

Clinical Capstone: Get Ready for Residency

Department of Emergency Medicine & Medical Education College of
Medicine, University of Cincinnati

COURSE SYLLABUS

Directors: Whitney Bryant, MD, MPH Term: Jan 2022
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Office Hours: By Appointment

I. Welcome!

Welcome to Get Ready for Residency (GRR)! This course was built for you to aid in one of the biggest transitions in your professional career, from learning medical student to practicing resident. The transition can be stressful but we hope that this course, by reviewing and building on practical concepts touched on throughout medical school, will reduce that stress. We look forward to working with you and hope you enjoy the course!

II. University Course Catalog Description

What's the difference between you on the last day of medical school and the first day of residency? Not a whole lot. Overwhelming does not even begin to describe the transition from medical student to resident, yet you are expected

to do it seamlessly. This course is meant to assist in this vital transition, emphasizing practical skills you might not have learned while a student but of absolute necessity as a resident. Have you obtained procedural consent, run (or even been in) a code, or discussed end-of-life with a family? These are things you will be face with in the first months (or even days) of residency. Each course session is designed to review common scenarios that you will experience when you have those two little letters behind your name that suddenly put you into the driver's seat of patient's health and well-being. Through simulation, small group sessions, interactive didactics, student presentations, and journal club we will explore some of the toughest and most common experiences you will have as a resident. Attendance at all sessions to which students are assigned is mandatory.

III. Course Objectives

By the end of this course, learners should be able to:

1. Summarize an approach to the evaluation of the most common patient complaints, including (but not limited to):
 - a. Chest Pain
 - b. Abdominal Pain
 - c. Fever
 - d. Altered Mental Status
2. Explain / demonstrate a systematic approach to common clinical tests including:
 - a. EKG
 - b. Chest X-ray
 - c. Blood Gas
3. Define common terms related to evidence-based medicine.
4. Demonstrate a systematic approach to the diagnosis and treatment of undifferentiated life threatening disease processes, including:
 - a. Tachycardia
 - b. Bradycardia
 - c. Hypotension
 - d. Hypoxia
 - e. Cardiac Arrest
5. Practice common procedures encountered by residents, including:
 - a. Obtaining Venous Access
 - b. Lumbar Puncture
 - c. Basic Airway Management
 - d. Basic Ultrasound
6. Evaluate a scholarly article with regard to its value in answering a defined clinical question.

7. Recognize the importance of teamwork and closed loop communication
8. in clinical scenarios.
9. Value wellness and healthy living habits as a resident.
10. Appreciate the role that life-long learning plays as a physician.

IV. Grading

This course utilizes the Honors/High Pass/Pass/Low Pass/Fail grading scheme used by UC College of Medicine. Learners must complete 1 presentation and attend all sessions (see attendance policy below) to achieve Honors.

Grading will be based on:

Attendance: Attendance for ALL course sessions is mandatory. Excused absences will be granted at the discretion of the course directors as outlined in the Student Handbook. For any absence, a Medical Student Status form is required to be completed. For each absence (excused or not), your grade will go from honors, to high pass, to pass, to fail, and there will also be expected make up work for each absence, to be completed by the end of the course. The only excused absences that do not result in a grade drop are for residency interviews. Learners that have unexcused absences will have a professionalism report filed with the Dean of the COM.

Of note, we are aware of the new UCCOM policy for students to have two days off “without reason” but in speaking with advisors within the UCCOM we have clarified that we as course directors are still allowed final determination in whether or not an absence is excused or unexcused. At this time in general, the only excused absences are for mandatory UCCOM meetings, doctor’s appointments that cannot be moved, acute illnesses with a provided doctor’s note, and residency interviews. Other allowances will be made on a case by case basis. Simulations in person and hands on procedural sessions are integral to the course, and most of these (especially the simulations) are difficult to replicate with make up work, hence our strict attendance policy.

Asynchronous Preparation: For specific components of the course, learners will be responsible for viewing online content and completing a brief quiz. The goal of this preparation is to be able to maximize hands-on learning and discussion time during the course. Learners will receive specific emails for each of these activities with links to the content and quiz. Activities not completed will result in a grade drop.

All asynchronous material including pre reading and quizzes can be found at <https://med.uc.edu/depart/emergency-medicine/GRR/materials>

Morning Report: Each learner will run a “Morning Report” by leading the class through a case based on an interesting patient that they cared for during their time on the wards. Students should come prepared on their selected day with a short oral presentation (~5 minutes) of the case as though they were presenting on the wards. The case should be either a good diagnostic dilemma (an uncommon presentation of a common disease or a common presentation of an uncommon disease) OR present a classic case of a common illness with prepared discussion points for management. The faculty will help guide the class through formulation of a differential diagnosis. You should have 1-2 key high yield teaching points about the diagnosis or management of the diagnosis at the end of the case to share.

Journal Club Presentation: The learner will select a journal article of their choosing from a list provided by the course directors and help to facilitate discussion around the article. The article should be presented in a journal club format with a resident or faculty facilitator to help provide context and highlight key learning points. All learners will be expected to summarize the article and its salient learning points, but also provide a critique of the methods of the study, review limitations, and suggest ways to overcome such limitations in future studies.

Attitude/Professionalism: While the course is meant to be low stress and has less patient contact than most electives, professionalism is still held to the highest standard expected of physicians. Casual dress IS allowed.

As senior level medical students, we expect you to embody professionalism every day by attending sessions prepared, motivated, and engaged. Breaches of professionalism will not be tolerated.

V. Required Texts and Materials

none

VI. Schedule

Please see <https://med.uc.edu/depart/emergency-medicine/GRR/calendar>
Please note that the schedule is subject to revision.

VII. Technology

Email: This is likely the easiest way to reach the course directors, as we keep somewhat odd hours as physicians working clinically in the ED. Don't hesitate to e-mail us. We will make every effort to respond within 24 hours of receipt of your e-mail.

Website: We are experimenting with our website. We hope to post materials that will expand on the material presented during the course. The website has a live calendar which is where you can find the most updated information regarding the course, especially regarding session locations.

Electronic Devices in Class: We understand the value of having an iPad or other tablet at your disposal during the course and are happy for you to use one during didactics to keep notes. However, please be sure to be professional and respectful of presenters and only use it as a note-taking device. Cell phones should be off during class time.