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Goals & Objectives:

One of the principal goals of this clerkship is to introduce students to the role that Emergency Medicine plays in the management of acute disease. The Emergency Department provides an opportunity for significant clinical exposure and learning of many skills. Such skills include appropriately directed patient history and physical exams, differential diagnoses, medical decision making, and acquisition of procedural skills. In the ED, there is exposure to a broad base of undifferentiated patients with a wide variety of personal, social, and cultural issues that influence patient care. This environment places a premium on physical exam skills and diagnostic reasoning, emphasizing the ability to recognize life-threatening situations and initiate resuscitation in a wide range of diseases with varying degrees of urgency.

Students are taught to appreciate the dynamic state of emergency medicine knowledge, the necessity for maintaining currency, and the means to do it. Although the primary teaching method employed in this Clerkship is tutorial by individual faculty members, students are also exposed to a series of videotaped lectures from the American College of Emergency Medicine covering common emergency problems. Weekly meetings are held with individual students by the Clerkship Director.

Prerequisites/Comments:
Must be either: 1) a 4th year medical student or 2) a 3rd year medical student who has completed all of the required core clerkships of the junior year to participate in the Emergency Medicine Clerkship.
Pediatric Emergency Medicine / 4 weeks

Goals & Objectives:

Develop proficiency in assessment and treatment of pediatric emergency patients. Attain skills necessary for the care of acutely ill or injured pediatric patients of all ages in the setting of an emergency department (ED): Such skills include but are not limited to, the recognition and management of the critically ill or injured child, appropriate use and interpretation of ancillary tests, use of appropriate medication and therapeutic measures, and determination of appropriate dispositions for patients in the ED.

Acquire the knowledge and skills to diagnose and manage patients with acute life-threatening problems, that include but not limited to, patients requiring cardiopulmonary resuscitation, stabilization for transport to the pediatric intensive care unit, trauma activation, high level triage, ventilator support, management for poisonings, management of renal or hepatic failure, and complicated hematologic, infectious and immune problems.

All students will learn to evaluate and manage critically ill children, with particular attention to: the patient in shock, the patient with head trauma, and the patient with respiratory failure.

Attain procedural skills necessary for treating pediatric emergency patients: Such procedural skills include but are not limited to, cardiopulmonary resuscitation, bag valve mask ventilation, endotracheal intubation, other advanced airway maneuvers, decompression of tension pneumothorax, advanced vascular access procedures, laceration repairs, reduction of limb-threatening fractures and dislocation, splint placement, lumbar puncture, and performance of procedural sedation.

Outline the significance of history in the evaluation of abuse; Outline risk factors for abuse; Review and outline documentation in findings of abuse

Prerequisites/Comments:
Must be either: 1) a 4th year medical student or 2) a 3rd year medical student who has completed all of the required core clerkships of the junior year to participate in the Emergency Medicine Clerkship.
Goals & Objectives:

1. To refine basic clinical skills that is essential to practicing Family Medicine effectively
   - Obtain a focused, problem oriented history and physical in an efficient manner.
   - Present a patient case in an orderly, thorough, and efficient manner.
   - Record a complete and organized SOAP note.
2. Develop a differential diagnosis relevant to the clinical situation and be able to discuss the rationale for establishing a final diagnosis.
3. Create diagnostic and therapeutic plans and exercise cost conscious use of medical resources when evaluating and treating both in-patients and out-patients.
4. To establish effective doctor-patient relationships by using appropriate interpersonal communication skills.
5. To gain knowledge and awareness of the principles and applications of health promotion and disease prevention in the family medicine setting.
6. The student will develop an awareness of, and sensitivity to, the psychosocial, cultural, familial, and socioeconomic aspects of medical problems as they relate to patient management.
7. To gain exposure to, and an understanding of, the practice of family medicine and the role of the family physician within the health care delivery system.
8. To develop knowledge and skills related to common medical office procedures practiced in the family physicians office.
9. To demonstrate knowledge and skills required for lifelong learning and the competent practice of medicine.

Prerequisites/Comments:
The following are prerequisites to be submitted to apply for the Family Medicine Allopathic Externship:

1. The student is currently enrolled in an LCME accredited medical school
2. The student must express a true interest in Family Medicine
3. The student must write a personal statement addressing:
   a. Why they are interested in Family Medicine
   b. What future goals they hold as a Family Medicine physician
   c. A statement reflecting the authenticity of their interest in Family Medicine

Applications will be reviewed and considered based on prerequisite criteria and availability.
General Surgery Residency Program

Rotation: General Surgery / 4-weeks

Goals & Objectives:
1) To be able to adequately evaluate and prepare the surgical patient for operation.
2) To effectively help manage the postoperative patient.
3) To appreciate less common disease processes and the role of surgery.
4) To recognize the subtleties encountered with the geriatric surgical patient.
5) To improve upon minor surgical skills and surgical assisting.

Description of Elective:
The student will be exposed to a more intensive general surgical experience than in the third year clerkship. Patient workups, perioperative patient care and surgery itself will be the focus for increased student responsibility.

Prerequisites/Comments:
- LCME accredited
- Allopathic
- USMLE Step 1 exam
- Students with plans to pursue General Surgery as their career


Internal Medicine Residency Program

Rotation: Internal Medicine / 4 weeks

Goals & Objectives:

The purpose of the rotation is to prepare the student for a subsequent PGY-1 year. The focus is on inpatient care from Emergency department entry to subsequent discharge to primary care continuity. Students will have 2-4 patients and be under supervision by a PGY-2/3 resident and Attending physician as part of a ward team.

Prerequisites/Comments:

- Must be a 4th year medical student
- LCME medical school is the focus
- Availability is limited
Rotation: Diagnostic Radiology / 2 or 4 weeks

During your general diagnostic radiology observership, you will learn about the advanced imaging modalities. You will observe how the Radiologist interacts with the patient. Observe how Radiologists read films and handle incoming phone calls from Primary Care Physician, Surgeons, and Other Hospital Personnel.

Rotations will be through Abdominal Radiology (GI/GU), Musculoskeletal, Pediatrics, Plain Films, CT, MRI, Ultrasound (OB and Vascular), Mammography, Cardiothoracic, Nuclear Medicine, Neuroradiology, and Vascular Interventional.

Reading materials and/or online teaching file websites will be made available during your rotation. The Radiology Residency Department has a thorough library for your use.

During your rotation you will make a 5-7 minute Power Point presentation to the Radiology Department Noon Conference. We suggest you follow a "case-presentation" style, by choosing an interesting case from the department’s teaching file or one you have seen while rotating through other departments. Please present the pertinent radiologic findings and pathophysiology. Didactic mini-lectures about Radiologic topics are also welcomed. We will be happy to offer any suggestions, advice, etc. regarding your presentation and to meet with you during the week(s) prior to your presentation to review the images you plan to show, etc.

In some occasions, due to scheduling conflicts, you will not be asked to make a presentation. You are encouraged to do a research project, prepare a manuscript of an interesting case to a peer-reviewed journal. Staff will be available to mentor you.

Goals & Objectives:

Goal # 1: Medical Knowledge

General Principles

Throughout the Undergraduate Radiology Curriculum, students will be exposed to the following general principles of the practice of radiology. Upon completion of this curriculum, our graduates will have the appropriate basic diagnostic and therapeutic skills for radiological interpretation, practice, and application for their own future careers. Our graduates will demonstrate competency in the following areas of radiology:

1. Role of radiologists as specialists and consultants working with other medical staff as part of the healthcare team;
2. Applications of radiology as a screening modality of disease and for use in guiding medical and surgical interventions;
3. Importance of evidence-based medicine in choice of radiological imaging, procedures, and appropriate interpretation;
4. Basic concepts of risk management, malpractice, and confidentiality, as it applies to radiology and the legal obligations to protect patients’ interests;
5. Formulation of appropriate differential diagnoses for common radiologic findings;

Throughout the Undergraduate Radiology Curriculum, our students will become familiar with the normal and abnormal structure of the body and each of its major organ systems as it pertains to radiological imaging. Our graduates will demonstrate competency to:

**Radiographics**
1. Discuss principles of radiology and radiation
2. Identify normal anatomy on PA, AP, and lateral chest films
3. Recognize abnormal chest films including pleural effusion, pneumothorax, pneumonia and lobe location, changes of congestive heart failure, changes of chronic obstructive pulmonary disease, atelectasis, pulmonary nodules and masses, and hyaline membrane disease of the newborn
4. Identify normal anatomy on four views of the abdomen
5. Recognize abnormal abdominal films including ileus, small bowel obstruction, large bowel obstruction, free air, and calcifications
6. Identify normal anatomy of the spine and long bones in both adults and children
7. Recognize abnormal bone radiographs including fractures, degenerative joint disease, osteoporosis (including vertebral collapse), and primary versus metastatic bone malignancy
8. Identify normal anatomy on intravenous pyelogram, barium enema, and upper gastrointestinal series

**Computed Tomography**
1. Recognize and treat contrast allergy, it’s signs and symptoms, and implications to the patient
2. Discuss principles of CT function and applications
3. Discuss differences between CT, MRI, plain film, and US, including the comparative benefits/drawbacks and strengths/weaknesses of each modality
4. Discuss general indications of when to use CT as the imaging of choice
5. Identify normal anatomy found on CT of the head, spine, chest, abdomen, and pelvis
6. Recognize abnormal head CTs including acute hemorrhage (subarachnoid, subdural, and parenchymal), infarcts, edema, mass effect, and hydrocephalus in an infant and adult
7. Recognize abnormal chest CTs including pulmonary nodules and masses
8. Recognize abnormal abdominal/pelvis CTs including diverticular disease, appendicitis, bowel obstruction, abdominal aortic aneurysms, pancreatitis, abdominal abscesses, ascites, and hepatic, pancreatic and renal masses
9. Recognize abnormal CTs of the spine, including metastatic disease, degenerative joint disease, and disc disease

**Magnetic Resonance Imaging**
1. Discuss principles of magnetic resonance imaging, including differences in abilities and applications of MRI versus CT
2. Identify normal anatomy on MRI of the head and spine
3. Recognize abnormal head and spine MRIs including central nervous system infection, masses, stroke syndromes, multiple sclerosis, disc disease, metastatic vertebral column disease, and cord compression

Ultrasound
1. Discuss general principles of ultrasound including the differences between 2D, Doppler, and M mode
2. Discuss indications and limitations of
   - ultrasound for specific OB/Gyn situations (molar pregnancy, anencephalic pregnancy, placenta previa, fetal age using biparietal diameter and femur length, and ectopic pregnancy),
   - vascular Doppler ultrasound (aneurysm, deep vein thrombosis, and carotid artery and peripheral vascular disease),
   - ultrasound for gall bladder, bile ducts and liver,
   - echocardiogram (transthoracic versus transesophageal echocardiography, chamber size, valvular disease, and pericardial infusions),
   - renal ultrasound for cysts and tumors,
   - prostate ultrasound (for evaluation of nodules and biopsy),
   - ultrasound for trauma

Mammography
1. Discuss basics of normal and abnormal mammograms
2. Discuss indications and utility of mammography, including usefulness as a screening method and as a surgical tool for resection and biopsy

Nuclear Medicine
1. Discuss general principles and therapeutic uses of nuclear medicine
2. Discuss mechanisms, indications, and limitations of HIDA scans, bone scans, tagged RBC scans, myocardial perfusion and function (gated blood pool) scans, bone densitometry scans, and ventilation/perfusion scans

Angiography
1. Discuss diagnostic and therapeutic principles of angiography
2. Discuss indications for obtaining angiograms
3. Discuss applications and utility of MRA angiograms
4. Recognize normal anatomy of the great vessels and other vasculature on angiograms
5. Discuss indications for angiograms for abnormal processes including subarachnoid hemorrhage and berry aneurysms, vascular stenotic lesions, pulmonary angiogram for PE, aortic dissection, aortic trauma, and gastrointestinal bleeding
Finally, our graduates will not only have obtained adequate competency in the identification of normal and abnormal findings, but also will have learned appropriate and judicious choice and sequencing of imaging modalities to optimize the diagnosis in balance with sensitivity and specificity, utility, and potential patient complications. Our graduates will have developed competence regarding the radiologic work-up of:

- Pulmonary embolism
- Cardiac ischemia
- Acute abdomen
- Neck and back pain
- Neurological syndromes including spinal cord compression, seizures, cerebrovascular accident, headaches, focal neurological findings, mental status changes, and head trauma
- Child abuse
- Preventive medicine including spiral CT for pulmonary nodules, bone densitometry scans for osteoporosis, mammograms for breast cancer screening, and prostate ultrasound for cancer screening and nodule evaluation
- Bone and joint pain
- Normal and abnormal pregnancy
- Staging of common cancers
- Hematuria and flank pain
- Gastrointestinal bleeding
- Aortic aneurysms/dissections
- Physical findings including ascites, abnormal heart sounds, prostate nodules, bruits, aneurysm, testicular masses, thyroid nodules, and breast lumps
- Trauma

**Goal # 2: Communication Skills**
Radiology is a field that requires effective communication among many health care professionals working as a team in the best interest of the patient. Upon completion of this curriculum, our graduates will demonstrate competency to recognize the role of the radiologist as a consultant and the importance of effective communication between radiologists and other clinicians.

**Goal # 3: Professionalism**
As physicians, radiologists are expected to hold themselves to the highest standards of integrity, service, and professionalism. Our graduates will demonstrate competence to work collaboratively as members of a healthcare team in a variety of settings.

**Goal # 4: Patient Care**
Our graduates will demonstrate competence to:
1. Interpret the results of the most frequent commonly used radiological tests;
2. Select and use information technology as it relates to radiological imaging with respect to PACS, and employ electronic communications for effective communication with clinical services.
Goal # 5: Practice Based and Lifelong Learning
Our observers will demonstrate competence to:
   1. Use information technology to access and manage clinical information and perform on-line searches to support ongoing self-directed learning;
   2. Search, evaluate, and critically review radiological scientific evidence appropriate as an approach to a clinical problem;

Goal # 6: Social and Community Context of Healthcare
Our observers will demonstrate competence to develop diagnostic and treatment strategies with regard to radiological technologies that are cost-effective, sensitive to limited resources, and do not compromise quality of care.

Prerequisites/Comments:

- 4th year medical students
- Medical student must have transportation to be able to travel between the following campuses:
  - Orlando/FRI Princeton/Altamonte/Winter Park/Florida Hospital Celebration-Kissimmee/Florida Hospital East/FRI Oviedo/FRI Waterford Lakes.
Family Medicine Osteopathic Residency Program

Rotation: Family Medicine Residency Service / 2 or 4 weeks

Goals & Objectives:
See Internal Medicine

Prerequisites/Comments:
Must be a 3rd or 4th year osteopathic medical student.
Rotation: Pediatrics / 2 or 4 weeks

Pediatrics is the study of the comprehensive care of the growing child. This includes screening for proper growth and development, preventive health care, and the recognition and management of illnesses in infants, children, and adolescents.

The emphasis in pediatrics is on learning to perceive the child as a dynamic, growing, and developing patient. All aspects of the child’s health are based upon the foundation formed during previous periods of growth. As pediatricians, it is vital for us to be cognizant of these changes, and to assist in maximizing health in each of these stages through health screening, anticipatory guidance, and preventative medicine techniques. In this way, we can assure the best future for our maturing young patients.

| Goals:  
Realm of Competency | Objectives |
|-----------------------|------------|
| Medical Knowledge:    | • Identify the common acute and chronic medical conditions for which children visit pediatricians  
                        o Develop a reasonable differential diagnosis and treatment plan for common pediatric clinical problems  
                        o List and identify those conditions that require immediate recognition and management in children (e.g. meningitis, epiglottitis, appendicitis, etc)  
                        o Demonstrate an awareness of the unique pharmacological concerns involved with prescribing medication for children  
                        • Assess for failure to thrive and identify its major causes  
                        • Assess for developmental delay and identify its major causes  
                        • Describe the fundamental aspects of health maintenance in children  
                        • Delineate the various immunizations for children  
                        • Describe the methods for evaluating the nutritional condition of children  
                        • Define normal ranges in children for commonly ordered laboratory studies  
                        o Identify the most likely and most serious possible causes for abnormal laboratory studies  
| See list of common problems in Pediatrics |
### Patient Care:

Provide patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health.

- Demonstrate history and physical exam skills for:
  - Newborns
  - Infants and toddlers
  - Children
  - Adolescents
- Demonstrate the appropriate involvement of parents and other caregivers in the assessment of the well and sick child.
- Order laboratory tests as indicated for both health maintenance and illness assessment.
- Plot growth and development for children and interpret the results.
- Conduct developmental assessments on children and interpret the results.
- Perform procedures such as:
  - IV line placement
  - Phlebotomy
  - Audiometry
  - Tympanometry
  - Testing for Strep pharyngitis
  - Giving immunizations
  - Circumcision
- Effectively differentiate between the sick child who needs immediate attention and the sick child who can be managed less acutely.

### Interpersonal and Communication Skills:

Demonstrate interpersonal and communication skills that result in effective information exchange and teaming with patients, their patients families, and professional associates.

- Recognize and address the needs of both the child and the parent or caretaker during the visit.
- Utilize appropriate techniques in interviewing children and their parents or caretakers:
  - Communicate the diagnosis in lay language and assure comprehension.
- Provide effective patient education:
  - Educate regarding indications for calling the doctor or returning to the office for follow-up.
- Provide anticipatory guidance on:
  - Normal growth and development concerns.
  - Issues related to puberty and adolescence.
  - Issues related to family dynamics.
- Consider confidentiality issues and the rights of parents and minor children around health care issues.

### Practice-Based Learning and Improvement:

Identify and utilize virtual library for use in diagnosis and therapeutics.
| Investigate and evaluate their patient care practices, appraise and assimilate scientific evidence, and improve their patient care practices | • Whenever possible, apply evidence-based medicine to clinical decision-making processes  
• Utilize clinical guidelines and best practice standards in an effort to minimize unexpected and unnecessary clinical variation |
| Systems-Based Practice: | • Formulate diagnostic and therapeutic plans based upon medical, psychosocial, spiritual, socioeconomic and ethical factors  
• Utilize community agencies and resources  
• Apply ethical and legal boundaries with regard to the interaction with and treatment of children and their parents or caretakers  
• Educate parents or caretakers on safety issues specifically regarding recreational activities, exercise, diet, drugs and alcohol, sexual activity, STDs and pregnancy |
| Demonstrate an awareness of and responsiveness to the larger context and system of health care and the ability to effectively call on system resources to provide care that is of optimal value |  |
| Professionalism: | • Communicate cases to colleagues, supervisors and consultants clearly and succinctly  
• Employ effective and proper strategies when confronted with problems relative to patient care responsibilities  
• Use appropriate dress, behavior and language in dealing with children, parents or caretakers, staff, peers and other health care workers  
• Acknowledge and demonstrate respect for the child and their parents or caretakers throughout the interaction  
• Honor the principles of compassion, empathy, and respect for modesty, privacy and confidentiality  
• Demonstrate tolerance of family attitudes, beliefs, cultural and socioeconomic influences |
| Demonstrate a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population |  |
| Osteopathic Philosophy and Osteopathic Manipulative Medicine: | • Recognize the differences in osteopathic approaches to the child versus the adult  
• Perform osteopathic evaluation and treatment to newborns, children and adolescents  
  o Condylar assessment and decompression  
  o Occipital to sacral fascial unwinding  
  o Leg length discrepancy  
  o Scoliosis |
| Integrate Osteopathic Concepts and OMT into the medical care provided to patients as appropriate. Understand and integrate Osteopathic Principles and Philosophy into all clinical and patient care activities |  |
| Prerequisites/Comments: | Must be a 3rd or 4th year osteopathic medical student. |
Rotation: Family Medicine Osteopathic / 2 or 4 weeks

Family medicine is a primary care medical specialty that provides continuous and comprehensive health care for the individual and the family. It integrates the biological, clinical, and behavioral sciences with a broad understanding of all health care disciplines. The scope of family medicine encompasses all ages, sexes, and organ systems. It deals with every disease entity and, includes an understanding and application of the principles of osteopathic medicine. It places in the forefront of medical care the advancement of wellness, the prevention of disease and promotes advocacy for the benefit of its patients. Family physicians possess unique attitudes, skills and knowledge that qualify them to provide continual and comprehensive medical care within the context of social, economic, cultural, psychological and environmental factors. The family practitioner may be involved in all aspects of medical care both in and out of the hospital setting. The family practitioner must know and uses community resources to benefit the patient and the family. Most often family medicine is practiced within the ambulatory setting, which includes outpatient clinics and private physician offices.

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<thead>
<tr>
<th>Goals: Realm of Competency</th>
<th>Objectives</th>
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<tbody>
<tr>
<td><strong>Medical Knowledge:</strong></td>
<td>List the most common acute, chronic and psychological diagnoses that present to the family physician including their main presenting symptoms and physical examination findings</td>
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<tr>
<td>Demonstrates knowledge about established and evolving biomedical, clinical, and cognate (e.g. epidemiological and social-behavioral) sciences and the application of this knowledge to patient care of all ages and all stages of life.</td>
<td>Describe the importance of commonly used laboratory modalities in family medicine</td>
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<td>Realize the effects of commonly used medications (Rx and OTC) used for frequently seen diagnoses in family medicine</td>
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<td>Demonstrate the importance of longitudinal care including growth and development assessments, health screenings and management of commonly seen chronic problems</td>
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<td></td>
<td>Demonstrate an understanding of health promotion and disease prevention</td>
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<td></td>
<td>Provide a differential diagnosis for common complaints, symptoms and signs that present to the family physician</td>
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<tr>
<td><strong>Patient Care:</strong></td>
<td>Demonstrate the ability to perform a complete medical history and physical examination</td>
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<tr>
<td>Provides patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health</td>
<td>Conduct a focused patient history and physical examination for common complaints and be able to offer a differential diagnoses and plan for treatment</td>
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<td>Be able to present a case of a patient encounter to a physician</td>
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|                           | Demonstrate an ability to develop rapport with patients through effective listening skills,
<table>
<thead>
<tr>
<th>Empathy and Sensitivity</th>
<th>empathy, sensitivity and respect for the patient</th>
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<tr>
<td>- Recognize the importance of total patient management including preventative care, patient education, episodic illness care and chronic illness care in a variety of settings including office, hospital, home visits and group visits</td>
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<td>- Recognize the impact of the disease process on the patient relative to family and other interpersonal relationships</td>
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<td>- Recognize the bio-psycho-social aspects of family systems and its impact on individual and family health</td>
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<tr>
<th>Interpersonal and Communication Skills:</th>
<th>- List and demonstrate the principles of the art of interviewing</th>
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<tbody>
<tr>
<td>Demonstrate interpersonal and communication skills that result in effective information exchange and teaming with patients, their patients families, and professional associates</td>
<td>- Demonstrate empathy and cultural sensitivity in patient interactions</td>
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<tr>
<td>- Present oneself in a professional manner to patients and their families</td>
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<td>- Demonstrate body language that places the patient at ease</td>
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<td>- Relate discussions and explanations in a manner that the patient can correctly interpret</td>
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<td>- Utilize touch when appropriate and within the boundaries of an appropriate doctor-patient relationship</td>
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<tr>
<td>- Maintain confidentiality at all times</td>
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<tr>
<th>Practice-Based Learning and Improvement:</th>
<th>- Be cognizant of, and apply, evidence-based medicine as it pertains to family medicine</th>
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<tbody>
<tr>
<td>Investigate and evaluate their patient care practices, appraise and assimilate scientific evidence, and improve their patient care practices</td>
<td>- Collect and analyze patterns of medical practice and compare / contrast the individual patterns within the practice with established clinical guidelines and norms</td>
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<td>- Recognize incidence of disease with epidemiologic consequence and know the process of appropriate notification (outbreaks, etc.)</td>
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<tr>
<th>Systems-Based Practice:</th>
<th>- Integrate the importance of appropriate referral systems and their use in a family medicine practice</th>
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<tr>
<td>Demonstrate an awareness of and responsiveness to the larger context and system of health care and the ability to effectively call on system resources to provide care that is of optimal value</td>
<td>- Identify health care issues involved in managed care with associated formulary, preventative care and referral pattern issues</td>
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<tr>
<td>- Understand and use a team approach when delivering healthcare</td>
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</table>
**Professionalism:**

Demonstrate a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population

- Act in a professional manner at all times
- Dress appropriately when working with patients
- Continually subscribe to changing and advancing medical knowledge
- Be cognizant of, and sensitive to, cultural diversity
- Demonstrate respect and professional behavior with other members of the healthcare team

**Osteopathic Philosophy and Osteopathic Manipulative Medicine:**

Integrate Osteopathic Concepts and OMT into the medical care provided to patients as appropriate. Understand and integrate Osteopathic Principles and Philosophy into all clinical and patient care

- Identify patients in the family medicine setting who would benefit from OMT
- Skillfully apply appropriate manipulative treatment as part of the overall treatment of the patient’s condition

**Prerequisites/Comments:**

Must be a 3rd or 4th year osteopathic medical student.
**Rotation: Osteopathic Manipulative Medicine / 2 or 4 weeks**

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<tr>
<th>Goals: Realm of Competency</th>
<th>Objectives</th>
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<tbody>
<tr>
<td><strong>Synopsis</strong></td>
<td><strong>Objectives</strong></td>
</tr>
<tr>
<td>Appropriate supervision shall be provided so that the resident will integrate these skills into the daily care of his/her patients. This shall be documented in the medical record.</td>
<td>The resident will demonstrate competence in his/her ability to:</td>
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<tr>
<td><strong>Goals</strong></td>
<td>Describe the philosophy behind osteopathic manipulative treatment.</td>
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<tr>
<td>5.62 To teach the resident, through didactic as well as clinical settings, the application of osteopathic principles and osteopathic manipulative treatment in all patient care settings. To expose the resident to multiple treatment techniques so he/she may choose the most appropriate method of treating any patient.</td>
<td>Describe the role of the musculoskeletal system in disease, including somato/visceral reflexes, alterations in body framework, and trauma. Describe contraindications to osteopathic manipulative treatment.</td>
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<td>Utilize multiple methods of treatment including, but not limited to, High-Velocity/Low Amplitude (HVLA), strain/counter strain, and muscle energy.</td>
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<td>Demonstrate, as documented in the medical record, his/her use of osteopathic principles and osteopathic manipulative treatment in the continuity of care training site in an integrated fashion. It is understood that integration implies the use of OMT in such conditions as, (but not limited to) respiratory, cardiac, and gastrointestinal disorders, as well as musculoskeletal disorders.</td>
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**Patient Care:**

- Demonstrate osteopathic history and physical exam skills for:  
  - Newborns  
  - Infants and toddlers  
  - Children  
  - Adolescents  
  - Adults  
- Demonstrate development of evaluation and treatment plan including osteopathic manipulation of the patient  
- Refer patient and parent to the appropriate specialist for adjunctive care  
- Order laboratory tests as indicated for both health maintenance and illness assessment  
- Effectively differentiate between the sick patient who needs immediate attention and the sick patient who can be managed less acutely
**Interpersonal and Communication Skills:**

Demonstrate interpersonal and communication skills that result in effective information exchange and teaming with patients, their patients families, and professional associates

- Recognize and address the needs of the patient during the visit
- Utilize appropriate techniques in interviewing
  - Communicate the diagnosis in lay language and assure comprehension
- Provide effective patient education
  - Educate regarding indications for calling the doctor or returning to the office for follow-up
  - Indication and approach of Osteopathic manipulative treatment to the patient
- Provide anticipatory guidance on:
  - Normal growth and development concerns
  - Osteopathic approach to medical condition
  - Issues related to puberty and adolescence
  - Issues related to family dynamics
- Consider confidentiality issues and the rights of parents and minor children around health care issues

**Practice-Based Learning and Improvement:**

Investigate and evaluate their patient care practices, appraise and assimilate scientific evidence, and improve their patient care practices

- Identify and utilize virtual library for use in diagnosis and therapeutics
- Whenever possible, apply evidence-based medicine to clinical decision-making processes
- Utilize clinical guidelines and best practice standards in an effort to minimize unexpected and unnecessary clinical variation

**Systems-Based Practice:**

Demonstrate an awareness of and responsiveness to the larger context and system of health care and the ability to effectively call on system resources to provide care that is of optimal value

- Formulate diagnostic and therapeutic plans based upon medical, psychosocial, spiritual, socioeconomic and ethical factors
- Utilize community agencies and resources
- Apply ethical and legal boundaries with regard to the interaction with and treatment of children and their parents or caretakers
- Educate parents or caretakers on safety issues specifically regarding recreational activities, exercise, diet, drugs and alcohol, sexual activity, STDs and pregnancy
**Professionalism:**
Demonstrate a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population

- Communicate cases to colleagues, supervisors and consultants clearly and succinctly
- Employ effective and proper strategies when confronted with problems relative to patient care responsibilities
- Use appropriate dress, behavior and language in dealing with children, parents or caretakers, staff, peers and other health care workers
- Acknowledge and demonstrate respect for the child and their parents or caretakers throughout the interaction
- Honor the principles of compassion, empathy, and respect for modesty, privacy and confidentiality
- Demonstrate tolerance of family attitudes, beliefs, cultural and socioeconomic influences

**Osteopathic Philosophy and Osteopathic Manipulative Medicine:**
Integrate Osteopathic Concepts and OMT into integrated familycare. Understand and integrate Osteopathic Principles, physiology and Philosophy into all clinical and patient care activities.

**Prerequisites/Comments:**
Must be a 3<sup>rd</sup> or 4<sup>th</sup> year osteopathic medical student.
Rotation: Geriatrics / 2 or 4 weeks

Geriatrics is the primary care medical specialty that addresses the unique health care issues of the elderly. The clinical rotation in geriatrics provides students the opportunity to understand the special needs of the geriatric patient and unique disease presentation and progression in the elderly. It also enables students to identify psychosocial needs and functional disabilities of the elderly and their impact on developing appropriate care planning and medical management. The focus is on an interprofessional approach, functional and neuropsychological assessment, and treatment of the geriatric patient as directed by patient needs and wishes.

<table>
<thead>
<tr>
<th>Goals: Realm of Competency</th>
<th>Objectives</th>
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</thead>
<tbody>
<tr>
<td><strong>Medical Knowledge:</strong></td>
<td>• List the most common acute, chronic and psychological diagnoses that present to the geriatric physician including their main presenting symptoms and physical examination findings</td>
</tr>
<tr>
<td>Demonstrate knowledge about established and evolving biomedical, clinical, and cognate (e.g. epidemiological and social-behavioral) sciences and the application of this knowledge to patient care of all ages and all stages of life.</td>
<td>• Understand the important alterations in pharmacokinetics and pharmacological effect of medications commonly prescribed for elderly patients</td>
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<td>• Demonstrate the importance of longitudinal care including growth and development assessments, health screenings and management of commonly seen chronic problems</td>
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<td>• Demonstrate an understanding of health promotion and disease prevention</td>
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<td>• Provide a differential diagnosis for common complaints, symptoms and signs that present to the geriatric physician</td>
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<tr>
<td><strong>Patient Care:</strong></td>
<td>• Demonstrate the ability to perform a complete medical history and physical examination on an older patient and offer a differential diagnoses and plan for treatment</td>
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<tr>
<td>Provide patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health</td>
<td>• Perform an accurate geriatric assessment</td>
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<td>• Demonstrate an ability to develop rapport with patients through effective listening skills, empathy, sensitivity and respect for the patient</td>
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<td>• Recognize the importance of total patient management including preventative care, patient education, episodic illness care and chronic illness care in a variety of settings including office, hospital, home visits and group visits</td>
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<td>• Recognize the impact of the disease process</td>
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<tr>
<td>Florida Hospital Graduate Medical Education, 2012</td>
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</table>
| **Interpersonal and Communication Skills:** | on the patient relative to family and other interpersonal relationships  
- Recognize the bio-psycho-social aspects of family systems and its impact on individual and family health |
| Demonstrate interpersonal and communication skills that result in effective information exchange and teaming with patients, their families, and professional associates | - List and demonstrate the principles of the art of interviewing  
- Demonstrate empathy and cultural sensitivity in patient interactions  
- Present oneself in a professional manner to patients and their families  
- Demonstrate body language that places the patient at ease  
- Relate discussions and explanations in a manner that the geriatric patient can correctly interpret  
- Utilize touch when appropriate and within the boundaries of an appropriate doctor-patient relationship  
- Maintain confidentiality at all times |
| **Practice-Based Learning and Improvement:** | Be cognizant of, and apply, evidence-based medicine as it pertains to geriatric medicine  
- Collect and analyze patterns of medical practice and compare / contrast the individual patterns within the practice with established clinical guidelines and norms  
- Recognize incidence of disease with epidemiologic consequence and know the process of appropriate notification (outbreaks, etc.) |
| Investigate and evaluate their patient care practices, appraise and assimilate scientific evidence, and improve their patient care practices | Integrate the importance of appropriate referral systems and their use in geriatric medicine  
- Identify health care issues involved in managed care with associated formulary, preventative care and referral pattern issues  
- Understand and use a team approach when delivering healthcare to the geriatric patient |
| **Systems-Based Practice:** | Act in a professional manner at all times  
- Dress appropriately when working with patients  
- Continually subscribe to changing and advancing medical knowledge  
- Be cognizant of, and sensitive to, cultural diversity  
- Demonstrate respect and professional behavior with other members of the healthcare team |
<p>| Demonstrate an awareness of and responsiveness to the larger context and system of health care and the ability to effectively call on system resources to provide care that is of optimal value | Identify patients in the geriatric medicine |
| <strong>Professionalism:</strong> | - Identify patients in the geriatric medicine |
| Demonstrate a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population |</p>
<table>
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<tr>
<th>Osteopathic Manipulative Medicine:</th>
<th>setting who would benefit from OMT</th>
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<tbody>
<tr>
<td>Integrate Osteopathic Concepts</td>
<td>• Skillfully apply appropriate</td>
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<td>and OMT into the medical care</td>
<td>manipulative treatment as part of</td>
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<td>provided to patients as</td>
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<td>appropriate. Understand and</td>
<td>the patient's condition</td>
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<tr>
<td>integrate Osteopathic Principles</td>
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<td>and Philosophy into all</td>
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<td>clinical and patient care</td>
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Prerequisites/Comments:
Must be a 3rd or 4th year osteopathic medical student.
Rotation: Ears, Nose, and Throat / 2 or 4 weeks

Knowledge of surgery, surgical indications, and surgical contraindications is essential for the competent practice of osteopathic medicine. The Department of Surgery closely partners with all areas of clinical instruction of all academic courses and programs of a clinical nature in the College of Osteopathic Medicine.

During this two-month clinical course, the student will be exposed to a variety of clinical problems routinely seen on the surgical service. Emphasis will be placed on preoperative, intraoperative, and postoperative management of the patient. In the operating room, the student will practice aseptic techniques, operating room principles, and assisting in surgery.

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<th>Goals: Realm of Competency</th>
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<tbody>
<tr>
<td>Medical Knowledge:</td>
<td>• Possess knowledge of anatomical, molecular, biochemical and cellular mechanisms underlying the pathology of disease</td>
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<tr>
<td>Demonstrate knowledge about established and evolving biomedical, clinical, and cognate (e.g. epidemiological and social-behavioral) sciences and the application of this knowledge to patient care</td>
<td>o Shock – hypovolemic, septic and cardiogenic</td>
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<td>o Trauma – penetrating, blunt and chemical</td>
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<td>o Acute abdomen</td>
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<td>o Hernias</td>
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<td>o GI hemorrhage – upper and lower</td>
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<td>o Peptic ulcer disease</td>
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<td>o Biliary tract disease</td>
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<td>o Pancreatitis – acute and chronic</td>
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<td>o Portal hypertension</td>
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<td>o Appendicitis</td>
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<td>o Abdominal masses</td>
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<td>o Colonic and ano-rectal diseases</td>
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<td>o Arterial occlusive disease</td>
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<td>o Venous disease, including DVT prophylaxis</td>
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<td>o Endocrine gland diseases</td>
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<td>o Breast masses and disease</td>
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<td>o Cancer – especially breast, colon, gastric, pancreatic, lung and skin</td>
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</table>
| Patient Care: | • Elicit thorough and pertinent patient histories  
• Perform a comprehensive and organ system specific examination  
• Write pertinent surgical notes  
  o Pre-operative notes  
  o Operative notes  
  o Post-operative checks  
  o Progress notes  
  o Consultation notes  
• Interpret results of commonly used diagnostic tests with recognition of their limitations  
• Engage in effective surgical decision making including timing, need for surgery, assessment of surgical risk / benefit ratios  
• Perform basic surgical skills  
  o Nasogastic tube insertion  
  o Venipuncture  
  o IV catheterization  
  o Arterial puncture  
  o Urinary catheterization  
  o Suturing |
| --- | --- |
| • Possess knowledge of essential characteristics of surgical practice  
  o Examination of the patient from the surgical viewpoint  
  o Evaluation and care of the pre-operative and post-operative patient, including appropriate orders  
  o Sterile technique including scrubbing, gowning, gloving, prepping and draping a field  
  o Fluid resuscitation and therapy  
  o Basic wound evaluation and care  
  o Hemostasis and anticoagulation including DVT prophylaxis and treatment  
  o Nutritional support – enteral and parenteral  
  o Malignant neoplasia and its effect on body systems  
  o Infections and appropriate prophylactic and therapeutic antibiotic use  
  o Basic principles of minimally invasive surgery  
  o Effective management of pain |

Provide patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health
| **Interpersonal and Communication Skills:** |  
Demonstrate interpersonal and communication skills that result in effective information exchange and teaming with patients, their patients families, and professional associates | - Communicate effectively with patients, their families and members of the healthcare team  
- Consider the psychological ramifications of surgical diagnoses on patients and their families when communicating  
- Avoid use of technical surgical jargon when communicating with patients, families and other physicians and staff who are involved in the care of the patient |
| **Practice-Based Learning and Improvement:** | - Identify and utilize sources of content that allow for the provision of the most updated standards of care in surgical practice  
- Utilize evidence-based medicine whenever appropriate to the care of the patient  
- Develop means for practicing and refining surgical skills that will be needed over time  
- Recognize and accept limitations in one’s knowledge and clinical skills as a means for continuously improving |
| **Systems-Based Practice:** | - Develop and demonstrate respect and honor for the roles of many health care professionals required for collaborative surgical care  
  - Primary care, emergency and attending physicians  
  - Operative and nursing personnel  
  - Social workers and discharge planning personnel  
  - Pain management specialists  
  - Nutritionists  
  - Therapists- physical and occupational  
  - Hospice  
  - Pastoral care  
  - Develop an awareness of the payment issues involved in surgical care  
  - Managed care requirements for pre-operative clearance  
  - Issues regarding length of stay  
  - Cost of surgical supplies and their impact on hospital operating budgets |
| **Professionalism:** | - Apply ethical and legal standards to surgical decision making  
- Practice with compassion  
  - Respect the privacy and dignity |
| ethical principles, and sensitivity to a diverse patient population | of patients and their families  
| | o Respect confidentiality  
| | o Effectively communicate bad news to the patient and family  
| | o Demonstrate tolerance for issues related to cultural, religious, spiritual and socioeconomic diversity  
| | • Maintain honesty and integrity in all relationships centered on the provision of surgical care  

**Osteopathic Philosophy and Osteopathic Manipulative Medicine:**

Integrate Osteopathic Concepts and OMT into the medical care provided to patients as appropriate. Understand and integrate Osteopathic Principles and Philosophy into all clinical and patient care activities

| • Comprehend and apply osteopathic medical concepts in the diagnosis and treatment of the surgical patient  
| • Utilize OMT skills to aid in pre-surgical diagnosis  
| • Utilize OMT skills as appropriate in the management of surgical disease  
| • Utilize OMT skills as appropriate in the management of surgical complications (e.g. ileus, pneumonia, wound infections)  

**Prerequisites/Comments:**

Must be a 3rd or 4th year osteopathic medical student.
**Rotation: Internal Medicine / 2 or 4 weeks**

Internal medicine is a broad-based, content-driven medical specialty that places a premium on the cognitive work and interpersonal skills necessary to providing well patient care and in caring for medical problems seen on clinical service. Emphasis is placed on determining normal from abnormal history and physical findings, using diagnostic tests, logical selection and defense of hypotheses (preliminary problem list), accurate reporting and recording of data and problems, beginning development of management plans, including health education to patients and families as well as referral.

For each clinical rotation, the preceptor and student can anticipate a minimum of three structured assessment readings.

On the first day of the rotation, the preceptor should set guidelines for the student and orient the student to the service. During this meeting, the student should communicate personal strengths and weaknesses and indicate expectations for the service. Halfway through the rotation, the preceptor and student should review the student’s progress.

At the end of the rotation, the preceptor should review the Clinical Evaluation Form with the student. Further goals for the student’s professional growth should be discussed.

On each clinical rotation, students should interview and examine patients independently and then present orally to preceptors their findings, develop a working diagnosis, and plan for further assessment and management. Every patient seen by a student will also be seen by a preceptor before diagnosis and comprehensive management plans are initiated.

While full case management is not an undergraduate expectation, the student, with guidance from the preceptor, will receive the practice necessary to begin to develop clinical problem solving abilities and to draw conclusion. Each preceptor should use written records, student self assessments, and early observations to determine the skill level of the student at the beginning of the rotation and plan appropriate learning experiences which ensure movement toward full accomplishment of objectives.

<table>
<thead>
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<tr>
<td><strong>Medical Knowledge:</strong></td>
<td>• Apply pertinent basic science principles to patients with internal medicine problems</td>
</tr>
<tr>
<td>Demonstrate knowledge about established and evolving biomedical, clinical, and cognate (e.g. epidemiological and social-behavioral) sciences and the application of this knowledge to patient care</td>
<td>• Analyze pathophysiological principles to understand why patients develop signs and symptoms from various diseases</td>
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<td>• Apply basic pharmacological principles to the treatment of common internal medicine diseases</td>
<td>• Apply basic pharmacological principles to the treatment of common internal medicine diseases</td>
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<td><strong>Patient Care:</strong></td>
<td>• Demonstrate proficiency in obtaining a history from an adult patient</td>
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<td>Provide patient care that is compassionate, appropriate, and effective for the treatment of health</td>
<td>• Perform a general physical examination on an adult patient</td>
</tr>
<tr>
<td>• Perform a problem focused physical examination</td>
<td>• Perform a problem focused physical examination</td>
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problems and the promotion of health on an adult patient
- Formulate a differential diagnosis for common presenting symptoms of adult disease
- Develop specific motor skills necessary to perform procedures on IM patients
  - Lumbar puncture
  - Thoracentesis
  - Central venous pressure line insertion
  - Venipuncture / ABG
- Detect commonly potentially serious medical diseases
  - Breast cancer - Perform a breast exam
  - Cervical Cancer – Perform a Pap smear
  - Colon Cancer – Perform a stool guaiac
  - Prostate Cancer – Perform a DRE
- Evaluate the pre-operative patient
- Manage the medical condition of the post-operative patient

**Interpersonal and Communication Skills:**
Demonstrate interpersonal and communication skills that result in effective information exchange and teaming with patients, their patients families, and professional associates

- Develop communication skills that facilitate the transfer of information to persons from a different cultural or socioeconomic background
- Utilize communication skills necessary to care for dying patients and their families
- Employ sensitivity when dealing with people who are vulnerable or scared
- Assess the psychosocial and spiritual needs of the patient

**Practice-Based Learning and Improvement:**
Investigate and evaluate their patient care practices, appraise and assimilate scientific evidence, and improve their patient care practices

- Identify and utilize resources for dissemination of new information regarding the practice of internal medicine
- Identify and utilize evidence-based medicine guidelines in the field of internal medicine
- Apply these principles to regular health maintenance

**Systems-Based Practice:**
Demonstrate an awareness of and responsiveness to the larger context and system of health care and the ability to effectively call on system resources to provide care that is of optimal value

- Employ a team oriented approach to problem solving in internal medicine
- Consult other physicians and health care providers in a manner that maximizes patient care and minimizes communication barriers
- Question the increasing larger role that financial considerations play in medicine
- Advocate for the needs of the patient, in light of society’s inability to provide unlimited resources to everyone

**Professionalism:**
- Exemplify behaviors such as altruism,
Demonstrate a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population.

accountability, excellence, duty, honor, integrity, and respect for others

- **Altruism**: the best interest of the patient must come before the interests of the doctor
- **Accountability**: accountability to patients, patients’ families, peers, faculty and society
- **Excellence**: an effort to exceed ordinary expectations
- **Duty**: a commitment to service
- **Honor and integrity**: a commitment to the highest standards of personal and professional behavior
- **Respect for others**: respect for patients, their families, peers, nurses, faculty, and other medical personnel and ancillary staff

Osteopathic Philosophy and Osteopathic Manipulative Medicine:

Integrate Osteopathic Concepts and OMT into the medical care provided to patients as appropriate. Understand and integrate Osteopathic Principles and Philosophy into all clinical and patient care activities.

- Apply osteopathic principles to the diagnosis and treatment of the internal medicine patient
- Identify specific internal medicine conditions where osteopathic manipulative medicine is a component of the treatment plan. Examples:
  - Pneumonia
  - Ileus
- Apply holistic approaches to the diagnosis and management of internal medicine conditions

**Prerequisites/Comments:**

Must be a 3rd or 4th year osteopathic medical student.
Rotation: Radiology / 2 or 4 weeks

Goals & Objectives:

Provides the student, through didactic and clinical experiences, with an educational experience that will expand his/her knowledge and skills in the utilization and interpretation of appropriate imaging techniques.

The student will demonstrate competency in his/her ability to:

1. Utilize appropriate studies to appropriately diagnose and manage common medical and surgical diseases.

Prerequisites/Comments:
Must be a 3rd or 4th year osteopathic medical student.
## Rotation: Nephrology / 2 or 4 weeks

<table>
<thead>
<tr>
<th>Goals: Realm of Competency</th>
<th>Objectives</th>
</tr>
</thead>
</table>
| **Medical Knowledge:**     | Apply relevant clinical and basic science knowledge in the following common conditions:  
|                            | - Acid Base Disorders  
|                            | - Fluid and electrolyte disorders  
|                            | - Acute and chronic renal failure  
|                            | - Indications for emergent dialysis  
|                            | - Evaluation for transplant  
|                            | - Understanding and application of medical literature related to common medical conditions.  
| **Patient Care:**         |  
|                            | - Demonstrate the ability to obtain and document an accurate and complete history.  
|                            | - Demonstrate the ability to perform a routine exam as it pertains to nephrology  
|                            | - Recognize critical illness including: Sodium disorders  
|                            | - Hypo/Hyperkalemia  
|                            | - Acute renal failure  
|                            | - Calcium and phosphate disorders  
|                            | - Acutely manage a patient with hyperkalemia  
|                            | - Interpret results of: Urinalysis  
|                            | - Renal Ultrasound  
|                            | - Understands indications for Foley Catheter, Central Line placement  
| **Interpersonal and Communication Skills:** |  
|                            | - Develop communication skills that facilitate the transfer of information to persons from a different cultural or socioeconomic background  
|                            | - Utilize communication skills necessary to care for dying patients and their families  
|                            | - Employ sensitivity when dealing with people who are vulnerable or scared  
|                            | - Assess the psychosocial and spiritual needs of the patient  
| **Practice-Based Learning and Improvement:** |  
|                            | - Identify and utilize resources for dissemination of new information regarding the practice of nephrology  
|                            | - Identify and utilize evidence-based medicine guidelines in the field of nephrology  
|                            | - Apply these principles to regular health maintenance  
| **Systems-Based Practice:** |  
|                            | - Employ a team oriented approach to problem solving in nephrology  

Florida Hospital Graduate Medical Education, 2012
| Demonstrate an awareness of and responsiveness to the larger context and system of health care and the ability to effectively call on system resources to provide care that is of optimal value | • Consult other physicians and health care providers in a manner that maximizes patient care and minimizes communication barriers  
• Question the increasing larger role that financial considerations play in medicine  
• Advocate for the needs of the patient, in light of society’s inability to provide unlimited resources to everyone |
| --- | --- |
| **Professionalism:** Demonstrate a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population. | • Exemplify behaviors such as altruism, accountability, excellence, duty, honor, integrity, and respect for others  
• **Altruism:** the best interest of the patient must come before the interests of the doctor  
• **Accountability:** accountability to patients, patients’ families, peers, faculty and society  
• **Excellence:** an effort to exceed ordinary expectations  
• **Duty:** a commitment to service  
• **Honor and integrity:** a commitment to the highest standards of personal and professional behavior  
• **Respect for others:** respect for patients, their families, peers, nurses, faculty, and other medical personnel and ancillary staff |
| **Osteopathic Philosophy and Osteopathic Manipulative Medicine:** Integrate Osteopathic Concepts and OMT into the medical care provided to patients as appropriate. Understand and integrate Osteopathic Principles and Philosophy into all clinical and patient care activities. | • Apply osteopathic principles to the diagnosis and treatment of the patient with renal disease  
• Identify specific nephrologic conditions where osteopathic manipulative medicine is a component of the treatment plan.  
• Apply holistic approaches to the diagnosis and management of nephrologic conditions. |

**Prerequisites/Comments:** Must be a 3rd or 4th year osteopathic medical student.
Rotation: Cardiology / 2 or 4 weeks

I. Goals:
A. To develop an awareness of the patient-physician relationship in promoting optimal cardiovascular health.
B. To understand the needs of the patient with chronic cardiac illness.
C. To appreciate the psychological and economic impact of cardiovascular disease not only to the individual patient but also to their family and the health care system.
D. To partner themselves with the patient and family through consultation, evaluation, treatment, and rehabilitation.
E. To identify and manage common, acute and chronic cardiovascular conditions.

II. Objectives:
A. Patient Care
1. Improve counseling skills of patients who are contemplating or actively making lifestyle modification to improve cardiovascular health.
2. Knowledge of the indications for inpatient and outpatient cardiology consultations, recognition of the unique knowledge and skills of invasive and non-invasive cardiologists and the value of family physician-cardiology collaboration.

B. Medical Knowledge
1. Understand normal cardiovascular anatomy and physiology.
2. Understand the indications for invasive and non-invasive examinations.
5. Develop an awareness of specific cardiovascular diseases and conditions
6. Improve their skills in cardiac centered history taking and physical examination
7. Improve skills in EKG interpretation.
8. Improve skills in laboratory interpretation of common cardiac related testing.
9. Improve skills in interpreting chest radiographs, stress testing, and nuclear imaging.
10. Improve skills in the management of cardiac arrhythmias.

C. Practice Based Learning and Improvement
1. Use information technology to manage and retrieve information and support the learner’s own education.
2. Apply knowledge of study designs and statistical methods to the appraisal of clinical studies and other information.
3. Assist and facilitate learning of ancillary health care professionals.

D. Interpersonal and Communication Skills
1. Understand the value of physician cardiology collaboration.
2. Collaborating with various other consultants and ancillary support staff.
3. Arranging appropriate patient transfer
4. Working as part of a comprehensive team.
5. Provide competent patient education and counseling.

E. Professionalism
1. Demonstrate respect, compassion, and a commitment to excellence in all professional activities.
2. Demonstrate a sensitivity and responsiveness to each patient’s age, culture, and disability.

F. Systems Based Practice
1. Awareness of and participation in hospital and office quality improvement efforts to optimize patient care.
2. Understand the indications for referrals.
3. Demonstrate a commitment to patient confidentiality.
4. Participate as part of a “team” (physician, consultant(s), nursing, rehabilitation, home care, etc) approach to the care of the patient.

G. Osteopathic Principles / OMM
1. Demonstrate the integration of osteopathic philosophy in the care of the cardiac patient.
2. Appropriate utilization of OMT, including indications and contraindications, in the care of the cardiac patient.

**Prerequisites/Comments:**
Must be a 3rd or 4th year osteopathic medical student.