

Department of Physician Assistant Education Master of Science in Medicine

5 units

MSM 6600 L Elective Internal Medicine

| Course director: Amy Vu | Term: varies |
|-------------------------|-------------------------|
| Phone 619-849-7952 | Meeting day & time: TBD |
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PLNU Mission

To Teach ~ To Shape ~ To Send

Point Loma Nazarene University exists to provide higher education in a vital Christian community where minds are engaged and challenged, character is modeled and formed, and service is an expression of faith. Being of Wesleyan heritage, we strive to be a learning community where grace is foundational, truth is pursued, and holiness is a way of life.

COURSE DESCRIPTION

This 5-week, full time elective clinical practicum that focuses on the evaluation, diagnosis, and management of acute and chronic medical conditions in adults and elders. Students will perform complete history and physical exams, assist with consultations, evaluate and manage patients from admission to discharge when possible. Students will demonstrate how to order and interpret diagnostic tests commonly utilized in internal medicine and to perform clinical hospital procedures. Emphasis will be placed on inpatient/outpatient care including hospital documentation to include the admission summary, history and physical examination, daily progress note, consultation note, and discharge summary. Students will be expected to mirror the Preceptor's schedule and may be assigned to any shift on any day of the week, including holidays.

COURSE LEARNING OUTCOMES

Within this five-week rotation, the supervised students will:

- 1. Have the opportunity to expand upon their didactic knowledge of medical conditions that appear across the life span both acutely and chronically in an internal medicine setting;
- 2. Learn to synthesize the didactic knowledge and skills gained into clinical applications in situations presented during the rotation;

- 3. Be provided ongoing opportunities to use the skills they have obtained in the evaluation of medical literature, and its use in evidence-based medicine and research;
- 4. Have the opportunity to increase their differential diagnoses;
- 5. Increase their ability to recommend, select and interpret appropriate diagnostic studies;
- 6. Gain proficiency in the diagnosis and management of conditions commonly encountered in internal medicine.
- 7. Have the opportunity to interact with a diverse population of patients and a variety of disorders involving all organ systems commonly encountered in the inpatient setting.

PROGRAM LEARNING OUTCOMES

The content in this course will contribute to the student's proficiency in this/these area(s):

- 1. Gather a history and perform a physical examination. MK, IC, PC, PR, PB, SB
- 2. Prioritize a differential diagnosis following a clinical encounter. MK, IC, PC, PB
- 3. Recommend and interpret common diagnostic and screening tests. MK, IC, PC, PR, PB, SB
- 4. Enter and discuss orders and prescriptions. MK, IC, PC, PR, PB, SB
- 5. Document a clinical encounter in the patient record. MK, IC, PC, PR
- 6. Provide an oral presentation of a clinical encounter. MK, IC, PC, PR
- 7. Form clinical questions and retrieve evidence to advance patient care. MK, IC, PC, PR, PB, SB
- 8. Give or receive a patient handover to transition care responsibilities. MK, IC, PC, PR, PB, SB
- 9. Collaborate as a member of an inter-professional team. MK, IC, PC, PR, PB, SB
- 10. Recognize a patient requiring urgent or emergent care and initiate evaluation and management. MK, IC, PC, PR
- 11. Obtain informed consent for tests and/or procedures. MK, IC, PC, PR, PB
- 12. Perform the general procedures of a physician assistant. MK, IC, PC, PR, PB, SB
- 13. Identify system failures and contribute to a culture of safety and improvement. MK, IC, PR, PB, SB

Initials indicate PA core competency required to meet the PLO.

PA Core Competencies:

MK = Medical Knowledge IC = Interpersonal Skills & Communication PC = Patient Care

PR = Professionalism PB = Practice-based Learning SB = Systems-based Practice

INSTRUCTIONAL OBJECTIVES

The following are the required learning objectives for the Internal Medicine rotation. Students are responsible for meeting these objectives whether or not clinical examples are seen during the rotation experience. At the conclusion of the rotation, it is expected that the student will be able to do the following:

Alignment to Core Competencies and Program Learning Outcomes

| Core Competencies | Specific Learning Objectives | PLOs |
|-------------------|------------------------------|------|
|-------------------|------------------------------|------|

| Medical Knowledge | Fund of medical knowledge regarding common | 1,2,3,7,10 |
|----------------------|---|-----------------|
| ivicultal Milowicuge | medical problems sufficient for patient care | 1,2,3,7,10 |
| | Order and interpret laboratory, diagnostic and | |
| | screening studies commonly used in adult | |
| | medicine. | |
| | Develop an appropriate differential diagnosis for | |
| | common acute and chronic medical conditions | |
| | Develop an appropriate treatment/management | |
| | plan for an adult patient | |
| | Recommend prevention strategies for common | |
| | acute and chronic conditions | |
| | Incorporates test characteristics, predictive values, | |
| | and likelihood ratios into clinical decision-making. | |
| | Implement a treatment/ management plan for an | |
| | elderly patient with attention to polypharmacy. | |
| Patient Care | Gather and record complete and accurate histories | 1,2,3,4,5,6,8, |
| | on adult and elderly patients. | 10, 12 |
| | Perform and record a comprehensive or focused | , |
| | physical exam on an adult or elder patient relevant | |
| | to the chief complaint. | |
| | Generate differential diagnoses based on the | |
| | history, the physical examination, results of any | |
| | diagnostic studies performed, and clinical | |
| | knowledge of common adult and elder disorders | |
| | as listed in the topic list below | |
| | Formulate treatment plans for common acute and | |
| | chronic medical problems. | |
| | Differentiate between the patient requiring urgent | |
| | care and an emergent condition and initiate | |
| | management as appropriate. | |
| | Demonstrate procedural skills as appropriate for | |
| | the adult and geriatric clinical setting | |
| Practice-Based | Obtain, analyze, and use the medical literature and | 2,3,4,6,7,8 |
| Learning and | other information resources to address medical | |
| Improvement | questions and to sustain professional growth | |
| | Identify individual learning goals, self-assess | |
| | knowledge and behaviors. | |
| Interpersonal and | Presents cases accurately reflecting chronology, | 1,4,5,6,8,9, 11 |
| Communication Skills | details of physical findings, differential diagnoses, | |
| | lab or imaging results and proposed treatment | |
| | plan | |
| | Written documentation is clear, concise, accurate an | |
| | organized. | |
| | Communicate effectively with patients, families | |
| | and other care givers. | |
| | Educate patients and families regarding common | |
| | acute and chronic medical conditions. | |

| | Check for patient's understanding of follow-up plan, including treatments, testing, referrals, and continuity of care. | |
|--------------------------|---|-----------|
| System Based Practice | Contribute to a culture of safety and improvement by identifying actual or potential system failures and notify the responsible person. Identify proper referral strategies for patients to other services for clinical interventions as appropriate. | 13 |
| Professionalism | Works well with team assuming responsibility when appropriate. Demonstrate respect, honesty, integrity and adherence to ethical behavior and legal standards Punctual for all scheduled events meeting all deadlines; dependable and communicates promptly when delayed | 1,5,6,8,9 |

Alignment of Organ System Based Conditions

For the following conditions the student must define the etiology, identify the signs and symptoms, generate appropriate differential diagnoses, recommend a diagnostic work up, recognize risk factors and recommend prevention strategies, treatment and provide patient education as appropriate. Students are responsible for this knowledge whether or not clinical examples are seen during the rotation experience.

| Organ | Symptoms | Conditions |
|----------------|--------------|---|
| Cardiovascular | Chest pain | Angina pectoris |
| | SOB | Cardiac arrhythmias /conduction disorders |
| | Palpitations | Cardiomyopathy |
| | Syncope | Congestive heart failure |
| | Fever | Coronary vascular disease |
| | Claudication | Endocarditis |
| | Dyspnea on | Hyperlipidemia |
| | exertion | Heart murmurs |
| | | Hypertension |
| | | Myocardial infarction |
| | | Myocarditis |
| | | Pericarditis |
| | | Peripheral vascular disease, |
| | | Rheumatic fever |
| | | Rheumatic heart disease, Valvular heart disease |
| | | Vascular disease |
| | SOB | Acute/chronic bronchitis |
| | Chest pain | Asthma |
| | Hemoptysis | Carcinoid tumor |
| | Fever | Bronchiectasis |
| | Weight loss | COPD |
| | Cough | Cor pulmonale |

| Pulmonary | | Hypoventilation syndrome Idiopathic pulmonary fibrosis Pneumoconiosis, Pneumonia (viral, bacterial, fungal, HIV-related) Pulmonary hypertension Pulmonary neoplasm Sarcoidosis Solitary pulmonary nodule |
|------------------------------|---|--|
| Gastrointestinal Nutritional | Abdominal para Diarrhea Constipation Melena Hematemesis Hematochezia Nausea/vomir Jaundice Heartburn Anorexia Change in bowhabits | Anal fissure/fistula, Hemorrhoid Cancer of rectum, colon, esophagus, stomach, Cholangitis Cholecystitis Cholelithiasis Cirrhosis Crohn disease Diverticular disease Esophageal strictures |
| Urology/Renal | Hematuria Dysuria Abdominal pain Enlarged prostate Testicular mass Edema | Acid/Base disturbances Acute and chronic renal failure Acute interstitial nephritis Benign prostatic hyperplasia Bladder carcinoma Epididymitis Erectile dysfunction Glomerulonephritis Hydronephrosis Hydrocele Hypervolemia Hypovolemia Nephritis Nephrotic syndrome Polycystic kidney disease Prostate cancer |

| Prostatitis Pyelonephritis Renal callculi Renal cell Carcinoma Renal vascular disease Testicular torsion Urinary tract infection Varicocele Hematology Fever Fatigue Easy bruising Pain Bleeding Arthraigias Pallor Petechiae Blood clot Sickle cell anemia Thalassemia Thrombotic Thrombocytopenic Purpura Utymphoma Multiple myeloma Sickle cell anemia Thalassemia Thrombotic Thrombocytopenic Purpura Vitamin B12 and folic acid deficiency anemia Weakness Paresthesia Weakness Facial droop Vertigo Balance Issues Pever Peiri Pain Confusion Tremor Motor or sensory loss Change in vision/speec h Migraine headaches Multiple sesees Peripheral neuropathies Seizure disorder Syncope Tension headaches | | | [a] |
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| Tension headaches | | | Seizure disorder |
| | | | Syncope |
| | | | Tension headaches |
| Transient ischemic attacks | | | Transient ischemic attacks |
| Endocrinology Fatigue Acromegaly | Endocrinology | Fatigue | Acromegaly |
| Palpitations Addison disease | | Palpitations | I |

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|--------------------|--------------|--|
| | Weight loss | Cushing disease |
| | Weight gain | Diabetes insipidus |
| | Polydipsia | Diabetes mellitus (type I & II) |
| | Polyuria | Hypercalcemia |
| | Polyphagia | Hypernatremia |
| | Heat/cold | Hyperparathyroidism |
| | intolerance | Hyperthyroidism/thyroiditis Hypocalcemia |
| | | Hyponatremia |
| | | Hypoparathyroidism |
| | | Hypothyroidism |
| | | Paget disease of the bone |
| | | Pheochromocytoma |
| | | · · · · · · · · · · · · · · · · · · · |
| | | Pituitary adenoma |
| | | Thyroid cancer |
| Infectious Disease | Fever | Botulism |
| | Chills | Candidiasis |
| | Rash | Chlamydia |
| | | Cholera |
| | | Cryptococcus |
| | | Cytomegalovirus |
| | | Diphtheria |
| | | Epstein-Barr infection |
| | | Gonococcal infections |
| | | Herpes simplex infection |
| | | Histoplasmosis |
| | | HIV infection |
| | | Influenza |
| | | Lyme disease |
| | | Parasitic infections |
| | | Pertussis |
| | | Pneumocystis |
| | | Rabies |
| | | |
| | | Rocky Mountain Spotted Fever |
| | | Salmonellosis |
| | | Shigellosis |
| | | Syphilis |
| | | Tetanus |
| | | Toxoplasmosis |
| | | Tuberculosis |
| | | Varicella Zoster |
| Critical Care | Chest pain | Acute abdomen |
| | Shortness of | Acute adrenal insufficiency |
| | breath | Acute GI bleed |
| | Confusion | Acute glaucoma |
| | Pallor | Acute respiratory distress/ failure |
| | Unresponsiv | Angina pectoris |
| | eness | Cardiac arrest |
| | | Cardiac arrhythmias & blocks |
| | | , |

| | Abdominal | Cardiac failure |
|--------------|-------------|--|
| | pain | Cardiac tamponade |
| | Headache | Coma |
| | | Diabetic Ketoacidosis/acute hypoglycemia |
| | | Hypertensive crisis |
| | | Myocardial infarction |
| | | Pericardial effusion |
| | | Pneumothorax |
| | | Pulmonary embolism |
| | | Shock |
| | | Status epilepticus |
| | | Thyroid storm |
| Ortho/ | Arthralgias | Fibromyalgia |
| Rheumatology | Pain | Gout/pseudogout |
| | Fatigue | Polyarteritis nodosa |
| | Fever | Polymyalgia rheumatic |
| | | Polymyositis |
| | | Reactive arthritis |
| | | Sjögren syndrome |
| | | Systemic lupus erythematosus |
| | | Systemic sclerosis |

^{*} Based on PAEA examination

RECOMMENDED STUDY RESOURCES

Note: Although there are no required textbooks for these rotations, students are encouraged to use textbooks and resources that are pertinent to the discipline of their study. The titles below are recommendations provided through Access Medicine.

**Title: Harrison's Principles of Internal Medicine

Author: Jameson et al

Publisher: McGraw-Hill Education / Medical; 20 edition (August 17, 2018)

ISBN-10: 1259644030 ISBN-13: 978-1259644030

**Title: Current Medical Diagnosis & Treatment 2020, Fifty-Ninth Edition

Author: Maxine A. Papadakis, Stephen J. McPhee, Eds. & Michael Rabow, Associate

Editor.

Publisher: McGraw – Hill ISBN: 978--126455281

**Title: Clinician's Pocket Reference Author: Leonard Gomella MD, FACS

Publisher: McGraw-Hill ISBN: 978-00711602822

Recommended downloads for handheld devices:

- Epocrates
- Medscape
- PubSearch
- Medical Calc

NOTE: Individual preceptors may include other resources. You will be notified of these resources by each preceptor. *If your preceptor does not offer additional resources, ask them what resources they like to use.*

HEALTH PROMOTION & DISEASE PREVENTION OBJECTIVES

- 1. Define primary, secondary and tertiary prevention.
- 2. Identify patients at risk for the diseases listed above and discuss appropriate screening methods.
- 3. Provide patient counseling including education on patients at risk for the chronic conditions listed above to delay disease progression.
- 4. Apply current CDC guidelines for adult immunization.
- 5. Provide patient education of adults and elders relative to the most common injuries and illness in a given age group.

ASSESSMENT AND GRADING - ROTATION EVALUATION PROCESS

Students must maintain a grade of 70% or better throughout the clinical year. A final score below 70% is considered failing. Grades are calculated on a percentage basis. All final course grade percentages are rounded to the nearest number. Rotation assessment grades are based on the following standards:

| Rotation Preparatory Exam | 20% |
|-----------------------------|------------|
| Written Assignment | 30% |
| End of Rotation Examination | 35% |
| Preceptor Evaluation | 15% |
| | Total 100% |

- **A.** Rotation Preparatory Exam: An open source, written assessment used to evaluate the student's current level of knowledge prior to the end of rotation examination. Comprised of multiple-choice questions with content based on the rotation's instructional objectives appropriate, the student is expected to complete the questions with a grade of 85% and submit it at the completion of the rotation.
- B. Written Assignment: At the end of this clinical rotation, the student will be required to

submit a complete written History and Physical. This written assignment is one of the tools used to assess how well the PA student gathers, synthesizes, and documents the important information necessary to care for the patient.

- **C.** End of Rotation Examination: A comprehensive written assessment to determine if the student has met the goals and objectives outlined for the clinical rotation.
- **D.** The Preceptor Evaluation of the Student is graded on a Pass/Fail basis and is worth 15% of the course grade. Overall rotation grade at "novice" in any of the main competency areas will result in a failing mark for the Preceptor Evaluation
 - a. Medical Knowledge
 - b. Patient Care
 - c. Interpersonal and Communication Skills

In addition, any student who receives a failing mark for the Preceptor Evaluation will be referred to the SPPC for review:

- **E.** In addition, any of the following may be criteria for failing the rotation:
 - Failure of course components with a grade < 70%
 - Failure to log and submit electronic entries and patient encounters
 - Failure to submit student evaluation of preceptor and clinical site
 - Unacceptable evaluation for professionalism (refer to Clinical Manual)
 - Excessive or unexcused absences from the rotation site (refer to Clinical Manual)

Grading will be in keeping with Point Loma Nazarene University policy for graduate programs and grading will be as follows:

| A = | C = 73 - 76 |
|-------------|-------------|
| 93-100 | C=70-7 |
| A = 92 - 90 | 2 |
| B+= | D+=67-6 |
| 87-89 | 9 |
| B = 83-86 | D= 63-66 |
| B-= | D-=60-6 |
| 80-82 | 2 |
| C+=77-79 | F = 0.59 |

INCOMPLETES AND LATE ASSIGNMENTS

All assignments are to be submitted/turned in by the beginning of the class session when they are due—including assignments posted in Canvas. No partial credit will be given for late assignments.

Incompletes will only be assigned under extremely unusual circumstances. Late assignments receiving no credit must still be submitted.

REMEDIATION

If a student's final grade falls below the required 70% needed to pass the rotation or the student receives a failing rotation evaluation, the student's case will be referred to the MSM PA Program Student Progress and Promotion (SPPC) Committee. During the Clinical Phase, students have the opportunity to retake a maximum of one (1) failed EOR exam. Due to the unique nature of the clinical year, the dialed exam must be retaken within 7 days of notification of the failed exam. Students have the opportunity to repeat only one (1) failed rotation. The PA SPPC committee will consider requests for remediation plans and/or recycle options and make these recommendations to the full PA program faculty. For further details on this process, please refer to the *PLNU PA Program Student Handbook*.

END OF ROTATION STUDENT EVALUATIONS

All students are expected to complete the evaluations of their preceptor and clinical site the week preceding the completion of their rotations. Failure to submit the evaluation will result in a failing grade for the rotation. These evaluations, which are delivered online, are an important part of rotation assessment and improvement efforts, so your cooperation in completing them is greatly appreciated.

PLNU COPYRIGHT POLICY

Point Loma Nazarene University, as a non-profit educational institution, is entitled by law to use materials protected by the US Copyright Act for classroom education. Any use of those materials outside the class may violate the law.

PLNU ACADEMIC HONESTY POLICY

Students should demonstrate academic honesty by doing original work and by giving appropriate credit to the ideas of others. Academic <u>dis</u>honesty is the act of presenting information, ideas, and/or concepts as one's own when in reality they are the results of another person's creativity and effort. A faculty member who believes a situation involving academic dishonesty has been detected may assign a failing grade for that assignment or examination, depending on the seriousness of the offense, for the course. Faculty should follow and students may appeal using the procedure in the university Catalog. See Academic Policies in the Graduate and Professional Studies Catalog for definitions of kinds of academic dishonesty and for further policy information.

PLNU ACADEMIC ACCOMMODATIONS POLICY

While all students are expected to meet the minimum standards for completion of this course as established by the instructor, students with disabilities may require academic adjustments,

modifications or auxiliary aids/services. At Point Loma Nazarene University (PLNU), these students are requested to register with the Disability Resource Center (DRC), located in the Bond Academic Center. (DRC@pointloma.edu or 619-849-2486). The DRC's policies and procedures for assisting such students in the development of an appropriate academic adjustment plan (AP) allows PLNU to comply with Section 504 of the Rehabilitation Act and the Americans with Disabilities Act. Section 504 (a) prohibits discrimination against students with special needs and guarantees all qualified students' equal access to and benefits of PLNU programs and activities. After the student files the required documentation, the DRC, in conjunction with the student, will develop an AP to meet that student's specific learning needs. The DRC will thereafter email the student's AP to all faculty who teach courses in which the student is enrolled each semester. The AP must be implemented in all such courses.

If students do not wish to avail themselves of some or all of the elements of their AP in a particular course, it is the responsibility of those students to notify their professor in that course. PLNU highly recommends that DRC students speak with their professors during the first two weeks of each semester about the applicability of their AP in that particular course and/or if they do not desire to take advantage of some or all of the elements of their AP in that course.

ARC-PA standards (4th edition) addressed in this course: B3.02 (preventive, emergent, acute, chronic) B3.03a (adults, elderly), B3.04c (inpatient), B3.07b (IM)

PLNU ATTENDANCE AND PARTICIPATION POLICY

Regular and punctual attendance at all rotations is considered essential to optimum academic achievement. Therefore, regular attendance and participation during each rotation are minimal requirements.

If the student is absent for more than 10 percent of their rotation, the faculty member will issue a written warning of de-enrollment. If the absences exceed 20 percent, the student may be de-enrolled without notice until the university withdrawal date or, after that date, receive an "F" grade.

Students who anticipate being absent for an entire week of a course should contact the instructor in advance for approval and make arrangements to complete the required coursework and/or alternative assignments assigned at the discretion of the instructor. Acceptance of late work is at the discretion of the instructor and does not waive attendance requirements.

Refer to Academic Policies for additional detail.

SPIRITUAL CARE AND CHAPLAIN SERVICES

PLNU strives to be a place where you grow as a whole person. To this end we provide resources for our Graduate students to encounter God and grow in their Christian faith. We have an onsite chaplain, Rev. Gordon Wong, at the Mission Valley (MV) campus to service Graduate students at the Mission Valley and Balboa Campuses. Rev. Gordon Wong is available during class break times across the week. If you have questions for, desire to meet

with, or want to share a prayer request with Rev. Wong you can contact him directly at mychaplain@pointloma.edu or gordonwong@pointloma.edu. Rev. Wong's cell number is 808-429-1129 if you need a more immediate response.

This syllabus is subject to change. Students are encouraged to check course messages and emails in order to remain current.