Syllabus for Rheumatology Clerkship

<table>
<thead>
<tr>
<th>Course No.</th>
<th>OM 7022</th>
<th>Course Title:</th>
<th>Internal Medicine Clerkship</th>
</tr>
</thead>
<tbody>
<tr>
<td>Credit Hours:</td>
<td>4 weeks, 4 credit hours for each rotation</td>
<td>Clerkship Director:</td>
<td>Katrina Platt, D.O.</td>
</tr>
<tr>
<td>Term - Dates:</td>
<td>Variable in OMS III and OMS IV years</td>
<td>Department Chair:</td>
<td>Emmanuel Katsaros, D.O.,</td>
</tr>
<tr>
<td>Level:</td>
<td>OMS III, OMS IV</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Department of Clinical Education Contact Information

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Educational Goal

Purpose of the Rotation:
The purpose of these rotations is to provide the student with a solid foundation in the diagnosis and management of rheumatic conditions.

Rotation Description:
Rheumatology  (4 credit hours)
This course provides supervised clinical education in rheumatology including clinical management, exam and procedural skills, interpretation of diagnostic data, patient counselling, development of diagnostic and management plans, and interprofessional
The student will be expected to:

1. Apply basic knowledge of the anatomy and physiology of the organ systems to the care of the medical patient. (COMP/AOA core competencies 2; Institutional outcomes 1, 2)
2. Refine skills to obtain appropriately comprehensive history and physical examination on both acute and chronic hospitalized and ambulatory rheumatology patients. (COMP/AOA core competencies 2, 3; Institutional outcomes 1, 2, 3, 4, 7)
3. Formulate and communicate a focused differential diagnostic problem list on each medical patient. (COMP/AOA core competencies 2, 4; Institutional outcomes 1, 2, 3, 4, 7)
4. 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 medical patient. This will be supported by the American College of Rheumatology (ACR) on-line material such as guidelines review. (COMP/AOA core competencies 2, 6, 7; Institutional outcomes 1, 2, 6, 7)
5. Learn and apply the basic immunology, pathophysiology, and genetic associations of common rheumatic diseases. (COMP/AOA core competencies 2, 6, 7; Institutional outcomes 1, 2, 7, 8)
6. Become familiar interpreting musculoskeletal x-rays, and DXA’s. (COMP/AOA core competencies 2, 6, 7; Institutional outcomes 1, 2, 7, 8)
7. Integrate concepts of epidemiology and population-based research into the care of the individual medical patient. (COMP/AOA core competencies 2, 4, 6, 7; Institutional outcomes 1, 2, 7)
8. 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)
9. 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)
10. Respect the cultural and ethnic diversity of their patients’ beliefs in evaluating and managing their medical care. (COMP/AOA core competencies 1, 2, 3, 4, 5; Institutional outcomes 2, 3, 4, 5, 6, 8)
11. 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)
12. 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)
13. 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).
14. Display collegiality, professionalism and respect toward all members of the healthcare team. (COMP/AOA core competencies 4, 5, 7; Institutional outcomes 3, 4)
15. Recognize the appropriate timing and indication for referrals to rehabilitation/ physical therapy, occupational therapy, orthopedics, and orthotics. Become familiar with community programs for our patients with chronic rheumatic diseases, such as arthritis foundation aquatics program. (COMP/AOA core competencies 4, 5, 7; Institutional outcomes 3, 4)
16. 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)
17. Apply Osteopathic Principles and Practice as an integral part of patient treatment and care.
Rotation Expectations

1. If applicable, assist in admitting patients to the hospital (from the ER, direct admit, transfer under the supervision of a medicine resident/intern).
2. Write accurate, organized and legible progress notes and consults (Preceptors/Clinical Faculty: please direct students on approved use of any electronic medical records. If the student is not allowed to enter data directly into the electronic records, please have the student “hand write” all progress notes and orders for daily review).
3. Accompany attendings, residents and interns on rounds in the hospital.
4. Effectively present clinic patients to attendings, residents and interns and when on hospital rounds with regard history of present illness, pertinent physical exam and diagnostic findings and any change of status of patients.
5. Recommend to the intern, resident or attending physician a treatment plan for all patients.
6. Demonstrate knowledge of specific medical procedures (indications and contraindications).
7. Participate in all conferences, morning reports, lectures, and meetings as directed by the attending and COMP faculty.
8. Lecture or present case histories as requested by interns, residents or attending
10. Wear appropriate attire.
11. Be professional at all times.

Required Educational Assignments

IF ON IM3 ROTATION, PLEASE SEE BLACK BOARD ECM V COURSE FOR THE FOLLOWING:

Internal Medicine Month 1:

1. Cardiology Week:
   • Wise-MD
     Ultrasound: Central venous access
   • Med-U
     SIMPLE
     Case 1: 49 yo man with chest pain
     Case 2: 60 yo woman with episodic chest pain
     Case 3: 54 yo woman with syncope
     Case 4: 67 yo woman with shortness of breath and leg swelling
     Case 5: 55 yo man with fatigue
     Case 6: 45 yo man with hypertension
   • Cardiology Online Lectures: See Blackboard
   • Online Case Conference: Thursday 3PM or 4PM. Students will be assigned a 3 PM or 4 PM time slot. See Blackboard
2. Infectious Disease Week:
   - Med-U
     CORE
     Chest: Infections
     Neuro: Vascular and HIV
   SIMPLE
     Case 14: 18 yo woman seen for pre-college physical
     Case 15: 50 yo man with cough and nasal congestion
     Case 20: 48 yo woman with HIV
     Case 29: 55 yo woman with fever and chills
   - Infectious Disease Online Lectures- See Blackboard
   - Online Case Conference: Thursday 3PM or 4PM. Students will be assigned a 3 PM or 4 PM time slot. See Blackboard.

3. Pulmonology Week:
   - Med-U
     SIMPLE
     Case 22: 71 yo man with cough and fatigue
     Case 28: 70 yo man with shortness of breath and leg swelling
     Case 30: 55 yo woman with left leg swelling
     Pulmonary Week
   - Pulmonary Online Lectures- See Blackboard
   - Online Case Conference: Thursday 3PM or 4PM. Students will be assigned a 3 PM or 4 PM time slot. See Blackboard.

4. Nephrology Week:
   - Med-U
     SIMPLE
     Case 23: 54 yo woman with fatigue
     Case 33: 49 yo woman with confusion
   - Wise-MD
     Skills: Foley Catheter
   - Nephrology Online Lectures- See Blackboard
   - Online Case Conference: Thursday 3PM or 4PM. Students will be assigned a 3 PM or 4 PM time slot. See Blackboard
Internal Medicine Month 2:

1. Gastroenterology Week:
   - Med-U
     SIMPLE
     Case 9: 55 yo woman with upper abdominal pain and vomiting
     Case 10: 48 yo woman with diarrhea and dizziness
     Case 11: 45 yo man with abnormal LFT’s
     Case 12: 55 yo man with lower abdominal pain
     Case 36: 45 yo man with ascites
   - Gastroenterology Online Lectures- See Blackboard
   - Online Case Conference: Thursday 3PM or 4PM. Students will be assigned a 3 PM or 4 PM time slot. See Blackboard.

2. Endocrinology Week:
   - Med-U
     SIMPLE
     Case 7: 28 yo woman with lightheadedness
     Case 8: 55 yo man with type 2 diabetes mellitus
     Case 13: 65 yo woman seen for annual physical
     Case 16: 45 yo man with obesity
   - Endocrinology Online Lectures- See Blackboard
   - Online Case Conference: Thursday 3PM or 4PM. Students will be assigned a 3 PM or 4 PM time slot. See Blackboard.
   - Reading assignments: (online)
     - American Diabetes Association, Clinical Practice Guidelines, 2014
     - 2013 American College of Cardiology/ American Heart Association Guidelines on the Treatment of Blood Cholesterol to Reduce Atherosclerotic Cardiovascular Risk in Adults

3. Hematology/ Oncology Week:
   - Med-U
     CORE
     Chest: Masses
   - Wise-MD
     Colon Cancer
     Lung Cancer
     Adrenal Adenomas
     SIMPLE
     Case 17: 28 yo man with rash
     Case 19: 42 yo woman with anemia
     Case 21: 78 yo man with fever, lethargy, anorexia
     Case 27: 65 yo man with back pain
   - Hematology Online Lectures- See Blackboard
   - Online Case Conference: Thursday 3PM or 4PM. Students will be assigned a 3 PM or 4 PM time slot. See Blackboard.
4. **Neurology Week:**

- **Med-U**
  
  **CORE**
  Neuro: Trauma
  
  **SIMPLE**
  Case 18: 75 yo man with memory problems
  Case 24: 52 yo female with headache, vomiting, and fever
  Case 25: 75 yo hospitalized woman with confusion
  Case 26: 58 yo man with altered mental status

- **Neurology Online Lectures - See Blackboard**
- **Online Case Conference: Thursday 3PM or 4PM. Students will be assigned a 3 PM or 4 PM time slot. See Blackboard.**

**Internal Medicine Month 3:**

- **Med-U**
  
  **SIMPLE**
  Case 31: 40 yo man with knee pain
  Case 32: 39 yo woman with joint pain
  Case 34: 55 yo man with acute low back pain
  Case 35: 35 yo female with three weeks of fever

- **Rheumatology Online Lectures - See Blackboard**
- **Online Case Conference: Thursday 3PM or 4PM. Students will be assigned a 3 PM or 4 PM time slot. See Blackboard.**

**Reading Assignments:**

- Joint National Committee on Prevention, Detection, Evaluation, and Treatment of High Blood Pressure-7 (JNC-7) (Can be found online)
- JNC-8 (Can be found online)
- UpToDate: *Obesity, Weight loss, and Cardiovascular Disease*, Jackson, MD and Rubenfire, MD Oct. 2012
- UpToDate: *Treatment of Acute Decompensated Heart Failure: Components of Therapy*, Colucci, MD, April 2013
- UpToDate: *Treatment of Acute Decompensated Heart Failure: General Considerations*, Colucci, MD, April 2013
- UpToDate: *Anemia in the Older Adult*, Price, MD and Schirer, MD
- American Heart Association, 2013 Guidelines for the Early Treatment of Patients with Acute Ischemic Stroke.
- American Thyroid Association/ American Association of Clinical Endocrinologists, Clinical Guidelines for Hypothyroidism in Adults 2012

**Internal Medicine Case Conferences (on-line)**

- **Participation**
  
  The Internal Medicine Case Conferences are interactive on-line conferences. You are expected to participate while you are
Recommended Procedures List (to see or do)

**Basic Procedures**

Prior to graduation, medical students must obtain experience performing the basic yet essential procedures listed below. In addition, students must be able to define, describe and discuss these procedures, and understand their indications, risks, contraindications and benefits. As appropriate, medical students should be able to obtain written or verbal consent. All or most of these skills can be performed during an internal medicine clerkship.

- Venipuncture
- Blood Culture
- Arterial blood gas sampling and interpretation
- ECG performance and interpretation
- Nasogastric tube placement
- Urethral catheterization
- Peripheral intravenous catheter insertion
- Throat culture
- PAP smear
- Digital Rectal Exam
- Urine dip stick and interpretation
- Stool occult blood testing
- Subcutaneous injection
- Intramuscular injection
- Wound culture
- Dressing Change
- PPD placement

**Rheumatology Procedures**

The following advanced procedures may be performed by general internists and occasionally by a third-year or fourth-year medical student under their supervision. All students must be able to define, describe and discuss these procedures, and understand their indications, risks, contraindications, and benefits. Although residents and attending are responsible for obtaining written consent, none of the following procedures should commence without following appropriate protocols to obtain the consent, and students should participate in obtaining an informed consent. In addition students should gain experience writing procedure notes that document the indications, how the procedure was done, and complications.

- Arthrocentesis: elbow, knee or ankle and interpretation of aspirate studies
- Shoulder injections
- Tigger point injections
Core Topics of Study

The topics in **bold** in the table below indicate high yield subjects that are recommended to focus on if there is not time to study in depth on all subjects listed.

<table>
<thead>
<tr>
<th>Core Rheumatology Out-Patient:</th>
<th>Core Rheumatology In-Patient:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Osteoarthritis</td>
<td>Systemic Lupus Erythematosus</td>
</tr>
<tr>
<td>Rheumatoid Arthritis</td>
<td>Lupus Nephritis</td>
</tr>
<tr>
<td>Seronegative Spondyloarthropaties</td>
<td>Lupus Cerebritis</td>
</tr>
<tr>
<td>Systemic Lupus Erythematosus</td>
<td>CNS vasculitis</td>
</tr>
<tr>
<td>Polymyositis</td>
<td>Vasculitis: Large Medium and small vessel</td>
</tr>
<tr>
<td>Dermatomyositis</td>
<td>Polyarteritis Nodusum</td>
</tr>
<tr>
<td>Inclusion Body Myositis</td>
<td>Granulomatosis with Polyangiitis</td>
</tr>
<tr>
<td>Fibromyalgia</td>
<td>Microscopic Polyangiitis</td>
</tr>
<tr>
<td>Polymyalgia Rheumatica</td>
<td>Acute Gout</td>
</tr>
<tr>
<td>Gout – Acute and Chronic</td>
<td>Monoarticular arthritis</td>
</tr>
<tr>
<td>Calcium Pyrophosphate Dihydrate</td>
<td>Septic Arthritis</td>
</tr>
<tr>
<td>__Deposition disease</td>
<td>HIV related arthritis</td>
</tr>
<tr>
<td>SJogren’s Syndrome</td>
<td>Polymyositis</td>
</tr>
<tr>
<td>Systemic Sclerosis</td>
<td>Dermatomyositis</td>
</tr>
<tr>
<td>Granulomatosis with Polyangiitis</td>
<td>Fever of unknown origin</td>
</tr>
<tr>
<td>Microscopic Polyangiitis</td>
<td>Leukocytoclastic Vasculitis</td>
</tr>
<tr>
<td>Takayasu Arteritis</td>
<td>Giant Cell Arteritis</td>
</tr>
<tr>
<td>Giant Cell Arteritis</td>
<td>Antiphospholipid Antibody Syndrome</td>
</tr>
<tr>
<td>Osteoporosis</td>
<td></td>
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<tr>
<td>Back Pain</td>
<td></td>
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<tr>
<td>Shoulder Impingement Syndrome</td>
<td></td>
</tr>
<tr>
<td>Carpal Tunnel Syndrome</td>
<td></td>
</tr>
<tr>
<td>Antiphospholipid Antibody Syndrome</td>
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</table>

Specific Core Clinical Competencies and specific objectives for the majority of the above problems can be found the CDIM and SGIM Core Curriculum clerkship guide available at the SGIM website:

http://www.im.org/p/cm/lid/fid=385
Clinical Faculty

Students are assigned to specific credentialed clinical faculty/preceptors at their core clinical site.

<table>
<thead>
<tr>
<th>Pomona</th>
<th>Lebanon</th>
</tr>
</thead>
<tbody>
<tr>
<td>Katrina Platt, D.O. Clerkship Director for Internal Medicine</td>
<td>Katherine Fisher, DO, Clerkship Director for Internal Medicine and Director for Clinical Education</td>
</tr>
<tr>
<td>Assistant Professor of Internal Medicine</td>
<td>Assistant Professor of Internal Medicine</td>
</tr>
<tr>
<td>Appointments available by email at <a href="mailto:kplatt@westernu.edu">kplatt@westernu.edu</a></td>
<td>Appointments available by email at <a href="mailto:kfisher@westernu.edu">kfisher@westernu.edu</a></td>
</tr>
</tbody>
</table>

Instructional Methods

Scheduled rotation time will be used for supervised patient care, case presentations (onsite and online) and independent studying. You will be required to complete on-line modules as part of your requirement to successfully pass the rotation. You will also be required to review current guidelines on evidence based medicine posted on the ACP website.

Texts and Media

Required Textbook:

1. Harrison’s Principle of Internal Medicine, 18th Ed. (Access Medicine): A gold standard internal medicine book that connects pathophysiology to a patient’s presentation. It also provides a complete narrative to subspecialty areas of medicine and their diseases while providing context to all the topics.


Required Media:

1. Access Smart Medicine. Sign up as a student member of ACP (free) and obtain Smart Medicine at no cost [www.acponline.org](http://www.acponline.org). Smart Medicine is quick reference to many conditions, which is very easy to use. It also gives you original articles or guidelines, which demonstrates the evidence behind management recommendations.

2. UpToDate (free for students through WesternU): Uptodate is a well done review of various medical conditions, which is easily searchable.

Optional Textbooks: For additional references

2. Bates’ Guide to Physical Examination & History Taking, 8th Ed. Bickley, et al. (Lippincott Williams & Wilkins)


7. Histology: A text and atlas, by Ross (Lippincott)

8. Lippincott’s Illustrated Reviews, Biochemistry, 4th edition, edited by Champe and Harvey


10. Mandell, Douglas, and Bennett's Principles and Practice of Infectious Diseases, 7th ed.

11. The Developing Human: clinically oriented embryology, 8th edition by Moore and Prasad

12. Robbins and Cotran Pathologic Basis of Disease, 8th ed. Kumar et al

13. DiGiovanna: Osteopathic Approach to Diagnosis and Treatment


Recommended downloads for handheld devices:

- Epocrates
- Medscape
- PubSearch
- Medical Calc
- AHRQ ePSS

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.

**Rotation Format, Evaluation, Grading and Student Feedback**

Additional information is located in the Clinical Education Manual at:

http://www.westernu.edu/bin/ime/cem-2014.pdf

**Rotation Schedule**

Each site will provide students with a schedule on their first day of the rotation. If not provided please ask and have a clear understanding as to the expectations. These schedules are rarely available prior to the start of the rotation. It is solely your responsibility to read and understand all information provided to you by the site. Some sites have additional requirements above and beyond those set forth by the College of Osteopathic Medicine.

**Evaluation/Grading**

Grading for your clerkship will be calculated according to the Clinical Education Manual http://www.westernu.edu/bin/ime/cem-2014.pdf. However, completion of the rotation will also depend on completion of the ECM 5/IM quizzes, which corresponds to your clerkship schedule. So, if you are taking two month of IM clerkships in your block of rotations, please complete the assignments and quizzes for those two months. If you are in IM3, complete one month of your ECM assignments and ECM5/IM quiz. In addition, attendance for the online case conference is mandatory for the completion of your IM Clerkship.
Please note, your attending/preceptor’s evaluation is based on, but not limited to the following:

- Communication skills regarding patients
- Care provided to assigned patients
- Attendance and participation at conferences, morning reports lectures and meetings
- Demonstration of library references on patients
- Completion and accuracy of paperwork on patients (Histories and Physicals, progress notes, treatment plans, presentations, hand-outs, etc.)
- Interaction with attendings, residents, students, medical staff, nursing and ancillary personnel
- General knowledge base and knowledge applied to specific patients
- Motivation in the learning process
- Overall performance, participation, enthusiasm to learn, and effort to improve
- Mid-rotation grades should be given by the intern/resident/attending. The final grade should be given/reviewed with the student on the last day of the rotation.

General Policies

**Policy on Disability Accommodations:** To obtain academic accommodations for this rotation, students with disabilities should contact the Center for Disability Issues and the Health Professions and the system coordinator within ten days of the beginning of the system. Disability Services can be reached at 909.469.5380.


**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.
<table>
<thead>
<tr>
<th>WU INSTITUTIONAL OUTCOMES</th>
<th>Health Professional Education</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Critical Thinking</td>
<td>The graduate should be able to identify and solve problems that require the integration of multiple contexts when performing patient care.</td>
</tr>
<tr>
<td>2 Breadth and Depth of Knowledge in the Discipline/Clinical Competence</td>
<td>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.</td>
</tr>
<tr>
<td>3 Interpersonal Communication Skills</td>
<td>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.</td>
</tr>
<tr>
<td>4 Collaboration Skills</td>
<td>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.</td>
</tr>
<tr>
<td>5 Ethical and Moral Decision Making Skills</td>
<td>The graduate should be able to perform the highest quality of care, governed by ethical principles, integrity, honesty and compassion.</td>
</tr>
<tr>
<td>6 Life Long Learning</td>
<td>The graduate should be able to engage in life-long, self-directed learning to validate continued competence in practice.</td>
</tr>
<tr>
<td>7 Evidence-Based Practice</td>
<td>The graduate should be able to utilize research and evidence-based practice and apply relevant findings to the care of patients.</td>
</tr>
<tr>
<td>8 Humanistic Practice</td>
<td>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.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>COMP/AOA CORE COMPETENCIES</th>
<th>Competency: Osteopathic Medical Students are part of an educational continuum that leads to residency and the curriculum provides the foundation for the following outcomes;</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Osteopathic Philosophy and Osteopathic Manipulative Medicine</td>
<td>Graduates 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.</td>
</tr>
<tr>
<td>2 Medical Knowledge</td>
<td>Graduates 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.</td>
</tr>
</tbody>
</table>
Graduates must demonstrate the ability to effectively treat patients, provide medical care that incorporates the osteopathic philosophy, patient empathy, awareness of behavioral issues, the incorporation of preventative medicine, and health promotion.

Graduates 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.

Graduates 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. Please note that professionalism is an integral part of the career of a physician. Clinical sites do have the right to fail a student or remove them from rotation due to deficits in professionalism.

Graduates 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.

Graduates 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.

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