

**MDC 7140 4th Year Required UF Geriatric Clerkship
Medical Student Syllabus**

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Schedule Structures

Table 1: Student Group Rotations [1WK Medicine + 1WK Palliative] + [2WK Rehab]
Fridays based on 2 week block (see schedule and orientation for more details.)

Site of Rotation	Week 1 Mon-Th	Friday 1	Week 2 Mon-Th	Friday 2	Week 3 Mon-Th	Friday 3	Week 4 Mon-Th	Friday 4
Geriatric Medicine (1 week)	Example student A	SP; QI 1	Example student B	QI 2; Death café;	Example student C	SP; QI3	Example student D	QI 4; Death Café;
Palliative Care (1week)	Example student B		Example student A	Ethics	Example student D		Example student C	Ethics
Rehabilitation (2 weeks)	Example students C D	QI 1; Falls	Example students C D	QI 2; Dementia Simulation, Neuro	Example students A B	QI 3; Falls	Example student s A B	QI 4; Dementia Simulation, Neuro

Table 2: Schedule of Activities for a Typical Week: Monday – Friday, *6:30 am – 5:00 pm
See more details pages 6-14.

	Monday to Thursday	Fridays (Mandatory)
Geriatric Medicine	<ul style="list-style-type: none"> Assigned facility (See orientation) Meet your attending physician Get and follow up your assigned patients Learn and practice geriatric assessment tools, assessed at Friday SP (Mini Cog & Get up and Go) Present assignment to attending by Wednesday or Thursday (ask attending) Required readings Geriatric Medicine Checklist 	<p>Morning (1st / 3rd) 8am – Noon, <u>all students on the Geriatric Medicine and the Palliative Care rotations will do the simulation with standardized patients (SP) at the UFHealth Senior Care Clinic</u>, unless specified.</p> <p>Afternoon (1st / 3rd): 1 – 4 pm all students on the Geriatric Medicine and the Palliative Care rotations meet at the HPNP G-110 for COM Quality Improvement (QI) Training.</p>
Palliative Care	<ul style="list-style-type: none"> Assigned facility, meet your attending physician Get and follow up your assigned patients Prepare assignments (2) for Palliative group presentations on designated Friday Travel required for some sites Palliative Medicine Checklist 	<p>Morning (2nd / 4th) 9am – 12pm <u>all students on the Geriatric Medicine and the Palliative Care rotation meet for COM Quality Improvement Training at HPNP G301A.</u></p> <p>Afternoon (2nd / 4th): all students on the Geriatric Medicine and the Palliative Care rotations meet at the HPNP G-110 for small group presentations and discussion. 1 – 3pm “Death Café” 3:30 – 5pm Ethics Case Conference</p>
Rehabilitation rotation	<ul style="list-style-type: none"> Assigned facility, meet your attending physician Get and follow up your assigned patients 2 GICS patients (initial and follow up), Clock Drawings, Quiz each week Required readings Learn and practice geriatric assessment tools, assessed at Friday session Rehabilitation Medicine Checklist 	<p>Mornings (1st / 3rd) COM Quality Improvement Training Sessions, HPNP G301A, 9am – 12pm.</p> <p>3-5pm (1st / 3rd) sessions with PT/OT on equipment usage and small group didactic activities on Falls / Dysmobility at the Gvl VA GRECC T2 modular building.</p> <p>Mornings (2nd / 4th) COM Quality Improvement Training Sessions, G301A, 9am – 12pm. 12:45 – 3pm Afternoon (2nd / 4th) all students of the group will participate in the VA’s Virtual Dementia Tour at 12:45, then Dementia Small Group at the VA GRECC T2.</p>

Schedules continued

Quality Improvement (QI) Training Small Group Session

Every Friday of the rotation, all Geriatrics students will attend a half day at the Gainesville, UF HPNP with the UF Health Office of Interprofessional Education.

Location: see table 2 and schedules posted in Canvas or notifications.

Your group time depends on the week and your assigned block. These will be at the other half of the day when you do not have other required Friday activities schedule. See tables 1 & 2 for reference.

Objectives:

- **Week 1:** Efficacy Pre-test (ungraded, survey), Re(Introduction) to QI Fundamentals (posted in Canvas), PDSA, intro teams and project
- **Week 2:** Root Cause Analysis with standardized patients
- **Week 3:** Objective Structured Clinical Examination [OSCE]
- **Week 4:** Efficacy Post-test, Project presentations

Instructor: Erik W. Black, PhD

Associate Director of UF Health Office of Interprofessional Education

352-275-7868, ewblack@ufl.edu

Course Director and Coordinator Contact Information

Course Director: [Mallory Otto, MD](#)

Clinical Assistant Professor, Department of Aging and Geriatric Research

UF Health Geriatric Consult Service, Oak Hammock

352-294-5550; 518-593-9921 mobile

mbotto@ufl.edu

Course Coordinator: [Brian K. Stanton, BS](#)

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Editor, Department of Aging and Geriatric Research

Office: [CTRB](#) 2004 Mowry Rd, Room 2115

New course in Canvas E-learning:

<https://ufl.instructure.com/courses/329274>

Evaluations of sites and attendings:

<https://studycore.medinfo.ufl.edu>

Clerkship Goals and Objectives

Welcome to your required 4th year Geriatric Clerkship. The aim of this clerkship is to provide 4th year medical students with a four-week in depth experience working on multiple geriatric teams to improve the function of frail older patients and manage their acute and chronic medical problems.

The rotation is divided into three parts:

- **One-week of Geriatric Medicine with ambulatory care** at one of the following: UF Health Senior Care Clinic, VA Gerifirm Clinic or inpatient Geriatrics Consult service at Shands Hospital
- **One-week of Palliative Care** at one of the following: Shands Hospital, Haven Hospice or Hospice of Marion County
- **Two-weeks Rehabilitation** at one of these locations (registered with COM): Shands Rehab Hospital, VA (N FL Malcom Randall VA Medical Center), Signature Healthcare or Brooks Rehab (Jax)

Goals

- Incorporate a basic working knowledge of aging physiology to evaluate and manage syndromes or diseases unique to or more common in older persons.
- Improve clinical skills of history taking and physical exams of older adults.
- Develop an understanding of and facility in geriatric assessment of older patients including the use of screening instruments and an awareness of the importance of patient function in medical care.
- Recognize the advantages of working collaboratively with an interdisciplinary health care team.
- Develop physician skills in working effectively with other community resources dedicated to the care of older patients in all settings.

General Clerkship Objectives

The Department's expectations of your performance are in line with the College of Medicine's competency based curriculum. There are several objectives, both general and specific. You will experience, be taught, and evaluated specifically in the following competencies:

- Patient care (PC)
- Medical knowledge (MK)
- Practice-Based Learning (PBL)
- Interpersonal Communication (IC)
- Professionalism (P)
- System based practice (SBP)
- Students will demonstrate professionalism and a caring attitude in working with older adults and in particular, frail elderly. (P)
- Recognize and treat each patient as a whole person, integrating body, mind and spirit. (P) (PC)
- Students will be able to obtain historical information and conduct medication reviews and evaluate medication interactions and side effects. (MK) (EB)
- Students will be able to describe geriatric syndromes, including but not limited to: falls, delirium, incontinence, pressure ulcers, polypharmacy, depression, dementia, osteoporosis, sensory deficits including hearing loss, visual and gait impairment, failure to thrive, osteoarthritis, immobility and functional capacity. (MK)
- Students will be able to form a patient-centered, interprofessional and evidence-based management plan. (PC) (EB)
- At the end of the one week palliative care rotation students will be able to (MK) (SBP)
 - Perform a patient assessment
 - Create a care plan to address physical, psychological, social, practical and spiritual needs
 - Discuss treatment withdrawal (antibiotics, hydration)
 - Discuss advance directives with patients
 - Discuss DNR orders
 - Describe the members of a palliative care team
 - Describe venues available to patients for palliative and end of life care
 - Reflect on personal response to working with dying patients

No textbook required. All required readings will be posted on Canvas Elearning

Please login to the Canvas / e-Learning with your Gatorlink for the most up to date course information.

<https://ufl.instructure.com/courses/329274>

- The following textbooks are recommended only for your reference (not required):
 - Geriatrics at Your Fingertips;
 - Current Geriatric Diagnosis and Treatment;
 - Geriatric Physical Therapy;
 - [Fast Facts and Concepts: Searchable database for evidence based practices for geriatric and palliative care syndromes.](#)
 - <http://www.mypcnow.org/#!/fast-facts/c6xb>
 - The Palliative Response, [Dr. F. Amos Bailey](#);
 - <http://www.uab.edu/medicine/palliativecare/training/palliative-response>
 - **Additional tools to use and study during Geriatric Medicine week**
 - [Montreal Cognitive Assessment \(MoCA\)](#)
 - [Geriatric Depression Scale](#) (short form)
 - [Guide to Geriatric Assessments pocket card](#)

Assignments/Task Checklist

The Clerkship Task Checklist (see Appendix 1 below / Canvas), which is broken down into Geriatric Medicine Tasks, Palliative Medicine Tasks, and Rehabilitation Medicine Tasks **MUST be completed and returned to the course coordinator, Brian Stanton, by the final day of the clerkship or a passing grade cannot be assigned.**

- The tasks must be signed off by a member of the care team who will verify the completion of the task, including attendings, nurses, social workers, PT/OT/SLP, care coordinators with their initials or signature.
- Please see the task checklist in the appendix of this syllabus.

Final Grade Determination

The final grade of the Geriatric Clerkship Program is determined by the outcomes of 2 components:

- 1) Clinical grades and Core Competencies
- 2) Clerkship Task Checklist Completion.

BOTH components must be completed and passed for a passing grade.

Geriatric Medicine Week

****Each day Monday through Thursday students will be assigned to either the UF or VA Senior outpatient clinic or the inpatient Consult Service. See descriptions for each below:****

See Canvas for current posted schedules

- **** Students are expected to bring with them their Geriatric Medicine Week Task Checklist and seek out completing the tasks on the checklist and obtaining a signature upon completion from a colleague. This can be an attending, nurse, social worker, PT/OT or other employed member of the care team. THIS IS REQUIRED FOR A PASSING GRADE****

Learning Activities and Objectives for the One-week of Geriatric Medicine:

- Based on their site, comprehensive geriatric assessment will be tailored to outpatient care or inpatient care but will always include:
 - functional assessments by using Katz ADL and IADLs
 - review, identifying geriatric syndromes including dementia screening vs normal aging
 - medication review and identification of potentially inappropriate medications for the elderly using the Beer's Criteria
 - cognitive screening using the mini cog and then MOCA (Montreal Cognitive Assessment) mocatest.org
- Accurately identify clinical situations where life expectancy, functional status, patient preference or goals of care should override standard recommendations for screening tests or treatments in older adults.
- Generate a differential diagnosis based on recognition of the unique presentations of common conditions in older adults, including but not limited to acute coronary syndrome, dehydration, urinary tract infection, acute abdomen, and pneumonia.
- Identify geriatric syndromes including falls, cognitive changes, urinary incontinence, polypharmacy effects, weight loss and failure to thrive, dizziness.

ADDITIONAL POINTS SPECIFIC TO INPATIENT CONSULTS

- On inpatient consults and when arises on outpatient visits, students will learn to screen for, diagnose, and treat delirium with both non-pharmacological and when appropriate pharmacological options in the elderly patient. They will use to employ the [Confusion Assessment Method \(CAM\)](#) to screen for delirium.
- On inpatient consults, Identify potential hazards of hospitalization for all older adult patients (including immobility, delirium, medication side effects, malnutrition, pressure ulcers, procedures, peri and post-operative periods, transient urinary incontinence, and hospital-acquired infections) and identify potential prevention strategies.
- On inpatient consults, reviewing appropriate options for the placement of patients at discharge, and identifying and preventing risks of hospitalization.

ADDITIONAL POINTS SPECIFIC TO OUTPATIENT CARE.

- Define and differentiate among types of code status, health care proxies, and advance directives.
- Understand appropriate behavioral management of dementia and caregiver support options in the community
- Understand appropriate screening tests including but not limited to for cancer screening, osteoporosis, abdominal aortic aneurysm, etc. and when these tests would potentially be inappropriate.

Daily Procedures on Geriatric Medicine Week:

Specific to the UF and VA Senior Clinic sites:

1. Meet your attending physician first and you will get an assigned patient. When a patient is in a room and a flag is up you may go in and examine the patient.
2. New patient visit: The student will start the history and physical including History of Present Illness, Past Medical and Surgical history, social history, family history, Functional abilities, medications, review of systems, vaccination and health maintenance. The student will perform a physical exam including a functional assessment with a timed up and go test as well as above mentioned tasks as time permits. The student will then present the case to the attending physician.
3. Established patient visit: visit with the patient and complete progress note. You may present the patient to the attending physician before or after the progress note is completed depending on time availability.
4. Progress notes: be sure to complete the EMR progress note before leaving for the day, the geriatric attending physician will sign off the note.
5. Typically, one faculty member at each site is responsible for completing the student Evaluation form based on a compilation of their assessment and the assessment of others who worked with the student (primarily other faculty and residents, although input from clinic staff, patients and peers will be considered when pertinent).

Specific to the UF Health Geriatrics Consult service site:

1. You might be assigned to work with either Dr. Otto or Dr. Hincapie
2. If with Dr. Otto: Meet at the Shands South Tower Surgical ICU (4 west) by 8:30 Monday and be assigned patients.
3. If with Dr. Hincapie: PRIOR TO MONDAY arrange meeting time and location with Dr. Hincapie.
4. Students are expected to see their consult, comprehensively review the chart, and be ready to present the patient to the attending within one hour.
5. Every patient needs a consult note; the note should be on the chart by the end of the day.
6. On subsequent days, students are expected to pre-round early on all their patients including a comprehensive chart review and seeing the patient and be on time and prepared for work rounds at the specified time discussed with their consult attending.
7. Specific to working with Dr. Otto
 1. Students will travel via their own transportation to Oak Hammock Skilled Nursing facility on Tuesday and Thursday afternoons to arrive by the specified time discussed with Dr. Otto during consult rounds that morning. Patients with acute issues and new admissions to Oak Hammock rehabilitation or long-term care will be assigned to the students who will gather appropriate information, evaluate the patient, and present to Dr. Otto.

Geriatric Medicine Week Assignments:

1. **Presentation:** Chose a topic of interest to you pertaining to Geriatric Medicine, research the topic and make a 5 - 10 minute evidence based presentation on your findings. **Schedule a time to present to one of your attendings by Wednesday or Thursday depending on your attending's preference.**
 - a. This can be either a presentation of information or a reflection. It should be either a 1 to 2--page paper or 5 - 10 PowerPoint slides. Email to attending and upload in Canvas Assignments.
 - i. **Additional resources to be used in your talk** ([PubMed](#), [American Geriatrics Society AGS](#), [American Academy of Hospice and Palliative Care](#), [Center to Advance Palliative Care](#)).

Required Fridays during Geriatric Medicine/Palliative Week focused on Geriatrics:

- Morning (1st week or 3rd week) 8am – Noon, all students from the Geriatric Medicine rotation and the Palliative Care rotations will complete the recorded **simulation with standardized patients** in the Clinical Translational and Research Building (CTRB), at UF Senior Care clinic.
 - Students will perform a clinic visit with a standardized patient in which they will have 15 minutes to interview, examine, and perform medication reconciliation with the patient, identify potentially inappropriate medications for the elderly using the latest [Beers criteria](#).
 - Students will be expected to perform the:
 - i. [Get up and Go test](#)
 - ii. [Mini-Cog Test](#)
 - Following the visit students will write a progress note on their patient and debrief with the instructor and standardized patient.

Table 3: Course Instructors and Locations for Geriatric Medicine: See detailed schedules posted in Canvas Modules				
Site	Start time day 1	Address	Attending / Support	Contact
UF Health Senior Care Clinic (outpatient)	8:00 am	Clinical Translational Research Building (CTRB) 2004 Mowry Road, 1 st floor, Gvl, 32611	<u>Evaluating attendings:</u> Henrique Kallas, MD kallah@shands.ufl.edu Bhanu. Sandesara, MD bsandesara@ufl.edu	Phone: 352-294-5804 (front desk) – Do not give to patients! Patient line 265-0615 Aging main 294-5801 aging.ufl.edu
VA Geri-firm (outpatient)	8:15 am	VA Medical Center Community Living Center (CLC), 2 nd floor, 218-12 1601 SW Archer Rd, Gvl, 32608	<u>Evaluating attending:</u> Carolyn Von Zabern, MD Director Carolyn.VonZabern@va.gov <u>Alternate evaluating attending:</u> Jolly Bose, MD Jolly.Bose@va.gov	Phone 352-376-1611, x2307 Desk x2309 VA CPRS PC Access and training required https://mix.office.com/watch/178ci6muswx86
UF Health Shands Inpatient Consults	8:30 am	If with Dr. Hincapie, Shands South Tower, * Contact PRIOR TO MONDAY to introduce and determine meeting location via text message	<u>Evaluating attendings:</u> Jacob Hincapie (Echeverri), MD jacobohincapieec@ufl.edu	Dr. Hincapie (407) 592-3175 mobile (text preferred)
	8:30 am	If with Dr. Otto: Shands South Tower 4 West (Unit 41) SICU Tues/Thurs afternoons at Oak Hammock 5100 SW 25th Blvd, Gvl 32608	Mallory Otto, MD (Course Director) mbotto@ufl.edu	Dr. Otto, (518) 593-9921 mobile
FRIDAYS	See Table 2 on page 2.			

Palliative Medicine Week

**** Students are expected to bring with them their Palliative Medicine Week Task Checklist and seek out completing the tasks on the checklist and obtaining a signature upon completion from a colleague. This can be an attending, nurse, social worker, care coordinator or other employed member of the care team. THIS IS REQUIRED FOR A PASSING GRADE****

Learning Activities and Objectives for the One-week of Palliative Care at Shands Hospital and Local Hospices (MK, PC, IC, SBP, EB)

1. Assess and treat patients near or at end-of-life.
2. Discuss goals of care and advanced directives with patients and families.
3. Assess pain and other symptoms such as nausea, constipation, and depression.
4. Explore various pain medication regimens and methods of pain medication delivery as well as other medical and non-medical treatment plans.
5. Learn the role of clergy and the role of hospice care.
6. Be exposed to ethical issues in end of life care such as withdrawal or withholding of therapies and nutrition and fluids.
7. Assess patients in their homes along with the home care team, (for those assigned to hospice centers.)
8. Adjust management of pain and key non-pain symptoms based on patient's goals of care.
9. Identify the psychological, social, and spiritual needs of patients with advanced illness and their family members, and link these identified needs with the appropriate interdisciplinary team members.
10. Present palliative care (including hospice) as a positive, active treatment option for a patient with advanced disease.

Daily Procedures on Palliative Care Week:

1. The student will serve for one week on in patient palliative care consult service at Shands, or one of three Haven Hospice care centers or Hospice Care Center of Marion County. Students assigned to one of the hospice care centers may be invited to assess patients in their homes along with the home care team. **See table 4.**
2. Students will be expected to work up at least one new patient during the week and to follow several patients on the service, assisting in care, family conferences and writing notes.
3. Round with clergy and social workers on the team as well as the physicians and nurse practitioners and learn the role of each team member on a palliative team
4. Complete a palliative reflection and presentation.
 - a. See examples and grading rubric on the course website under [Palliative Orientation](#).

Required Fridays during Palliative/Geriatric Medicine Weeks (2nd or 4th week)

Students are expected to participate actively in the discussions.

Every other Friday afternoon (2nd / 4th week) all students on the Palliative Care and Geriatric Medicine rotations

1. 9:00 am – 12:00 pm for Quality Improvement session, UF HPNP G301A
2. 1:00 – 3:00 pm for the “Death Café” (see tables 1 & 2). Reflections and Presentations described in the Assignments section are due at this conference, UF HPNP G-110
3. 3:30 – 5:00 pm Ethics Case Conference, UF HPNP G-110

Assignments (DUE before palliative care conference) See examples and grading rubric in orientation on course website.

1. **Reflection:** Write a one page (minimum) reflection on personal reaction to working with dying patients using personal or professional experiences on this rotation or previous rotations.
2. **Presentation:** Students will choose one topic in palliative care of interest to them, research the topic and complete a 10 minute presentation on their topic at the Friday small group. It should be either a 1 - 2 page paper or 5 - 10 PowerPoint slides. See orientation on course website for topic ideas.
3. **Ethics Case Conference Assignment:** Due Wednesday prior to scheduled Friday.
 - a. Write a one page maximum summary of a case observed during this clerkship that raises ethical questions or issues and upload under the Ethics Module in e-Learning
 - b. Refer to assignment instructions, posted in the Ethics Canvas module.

Table 4: Course Instructors and Locations for Palliative & Hospice Care Week: Mon – Thurs				
Site	Start time day 1	Address	Attending / Support	Contact
UF Health (Shands) Hospital Palliative Care Consult Service	8:30 am	1600 SW Archer Rd, #5130, Gvl, 32608	Evaluating attending: Varies, see schedule tba	Physician on service pager: 352-413-7356 Alternate contact Paula Turpening, ARNP 352-219-9641 https://ufhealth.org/uf-health-palliative-care/overview
Haven Hospice (Transportation required)	8:00 am	4200 NW 90 th Blvd, Gvl, 32606	Evaluating attending: Varies, see schedule tba	Phone: 352-378-2121, x16225 http://www.havenhospice.org/ Scheduling contact: Jean Ann Cannon, 352-692-5104, jcannon@havenhospice.org
Marion County Hospice (Transportation required)	8:30am	3231 SW 34 th Ave, Ocala, FL 34474	Evaluating attending: Varies, see schedule tba	Phone: 352-873-7400 http://www.hospiceofmarion.com/ Barbara Sandberg, office contact bsandberg@hospiceofmarion.com
<u>FRIDAY</u> 9 am – 12 pm	<u>Quality Improvement session,</u> UF College of Public Health and Health Professions (HPNP) <u>G301A</u> with Erik W. Black, PhD 352-275-7868, ewblack@ufl.edu			
1- 3 pm	<u>Palliative Care and Geriatric Medicine groups Friday Conference (“Death Café”), 1-3pm</u> HPNP, G-110 <u>Course Palliative Instructor:</u> Melanie Hagen, MD, FACP Phone: 352-222-4895, Melanie.Hagen@medicine.ufl.edu			
3:30-5pm	<u>Ethics Case Conference, Friday 3:30- 5pm after Palliative Conference in the same room</u> HPNP, G-110 Refer to assignment instructions and session facilitator posted in the Canvas module. Due uploaded by Wednesday before Friday session. Session is immediately after the Palliative conference “Death Café”. If you have any additional questions about this assignment, or if you have difficulty finding an appropriate case to present, contact: Bernie Amaro, Academic Assistant at 352-273-5155 or bamaro@ufl.edu Led by the UF Department of Health and Family Medicine, Program in Bioethics, Law & Medical Professionalism, Lauren B. Solberg, JD, MTS, lbsolberg@ufl.edu .			

Rehabilitation Medicine Weeks (2)

**** Students are expected to bring with them their Rehabilitation Medicine Week Task Checklist and seek out completing the tasks on the checklist and obtaining a signature upon completion from a colleague. This can be an attending, nurse, social worker, PT/OT, care coordinator or other employed member of the care team. THIS IS REQUIRED FOR A PASSING GRADE****

Rehab sites: schedules established from your course registration. See table 5 for location details and Monday start times. See Rehab Modules in Canvas and email from course coordinator for your detailed schedule.

[Med R3] Shands Rehab Hospital
• Includes 4 afternoons at the UF Orthopedic Institute , Non-Operative Sports/Musculoskeletal Medicine Clinic
[Med R4] N FL Malcom Randall VA Medical Center, Community Living Center (CLC)
• GEM (Geriatric Evaluation and Management) and PCU (Palliative Care Unit)
[Med R6] Signature HealthCARE of Gainesville
[Med R5J] Brooks Rehabilitation Jacksonville
• Rehabilitation Hospital or
• Rehabilitation at Bartram Crossing

Learning Activities and Objectives for the Two-week Rehabilitation rotation

The student will evaluate frail elders in an acute-care rehabilitative, sub-acute rehabilitative or long-term care with rehabilitation setting, divided into two primary foci

1. the focus of the first week will be Falls and Dysmobility
2. the focus of the second week will be Major Neurocognitive Disorders in the Elderly.

The majority of students' time from Monday through Thursday each week will be spent at the assigned facility.

- Students will manage medical problems and will learn how to function as part of an interdisciplinary health team. Identify transfer of care issues and areas of potential errors including poor documentation on discharge summaries and medication reconciliation errors.
- Assess and describe baseline and current functional abilities in an older patient by collecting historical data from multiple sources, making sure to include the [Katz activities of daily living and Lawton instrumental activities of daily living](#) and, and performing hearing and vision screenings.
- Develop a preliminary management plan for patients presenting with functional deficits, including adaptive interventions and involvement of interdisciplinary team members from appropriate disciplines, such as social work, nursing, rehabilitation, nutrition, and pharmacy.
- Identify and assess safety risks in the home environment, and make recommendations to mitigate these.
- Ask all patients > 65 years, or their caregivers, about falls in the last year, watch the patient rise from a chair and walk (or transfer), then record and interpret the findings.
- In a patient who has fallen, construct a differential diagnosis and evaluation plan that addresses the multiple etiologies identified by history, physical examination and functional assessment.

Daily Procedures on two-week Rehabilitation rotation Monday – Thursday

See table 5 for first day start times, location and contacts.

1. It is expected that on the first day students will pick up two existing patients and then admit new patients regularly until they achieve a maximum census of 6 patients. Every patient needs an H&P and at least twice-weekly progress notes or as required. H&Ps should be on the chart by the end of the day of admission.
2. Students should pre-round on all their patients and be on time and prepared for work rounds.
3. Typically, one faculty member at each site is responsible for completing the student Evaluation form based on a compilation of their assessment and the assessment of others who worked with the student (primarily other faculty and residents, although input from clinic staff, patients and peers will be considered when pertinent).

Assignments for the two-week Rehabilitation rotation:

1. **GICS Case Studies:** Geriatrics Interdisciplinary Care summary (GICS) Write-up of Geriatrics Interdisciplinary Care Summary [Swiss Cheese Model of Geriatrics] on a practice case and two patients to be evaluated by clinical faculty for initial (week 1) and follow up (week 2), starting Day 1 (or earlier) with the practice case. a. See “Guide to Write-Up Assignment Using the Swiss Cheese Model of Geriatrics” for full deadlines and instructions, starting with DAY 1.
 - a. Read [full instruction guide with practice case posted in Canvas](#) Rehab module assignments
 - b. Summaries must be typed on posted [templates \(Word format\)](#)
2. **Completion of Learning Quizzes:** Successful completion of two quizzes of web-based self-assessment of knowledge. Students must complete one quiz module each week.
 - i. [Online Falls & Dismobility](#)
 - ii. [Online Dementia & Psychosocial Issues](#)
3. **Clock drawing:** Have your site patients perform the clock-drawing test using the form in packet located in Canvas. Review with your attending during week 2.

Required Fridays during Rehabilitation Medicine

1. 1st/3rd Friday for
 - a. 9am-12pm: COM **Quality Improvement training**
 - b. 3:00pm-5:00pm, **Falls and Dismobility** at the VA GRECC T2 (across from Shands 1329).
2. 2nd/4th Friday,
 - a. 9am-12pm: COM **Quality Improvement training**
 - b. 12:45 – 3:00 p.m. for the **Virtual Dementia Tour and subsequent lecture**. Meet at 12:45 at the lobby of the main entrance to the VA Hospital.
 - i. The Virtual Dementia Tour is a scientifically proven simulation method designed to increase sensitivity toward those with Alzheimer’s disease and related dementias.
 - ii. Following the activity at the VA you will walk with the instructor to the conference room at the Gainesville VA GRECC to participate in a lecture on dementias (see tables 1 & 2).

Table 5: Course Instructors and Locations for Rehabilitation See posted schedules and orientations in Canvas, under Rehab Module				
Site	Start time day 1	Address	Attending / Support	Contact
<u>VA GEM/PCU at CLC</u>	7:30 am	Malcom Randall VA Medical Center, 1601 SW Archer Rd, Gvl, 32608	<u>Evaluating:</u> John Meuleman, MD Alternates: Miho Bautista, MD and Leslye Pennypacker, MD	Phone: 352-376-1611 http://www.va.gov/GRECC/Gainesville_GRECC.asp Dr. Meuleman, ext. 6590; John.Meuleman@va.gov
<u>UF Health-Shands Rehabilitation Hospital</u> and UF OSMI: Physical Medicine and Rehabilitation	6:30 am	<u>Shands Rehab</u> 4101 NW 89th Blvd, Gvl, 32606	<u>Evaluating:</u> Wilda Murphy, MD, Medical Director <u>Secondary attendings:</u> Drs. Leber and Puente	Phone: 352-373-4321 https://ufhealth.org/uf-health-shands-rehab-hospital Cell Phone: 352-284-1414 (preferred) murpwe@shands.ufl.edu
	Tues /Thurs 1 pm start	<u>OSMI: Non-Operative Sports/Musculoskeletal Medicine Clinic</u> 3450 Hull Rd, 2 nd floor, east, Gvl, 32607	<u>Tuesday afternoons</u> Dr. Zaremski <u>Thursday afternoons</u> Dr. Perez	Phone: 352-273-7461 https://ufhealth.org/uf-health-orthopaedicsand-sports-medicine-institute Administrative contact: Mary-Ellen Paulk paulkme@ortho.ufl.edu Phone: 352-273-7461
<u>Signature HealthCare</u>	8 am	4000 SW 20th Ave, Gvl, 32607	<u>Evaluating</u> Bhanu. Sandesara, MD, Medical Director	Phone: (352) 377-1981 http://shcofgainesville.com/our-facility/ Dr. Sandesara's cell: (412) 607-3914 bsandesara@ufl.edu
<u>Brooks Rehabilitation (Jacksonville)</u> Your personal schedule will be sent via encrypted email from Brooks. *If enrolled here, you will be assigned to one of two sites, determined by Brooks. Do not solicit them to change.	8:30 am	Site A) Brooks Rehab Hospital 3599 University Blvd S, Jacksonville 32216	<u>Evaluating at Brooks Rehab Hospital</u> Geneva Jacobs, MD Medical Director, Brooks Spinal Cord Injury Program (unless schedule indicates otherwise)	Brooks Rehab Hospital Phone: (904) 345-7776 Administrative Assistant, Rhonda Boatright Rhonda.Boatright@Brooksrehab.org http://www.brookshealth.org/inpatient-rehabilitation/rehabilitation-hospital/
		Site B) Bartram Crossing Rehab / Skilled Nursing 4201 Belfort Rd, Jacksonville FL 32216	<u>Evaluating at Bartram</u> Charles Dempsey, MD Secondary Michelle Musto, MD	<u>Bartram Crossing</u> Phone: (904) 296-5645 Charles.Dempsey@BrooksRehab.org http://www.brookshealth.org/skilled-nursing/#bartram Administrative Assistant, Brittney Lukacovic Brittney.Lukacovic@brooksrehab.org

Clerkship Evaluation/ Grading Policies/ Student Performance Criteria

*For additional expectations and requirements, review the UF, College of Medicine Medical Education Program Policies and Procedures <http://osa.med.ufl.edu/policies/>

Clerkship Evaluation (feedback from students):

We appreciate your feedback! The Course evaluation form can be accessed in [Studycore](https://studycore.medinfo.ufl.edu/php/content.php), based on your Rehab site, (<https://studycore.medinfo.ufl.edu/php/content.php>) under "evaluation" for students to fill out. The evaluation period is open starting the first day of your rotation and up to 1 week after it ends.

Grading Policies and Student Performance Criteria

1. Internal and external measures used to assess student's knowledge and skills.

Students will be evaluated by Faculty and Preceptors using both formative and summative feedback to arrive at an appropriate grade of the student's performance.

2. Describe the system for giving formative feedback:

At the end of the first week, students will be assessed by faculty and preceptors on the six core competencies:

- I. Patient care (PC): Students are expected to review the patient record, integrate and coherently present to team history and physical findings, and serve as patient advocate
- II. Medical knowledge (MK): Students are expected to create differential diagnoses and be able to correlate knowledge with the clinical situation.
- III. Practice-Based Learning (PBL): Students are expected to use scientific information and evidence based medicine to manage patients and aim for quality improvement
- IV. Interpersonal Communication (IC) : Students are expected to listen to patients and families and explain information without medical jargon and to communicate effectively with the members of the patient care team.
- V. Professionalism (P) : Students are expected to demonstrate respect, integrity, honesty, work ethic, dependability and to be present, engaged, and timely.
- VI. System based practice (SBP): Students are expected to seek to understand clinical and other patient resources, recognize the need for interdisciplinary care, identify transitional care issues, and identify system-based issues that affect a patient's care.

A representative evaluation form is included in the appendix to the syllabus and in the online orientation.

Students are encouraged to elicit direct feedback from faculty if faculty have not already provided verbal feedback at a midpoint in their time working with faculty and at the end.

3. System for determining summative evaluation and grade determination: This Clerkship is Pass/Fail, with high benchmarks for passing as follows:

- The Clerkship Task sheet **MUST** be completed and turned in to the course coordinator, Brian Stanton, by the last day of the clerkship. If the Task sheet is missing items a passing grade cannot be assigned without make up and completion of items.
- On clinical evaluations, evaluators may make the recommendation for a passing or failing grade. If the recommendation is made for a failing grade in any portion of the evaluation, the Geriatric Medicine clerkship committee will meet and determine if a failing grade is indeed appropriate or if in-course remediation can be first attempted. The remediation will be at the discretion of the clerkship committee, which includes the course director Dr. Otto, Dr. Hincapie, and palliative course director Dr. Hagen.
- If a failing grade is determined as the ultimate grade after the above procedures or if remediation is not successful as determined by the discretion of the course directors, the students will be referred to the College of Medicine Academic Status Committee and their grade will remain Incomplete (I) until action decided by the committee.
- Attendance is mandatory, and no unexcused absences are permitted including leaving early or not attending parts of the daily duties. If such absence is occurring, the clerkship committee will meet to determine if a failing grade is appropriate or follow the remediation procedures above.

Student Attendance

The designated hours of the clerkship will be Monday through Friday from 6:30* am – 5:00 pm*. Students will be expected to be available as their site, cases, and patients require. (e.g. An attending starts rounds early or expects pre-rounding, or a two-hour admission occurs at 4:00 pm) Students will be expected to complete the admission regardless of the time.) **Structured Fridays are mandatory. Do not plan to leave early. Weekends are not an option** to make up clinical time in this rotation.

Unplanned Absences

In the event of a single-day, unexpected absence due to illness, you **MUST** notify the Geriatric Clerkship Coordinator (bstanton@ufl.edu) and Clerkship Director (mbotto@ufl.edu) as soon as physically possible. If unable to reach the Geriatric Clerkship Coordinator or Clerkship Director, contact the UF Office of Student Affairs. If longer than a single day, the Geriatric Clerkship Coordinator or Clerkship Director and a note clearing the student to return to clinical work will be required by their PMD or Student Health.

Planned Absences

***Students should not plan any absences during required clerkships. Do not plan to leave early on Fridays.** Schedule during elective time or vacation per COM and course leadership. Do not plan to leave early for extended weekend vacations, wedding pre-parties, and such.

INTERVIEW SEASON

We fully recognize the importance of attending interviews for a successful match. We will allow 1 day to be missed for an interview without requiring make up. Scheduling more than this during this required clerkship is strongly discouraged. In extenuating circumstances, the clerkship director may make exceptions with the requirement of necessary make up of clinical days or whole weeks if necessary to preserve continuity of care and ensure the course requirements are met.

Holidays

During clinical rotations, typical “holidays” are not taken by MS4s unless specifically mentioned by the clerkship. Students are allotted the following holidays: Thanksgiving: beginning 7pm Wednesday, Nov. 23 and ending 5am Monday, Nov. 28. Winter Break: Dec 17, 2016 – Jan 1, 2017. Match Day is March 17, 2017. The COM recognizes other holidays, both religious and secular, which are of importance to some individuals and groups. Students wishing to observe these holidays must inform the Geriatric Clerkship Coordinator or Clerkship Director before Clerkship begins. In the event of such request, an alternate assignment or arrangement may not be available to ensure adequate clinical experience. The timing of this make-up work is at the discretion of the Clerkship Director. **Missed days, which cannot be completed before clerkship end date results in a grade of “Incomplete”.** Additional requirements for class attendance and make-up exams, assignments, and other work in this course are consistent with university policies that can be found at: <http://osa.med.ufl.edu/policies/>

Students with disabilities

*Students with disabilities requesting accommodations should first register with the Disability Resource Center (352-392-8565, www.dso.ufl.edu/drc/) by providing appropriate documentation. Once registered, students will receive an accommodation letter, which must be presented to the instructor when requesting accommodation. Students with disabilities should follow this procedure as early as possible in the semester.

Contact Information for UF Student Counseling & Wellness Center

Contact information for the Counseling and Wellness Center: <http://www.counseling.ufl.edu/cwc/>, (352) 392-1575; and the University Police Department: 392-1111 or 9-1-1 for emergencies

UF Student Honesty Policy / Honor Code

UF students are bound by The Honor Pledge, which states, “We, the members of the UF community, pledge to hold ourselves and our peers to the highest standards of honor and integrity by abiding by the Honor Code. On all work submitted for credit by students at UF, the following pledge is either required or implied: “On my honor, I have neither given nor received unauthorized aid in doing this assignment.”

The Honor Code (<http://www.dso.ufl.edu/sccr/process/student-conduct-honor-code/>) specifies a number of behaviors that are in violation of this code and the possible sanctions. Furthermore, you are obligated to report any condition that facilitates academic misconduct to appropriate personnel. If you have any questions or concerns, please consult with the instructor of the class.

Appendix 1) REQUIRED Task Checklist

Geriatric Medicine, Palliative, and Rehab Medicine

STUDENT NAME

All items on this task checklist must be performed for a passing grade.

It is suggested that the tasks on each course specific checklist are sought out during that area of the course (ex. Palliative vs Geriatric medicine vs. Rehab) but if necessary, crossover is allowable such that all tasks may be completed.

<u>REHAB</u>	<u>SIGNATURE OF OBSERVER</u>	<u>DATE COMPLETED</u>
GICS #1		
GICS #2		
Online quizzes (#2) Falls and Dementia		
Identify potential for error in transition of care from hospital to rehab or rehab to home including in discharge summary documentation and medication reconciliation.		
Observe 1 PT or OT session		
Observe 1 SLP (speech language) session		
Perform a Clock Draw Test		
<u>GERIATRIC MEDICINE</u>		
Evidence based presentation on topic of your choice relating to Geriatrics		
Perform either: - Confusion Assessment Method (CAM) - MOCA (Montreal Cognitive Assessment)		
Perform 1 Mini-Cog		
Assess Katz ADL/IADL history		
Identify one patient with Beer's Criteria Medications Prescribed (Polypharmacy)		
Perform a Get-Up And Go		
<u>PALLIATIVE MEDICINE</u>		
Reflection		
Presentation on topic of your choice relating to Palliative Medicine		
<u>Ethics</u>		
Ethics Case Conference Assignment		

Appendix 2) Evaluation Forms

Geriatric Medicine and Rehab Evaluation

Student Name _____ Date _____

Evaluator _____

Describe one or two areas of strength:

Describe one or two areas for improvement:

If applicable, explain need for remediation (fail):

Category	Ideal Example	SCORE P/F
Professionalism	Demonstrates respect, integrity, honesty, and compassion, seeks feedback, is responsible, mature, ethical, present, and timely.	
Patient Care	Reviews patient record, integrates and coherently presents to team history and physical findings, serves as patient advocate	
Systems based Practice	Seeks to understand clinical and other patient resources, recognizes need for interdisciplinary care, identifies transitional care issues	
Practice-based learning	Use scientific information and evidence based medicine to manage patients, aims for quality improvement	
Medical Knowledge	Differential diagnosis, able to correlate knowledge with clinical situation	
Communication	Listens to patients and families and explains information without using jargon. Communicates effectively with members of the patient's care team.	

(*See page 15 for grading policies)

Appendix 3) Palliative Medicine Evaluation:

Student Name _____ Date _____

Evaluator _____

Describe one area of strength:

Describe one area for suggested improvement:

Category	Description	Grade (Pass/Fail)
Professionalism	Demonstrates respect, integrity, honesty, and compassion, seeks feedback, is responsible, mature, ethical	
Patient Care	Reviews patient record, integrates and presents to team coherently history and physical findings, serves as patient advocate	
Systems based Practice	Understands clinical and other patient resources, learns about social work, chaplaincy and hospice, reduces error, efficient	
Practice-based learning	Use scientific information and EBM to manage patients, takes Initiative, strives for autonomy	
Medical Knowledge	Differential diagnosis, wants to learn and to improve, able to correlate knowledge with clinical situation	
Communication	Listens to patients and families, explains information to patient and families without using jargon, sensitive to patient and family nonverbal communication. Communicates effectively with members of the patient's care team.	