I. Interpersonal and Communication Skills

**Verbal Communication: Written**

The student demonstrates competency in using the written language effectively in:

1. Medical record documentation in the continuing care clinic, on docent rotation, and in family medicine.
2. Papers, laboratory reports, journals, essays, exercise, and online discussions assigned in courses and rotations.
3. Essay examinations in medical ethics.
4. Official correspondence including e-mail and petitions.

The student offers constructive criticism when completing course evaluations.

**Verbal Communication: Oral**

The student demonstrates competency in using oral language effectively when:

1. Communicating with standardized patients and with patients and their families in clinical settings, specifically in continuing care clinic and on family medicine and docent rotation.
2. Communicating with senior partners, peers, faculty, staff, and other health care professionals.
3. Presenting information about patients.
4. Giving talks and presentations.
5. Functioning as a junior partner and member of a health care team, especially their docent team.

- The student uses patient-centered and doctor-centered interviewing skills when taking a targeted history in the continuity clinic/family medicine and a complete history in docent rotation/family medicine.
- The student knows and can demonstrate in simulations advanced interpersonal and communication techniques when interacting with angry patients, caring for diverse patients, promoting adherence to physician advice, delivering “bad news,” and eliciting information from patients about sensitive topics such as intimate partner violence, sexuality, spirituality, chemical abuse.

**Nonverbal Communication**

- The student demonstrates effective nonverbal communication skills with faculty, staff, other health care professionals, patients, and students (especially those on their docent team and in study groups).
- The student demonstrates effective listening skills with faculty, staff, other health care professionals, patients, and students (especially those on their docent team and in study groups).
Doctor-patient relationship

- The student is able to establish a positive relationship with patients in order to enhance patient adherence and satisfaction.

II. Medical Knowledge including Applications of Basic Science & “Problem-Solving”

- The student knows and understands important facts and concepts in biostatistics, immunology, microbiology, pathology, and pharmacology and is able to solve problems/answering questions posed within each of these disciplines.

- The student knows and understands key neuroscience facts and concepts that are related to health and disease and can use them in solving problems/answering questions within the discipline.

- The student knows and understands, and is able to solve problems/answers questions using advanced facts and concepts in anatomy, behavioral/social sciences, biochemistry, genetics, and physiology.

- The student applies facts and concepts of anatomy, behavioral/social sciences, biochemistry, biostatistics, genetics, immunology, microbiology, neurosciences, pathology, pharmacology, and physiology to the overall care of the patient (especially in docent rotation, continuing care clinic, and family medicine).

- The student applies basic facts and concepts from the clinical sciences, internal and family medicine to patients they have been assigned to see in continuing care clinic, docent rotation, and the family medicine rotation.

- As part of routine history-taking the student elicits relevant non-biological factors such as, psychological, cultural, social, and economic factors in the formulation of a problem list and management plan.

III. Practice-based Learning and Improvement including Lifelong Learning & Self-Appraisal

The student exhibits behaviors indicative of self-awareness through a process of self-reflection about their cognitive, emotional, and social abilities:

1. The student is able to identify real situations of stress and his/her responses to them and practices personal techniques for relaxation and time management.

2. The student can respond to constructive criticism, accept help from others to address his/her deficiencies, and modify behavior accordingly.

3. The student can describe techniques to balance their academic obligations, clinical responsibilities and their personal needs and knows of resources they can access to achieve that balance.

4. The student is reflective about him or herself in a group and team context.
• The student identifies his/her learning needs in order to achieve the learning objectives of Year 3 and 4 courses and rotations, plans a program to meet those needs, determines how well they have met them, and decides what further learning issues they need to address.

• The student demonstrates specific lifelong learning skills including comprehension of basic medical literature, critical appraisal of straightforward studies using the scientific method, formulation of questions for literature searches, and performance of straightforward literature searches to locate information relevant to addressing clinical problems.

IV. Systems-based Practice

• In continuing care clinic, on docent rotation, and in the family medicine rotation, the student takes personal responsibility for identifying non-biological factors as part of routine history-taking; discusses them with patients, assesses their needs, and matches those needs to appropriate community resources.

• The student turns to various members of the health care team, such as PharmD’s, clinical medical librarians, social workers, interpreters, and nurses, for assistance in the comprehensive care of patients and their families.

• The student assists patients and their families to deal with system complexities in the continuing care clinic, docent rotation, and family medicine.

• The student analyzes and describes how public policy related to health, health care funding and finance, delivery systems, and health care reform impacts the practice of medicine in continuing care clinic, on docent rotation, and in the family medicine rotation.

• The student suggests cost effective options in helping to care for patients in continuing care clinic, on docent rotation, and in the family medicine rotation.

V. Patient Care including history-taking, physical exams, procedures, diagnosis, management, prevention

Performs a comprehensive history and physical examination of patients in selected clinical settings.

The student is able to perform a comprehensive history and physical examination of patients in inpatient settings (docent rotation and family medicine rotation) as well as targeted histories and physical examinations in continuing care clinic and family medicine rotation.

Performs and interprets the following physical examination components:

1. Vital signs
2. Head and Face examination
3. Eye, ears, nose, mouth and pharynx examination
4. Neck examination
5. Back and posterior chest examination
6. Heart examination
7. Lung examination
8. Neck vessels examination
9. Abdominal examination
10. Musculoskeletal examination
11. Extremities/Lymphatics examination
12. Neurologic examination
13. Pelvic examination
14. Male genital examination
15. Rectal examination with hemoccult test
16. Breast examination
17. Well child examination
18. Well newborn examination
19. Mini mental status examination

Performs a complete health risk assessment.

Performs the following procedures competently:

1. Basic CPR
2. Venipuncture
3. Gram-stain
4. Stool occult blood
5. Point of Care Urinalysis
6. Urine pregnancy test
7. Finger stick glucose determination
8. Peak expiratory flow rate
9. Vaginal smear wet prep

The student observes the following procedures:

1. Cervical examination
2. Circumcision
3. Spontaneous vaginal delivery and/or C-section
4. Delivery of the placenta
5. Fetal monitoring
6. FHT detection by Doppler
7. Newborn evaluation
8. Postpartum evaluation

The student observes/or knows the indications, complications, and limitations of:

1. Thoracentesis
2. Arterial puncture for blood gases
3. Abdominal paracentesis

The student interprets basic clinical procedures, laboratory and diagnostic tests accurately.

The student knows the basics of interpretation of plain extremity x-ray studies, chest x-ray, and abdominal x-ray.
The student is able to interpret basic clinical procedures and laboratory and diagnostic tests accurately as listed:

1. Blood chemistry
2. Laboratory Microscopic Urinalysis
3. Hematology studies
4. Hemoccult test
5. Urine pregnancy test

The student observes and is familiar with some of the more complex or specialized lab and diagnostic tests.

The student interprets and uses history and physical examination data and results of selected diagnostic studies to state the most likely diagnosis for patients seen in selected clinical settings.

**The student develops management plans for straightforward patient problems:**

1. The student recommends appropriate preventive care for patients in the outpatient setting.
2. The student provides basic education to patients with common straightforward problems.

**VI. Professionalism**

**Professionalism**

- The student identifies the elements of professional behavior and can explain the meaning of each element: **respect, compassion and empathy, altruism, honesty, responsibility, and excellence.**

  **Respect:** The student shows courteous regard for patients, students, faculty, and members of the health care team and acknowledges their views. In doing so, the student takes into account different value systems and life styles of people with whom they interact through his/her actions or behavior.

  **Compassion and Empathy:** The student interacts with patients, patients’ families, and members of the health care team in an appropriately empathic and compassionate fashion.

  **Altruism:** The student recognizes how potential conflicts between his/her own needs and the legitimate needs of patients, docent group members, and study group members might be resolved and can discuss a rationale for alternative resolutions.

  **Honesty:** The student is honest in all aspects of coursework for the baccalaureate-MD degree and takes responsibility for his/her errors in the patient care setting after discussion with supervisors.

  **Responsibility:** The student carries through on assignments and other responsibilities; attends required courses and rotations; arrives promptly for meetings, classes, rounds, and clinics; keeps scheduled appointments; accepts personal responsibility for group projects and for assigned patients; and completes course evaluations in a timely and thoughtful fashion.
Excellence: The student seeks out opportunities to learn, tries to excel in their coursework, and contributes to the docent team and other small groups by sharing knowledge and skills, raising questions, and finding answers.

- The student can give a specific example of how each of the elements of professionalism applies to Year 3 and Year 4 coursework for the baccalaureate and MD degrees and actively demonstrates each element in his/her behavior in the classroom, clinical settings, and co-curricular activities.

- The student advocates for quality care of their patients in continuing care clinic, on docent rotation, and in the family medicine rotation.

Medical Ethics

- The student is able to discuss in detail the major principles of medical ethics.

- He/she can apply ethical concepts and use moral reasoning when presented with typical ethical dilemmas in medicine.

- The student is able to recognize ethical issues in medical practice.

- The student can confront his/her own ethics and values as they relate to the practice of medicine.

- The student develops a deeper appreciation for their personal beliefs by presenting and defending their position in small group discussions.