medicine Sub-Internship</strong></td>
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<tr>
<td>Apply knowledge of current medical literature in making evidence-based diagnostic and management decisions, using appropriate evidence-based decision support resources.</td>
<td>x x x x x</td>
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<tr>
<td>Incorporate basic science information appropriately into clinical decision making.</td>
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<td>Effectively manage patient transitions between different care settings.</td>
<td>x x x x x</td>
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<td>Convey thought processes behind clinical decisions and tailors presentations to setting.</td>
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<td>Demonstrate the ability to evaluate and manage patients under supervision with commonly occurring inpatient internal medicine presentations: See list below</td>
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<tr>
<td>Abdominal Pain</td>
<td>x x x x x</td>
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<tr>
<td>Acute gastrointestinal bleeding</td>
<td>x x x x x</td>
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<td>Acute neurologic changes, including seizure, stroke, TIA</td>
<td>x x x x x</td>
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<tr>
<td>Arrhythmias</td>
<td>x x x x x</td>
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<tr>
<td>Chest Pain</td>
<td>x x x x x</td>
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<tr>
<td>Procedure</td>
<td>X</td>
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<td>---------------------------------------------------------------</td>
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<td>Electrolyte disorders</td>
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<td>Fever</td>
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<td>Substance abuse/ overdose/drug withdrawal</td>
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<tr>
<td>Syncope</td>
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<td>Discuss the indications, contraindications, risks, and benefits appropriate to the level of education for each the following procedures: <strong>See list below</strong></td>
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<tr>
<td>Thoracentesis</td>
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<td>Insertion and maintenance of urinary (Foley) catheters</td>
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<td>Patient centered approach in all communications with patients.</td>
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<td>Understanding of ethical principles and their application to patient care.</td>
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<td>Task</td>
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<td>---------------------------------------------------------------------</td>
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<tr>
<td>Effective communication with patients from diverse backgrounds and with all the members of the healthcare team.</td>
<td>x</td>
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<tr>
<td>Application of the principles of end-of-life care with patients and their families.</td>
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<td>Displays and demonstrates professionalism in all interactions with patients, colleagues and staff.</td>
<td>x</td>
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<tr>
<td>Demonstrate the ability to work effectively as a member of the health care team.</td>
<td>x</td>
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<td>Explain the risks, indications, alternatives, and contraindications for physical and pharmacological.</td>
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<td>Discuss complications for which hospitalized adults are at increased risk.</td>
<td>x</td>
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