

It is the sole responsibility of the student to check AIMS for schedule updates on a daily basis!

**Northeast Ohio Medical University
College of Medicine**

**Emergency Medicine Clerkship, 83007
Course Syllabus
AY 2019-20**

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COURSE DESCRIPTION

General Description

The Northeast Ohio Medical University M3 Emergency Medicine Clerkship is a continuous three-week clinical rotation focused on the undifferentiated patient in the acute care setting. This core curriculum is designed to provide all M3 students with an introduction to the basic knowledge, skills and attitudes of emergency medicine that are essential to the fundamental education of all physicians. Students, working with residents and emergency medicine physicians, will encounter a wide range of patients, presenting complaints and levels of acuity. Learning is primarily through direct patient care experience and bedside teaching, supplemented with lectures, directed readings and simulation. The clerkship is designed so ensure that all students, regardless of their intended career path, have a broad exposure to emergency medicine.

Course Type

This course is solely a College of Medicine Course for M3 students taking place at medical facilities under the supervision of clinical site supervisors and their designated staff.

Course Enrollment Requirements

Successful completion of M1 and M2 years of study.

Trainings	Screenings	Immunizations
HIPPA BLS OSHA ACLS Responsible Conduct of Research Human Subjects Research	Criminal Background Check Toxicology Screen TB Test	Hepatitis B, MMR, Tdap, Varicella (required upon matriculation) Flu shot

Student Assignment

Students are assigned to one of the ten hospital sites. All sites offer the benefits of a teaching hospital with outstanding attending faculty. The clerkship teaching sites are bound by shared learning objectives as well as a common curriculum. Teaching sites are closely monitored to ensure equity. The depth and scope of clinical encounters during the three-week clerkship are comparable among sites as evidenced by student feedback, clerkship evaluations and the Clinical Skills Experience Portfolio.

Work Hours

Students will work an average of 45 hours per week for each of the 3 weeks. The schedule will encompass all shifts, including 2 week-end shifts. The schedule will consist of a minimum of nine shifts of at least eight hours each, conferences and videos.

Daily schedules will be distributed by sites no later than Day 1 of each rotation. Some sites may send schedules prior to arrival for the first day.

COURSE ADMINISTRATION

Dr. Rebecca Merrill is the Clinical Experiential Director for the Emergency Medicine Clerkship

and in collaboration with Dr. David Sperling, Senior Director of Clinical Experiential Learning, and Dr. Susan Nofziger, Director of M3 Clinical Experiences, provides oversight for the clerkship. In her role as Clinical Experiential Director, Dr. Merrill is responsible for ensuring that implementation of the Emergency Medicine Clerkship curriculum is consistent across all teaching sites.



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Course Coordinator(s)

David Ruble, M.S.

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Hospital Sites and Clerkship Site Directors

The facilities for clinical instruction for the Emergency Medicine Clerkship are those institutions and residency training programs that have committed themselves to the Northeast Ohio Medical University College of Medicine for participation in the undergraduate training of the NEOMED students.

Site Directors are designated at each hospital that provides a clerkship experience. Responsibilities of the Clerkship Site Director include tasks and responsibilities in three categories: 1) curricular, 2) assessment and 3) administrative.



Thomas Kinney, M.D.
Aultman Hospital



Kristin Drogell, M.D.
Cleveland Clinic Akron
General



David J. Ledrick, M.D.
Mercy Health, St. Vincent
Medical Center (Toledo)



Chad Donley, M.D.
Mercy Health, St. Elizabeth
Youngstown Hospital



Lauren Fredrickson, M.D.
Salem Regional Medical
Center



Donald L. Norris II, MD
Summa Health System, Akron
City Hospital



Arnold Feltoon, M.D.
UH Portage Medical Center



John Pleshinger, M.D.
Union Hospital



Carla O'Day, M.D.
St. Vincent Charity Medical
Center
(Cleveland)

Orientation

All students are required to watch the orientation videos prior to start of the clerkship. Please refer to the Emergency Medicine folder on AIMS M3 Clerkships Site.

The clerkship begins with orientation focusing on clerkship goals and objectives, student responsibilities, schedules and assessment methods. Students will be provided information about relevant hospital policies and procedures, personnel contact information, meal allowances (if provided) and parking.

First Day Reporting

In addition to the information provided below, students may receive first-day reporting information directly from their clinical sites. If that information differs from the information provided below, please follow the instructions provided directly from the sites.

Where and When to Report on First Day of Clerkship		
You will need your student ID, white coat and license plate number.		
Cleveland Clinic Akron General	8:30 a.m.	Medical Education Office located in the Ground Floor Annex to Main Hospital. At 9:00 a.m, report to Department of Emergency Medicine, Room 1036. <i>Note: Park in employee Lot A across from main entrance to hospital.</i>
Aultman Hospital	7:15 a.m.	Aultman Medical Education, First Floor, Education Building (adjacent to the parking deck; do not enter the hospital). Ask for Ms. Marie Hoyle (330.363.5434). <i>Note: Park in the Seventh Street visitors parking deck.</i>
Mercy Health St. Elizabeth Youngstown Hospital	8:30 a.m.	Undergraduate Medical Education, 2 South. You may park in the free lot behind the Outpatient Rehabilitation Center on Caroline Avenue. Caroline Avenue is directly across from the Belmont Avenue hospital entrance. Go down Caroline Street and turn left into the parking lot. Please park in the back of the lot on the higher level. Enter St. Elizabeth

		Youngstown Hospital at the Belmont Avenue entrance. Take elevator B to the second floor, turn left towards the medical library.
Mercy Health, St. Vincent Medical Center (Toledo)		2213 Cherry St. ACC Building 1st floor – GME area; Toledo, OH 43608
Salem Regional Medical Center		Contact Dr. Lauren Fredrickson 1-2 weeks prior to start of your rotation at lauren.fredrickson@salemregional.com to arrange orientation.
Summa Health System - Akron City Hospital	7:00 a.m.	Students should report to Summa, Akron City Hospital, Medical Education at 7:00 a.m. to get a badge and arrive in the Emergency Department Waiting area to be picked up by 7:30 a.m.
Trumbull Regional Medical Center	8:00 a.m.	Meet in the lobby of Trumbull Regional Medical Center. Information will be emailed to you prior to the start of the clerkship.
UH Portage Medical Center		Please contact Dr. Arnold Feltoon at arnold.feltoon@uhhospitals.org and be sure to cc Jami Englehart Jami.Englehart@UHhospitals.org 1 week prior to start of your rotation. They will respond to you with reporting instructions for your first day. Please note that all physician emails are confidential and should not be shared. You will also need to obtain an ID badge from the human resources department during your first day if you did not stop up and do this prior. (Hours 7:30 – 4, M-F)
Union Hospital	8:00 a.m.	Union Hospital, Dover, Ohio. Main ED Registration Desk. Ask for Dr. Pleshinger.
St. Vincent Charity Medical Center (Cleveland)	8:30 a.m.	Office of Graduate Medical Education located on the 3rd floor of the West Building – office number 323W, 338W or 342W; 2351 East 22nd Street. Note: 1) Park in the East 22nd Street Visitor’s Lot directly across from the main entrance to the hospital.

		<p>Parking will be validated only if you park in this visitors' lot. At orientation, you will be issued a complimentary parking pass for the remainder of the rotation. 2) Report to the front desk of the hospital or the security booth and tell them that you have an appointment with the Office of Graduate Medical Education. Coordinator will e-mail you paperwork that needs completed and sent back prior to start of rotation.</p>
<p>Western Reserve Hospital</p>	<p>8:00 a.m.</p>	<p>Park in visitor lot "E" and enter through the back Entrance 1. Follow the hallway to the left toward the Medical Education Suite which is located on the 1st floor near Auditorium 1. You will then go to the 4th floor computer training room to have a short EMR training session. We will then have a short orientation and provide your name badge/scrubs, etc. Please bring a personal check with you to orientation. We request that visiting students pay a \$25 deposit. Make checks out to Western Reserve Hospital. We'll destroy the check when you complete the rotation and return your ID badge and scrubs you might have used on rotation. In preparation for your paperwork, please know your license plate number (perhaps take a picture so you have it on your phone). If you plan to use a locker at WRH, please be sure to bring your own lock.</p>

COURSE GOALS

Course Sequence and Links with College of Medicine Program Courses

This course immerses students in the clinical setting after their first two foundational years of medical education. This course introduces students to multiple medical disciplines in the clinical and simulated setting which prepares them for selecting electives in their M4 year.

Clerkship Goals

The student will have the opportunity to learn the approach to undifferentiated, acutely ill or acutely injured patients who present to the emergency department for care. The overall goal of the Emergency Medicine Clerkship is the mastery of the basic core competencies that are essential for practice as a competent physician focused on the AAMC competencies. The Emergency Medicine Clerkship will focus on these competencies in the context of the delivery of emergency care regardless of the student's career focus, and include the following:

- recognition of the role of the emergency physician in the health care delivery system
- development of an organized and systematic approach to the care of the acute patient who presents to the emergency department with an undifferentiated chief complaint
- acquisition of a body of knowledge and clinical reasoning skills necessary for the formation of an initial differential diagnosis and treatment plan focused on immediate life threats
- development of medical decision-making skills necessary to integrate limited assessment data findings and determine the sick vs non-sick, stable vs non-stable patient and to implement a plan for treatment
- development of clinical reasoning skills necessary to identify the actual reason for the patient's presentation to the emergency department
- ability to deliver emergent care in a team-based environment
- ability to perform minor and life-saving procedures under supervision or with simulation
- integration of concepts of emergency medicine into personal and professional growth as a physician

Core Clerkship Learner Objectives

Upon completion of the three-week Emergency Medicine Clerkship, the student will be able to do the following to the satisfaction of the supervising emergency medicine faculty:

- I. Recognize patients with immediately life threatening conditions regardless of etiology and institute appropriate initial therapy
 - collect an appropriate complaint-directed and focused history
 - perform an accurate complaint-directed and focused physical examination
 - generate a reasonable initial and subsequent differential diagnosis and problem list
 - identify and prioritize a patient's problems
 - perform routine technical procedures
- II. Communicate effectively, both orally and in writing, with patients, patients' families, colleagues, and other members of the health care team with whom emergency medicine physicians must exchange information while carrying out their responsibilities
 - present a case in a clear, organized and efficient manner
 - document patient care information in the medical record

- III. Demonstrate an understanding of the use and interpretation of commonly ordered diagnostic studies
 - use the concepts of pre-test probabilities and diagnostic testing
 - interpret the results of commonly used diagnostic procedures
 - formulate a basic plan for diagnostic evaluation
- IV. Develop and assist with implementation of appropriate case management plans
 - outline an initial course of management for patients with serious conditions requiring critical care
 - formulate plans for patients who presents with multiple undifferentiated problems
- V. Establish effective physician/patient relationships
 - establish rapport with patients
 - use vocabulary appropriate for patients
 - assess patients' understanding
 - use appropriate listening skills
 - show empathy and compassion
 - demonstrate respect for the individuality, values and rights of all patients
- VI. Demonstrate understanding of the principles of health promotion, disease prevention and patient education
 - list health risk factors for patients based on age, gender, medical history and social history
 - counsel patients about signs and serious effects of harmful personal behaviors and habits
- VII. Further develop his/her professional role as a physician
 - demonstrate self-directed learning and self-assessment
 - attend promptly and prepare for all activities
 - show respect for patient confidentiality
 - show respect for patients, colleagues, peers and ancillary health care workers
 - behave in a morally and ethically appropriate manner

Instructional Methods/Learning Strategies

Each clerkship rotation will be composed of a combination of clinical activity and related materials, didactics, simulation, reading as well as a variety of other activities.

Clinical activity: The number of shifts will be no fewer than nine [9] and include days, evenings, nights and weekends, and span all three weeks of the clerkship.

Simulation: Opportunities to learn through simulation may occur locally, at NEOMED, at ABIA or at any of the NEOMED emergency medicine residencies.

Didactics: Participation in curricula from both NEOMED emergency medicine residencies and the NEOMED pediatric emergency medicine fellowship is encouraged.

Reading: Is required as assigned from the Emergency Medicine Clerkship Primer, and encouraged from one of the two main emergency medicine textbooks (Rosen or Tintinalli). **See Appendix A for the required reading list.** A good text for student purchase is EM Secrets.

Additional Activities: Extra activities that involve emergency medicine sub-specialties such as EMS ride-along, hazmat, poison center, hyperbaric or palliative care, are encouraged.

A variety of learning strategies will be used during the clerkship to help you achieve your goals. Strategies may include but are not limited to:

- Patient encounters in the emergency department
- Small group discussions
- Conferences and lectures
- Workshops
- Core educational lecture videos
- Textbooks
- Simulation
-

Student Conferences

Clerkship students will meet regularly with the Clerkship Site Director (or designated faculty) to discuss recent patient encounters. These sessions provide structured time for students and a faculty leader to discuss:

- diagnosis and management of acute care problems and patients,
- principles and processes of patient care in emergency medicine,
- care of a patient in the context of his/her family, and
- community health issues and resources.

You are expected to help lead the discussions and share information with your peers. These and other problem-based learning principles will be engaged to aid in the development of lifelong learning skills. You are expected to come to each conference prepared to:

- give a clinical presentation based on a recent patient encounter, including specific information on any use of alternative medicine,
- discuss clinical reasoning, differential diagnoses and decision making related to that patient and symptoms, and
- report on knowledge gained from preparatory research for the discussion.

You may be given an assignment for the next session.

Tips for Student Conferences:

- Relax and enjoy the process!
- Make sure your topic is different from what other students are presenting.
- Research your area of interest and demonstrate preparation.

- Present information that is practical. How will the information help you and others better assess and/or manage the patient and his/her problem?
- Present in a creative manner. Use handouts when available. Provide a copy of articles for everyone.
- Make the presentation interesting. Address what is important/pertinent.
- Involve your audience. Keep their interest by giving them something to do.
- Define learning issues – something you want to know more about.
- Follow up on learning issues with the group.
- Ask questions of your peers when they are presenting. Be an active listener during presentations.

Pathway Articulation

Not applicable.

Academic Integrated Management System (AIMS)

The on-line learning and collaboration system, Academic Integrated Management System (AIMS) will be used to post all education materials including, but not limited to, course syllabus, schedules, assignments, and instructional materials including any core curriculum lecture videos.

It is the sole responsibility of the student to check for course updates on a daily basis.

COURSE GRADE

Final Grade Determination

The Emergency Medicine Clerkship is a pass/fail clerkship with no honors option.

Assignment/Assessment	% of Final Grade	Grade Criteria	Type of Feedback	Date Scheduled/Due
Final Grade Report Form <ul style="list-style-type: none"> • Patient Care • Interpersonal and Communication Skills • Knowledge for Practice • Practice-Based-Learning and Improvement • Systems-Based Practice • Professionalism • Interprofessional Collaboration 	100%	See overall Clerkships Course Guide including (1) behavioral anchors for each rating in each competency element and (2) the formula for final rating/grade	Rubric with Narrative Feedback	Feedback is recorded throughout the clerkship via student evaluation forms. The Clinical Grade will be generated at the conclusion of the course by the clerkship site director submitted for final review

Assignment/Assessment	% of Final Grade	Grade Criteria	Type of Feedback	Date Scheduled/Due
<ul style="list-style-type: none"> Personal and Professional Development 				and grade assignment to the Clinical Experience Director.
Clinical Skills Experience Portfolio (CSEP)	0%	Satisfactory completion	Checklist of required activities	Mid-course and end of rotation meeting with Site Director
Total Course	N/A			

Formative, Mid-course and End of Rotation Feedback

The Emergency Medicine Clerkship places emphasis on providing students with continuous feedback on their knowledge, skills and attitudes. Your final grade report form will reflect the feedback provided to you throughout the rotation. A mid-rotation meeting may be scheduled around the middle of week 2 for you to:

- discuss your performance based on the assessment forms completed by faculty during the week of the rotation and a self-assessment of your performance,
- review clinical progress via your Clinical Skills Experience Portfolio,
- plan activities for the week to match your learning objectives, and
- address any problems or concerns.

An end-of-rotation meeting will be scheduled in week 3 to:

- discuss your performance since mid-rotation,
- review your Clinical Skills Experience Portfolio,
- review clerkship objectives and your initial learning plan to assess if and how all objectives were met, and
- review your feedback forms.

Narrative Feedback

Summative feedback will be provided on the Final Grade Reporting Form by Site Directors

Patient Note

Prior to the end of the clerkship, select one of your patients, and write a patient note and submit it to your site director for critique.

Clinical Skill Experience Portfolio (CSEP)

The Emergency Medicine Clinical Skills Experience Portfolio (CSEP) is an electronic checklist of clinical experiences developed for the clerkship and designed for students to use to track their progress in developing knowledge and skill in the following areas:

- Diagnoses/Symptoms/Clinical Scenarios
- Physical Examinations
- Procedures/Technical Skills
- Additional Clinical Activities
- Additional Learning Activities

All items listed on the CSEP are required; i.e., students must document exposure to all of the listed experiences. Students are required to submit their CSEP electronically to the Clerkship Site Director for review at both the midpoint and the end of the clerkship. See Appendix A for a complete list of Emergency Medicine CSEP Requirements.

See instructions below for accessing and entering data into CSEP:

- Links to clerkship-specific content for each CSEP are posted on AIMS M3 Clerkship Site homepage. Follow the link for CSEP and enter your Banner ID number (excluding the @ character and initial zeros);
- Click the fields in which you wish to enter information. Please be sure to mark Patient Type, Setting and Level of Responsibility for each item;
- click “**Submit**” when you have finished.
- You do not need to put in your email address because you will receive a copy automatically whenever you submit.
- To send a copy of your CSEP to your Clerkship Site Director or preceptor, enter their e-mail address at the bottom of the form.
- You can return to the site as often as necessary throughout the rotation to update your entries. All previous entries will be preserved.

Course Remediation

Students should refer to the Course Guide for information related to course remediation.

Students who would like to access NEOMED resources available for academic support may contact the Learning Center at 330-325-6758, in the NEOMED Office of Student Affairs.

Remediation contracts may be signed by the Director of M3 Clinical Experience, however, if a student is referred to CAPP for academic or professionalism issues, the opportunity to remediate will be the decision of CAPP. Students referred to CAPP should continue with their academic

program; however, remediation opportunities cannot be approved until they are approved by CAPP.

COURSE TEXTBOOKS AND INSTRUCTIONAL RESOURCES

Required Textbooks and Resources

The following texts are required for the Emergency Medicine Clerkship:

Clerkship Directors in Emergency Medicine. (2008) Emergency Medicine Clerkship Primer. A Manual for Medical Students. Lansing, MI: Clerkship Directors in Emergency Medicine. Available at: http://www.saem.org/docs/students/em-clerkship-primer_0_0.pdf?sfvrsn=2 (last accessed June 5, 2019).*

Marx J.A., Hockengerger, R.S., Walls, R.M. (2014) Rosen's Emergency Medicine: Concepts and Clinical Practice, 8th ed. Philadelphia, PA: Saunders/Elsevier, Inc.

Tintinalli, J., Stapczynski J., Ma, O.J., Yealy D., Meckler G, Cline D. (2016) Tintinalli's Emergency Medicine: A Comprehensive Study Guide, 8th ed. New York: McGraw/Hill.

Markovchick, V., Pons, P., Bakes, K., Buchanan, J. (2015) Emergency Medicine Secrets, 6th ed. Elsevier.

*Primary reference

COURSE POLICIES

Students should refer to the Clerkship Guide for a full list of Clerkship Course Policies.

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Appendices

Appendix A. Reading List

You are required to read the following chapters, as assigned, from Emergency Medicine Clerkship Primer (Clerkship Directors in Emergency Medicine 2008). All readings should be completed by Wednesday or Monday, as indicated, in the week assigned.

- By Wednesday of Week 1
 - Chapter 1: Introduction to the Specialty of Emergency Medicine
 - Chapter 2: Introduction to the Emergency Medicine Clerkship
 - Chapter 4: Unique Educational Aspects of Emergency Medicine
 - Chapter 5: Differences Between the Emergency Department, the Office, and the Inpatient Setting
 - Chapter 6: Undifferentiated and Differentiated Patients
 - Chapter 7: Performing a Compliant-Directed Physical Examination
 - Chapter 8: Data-Gathering Skills
 - Chapter 9: Developing a Case-Specific Differential Diagnosis
 - Chapter 16: Enhancing Your Oral Presentation Skills
 - Chapter 22: How to Get the Most Out of Your Emergency Medicine Clerkship
 - Chapter 23: Introduction to the Core Competencies

- By Monday of Week 2
 - Chapter 10: Diagnostic Testing in the Emergency Department
 - Chapter 11: Developing Your Plan of Action
 - Chapter 12: Diagnosis: Is It Possible? Is It Necessary?
 - Chapter 13: Disposition of the Emergency Department Patient
 - Chapter 14: Discharge Instructions
 - Chapter 15: Documentation
 - Chapter 20: Procedural Skills

- By Monday of Week 3
 - Chapter 17: Interacting with Consultants and Primary Care Physicians
 - Chapter 18: Patient Satisfaction – Meeting Patients’ Expectations
 - Chapter 19: Providing Anticipatory Guidance

Appendix B. Emergency Medicine CSEP

M3 Clinical Skills Experience Portfolio (CSEP)

Clerkship Required Clinical Activities

Emergency Medicine

AY 2019-20

At what clinical site is your rotation?

Diagnoses/Symptoms/Clinical Scenarios

In all cases, active participation with real patients is strongly encouraged. Active participation means collecting the history and/or performing the physical exam and/or generating an assessment and plan and/or documenting the encounter and/or presenting the patient.

*Please choose all options that apply for each diagnosis, e.g., if you actively participate in the care of a real patient and complete an online case for a diagnosis, please mark both "patient" and "online case" under "patient type." **All students, at minimum through completion of an online case, must document experience with all diagnoses.** If "patient" is marked in the first column, please also complete the setting (hospitalized or not hospitalized) and level of responsibility (actively participated or observed).*

Abbreviations for the text and online resources

Aquifer IM Cases: Aquifer Internal Medicine Cases and DX Diagnostic Excellence

CDEM: Emergency Medicine Clerkship Primer: A Manual for Medical Students (Clerkship Directors in Emergency Medicine, 2008)

Textbook: Emergency Medicine Secrets, Vincent J. Markovchick, MD (6th Edition, 2016)

BatesVG: Bates' Visual Guide-Physical Examination

Bates' Guide: Bates' Guide to Physical Examination and History Taking

AIMS: Cases and Videos**Stanford 25:** The Stanford Medicine 25

	Patient Type		Setting		Level of Responsibility	
	Patient	Online Case	Hospitalized	Not hospitalized	Actively participated in care	Observed
<u>Abdominal pain</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>Acute coronary syndrome</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>Back pain</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>Bleeding (epistaxis/gastrointestinal/vaginal)</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>Cellulitis/rash</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>Chest pain</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>Congestive heart failure</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>Chronic obstructive pulmonary disease exacerbation</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>Dizziness/vertigo</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>Dyspnea</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>Fever</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>Gastroenteritis</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>Headache</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>Head injury</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>Pelvic Pain</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>Pneumonia</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>Psychiatric emergency (alcohol or drug crisis/depression/suicidal or homicidal ideation)</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>Rash</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>Syncope</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>TIA/stroke</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>Toxic ingestion</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>Upper or lower extremity pain</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>Upper respiratory tract infection/sinusitis/pharyngitis</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>Urinary tract infection</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Physical Exam

If "patient" is marked in the first column, please document the setting and level of responsibility.

	Patient Type		Setting		Level of Responsibility		
	Patient	Simulated patient	Hospitalized	Not hospitalized	Performed with supervision	Assisted	Observed
<u>Abdominal exam (PS)</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>Cardiovascular exam (PS)</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>Extremity exam (PS)</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>Neurologic exam (PS)</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>NIH Stroke Scale or Glasgow Coma Scale (PS)</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>Thoracic/Pulmonary exam (PS)</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional Clinical Activities

	Yes	No
Write and submit one <u>patient note</u> to clerkship site director <u>(PS)</u>	<input type="radio"/>	<input type="radio"/>
Review EKG with attending or resident	<input type="radio"/>	<input type="radio"/>
Review chest X-ray with attending or resident	<input type="radio"/>	<input type="radio"/>
Review musculoskeletal x-ray with attending or resident	<input type="radio"/>	<input type="radio"/>
Give an <u>assessment oriented patient presentation</u> to attending or resident	<input type="radio"/>	<input type="radio"/>
Observed by resident or attending doing the relevant parts of a history at least once	<input type="radio"/>	<input type="radio"/>
Observed by resident or attending doing a focused physical exam at least once	<input type="radio"/>	<input type="radio"/>

Additional Learning Activities

	Yes	No
Review clerkship goals in the syllabus.	<input type="radio"/>	<input type="radio"/>

	Yes	No
Clarify and submit rotation goals by end of Week One.	<input type="radio"/>	
Submit progress on personal goals by end of Week Three.	<input type="radio"/>	
Watch three online lecture videos on AIMS as outlined in syllabus - Principles of Emergency Medicine/Patient Approach, Acute Injury, Disasters.	<input type="radio"/>	
Read required chapters in Emergency Medicine Clerkship Primer (Clerkship Directors in Emergency Medicine 2008) as directed in syllabus and as needed to ensure familiarity with all diagnoses listed under "Diagnosis" section of CSEP.	<input type="radio"/>	
Active participation with at least 15 patients.	<input type="radio"/>	
Will have completed end-of-clerkship feedback survey by the deadline.	<input type="radio"/>	

Enter an e-mail address to send someone (e.g., site director) a copy of your log **in electronic form**.

You do not need to put in your email address because you will receive a copy automatically whenever you submit.

Note: Submission of the CSEP to the Clerkship Site Director between Monday and Friday of the final week of the clerkship **is a clerkship requirement**.

E-mail Recipient

Additional E-mail Recipient

With your submission of your CSEP, you attest to the accuracy and validity of its contents. Confabulated or misrepresented information is considered an Honor Code violation.

Submit