



**Western  
University**  
OF HEALTH SCIENCES

*The discipline of learning. The art of caring.*

***College of Osteopathic Medicine of the Pacific***

## **Pediatrics Core Rotation Syllabus**

Course No.:	OM 7550A-G	Course Title:	Pediatrics
Credit Hours:	4 weeks, 4 credit hours for each rotation	Chair and Clerkship director:	Adam Paul, MD
Term - Dates:	Academic Year Variable	Level:	OMS III

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### Educational Goal

The Clinical Pediatric Didactic core rotation is offered to the third-year student (OMS III) as a four-week rotation that includes an online component to complement the onsite rotation. This blended experience allows for a degree of standardization to complement the student's patient encounters, which differ due to variation in seasonal and rotation site exposure. The goal of the online Pediatric rotation is to develop the student's ability to address issues unique to childhood and adolescence by exploring age-specific health concerns and emphasizing the impact of family, community and society on child health and well-being. Additionally, the student will focus on the impact of disease and its treatment on the growing child, and the principles of health supervision and recognition of common health problems.

The exposure to pediatrics will introduce the student to a unique, complex and challenging field of medicine, and will provide a foundation for those students who elect to further study the health care of infants, children and adolescents.

## Core Learning Objectives

Students attending this course will:

- Acquire basic knowledge of growth and development (physical, physiologic, and psychosocial) and of its clinical application from birth through adolescence
- Acquire the knowledge necessary for the diagnosis and initial management of common acute and chronic illnesses.
- Develop clinical problem-solving skills.
- Develop strategies for health promotion as well as disease and injury prevention.
- Understand the influence of family, community, and society on the care and development of a child.

The following COMP and AOA Competencies/Outcomes are incorporated into the objectives: Osteopathic Principles and Practice, Medical Knowledge, Patient Care, Interpersonal and Communication Skills, Professionalism, Practice-Based Learning and Improvement, and Systems-Based Practice.

The student will be expected to:

- Apply basic knowledge of the anatomy and physiology of the organ systems to the care of the acutely and chronically ill or injured medical, psychiatric, surgical, obstetrical/gynecological, and pediatric patients. (COMP/AOA core competencies 2; Institutional outcomes 1, 2)
- Apply basic knowledge of the molecular, biochemical, and cellular mechanisms for maintaining homeostasis in the care of the acutely and chronically ill or injured medical, psychiatric, surgical, obstetrical/gynecological, and pediatric patients .. (COMP/AOA core competencies 2, 3; Institutional outcomes 1, 2, 7)
- Refine skills to obtain appropriately comprehensive history and physical examination on acute care patients presenting to the Emergency Department. (COMP/AOA core competencies 2, 3; Institutional outcomes 1, 2, 3, 4, 7)
- Formulate and communicate a focused differential diagnostic problem list on each psychiatric, surgical, obstetrical/gynecological, pediatric and medical patient. (COMP/AOA core competencies 2, 4; Institutional outcomes 1, 2, 3, 4, 7)
- Identify knowledge deficits and search the medical literature for the most current aspects of diagnostic and management strategies to thereby apply the principles of evidence-based medicine to the care of the individual acutely and chronically ill or injured medical, psychiatric, surgical, obstetrical/gynecological, and pediatric patient.

This will be supported by ACEP on-line material such as guidelines review.  
(COMP/AOA core competencies 2, 6, 7; Institutional outcomes 1, 2, 6, 7)

- Formulate strategies for disease prevention based on knowledge of disease pathogenesis and mechanisms of health maintenance, with the support of ACEP on-line guidelines and the United States Preventative Task Force Recommendations. (COMP/AOA core competencies 2, 6, 7; Institutional outcomes 1, 2, 7, 8)
- Integrate concepts of epidemiology and population-based research methods into the care of the individual acutely and chronically ill or injured medical, psychiatric, surgical, obstetrical/gynecological, and pediatric patient. (COMP/AOA core competencies 2, 4, 6, 7; Institutional outcomes 1, 2, 7)
- Formulate diagnostic and treatment plans taking into consideration a cost-benefit analysis and access to healthcare. (COMP/AOA core competencies 2, 4, 6, 7; Institutional outcomes 1, 2, 4, 5, 6, 7, 8)
- Skillfully present patient history, physical and diagnostic information in a systematic, coherent and concise manner, which addresses the chief complaint/problem, identifies pertinent positive and negative findings and supports a logical assessment. (COMP/AOA core competencies 2, 3, 4; Institutional outcomes 2,3)
- Respect the cultural and ethnic diversity of their patients' beliefs in evaluating and managing their emergent medical care. (COMP/AOA core competencies 1, 2, 3, 4, 5; Institutional outcomes 2, 3, 4, 5, 6, 8)
- Display honesty, integrity, respect, and compassion for patients and their families. (COMP/AOA core competencies 1, 2, 3, 4, 5; Institutional outcomes 23, 4, 5, 6, 8)
- Participate in the education of patients, families, and other students. (COMP/AOA core competencies 1, 2, 3, 4, 5; Institutional outcomes 1, 2, 3, 4, 5, 8)
- Participate in an inter-professional team to enhance patient safety and improve patient care. (COMP/AOA core competencies 1, 2, 3, 4, 5, 6, 7; Institutional outcomes 1, 2, 3, 4, 5)
- Display collegiality, professionalism and respect toward all members of the healthcare team. (COMP/AOA core competencies 4, 5, 7; Institutional outcomes 3, 4)
- Follow all infection control policies and guidelines as established by the Centers for Disease Control and Prevention (CDC) and the Society for Healthcare Epidemiology of America (SHEA). (COMP/AOA core competencies 2, 4, 6, 7; Institutional outcomes 1, 2, 7)
- Obtain a greater understanding of the patient-physician relationship and consistently apply the "bio psychosocial model." (COMP 1,2,3,5,7; Institutional Outcomes 1,2,3,4,5,6,8)

- Apply Osteopathic Principles and Practice as an integral part of patient treatment and care. ( COMP 1,2,3,4,5, 6,7; Institutional Outcomes 1,2,3,4,5,6,7,8)

At the end of the rotation, the student should be able to:

- Assist in the evaluation, treatment, and disposition of patients.
- Complete an accurate History and Physical
- Write accurate, organized and legible progress notes
- Establish a differential diagnosis for patients
- Recommend to the Resident or Attending physician a treatment plan for assigned patients
- Demonstrate an ability to quote updated Evidence-Based references on patients' conditions and treatment
- Identify abnormal laboratory values, then create an appropriate treatment plan to present to the Resident or Attending
- Demonstrate knowledge of specialty-specific medical procedures, as well as indications and contraindications of each

### **Requirements and Expectations During the Rotation**

Course objectives, accomplished under supervision, should be covered during the rotation to assure adequate student preparation for Board Examinations and clinical practice.

Course objectives are achieved through the blended curriculum of independent study and on-site patient-centered teaching.

Didactic methods to achieve required objectives include:

- Reading assignments – assigned by both Core Rotation faculty and preceptors.
- Lectures
- Computer assisted programs and modules (including, but not limited to, the Aquifer modules and OPENPediatrics assignments)
- Student attendance at and participation in formal clinical presentations by medical faculty

Clinically oriented teaching methods may include:

- Assignment of limited co-management responsibilities under supervision
- Participation in clinic visits, daily patient rounds and conferences
- Supervised and critiqued clinical work-ups of patients in the outpatient or inpatient settings

- Assigned, case-oriented reading and case presentations.

A 4-week curriculum has been designed to meet the 40 hours/week mandate. This includes working through assigned Pediatric Aquifer modules, the submission of a required student PowerPoint presentation, and viewing of the video “Newborn Exam” on OPENPediatrics. In addition, we have identified articles on common pediatric conditions for review that are available in PDF format. Students are required to submit an attestation form of completed required assignments to receive credit for the rotation.

[Aquifer Pediatrics](#) is an on-line program that allows students to have a standardized pediatric curriculum across the different rotation sites. These cases are developed by nationally recognized faculty and are designed for a third-year medical student. Completion of the following modules is required by the completion of the rotation:

- Pediatrics 02: Infant female well-child visits (2, 6, and 9 months)
- Pediatrics 06: 16-year-old male pre-participation evaluation
- Pediatrics 10: 6-month-old female infant with a fever
- Pediatrics 12: 10-month-old female with a cough
- Pediatrics 27: 8-year-old female with abdominal pain
- Pediatrics 28: 18-month-old male with developmental delay
- Pediatrics 29: Male infant with hypotonia
- Pediatrics 32: A day in the pediatric dermatology clinic

[OPENPediatrics](#) – Students completing the rotation are required to watch “Newborn Exam”

Optional:

- Respiratory Distress in the Newborn
- Neonatal Jaundice
- Kawasaki Disease
- Developmental Milestones
- Bronchiolitis
- Pneumonia
- Croup
- Urinary Tract Infection
- Asthma
- Acute Otitis Media
- Diarrhea
- Approach to Fever
- Functional Constipation
- Approach to Brief Resolved Unexplained Events BRUE

- Approach to Abdominal Pain
- Breastfeeding
- Child Abuse: Skeletal and Cutaneous Findings
- Immunizations
- Sickle Cell Disease

OnlineMedEd Videos – optional

- Congenital Defects
- Well Child
- Vaccinations
- Preventable Trauma
- Child Abuse
- Newborn Management
- Neonatal ICU
- Failure to Pass Meconium
- Baby Emesis
- Neonatal Jaundice
- ALTE, BRUE and SIDS
- Seizures
- ENT
- Allergies
- Upper Airway
- Lower Airway
- Orthopedics
- Peds CT Surgery
- GI Bleed
- Immunology
- Peds ID Review

Presentation – The student will be required to prepare and present to their faculty a PowerPoint presentation on a topic of their choice.

## Expectations:

During this rotation, the student is expected to do the following:

- Function as an essential member of the office/hospital team
- Report to the office/hospital daily. If the student is late or absent, they must notify the Resident or Attending and **submit a Time-Off Request (TOR) with the Office of Student Affairs**
  - The OSA, not the Course Director or individual faculty or preceptors, determines whether a TOR is excused. It is each student's responsibility to seek the necessary assistance if they encounter difficulties during the rotation. Students experiencing difficulty should consult with the OSA, appropriate coordinators, and Faculty Advisors for assistance.
- Report to the Resident or Attending daily for assigned patients.
- Write progress notes and orders as allowed by the attending physician.
- Attend all educational conferences and Grand Rounds as required by the Resident or Attending Physician
- Read about the anatomy, physiology, and pathology of patients encountered.
- Complete the assigned readings and on-line modules.
- Apply osteopathic principles and practices to every patient.

## Resources

It is strongly recommended that students spend approximately 10 hours per week reading independently. Students should not rely solely on review books to be adequately prepared for the rotation.

### Recommended Textbooks:

- Current Diagnosis and Treatment Pediatrics, 26<sup>th</sup> Edition
- Harriet Land Handbook, 23<sup>rd</sup> Edition
- Zitelli – Atlas of Pediatric Physical Diagnosis, 8<sup>th</sup> Edition
- Case Files Pediatrics, Sixth Edition

### Evidence-Based Medicine Resources:

- American Academy of Pediatrics ([www.AAP.org](http://www.AAP.org))
- ACP's PIER-Stat! Ref-PIER is a collection of over 400 evidence-based summaries published by the American College of Physicians. Each module provides authoritative guidance to improve the quality of care.



- Cochrane Library for Evidence-Based Medicine – The Cochrane Library contains high-quality, independent evidence to inform healthcare decision making.
- DynaMed – Point-of-care reference resource designed to provide doctors and medical researchers with the best available evidence to support clinical decision making.
- Essential Evidence Plus - A power resource with content, tools, calculators and alerts for clinicians who deliver first-contact care.
- ACP Medicine – A comprehensive, evidence-based reference for fast, current answers on the best clinical care.

#### Recommended Downloads for Handheld Devices:

- Epocrates
- Medscape
- Medical Calc
- AHRQ ePSS

#### Electronic Texts:

- Cecil Medicine – MD Consult
- Harrison's Online – AccessMedicine
- Current Medical Diagnosis and Treatment – AccessMedicine
- MD Consult – Provided full-text access to medical textbooks, journals, comprehensive drug information, and clinical practice guidelines.
- Ebsco A-to-Z Database – links and information on more than 124,000 unique titles from more than 1100 databases and e-journal packages
- The Medical Letter on Drugs and Therapeutics – An independent, peer-reviewed, nonprofit publication that offers unbiased critical evaluations of drugs, with special emphasis on new drugs.
- UpToDate

#### **Evaluations:**

The evaluation of the student is based upon, but not limited to the following:

- Knowledge of the disease, pathology, and management for assigned patients
- Knowledge of the diagnosis and treatment of common pediatric diseases
- Presentation of assigned patients

- Completion of documentation (history and physical, progress notes, orders, etc) on assigned patients.
- Independent presentations as assigned by the Resident or Attending Physician
- Professionalism and rapport with patients, residents, attendings, and ancillary staff
- Attendance at lectures, conferences, and meetings
- Submissions of completed case log and procedure log in New Innovations
- Completion of assigned Aquifer Modules, OPENPediatrics videos, and PowerPoint Presentations

### General Policies:

**Policy on Disability Accommodations:** To obtain academic accommodations for this course, students with disabilities should contact the Center for Disability Issues and the Health Professions and the course director within ten days of the beginning of the course. Disability Services can be reached at 909-469-5380.

**Remediation Policy:** Every effort will be made to provide each student ample opportunity to demonstrate competency in each area of the academic program. Students who earn a final grade of Fail will present to the Student Performance Committee (SPC). The SPC may decide that the student may be allowed to remediate or repeat the rotation, or be dismissed from the College. The SPC will recommend to the Dean which of these options will be given to the student. For those students allowed to remediate a course, the remediation exams will take place at the end of the academic year.

**Academic Dishonesty:** Complete confidence in the honor and integrity of the health professions student and health care professional is essential. Such confidence depends entirely on the exemplary behavior of the individual health care provider in his or her relations with patients, faculty and colleagues. Strict honesty as a personal way of life should be nurtured during the period of education for professional service. The student shall conduct all aspects of his or her life with honor and integrity. This includes accountability to oneself and to relationships with fellow students, future colleagues, faculty, and patients who come under the student's care or contribute to his or her training and growth, and members of the general public. This applies to personal conduct that reflects on the student's honesty and integrity in both academic and non-academic settings, whether or not involving a University sponsored activity. Upon accepting admission to the University, each student subscribes to and pledges complete observance to the Standards of Academic and Professional Conduct as outlined in the University Catalog for each academic program. A violation of these standards is an abuse of the trust placed in every student and could lead to suspension or dismissal.

<b>WU INSTITUTIONAL OUTCOMES</b>	<b>Health Professional Education</b>
<b>1. Critical Thinking</b>	The graduate should be able to identify and solve problems that require the integration of multiple contexts when performing patient care.
<b>2. Breadth and Depth of Knowledge in the Discipline/Clinical Competence</b>	The graduate should be able to perform appropriate diagnostic and therapeutic skills, to apply relevant information to patient care and practice, and to educate patients regarding prevention of common health problems.
<b>3. Interpersonal Communication Skills</b>	The graduate should be able to effectively use interpersonal skills that enable them to establish and maintain therapeutic relationships with patients and other members of the health care team.
<b>4. Collaboration Skills</b>	The graduate should be able to collaborate with clients and with other health professionals to develop a plan of care to achieve positive health outcomes for their patients.
<b>5. Ethical and Moral Decision Making Skills</b>	The graduate should be able to perform the highest quality of care, governed by ethical principles, integrity, honesty and compassion.
<b>6. Life-Long Learning</b>	The graduate should be able to engage in life-long, self-directed learning to validate continued competence in practice.
<b>7. Evidence-Based Practice</b>	The graduate should be able to utilize research and evidence-based practice and apply relevant findings to the care of patients.
<b>8. Humanistic Practice</b>	The graduate should be able to carry out compassionate and humanistic approaches to health care delivery when interacting with patients, clients, and their families. They should unfailingly advocate for patient needs.

<b>COMP/AOA CORE COMPETENCIES</b>	Competency: Osteopathic Medical Students are part of an educational continuum that leads to residency and the curriculum provides the foundation for the following outcomes:
<b>1. Osteopathic Philosophy and Osteopathic Manipulative Medicine</b>	Residents are expected to demonstrate and apply knowledge of accepted standards in Osteopathic Manipulative Treatment (OMT) appropriate to their specialty. The educational goal is to train a skilled and competent osteopathic practitioner who remains dedicated to life-long learning and to practice habits in osteopathic philosophy and manipulative medicine.
<b>2. Medical Knowledge</b>	Residents are expected to demonstrate and apply knowledge of accepted standards of clinical medicine in their respective specialty area, remain current with new developments in medicine, and participate in life-long learning activities, including research.
<b>3. Patient Care</b>	Residents must demonstrate the ability to effectively treat patients, provide medical care that incorporates the osteopathic philosophy, patient empathy, awareness of behavioral issues, incorporation of preventative medicine, and health promotion.
<b>4. Interpersonal and Communication Skills</b>	Residents are expected to demonstrate interpersonal/communication skills that enable them to establish and maintain professional relationships with patients, families, and other members of health care teams.
<b>5. Professionalism</b>	Residents are expected to uphold the Osteopathic Oath in the conduct of their professional activities that promote advocacy of patient welfare, adherence to ethical principles, collaboration with health professionals, life-long learning, and sensitivity to a diverse patient population. Residents should be cognizant of their own physical and mental health in order to effective care for patients.
<b>6. Practice-Based Learning and Improvement</b>	Residents must demonstrate the ability to critically evaluate their methods of clinical practice, integrate evidence-based medicine into patient care, show an understanding of research methods, and improve patient care practices.
<b>7. Systems-based Practice</b>	Residents are expected to demonstrate an understanding of health care delivery systems, provide effective and qualitative patient care within the system, and practice cost-effective medicine.

<b>COMPARISON OF OUTCOMES STANDARDS: WU AND COMP</b>	<b>WU</b>	<b>COMP</b>
Critical Thinking	1	1,2,3,6
Breadth and Depth of Knowledge in the Discipline/Clinical Competence	2	1,2,3,4,5,6,7
Interpersonal Communication Skills	3	4
Collaboration Skills	4	4
Ethical and Moral Decision-Making Skills	5	1,3,5,6
Lifelong Learning	6	1,2,3,6,7
Evidence-Based Practice	7	1,2,3,6,07
Humanistic Practice	8	3,4,5