Clinical Learner Objectives:

At the end of the 6-week Psychiatry Clerkship, medical students will be able to:

1. Summarize the basic mechanisms of action, common side effects and indications for drugs within each of the major classes of psychotropic medication.
2. Describe the roles of neurotransmitters in the major psychiatric disorders and their significance in treatment.
3. Summarize the unique factors essential to evaluation of individuals at both ends of the age spectrum (children/adolescents and elderly patients) and identify the psychiatric disorders most commonly seen in each cohort.
4. Demonstrate knowledge re: appropriate clinical management for individuals with the major psychiatric illnesses (DSM-IV Axis I).
5. Discuss the primary ethical/legal issues that may arise during the course of treatment for individuals with serious, persistent psychiatric illnesses.
6. Describe symptoms of the most common mood, anxiety and psychotic disorders, and discuss the laboratory and other diagnostic tests that should be ordered when considering the various diagnoses/underlying etiologies within these categories.
7. Discuss the rationale for utilizing various forms of psychotherapy, behavioral modification and/or (other) alternative medical approaches in treating individuals with psychiatric illnesses and/or emotional problems.
8. Summarize the process of evaluation and treatment of individuals with sexual dysfunction/paraphillias.
9. Describe maladaptive traits and interpersonal patterns that typify personality disorders, and discuss strategies utilized in treating individuals with these problems.
10. Obtain a complete psychiatric history, identify relevant signs and symptoms, perform a complete mental status examination, formulate an appropriate differential diagnosis and summarize the information gained in a concise manner, both in written form and verbally.
11. Identify, clinically evaluate, and treat the neuropsychiatric consequences of substance abuse and dependence.
12. Develop a biopsychosocial formulation based on a clinical evaluation of an individual with a psychiatric illness and explain how it is relevant to treatment planning.
13. Collect and synthesize information from patients and communicate with them in a manner that is culturally sensitive and appropriate to their “worldview” and facilitates the formation of a therapeutic alliance.

15. All students participating on this clerkship will meet or exceed the institutional standards for professional behaviors as evidenced by:

- Adhering to the dress code consistent with clerkship standards.
- Being punctual for all educational experiences (i.e. seminars, clinics, inpatient rounds, small group sessions, case conferences, exams).
- Completing all educational assignments and fulfilling responsibilities on time.
- Displaying honesty in all interactions and situations.
- Contributing to an atmosphere conducive to learning and committing to advance scientific knowledge.
- Establishing and maintaining appropriate boundaries in all learning situations.
- Using professional language and being mindful of the environments in which clinical issues should and should not be discussed.
- Establishing effective rapport.
- Being respectful at all times and with all parties involved.
- Resolving conflict in a manner that respects the dignity of every person involved.
- Respecting the diversity of race, gender, religion, sexual orientation, age, disability and socioeconomic status encountered in the practice of medicine.
- Exhibiting humanism in all interactions.
- Protecting patient confidentiality.
- Being aware of and adapting to differences, including those related to culture and medical literacy, among individual patients.
- Recognizing personal limitations and seeking appropriate help when needed.
- Accepting constructive feedback and making changes accordingly.
- Exhibiting independent and self-directed learning skills.

16. Discuss common ethical challenges faced by physicians caring for patients with psychiatric illness, including: Duty to Warn, Patient Autonomy considering Autonomy and forced medications, Informed Consent and risk benefit considerations, Competency, and Nonmalficence.

17. Complete Clinical Ethics Consultation note on a psychiatric patient, to be evaluated by the Clerkship Director.

18. Describe the resources available for guidance in ethical challenges encountered in the care of patients with psychiatric illness.

**Required Clinical Experiences**

To help learners achieve these goals, requirements for both patient type (diagnostic category) and student level of involvement have been established. These clinical experiences will be supplemented by required reading, clinical case conferences, intranet modules, seminars and informal teaching sessions with attending and resident physicians, all of which will improve each student’s ability to diagnose and manage individuals with psychiatric illnesses.
Patient type

During this clerkship, students are required to encounter patients in the following diagnostic categories, which provide the core of the psychiatry clerkship experience. Experiences in all diagnostic categories below (with the exception of the last two) are considered essential and are, therefore, required. The majority of students will see patients in both inpatient and ambulatory settings, and all attempts are made to insure that each student has a broad and balanced experience.

Because of the sensitive nature of medical records in psychiatric practice, students are instructed to enter only the last two digits of each patient’s medical record number (MRN) to help ensure patient privacy. Students must log all patient encounters in a timely manner, and logs are monitored by both the clerkship director and coordinator in order to ensure timeliness and adequate clinical exposure. Each individual patient should be entered only once, unless there are comorbid psychiatric diagnoses that are actively being addressed. In that case, the same patient should be entered into the log (with the same last two digits of the MRN) again, but under the appropriate diagnostic category and with the second diagnosis. Comorbid diagnoses may also be entered as a secondary diagnosis for a single patient.

<table>
<thead>
<tr>
<th>Diagnostic category</th>
<th>Number of pts. to be seen</th>
<th>Comments/Explanation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mood disorders</td>
<td>3</td>
<td>At least one patient with Major Depressive Disorder and one with Bipolar I Disorder</td>
</tr>
<tr>
<td>Anxiety disorders</td>
<td>2</td>
<td>Can be comorbid diagnosis on Axis I (but must be a focus of treatment and must then be logged as a secondary diagnosis)</td>
</tr>
<tr>
<td>Psychotic disorders</td>
<td>2</td>
<td>At least one patient with Schizophrenia</td>
</tr>
<tr>
<td>Psychiatric disorders in childhood and adolescence</td>
<td>1</td>
<td>e.g., ADHD, Conduct Disorder, Pervasive Developmental Disorder, etc.</td>
</tr>
<tr>
<td>Psychiatric disorders in elderly</td>
<td>2</td>
<td>At least one patient with Dementia</td>
</tr>
<tr>
<td>Primarily non-psychiatric medical illnesses (with psychiatric manifestations)</td>
<td>2</td>
<td>e.g., Delirium, Parkinson’s Disease, Multiple Sclerosis, etc.</td>
</tr>
<tr>
<td>Personality disorders</td>
<td>(2)</td>
<td>Recommended, but not required. Can be comorbid diagnosis on Axis II (but must then be logged as a secondary diagnosis)</td>
</tr>
<tr>
<td>Substance use disorders</td>
<td>(2)</td>
<td>Recommended, but not required. Can be a comorbid diagnosis on Axis I (but must include active treatment and must then be logged as a secondary diagnosis)</td>
</tr>
</tbody>
</table>
Level of Involvement

In addition to seeing patients in the diagnostic categories listed above, the manner in which students are engaged in each encounter is also an important factor in helping students achieve the objectives for this clerkship. The level of involvement is likely to include various types of interaction with patients and the health care team and should be monitored to ensure a complete educational experience. Levels of involvement will be indicated for each patient encounter logged, thereby documenting not only the primary diagnosis/diagnoses for the patients seen, but also the student’s level of personal responsibility in their care. The logs will be reviewed mid-block to ensure that students have the desired range of experiences in both inpatient and/or outpatient settings.

The level of involvement during patient encounters will be logged using the following categories:

- Independently gathered historical information
- Observed patient interview
- Independently performed physical/mental status exam
- Observed physical exam
- Presented patient case
- Recorded patient note
- Opportunity to discuss laboratory or test results
- Opportunity to offer and discuss differential diagnosis
- Opportunity to offer and discuss management options
- Observed procedure

Other Clerkship Experiences

In addition to the required clinical experiences (patient type and level of involvement), successful completion of the clerkship requires student participation in a variety of additional experiences. These experiences are coordinated through the Department of Psychiatry and include:

- Mid-block formative feedback concerning individual progress during the 6-week block, to be initiated by the attending.
- Appropriate use of time made available for independent, self-directed learning.
- Attendance at and active participation in all scheduled conferences including:
  1. Department of Psychiatry Grand Rounds (required) and all Neurology Grand Rounds (recommended, but should not interfere with scheduled/clinical activities at the assigned clerkship site). Thursday, 12:00 noon to 1:00 p.m., Health Education Building, University of Toledo Health Science Campus, Room 105.
  2. Clinical Case Conference (required). Friday, 10:30 a.m. – 12:00 noon. Please see specific schedule for location.
3. Didactic Seminar (required). Friday, 1:00 p.m. – 5:00 p.m. Please see specific schedule for location.
4. Scheduled educational activities specific to individual clerkship sites (e.g. trip to Bittersweet Farms, etc.). Please check your clerkship site schedule specific to that assignment.
5. Psychiatry Clerkship Debriefing with the clerkship director and/or coordinator to ensure continuous improvement in the quality of the educational experiences. Please see the Evaluation/Exam schedule for date and time.
6. NBME Psychiatry Subject Exam, Friday of your final day of this clerkship, 12:30 p.m., Health Education Building, University of Toledo Health Science Campus, Room 100.

- Completion of UT Intranet-based educational modules as required prior to each week’s didactic seminar series.
- Successful completion of the quiz administered at the conclusion of each didactic seminar series.