Objectives for Graduation

Objectives for graduation have a number of important functions. They provide:

1. A description of the basic skills, knowledge, and behavior expected of graduates of the School of Medicine;
2. A basis for evaluation of student performance;
3. A guideline for developing and implementing the curriculum (see also Curriculum Guidelines);
4. A basis for evaluation of the curriculum;

I. THE PATIENT ENCOUNTER – CLINICAL SKILLS

When the student encounters a patient with any presenting complaint or complaints as defined by the objectives for each curricular segment and as outlined in Appendices A and B, the student should be able to:

A. Obtain an accurate medical history.
B. Perform a complete and appropriately focused organ system specific examination.
C. Accurately interpret patient responses and physical findings.
D. Develop a problem list that includes the consideration of all psychosocial and social variables. The differential diagnosis should emphasize all likely causes of each problem.
E. Develop a plan for any necessary further investigations to confirm the diagnosis. The following should be considered:
   a. Availability, reliability, and validity of the requested tests or procedures. In doing so, students must:
      i. Appropriately use sensitivity, specificity, and predictive values of the test.
      ii. Understand the importance of the prevalence of disease in interpretation of tests.
      iii. Estimate pre-test and post-test probability of disease.
   b. Risks and complications;
   c. Discomfort and inconvenience to the patient;
   d. Cost and its impact on the patient and society;
   e. The patient’s wishes and values.
F. Accurately interpret the results of all tests ordered and modify the problem list and the differential diagnoses accordingly.
G. Design and implement a comprehensive management plan for the patient. The following should be considered:
   a. Therapeutic goals;
   b. Informed consent, including benefits, risks, and treatment alternatives of the proposed interventions;
   c. Discomfort and inconvenience to the patient;
   d. The patient’s goals, expectations, and ability to adhere to treatment proposals;
e. The patient’s cultural and religious values;
f. The indications, contraindications, and side effects of therapies involved;
g. Available resources (including patient, family, health care system and community);
h. Legal and ethical requirements;
i. The structure and function of health care delivery and payment systems, and how payments for medical care affect decision making and care provision.

H. Consult other physicians and/or other health care professionals to enhance the quality of care.
I. Arrange for follow-up on all problems identified.
J. Monitor the effectiveness of therapy and modify when indicated.
K. Recognize patients with immediate life-threatening conditions and institute initial therapy.
L. Identify and design plans to manage situations that require on-going support: chronic, complex illness; chronic pain; permanent disability; death and dying.
M. Provide appropriate health maintenance, health counseling, and disease-prevention strategies.
N. Comply with infection control guidelines and the use of universal precautions.
O. Perform common technical procedures.

II. KNOWLEDGE

Students should be highly knowledgeable about medicine to provide the best possible care for patients; they should demonstrate:

A. An understanding of the importance of the scientific foundation upon which medicine is based and a recognition of the need for lifelong learning and the scholarly practice of medicine.
B. Knowledge of the normal structure and function of the body and each of its major organ systems.
C. Knowledge of the molecular, biochemical, and cellular mechanisms that are important in maintaining the body’s homeostasis.
D. Knowledge of the altered structure and function of the body and its major organ systems that are seen in various diseases and conditions and patient presentations (Appendices A and B).
E. Knowledge of the social and behavioral factors that influence patients’ responses to health and disease. Such factors include:
   a. Specific cultural, ethnic, and societal beliefs and behaviors;
   b. Patients’ age, education, finances, and family resources;
   c. Alternative or complementary medical practices within patients’ communities.
F. Knowledge of contemporary health care policy and practice issues.
G. Knowledge of the capabilities and limitations of information technology and the management of knowledge, including:
   a. Searching, collecting, organizing, and interpreting health and biomedical information from different databases and sources;
   b. Retrieving patient-specific information from a clinical data system;
c. Using information and communication technology to assist in diagnostic, therapeutic, and preventive measures, and for surveillance and monitoring health status;

d. Maintaining practice records for analysis and improvement.

H. Knowledge of the rational use, risks, and benefits of medical therapies, including pharmacotherapeutic agents.

III. COMMUNICATION/TEAM SKILLS

Students should be able to communicate effectively with individuals and health care teams to ensure delivery of high quality patient care. In all health care settings, the students should be able to:

A. Communicate with patients, families, caregivers, and medical translators with respect, sensitivity, and compassion in a culturally sensitive and jargon-free manner.

B. Provide a well-organized, concise, and thorough oral presentation of a patient’s problem.

C. Produce proper written documentation to facilitate patient care, including initial history and physical examination, follow-up notes, physician orders, and prescriptions.

D. Function as an effective member of a health care team through cooperative interactions with health and social service professionals, families, and other caregivers.

IV. COMMUNITY/PUBLIC HEALTH/PREVENTIVE MEDICINE

Students should be highly knowledgeable about community and public health to provide the best possible care for populations. Students should be able to:

A. Articulate the importance of public health measures in promoting health and wellness and preventing disease.

B. Describe the health status of a defined population and identify subgroups whose health status differs significantly from the population at large.

C. Define specific public health problems in terms of incidence, prevalence, risk factors, and socioeconomic impact.

D. Define the roles for the physician in relation to other service providers and community agencies in addressing the health problem.

E. Apply the principles of preventive medicine, including screening and case findings, for individual patients and populations.

F. Treat patients of all races and cultures with respect, striving to understand how spirituality and cultural beliefs impact the encounter, treatment, and health care in general.

G. Know when and how to report incidents of domestic violence including: child, elder, and spousal abuse.

H. Describe other legal and regulatory reporting responsibilities.

V. SELF-ASSESSMENT/PROFESSIONAL DEVELOPMENT SKILLS

Students should be able to assess their own skills, those of their peers, and those of the programs in which they participate. This assessment should provide thoughtful, appropriate, and constructive feedback for professional development. To enhance life-
long learning, continuous improvement, and professional development, students should be able to:

A. Evaluate their own skills, practice patterns, fund of knowledge and communication abilities. In areas that are lacking, the student should have the ability to commit him or herself to making a change and seeking appropriate resources and guidance to do so.

B. Evaluate the practice patterns and communication skills of their peers and offer meaningful formative feedback.

C. Participate in continuing educational programs and activities to improve skills and be able to evaluate program effectiveness with meaningful feedback.

D. Access information related to practice and professional development, critically analyze their own practice habits and outcomes, and learn and incorporate new skills.

E. Critically analyze the medical literature using the principles of evidence-based medicine, including:
   a. Understanding the statistical methods basic to clinical trials (relative risk, relative risk reduction, absolute risk, absolute risk reduction, and number needed to treat or harm).
   b. Understanding the statistical methods basic to case control and observational studies (2 x 2 tables, odds ratio and confidence intervals).

VI. PROFESSIONAL AND ETHICAL BEHAVIOR

The student should accept the responsibilities of the profession of medicine, which expects the highest level of competence with regard to knowledge, skills, attitudes, and behavior in the care of patients and/or the generation and dissemination of knowledge. The student should be able to demonstrate in daily activities:

A. Treatment of the patient as a person, not a disease, and understanding that the patient is a person with values, goals, and concerns which must be respected and which may influence how the patient responds to his or her disease and its management.

B. Respect of the patient’s rights and privacy and maintaining confidentiality of patient information.

C. Interaction with the patient in a way that will allow the patient to feel he/she has received medical care in a caring, compassionate, and humane manner.

D. Self-motivation; self-discipline; and personal integrity, including both honesty and reliability.

E. A professional image in manner, dress, grooming, speech, and interpersonal relationships that is consistent with the medical profession’s accepted contemporary standards in the community.

F. Recognition of personal limitations, whether they are intellectual, physical, or emotional, and work with or adapt to them.

G. Recognition of the importance of personal and family roles and the need to balance them with professional demands.

H. Provision of patient care without allowing personal biases to interfere.

I. Caring for individuals who are members of underserved populations.

J. Application of principles that govern critical decision-making to common ethical dilemmas faced by physicians.
Objectives for Graduation

Appendix A (Must be seen and documented by students)

A1. abdominal mass
A2. abdominal pain
A3. abnormal ECG
A4. abnormal serum lipids
A5. acid Base disorders
A6. acute illness in an infant/child
A7. allergic reactions
A8. anemia/pallor
A9. back pain
A10. breast disorders
A11. chest discomfort/angina pectoris
A12. contraception
A13. dementia/memory disturbances
A14. diarrhea/constipation
A15. dizziness/vertigo
A16. difficulty swallowing
A17. domestic violence
A18. dyspnea/breathlessness
A19. ear pain
A20. electrolyte disorders
A21. eye redness/pain
A22. falls
A23. fatigue
A24. fever/chills
A25. fractures/dislocations/joint injuries
A26. gait disturbances
A27. gastrointestinal bleeding
A28. genetic/hereditary concerns
A29. headache
A30. hearing loss/deafness
A31. hemoptysis
A32. hyperglycemia/diabetes mellitus
A33. hypertension
A34. immunocompromise/immunodeficiency
A35. impaired consciousness
A36. jaundice (adult & infant)
A37. joint pain, non-traumatic
A38. leukocytosis/leukopenia
A39. lymphadenopathy
A40. menstrual cycle – abnormal
A41. mood disorders
A42. murmur/abnormal heart sounds
A43. numbness/tingling/paresthesias
A44. painful limb
A45. panic/anxiety
A46. pap abnormality
A47. pelvic mass
A48. pelvic pain/dysmenorrhea
A49. periodic health examination/growth & development
A50. pregnancy/delivery
A51. Preventive Health Care/Cancer screening/STD screening
A52. psychotic patient/disordered thought
A53. renal failure: acute or chronic
A54. rhinosinusitis (rhinorrhea/sneezing/nasal congestion/sinus congestion)
A55. scrotal mass/pain
A56. seizures (epilepsy)
A57. sexual dysfunction
A58. shock/hypotension
A59. Skin lesions
A60. sleep disturbances
A61. sore throat
A62. speech and language abnormalities/dysphonia/hoarseness
A63. substance abuse/drug addiction/withdrawal
A64. suicidal behavior/prevention
A65. syncope/pre-syncope/loss of consciousness
A66. thromboembolic disorders
A67. trauma
A68. urinary disorder/incontinence/incomplete emptying/frequency
A69. vaginal bleeding-abnormal
A70. vaginal/penile discharge
A71. visual disturbance/loss
A72. vomiting/nausea
A73. weakness/paralysis
A74. weight gain/obesity
A75. weight loss
A76. wheezing/cough
Objectives for Graduation

Appendix B (Must be known by students)

B1. abdominal distention
B2. abnormal liver function tests
B3. abnormalities of white blood cells
B4. attention deficit/learning disorder/school failure
B5. behavior disorder
B6. bleeding tendency/bruising
B7. burns
B8. cardiac arrest/respiratory arrest
B9. cyanosis/hypoxia
B10. depressed newborn
B11. development disorder/development delay
B12. diplopia
B13. eating disorders
B14. edema/anasarca/ascites
B15. failure to thrive
B16. fetal distress/non-reassuring fetal status
B17. hair and nail disorders
B18. head injuries/brain death/transplant donation
B19. hematemesis
B20. hematuria
B21. hirsutism and virilization
B22. infertility
B23. involuntary movement disorders/tic disorders
B24. issues of bad news/dying patients
B25. limp/pain in lower extremity in children
B26. menopause
B27. mouth/oral disorders
B28. neck mass/goiter
B29. personality disorders
B30. poisoning
B31. polycythemia/elevated hemoglobin
B32. pregnancy loss
B33. prematurity
B34. prolapse/pelvic relaxation
B35. proteinuria
B36. pruritus
B37. pupil abnormalities
B38. sexual maturation
B39. sexually concerned patient, gender identity disorder
B40. sudden infant death syndrome
B41. spinal injuries
B42. splenomegaly
B43. strabismus and/or amblyopia
B44. tall stature, short stature
B45. tinnitus
B46. torticollis