Global Health – Shanghai, China Elective Curriculum

Title of Clerkship: Global Health – Chinese Health Care System Practice & Management Elective Clerkship

Elective Type: Fourth-Year Elective Clerkship

Department(s): Emergency Medicine

International Department/Clerkship:
- Traditional Chinese Medicine
- Emergency Medicine/Critical Care
- Public Health
- General Surgery & Surgical Sub-specialties
- Internal Medicine & Medical Specialties

Clerkship Site: Shanghai, China

Course Number: GLHL 756

Blocks available: Potentially, Blocks 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, but students must first check availability with The Office of Global Health, then get additional necessary approvals PRIOR TO enrolling. Please see “Special Requirements” section below.

Number of students per block: Four maximum

UT Faculty: Kris Brickman, M.D.

International Faculty: Dr. Gao Zhen (gaozhen79@msn.com) International Clerkship Coordinator, Shanghai First Peoples Hospital
Dr. Rui-Lan Wang (wangyusun@hotmail.com) Assistant Director of Emergency Department/Assistant Clerkship Coordinator
Dr. Kang-Long Yu (yukanglo@online.sh.cn) Director of Emergency Department and Critical Care
Dr. Xiao-Feng Zhu, Director of Medical Education and student evaluations

Elective Description/Requirements:

This elective clerkship will enable fourth-year medical students to gain four weeks of clinical experience in both inpatient and outpatient clinical settings at First Peoples Hospital in Shanghai, China. The students will live in a dormitory/apartment on the hospital campus throughout their experience in Shanghai, China.
Students will be working with and supervised by Attending physicians in a variety of specialties that may include Emergency Medicine, Internal Medicine, General Surgery, Critical Care, Infectious Disease and other related sub-specialties. The student will be expected to manage a variety of clinical disease entities both medical and surgical. Specifically the student will learn to integrate their knowledge and concept of medical care within the Chinese medical system and learn to manage these problems that they have significant familiarity as well as those that are unique to China. These disease entities and medical conditions will include, but are not limited to; trauma and acute surgical disease, oncology, cardiology/acute coronary disease, pulmonary disease/acute infectious disease entities, acute neurology emergencies, gastrointestinal disorders, endocrinology and renal/urologic disorders.

The student will also be expected to develop knowledge and understanding of traditional Chinese medicine and how this is woven within the fabric of the evolution of Western medicine in Chinese health care.

**Length of Clerkship:** Four Weeks, including approximately four days (total) traveling to and from Shanghai, China.

**Links to EPOs:**

**Educational Course Objectives (ECOs):**

| K12, K13, K14, K15, K16, S8, S9, P6, P7 | 1. Describe the institutional mission of First Peoples Hospital and relate it to the breadth and depth of medical care provided. Include the size of the catchment area served by this tertiary care hospital. |
| K3, K6, K7, K8, K9, K10, K12, K13, K14, K15, S2, S8, S9, S10, S11, P5, P6, P7 | 2. Discuss the impact of the three leading types of cancer on (a) the local, urban population served by First Peoples Hospital, (b) prevalence throughout China, and (c) the population in rural villages near Shanghai. Include prevalence, societal productivity / economic impact, mortality and any major public health initiatives currently underway to address the underlying etiologies or access to treatment. |
| K3, K4, K5, K6, K7, K8, K12, K13, K14, K15, K16, S7, S8, S9, S10, S11, P3, P6, P7 | 3. Compare and contrast the inpatient clinical and laboratory facilities at The University of Toledo Medical Center (UTMC) and First Peoples Hospital. Include the factors that make each a leader in regional provision of tertiary medical care. |
| K1, K2, K3, K4, K5, K6, K7, K8, K9, K10, K11, K12, K13, K14, K15, S1, S2, S3, | 4. Discuss the clinical assessment, diagnostic testing and recommended treatment of an individual brought to First Peoples Hospital’s Emergency Department with end-stage kidney failure. Include the various factors to be considered in the allocation of potentially scarce clinical resources. |
| S4, S5, S6, S7, S8, S9, S10, S11, P1, P2, P3, P4, P5, P6, P7 | 5. Discuss the similarities and differences between delivery of emergency clinical care at UTMC and First Peoples Hospital. Explain the degree to which physicians have autonomy in deciding which course of treatment to pursue, as well as the impact of an individual's ability to pay (for medical services) on the type of treatment provided? |
| K9, K10, K11, K12, K13, K14, K15, K16, S2, P1, P2, P3, P4, P5, P6, P7 | 6. Describe the three most common infectious diseases seen at First Peoples Hospital and the pathogenesis, differential diagnosis, assessment and recommended treatment for each. Include similarities and differences in diagnostic assessment and treatment of the most common infections encountered at UTMC. Discuss how the concept of "public health" influences treatment decisions at both institutions. |
| K12, K13, K14, K15, K16, S8, S9, S11, P6, P7 | 7. Compare the "typical" worldview of someone from Shanghai, China with that of someone born and raised in Toledo, Ohio. Discuss differences in the understanding of "health and wellness" vs. "disease and illness", and explain how these differences impact the delivery of medical care in both locations. |
| K3, K9, K10, K11, K12, K13, K16, S1, S2, S9, P1, P2, P5, P6 | 8. Describe the cultural differences in the physician/patient relationship in China compared to the United States and outline the medical ethics issues that face China that may interfere with optimal overall patient care. Incorporate both patient and physician perception so the rapidly changing health care landscape as it relates to these medical ethics issues. |
| K5, K6, K7, K10 K11, K13, K14, K15, S2, S7, S8, S11, P3, P7 | 9. Identify the similarities of the Chinese and American health care systems as well as the disparities that currently exist. Define the obstacles that exist that may limit health care development in selected areas of deficiency. |

**Professionalism:** UT COM students will meet or exceed the institutional standards for professionalism as stated in the current Educational Program Objectives (EPOs) and the current Educational Course Objectives (ECOs) for the sponsoring departments.

**Instructional Methods:**
- Case write-ups
- Clinical case presentations / discussions
- Diagnostic tests – use / interpretation
• Independent study
• Inpatient rounds
• Interpretation of lab data
• Mentored clinical practice
• Teaching rounds

Evaluation Methods Employed:
• Attendance
• Case presentation
• Case write-up
• Clinical log
• Faculty observation and assessment of clinical skills
• Narrative
• Reflective paper
• Self-assessment

Prerequisites: Successful completion of all third-year required clerkships

Clerkship Director: Kris Brickman, M.D.

Clerkship Coordinator: Pamela Woznicki
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  Email: Pamela.Woznicki@utoledo.edu

Special Requirements: Students participating in this elective will need to fulfill ALL requirements set forth by the UT COM International Travel Committee and gain approval from that body (a) PRIOR TO enrolling in this elective, and (b) at least four months prior to anticipated departure from the U.S.

Each student will be responsible for securing funding for his / her own air transportation, entry visa to China, exit fees and other costs associated with travel between the U.S. and China. Costs associated with transportation, food and lodging will be borne by the student or student sponsor.

While the language spoken in Shanghai is Chinese, key medical and administrative personnel at First Peoples Hospital will speak English fluently with UT COM students.

Students will have access to telephone service through International cell phone that will be provided to the student for their rotation. Internet access will be available in Shanghai and students are advised to take their own laptops with them for this rotation. All costs and expenses though for telephone usage, long distance service and internet use will be the responsibility of the student.
A formal orientation will be provided through the Office of Global Health on the Health Science Campus. Students will be required to attend these orientation sessions to gain an understanding of their rotation, the cultural issues of China and the similarities and differences in clinical practice as it pertains to First Peoples Hospital and their specific rotation. Video-conferencing (e.g. via Skype) with key medical and institutional leaders from First Peoples Hospital will occur as necessary prior to the commencement of travel to complete this orientation process. There will be weekly contact with students and the Office of Global Health while all students are on International rotations abroad. Discussions with the International liaison in Shanghai and the University of Toledo coordinator in the Office of Global Health will occur at least twice monthly to review the students rotation. Any obstacles/complications, to update progress report on the attainment of the appropriate goals and objectives of this experience.

AAMC Hot Topics Addressed in this Elective Clerkship:

**General Hot Topics**
- Biostatistics
- Clinical pathology
- Clinical problem solving / decision making
- Communication skills
- Community health
- Cultural diversity / multi-cultural medicine
- End-of-life care
- Epidemiology / population-based medicine
- Evidence-based medicine
- Family violence / abuse
- Geriatrics
- Health disparities
- Health care financing
- Health care systems
- Human development / life cycle
- Human sexuality
- Medical ethics
- Medical socioeconomics
- Nutrition
- Occupational health / medicine
- Pain management
- Palliative care
- Patient health education
- Prevention and health maintenance / preventive medicine
- Rehabilitation / care of disabled
• Substance abuse
• Women's health

**Hot Topics Related to Clinical Prevention and Population Health**
• Counseling for health risk reduction
• Disease screening tests
• Environmental health
• Health determinants
• Health policy development processes
• Health services financing
• Health surveillance strategies
• Health care workforce
• Immunization
• Public health systems

**Additional Hot Topics**
• Health literacy
• Racial / ethnic demographics of illness