At the conclusion of the clerkship student will:

1. Be able to use the biopsychosocial model to understand psychiatric disorders
2. Be able to conduct all aspects of the mental status examination
3. Be capable of identifying and initiating appropriate medical psychiatric interventions for the major psychiatric illnesses as they present in primary medical care settings and,
4. Understand clinical psychiatry as a medical specialty.

In addition, students will be expected to master the following goals and objectives in six specific competency areas as outlined below:

**Patient Care (Problem Solving and Clinical Skills)**

Students are expected to provide patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health.

1. Conduct an adequate psychiatric interview, including skills in recognizing and categorizing psychological and behavioral phenomena as described in the psychiatric mental status examination
2. Engage a patient and establish rapport
3. Introduce and discuss sensitive material
4. Manage behavioral or emotional difficulties commonly encountered in the psychiatric interview
5. Perform a psychiatric diagnostic workup, to include:
   a. Acquiring and organizing the psychiatric history
   b. Performing the mental status and physical exam
   c. Making decisions regarding further diagnostic studies
6. Diagnose a patient based on clinical history and other information by the methodology of the multi axial format of DSM-IV-TR
7. Present a patient in a more complex biopsychosocial formulation
8. Develop and help execute an initial treatment plan for an inpatient
9. Record progressive care data (progress notes) using appropriate terminology and organization

**Medical Knowledge**

Students are expected to demonstrate knowledge of established and evolving biomedical, clinical and social sciences.

1. Describe the major psychiatric diagnoses as defined in DSM-IV-TR in the context of the complexities of clinical presentation which includes complex differential diagnoses, multiple stressors, complex psychosocial situations, and patient personality variables
2. Explain the range of psychiatric interventional therapeutics, specifically:
   a. Indications for and possible side effects and complications of somatic treatments including psychopharmacologic agents and electroconvulsive therapies
   b. Indications for and possible side effects and complications of psychotherapies including fundamentals of psychodynamic, behavioral and cognitive approaches
   c. Indications and appropriate selection for psychosocial interventions including decision and use of psychiatric hospitalization, case management, crisis intervention, social work, occupational therapy and vocational counseling
3. Identify a psychiatric emergency in the clinical setting, and describe the appropriate interventions in the primary care setting for immediate management or referral of the patient
4. List the indications for a psychiatric referral or psychiatric consultation, and derive an understanding of the concept of a psychiatric liaison

**Practice-Based Learning and Improvement**

Students are expected to investigate and evaluate their patient care practices by appraisal and assimilation of scientific evidence.

1. Formulate skills in assembling and integrating information relevant to patient care from multiple sources, including specialty information databases used in searches on psychiatric and psychological issues
2. Recognize how these skills are a base for lifelong learning

**Systems-Based Practice**

Students are expected to demonstrate an awareness of the larger context and system of health care and effectively call on system resources to provide optimal care.

1. Demonstrate respect for, and integrate the care of hospitalized psychiatric patients with all team members.
2. Demonstrate respect for, and integrate the care of patients in the outpatient setting with all team members.
3. Teach patients about their role and function in their family system, and assess their understanding of the family system in improvement or complication of psychopathology

**Interpersonal and Communication Skills**

Students are expected to effectively communicate and collaborate with patients, their families and health professionals.

1. Exhibit the ability to engage a patient in a psychotherapeutic relationship appropriate to psychiatric hospital care
2. Manage patients’ reactions that may include defensiveness or confusion
3. Recognize and manage personal reactions and responses to the patient that may detract from an appropriate professional relationship that may include excessive sympathy, anger, rejection, fear, or emphasis on interpersonal control

**Professionalism**

Students are expected to demonstrate a commitment to carrying out professional responsibilities, and to be responsive and compassionate.

1. Describe the details and reasons for extreme care of medical confidentiality in the psychiatric situation, and that such material is specifically identified for any release-of-information procedure
2. Demonstrate appropriate professional interpersonal boundaries in the context of the intense relationship issues which arise in acute psychiatric decompensation and other forms of psychopathology
3. Demonstrate the management of the appropriate engagement for a psychotherapeutic alliance, and the limits that such engagement must have for therapeutic effectiveness
4. Explain the application of basic ethical principals in psychiatric practices as they apply to:
   a. Involuntary commitment to psychiatric care
   b. Appropriate use and limits for restraint and/or seclusion
   c. The complex issue of the clinical and legal definition, and the assessment of competency (as it is defined in patient clinical situations)
The hierarchical relationship of ethical principles regarding autonomy, paternalism and safety of others

**IMPORTANT CONDITIONS**

**Complaints**

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<thead>
<tr>
<th>Complaint</th>
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<tbody>
<tr>
<td>Aggression</td>
<td>Losing weight</td>
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<tr>
<td>Alcohol abuse</td>
<td>Obese</td>
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<tr>
<td>Anxiety</td>
<td>Psychotic</td>
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<tr>
<td>Behavioral problems</td>
<td>Self-injurious</td>
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<tr>
<td>Chronic pain</td>
<td>Substance abuse (other than alcohol)</td>
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<tr>
<td>Depressed</td>
<td>Suicidal</td>
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**Diagnoses**

<table>
<thead>
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<tbody>
<tr>
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<td>Eating disorder</td>
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<tr>
<td>Alcohol abuse or Dependence</td>
<td>Mood disorder</td>
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<tr>
<td>Anxiety disorder (General anxiety/panic/OCD)</td>
<td>Personality disorder</td>
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<tr>
<td>Attention Deficit Hyperactivity Disorder</td>
<td>Post traumatic stress disorder</td>
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<td>Autistic disorder</td>
<td>Psychotic disorder</td>
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<tr>
<td>Delirium</td>
<td>Somatization disorder</td>
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<tr>
<td>Dementia</td>
<td>Substance abuse or dependence (other than alcohol)</td>
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