Pediatrics Clerkship 2015-2016

We would like to take this time to thank all the faculty and residents who take the time to participate in the education of the students while they rotate through Pediatrics.

During orientation to the Pediatric Clerkship, all students are given information about the logistics of the clerkship, which is available on Canvas. We have included the information for you below.

- I. Objectives for the Pediatrics Rotation
- II. Pre-determined Patient Encounter Diagnoses
- III. Procedures
- IV. Ethical Behavior
- V. Dress Code
- VI. Work Hour Policy
- VII. Grading system and Honors Designation

If there are any suggestions or concerns, please do not hesitate to call the Pediatrics Clerkship office at (909) 558-8324.

Sincerely,

The Pediatrics Clerkship

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I. Pediatric Clerkship Objectives

- 1. Students will acquire the basic knowledge of growth and development (physical, physiologic, and psychosocial) and understand its clinical application from birth through adolescence.
- 2. Students will acquire the knowledge necessary for the diagnosis and initial management of common pediatric acute and chronic illnesses.
- 3. Students will develop an understanding of the approach of pediatricians to the health care of children and adolescents.
- 4. Students will develop an understanding of the influence of family, community and society on the child in health and disease.
- 5. Students will develop communication skills that will facilitate the clinical interaction with children, adolescents, and their families and thus ensure that complete, accurate data is obtained.
- 6. Students will develop their competency in the physical examination of infants, children, and adolescents.
- 7. Students will develop their clinical problem-solving skills.
- 8. Students will develop of strategies for health promotion as well as disease and injury prevention.
- 9. Students will develop the attitudes and professional behaviors appropriate for clinical practice.
- 10. Students will develop an understanding of how to deal with personal bias or another team member's bias towards a patient or patient group.
- 11. Student will develop an adequate social history including screening for domestic violence and smoking exposures.
- 12. Student will develop an understanding in how a medical team functions and the role of each member of the team.

- 13. Student will develop an understanding of the local medically underserved patient population.
- 14. Student will acquire an understanding how to translate research to the care of a patient.
- 15. Student will acquire an understanding the ethical issues that can arise with the consent process in pediatric patients, refusal of treatment by a child's caregiver, and the care of severely disabled children.

II. Pre-determined Patient Encounter Diagnoses

During the Pediatrics Rotation, each student will see at least one patient for each diagnosis listed below:

- 1. Well child 0-12 months old
- 2. Well child 12-60 months old
- 3. Well child 5-12 years old
- 4. Child with abnormal growth 0-18 years old (failure to thrive, growth delay or short stature)
- 5. Obese child 1-18 years old
- 6. Child with delayed development 6 months -12 years of age
- 7. Child with acute upper respiratory infection 6 mo-18 years of age (viral pharyngitis, viral URI, strep pharyngitis, herpangina, hand foot mouth, acute otitis media, sinusitis)
- 8. Child with lower respiratory tract infection (RSV or viral bronchiolitis, bronchitis, pneumonia, asthma, bronchiectasis)
- 9. Child with acute or chronic diarrhea 6 months-18 years old
- 10. Child with a rash 1 month to 18 years old
- 11. Child with dehydration 6 months -18 years
- 12. Child with fever 1 month to 18 years of age

III. Procedures

There are no required procedures for the Pediatrics rotation; however, students may perform the following procedures with direct supervision by the attending or resident:

- 1. Lumbar puncture
- 2. Immunizations (including PPD)
- 3. Venipuncture for routine labs
- 4. Throat culture

IV. Ethical Behavior

The highest standards of honesty and ethical behavior are expected of each student. If any student is found to be dishonest or unethical in any aspect of their work or interpersonal interactions (including such conduct as signing in for a required activity but not staying for the activity) it will result in an automatic failure for the rotation.

V. Dress Code

Professional attire is expected and required of all students. Students must wear a clean while lab coat with your nametag at all times during both inpatient and outpatient Pediatric clerkship rotations. You may be sent home to change if your attending deems your attire inappropriate.

Outpatient rotation: Scrubs may NOT be worn in the outpatient clinic setting

Inpatient rotation: Surgical scrubs are not provided by the Pediatrics Clerkship. Scrubs may be won on call days and post-call days and will be worn with your white lab coat.

VI. Work hour policy for Pediatrics Clerkship

While on Pediatrics, students will be expected to adhere to the following work hour policy as implemented by the LLU School of Medicine:

- Students will not be expected to work more than 80 hours per week averaged over a 4 week period
- Students will not be expected to work more than 28 hours consecutively (unless there is an educational exception e.g. family conference, procedure, etc., AND the student requests to stay
- Students will be expected to have 8 hours off work between shifts.

Each student will be responsible to follow these policies and to report any issues they encounter to:

- The Pediatrics Clerkship Office
- The LLU Dean's office

Each student will be required to complete a survey at the 2 week and 4 week points during his/her rotation for both the inpatient and outpatient portion of the Pediatrics Clerkship.

VII. Grading System and Honors Designation:

The grade for the Junior Clerkship in Pediatrics will be separated into two categories and is determined as follows:

1. Cognitive

	Mock Board	85%
	Dept Final Exam	10%
•	Dept Final Exam Dept Quizzes/participation	5%

2. Clinical

•	Ward Rotation Final Evaluations	10%
•	Clinic Rotation Final Evaluations	10%
	PTO/Live Patient OSCEs	
	Video Taped OSCEs	
•	CLIPP Cases Completion	10%
•	Analysis Exercise's	5%
•	Administrative Assignments* (See below)	5%
	Outpatient participation	5%
•	Outpatient participationInpatient participation (H&P/ Prog Notes)	5%

^{*} You will only receive FULL credit if completed patient logs, completed

multidisciplinary responses, completed course evaluations- survey are turned in/submitted by due date, see Canvas for list of deadline.

BOTH the clinical component as well as the cognitive component of the rotation must be passed in order to complete the clerkship. They will be reported separately.

A grade of marginal pass will be given to any student who has passed the cognitive component but has not shown a proficiency in the clinical aspects of the rotation.

<u>3.</u> HONORS Designation:

- NO Non-Cognitive Evaluations received. Mock Board Score of 88 or better.
- Satisfactory performance on the clinical component of the clerkship.

<u>4.</u> Mock board:

- Passing score on the mock board examination is 60.
- If you fail the mock board you will be required to contact the Dean's office to make arrangements to retake the mock board. Students failing the examination twice will be expected to repeat the entire pediatric rotation before retaking the mock board.
- Students repeating the board examination will be given a class rank reflecting the initial mock board score. The score achieved on the repeat examination will be recorded for the Dean's letter, but will not change class standing.
- The Computerized Pediatric Mock Board exam for students in 'Group A & B' will take place on the final Friday morning of their pediatric rotation.