

# 2024-25 HEALS Course Objectives

# Table of Contents

Year One	2
Basecamp Course Objectives	.2
Foundations of Medical Science Course Objectives	.3
Early Authentic Clinical Experience (EACE) Component	
Foundations of Practice (FOP) Component Scientific Foundations of Medicine (SFM) Component	
Year Two	
Intersessions	_
Emergency Medicine Clerkship	.5
Family Medicine Clerkship	.6
Medicine Clerkship	.7
Neurology Clerkship	.9
Obstetrics & Gynecology Clerkship	.9
Pediatrics Clerkship	.9
Psychiatry Clerkship	10
Surgery Clerkship	11
Longitudinal Radiology	12
Year Three 1	13
Discovery Preparation	13
Discovery Course	13
Longitudinal Clinical Experience	13
Year Four	15
Capstone	15
HEALS Thread Objectives	16
Medical Ethics	
Medical & Health Humanities	
Structural Racism & Health Equity	16



### Year One

#### Approved by Preclerkship Curriculum Committee 07-23-2024 Approved by Medical Education Committee 08-21-2024

#### Basecamp Course Objectives

- 1. Describe the basic structure of the US medical system and explore patients' experiences with the medical system through narrative.
- 2. Define structural racism and identify examples of it in Los Angeles history.
- 3. Describe and value the role of physicians as patient and professional advocates within society especially for vulnerable patient populations.
- 4. Identify and describe the diverse communities' students will serve as members of the DGSOM and UCLA care teams.
- 5. Describe the role of medical student as an important member of the healthcare team.
- 6. Apply basic teaching skills as students embrace their role as educators for both peers and patients.
- 7. Describe the resources available at the DGSOM, in the greater UCLA and Los Angeles communities and identify areas of potential collaboration.
- 8. Describe the overall curricular structure and goals of a DGSOM education.
- 9. Name and identify ways to embody the values of the DGSOM community and cultural North Star.
- 10. Describe ways advising networks are critical to personal and professional development. Identify and begin to develop a personalized support and advising network.
- 11. Analyze and apply knowledge gained from self-reflection and personal inventories to inform coaching meetings in FOMS and including a set of 3-month goals.
- 12. Assess fundamental knowledge and acquire the necessary knowledge, skills and tools to succeed in Scientific Foundations of Medicine.
- 13. Assess fundamental knowledge and acquire the necessary knowledge, skills and tools to succeed in Foundations of Practice.
- 14. Acquire the necessary knowledge, skills, and tools to succeed in Early Authentic Clinical Experience.

#### Foundations of Medical Science Course Objectives

#### Early Authentic Clinical Experience (EACE) Component

- 1. Participate actively in an on-site, in-person clinical and/or community healthcare experience focused on history and physical examination skill building.
- 2. List the interprofessional healthcare providers at your EACE site, define their responsibilities and describe how they contribute to addressing the social and structural determinants of health & healthcare that patients, clients and/or the community face.
- 3. Demonstrate interpersonal and communication skills that foster a collaborate and respectful environment and that delivers care that is compassionate, trauma-informed, culturally humble, and nonjudgmental.
- 4. Explain how the social and structural determinants of health contribute to health and healthcare among the patients, clients, and communities your EACE site serves and identify and utilize resources to mitigate the effects.
- 5. Begin to employ a process of reflection to guide present and future behavior and to inform emerging professional values integration.

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#### Foundations of Practice (FOP) Component

- 1. Demonstrate a comprehensive, structured, and hypothesis-driven **history** through a patient interview, reviews of secondary sources, and reviews of medical records.
- 2. Demonstrate an appropriately-focused **physical examination** relevant to the purpose and setting of the patient encounter, integrating patient history, clinical knowledge, and clinical reasoning.
- 3. Demonstrate **Provider/Patient Interaction** skills during the history, physical examination, and patient counseling, through words, body language and active listening, that are caring and compassionate, nonjudgmental and unbiased, trauma informed, motivational and supportive, therapeutic and patient-centered.
- 4. Communicate, **in oral and written formats**, a complete, coherent, non-judgmental and accurate patient history and assessments with an appropriately-prioritized differential diagnosis and care plan based on data gathered.
- 5. Develop a means of **educating and counseling** patients, families and the public that is evidence-based, humanistic, culturally sensitive, ethical, and jargon-free.
- 6. Apply evidence-based medicine and clinical reasoning, including domains of data collection, problem representation, hypothesis generation, and data analysis to the development of comprehensive patient care plans with appropriate, justified therapeutic and diagnostic options.
- 7. Demonstrate the ethical use of health information technology and electronic medical record systems to gather, analyze, and synthesize relevant and accurate information and ensure clear communication.
- 8. Practice **teamwork** that is collaborative, **interprofessional**, and respectful of the role and value of individual healthcare team members.
- 9. Integrate **social and structural determinants of health** into the development of comprehensive patient care plans; identify biases and inequities that influence clinical reasoning and potential strategies (e.g., advocacy) to mitigate the impacts of social determinants of health in clinical care.

- 10. Demonstrate the basic operation of **POCUS** (point of care ultrasound) to perform diagnostic bedside examinations of the neck, heart, major blood vessels, lungs, abdomen, and musculoskeletal system, focusing on normal findings and beginning to recognize abnormal findings on POCUS.
- 11. Describe the principles of **humanities and biomedical ethics** and the foundational concepts used in ethical medicine practice (what are the different conceptions and theories of health, disease, illness, therapy, disability, autonomy, liberty, harm, justice, vulnerability, and bias in clinical, research, and social advocacy settings).
- 12. Demonstrate **professional development** with the skills needed to receive and give feedback for growth and improvement (e.g., self-reflection and assessment, self-directed learning, use of the ADAPT model, and adaptability), incorporating learning from coaching sessions and group interaction.

#### Scientific Foundations of Medicine (SFM) Component

- 1. Apply fundamental concepts and mechanisms from biomedical sciences in the context of medical conditions affecting one or more organ systems through one or more stages of life.
- 2. Identify anatomical and histological structures of the human body that are relevant to the practice of medicine and state their physiological functions.
- **3.** Efficiently obtain and critically appraise information related to medical practice from sources that include biomedical literature and databases.



### Year Two

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#### Intersessions

- 1. Explain the roles and expectations of medical students on the core clinical clerkships, as well as the policies, standards, and resources in place at DGSOM to promote student success, development, and wellbeing during the clinical years.
- 2. Demonstrate essential clinical skills and knowledge needed to provide appropriate and effective care on upcoming core clinical clerkships.
- **3.** Apply fundamental concepts in epidemiology and biostatistics to improve the interpretation of primary literature and inform evidence-based clinical practice.
- 4. Utilize problem representation, diagnostic schemas, and illness scripts to effectively reason through and solve clinical problems, while minimizing cognitive biases and diagnostic errors.
- 5. Utilize bioethical principles and reasoning to understand and navigate common ethical situations encountered in clinical medicine.
- 6. Employ strategies for effective communication and collaboration within the interprofessional team.
- 7. Discuss the effects of healthcare systems and finance on the practice of medicine.
- 8. Describe systems and employ best practices that support patient safety and quality improvement in the healthcare environment.
- 9. Discuss the impact that social determinants of health have on patient access to care and outcomes, as well as develop strategics that can be used to optimize care for individuals facing these challenges.
- **10.** Utilize humanities and narrative medicine education to cultivate deeper empathy, strengthen personal resilience and refine observation, communication, and clinical reasoning skills.
- **11.** Utilize feedback, critical reflection, goal setting, and coaching to promote identity formation, personal and professional development, resilience, and wellbeing during the clinical years.
- **12.** Formulate a plan to engage in a scholarly experience during upcoming DGSOM Discovery.

#### **Emergency Medicine Clerkship**

- 1. Demonstrate the approach to the undifferentiated patient in the Emergency Department (ED).
- 2. Recognize the clinical approach to an unstable patient, including the assessment and monitoring of airway, breathing and circulatory status, the purpose of establishing an IV, O2, and placing them on the monitor.
- 3. Perform focused history and physical examinations for ED patients and specifically for patients presenting with the chief complaints and diagnoses on the clerkship.
- 4. Document pertinent positives and negatives and list possible life-threatening illnesses for ED patients and specifically for patients presenting with the essential chief complaints/diagnoses.

- 5. Engage in effective teamwork in the ED by using closed loop communication with the primary nurse for your patients, communicating effectively with residents, attendings, consultants, and with other ED staff when indicated, and also assisting with procedures, and other needs for your patients or the department.
- 6. Demonstrate an understanding of how the ED functions in the context of the broader healthcare system including pre-hospital care, the function of the ED as the safety net, 24/7 care, challenges surrounding the uninsured/underinsured and how social determinants of health impact access and treatment/disposition plans.
- 7. Describe the indications and uses of common ED laboratory studies (i.e. CBC, BMP, coagulation studies, "liver function tests", cardiac enzymes, lactate) and emergent radiographic studies (US, X-ray, CT, MRI) and distinguish between emergent diagnostics and non-emergent diagnostics.
- **8.** Describe strategies for managing pain using common oral and parenteral medications in the ED.
- **9.** Describe the approach to a patient in cardiac arrest, differences in management of shockable and non-shockable rhythms, demonstrate high quality chest compressions, and how to perform manual defibrillation.
- **10.** Describe the clinical approach to a patient in each category of shock (Hypovolemic, cardiogenic, Distributive, Obstructive shock) and list the differential diagnosis.
- **11.** State the indications/contraindications/complications of basic procedures in the ED as well as the steps of procedural consent with reinforcement of the ethical underpinnings of medical consent (capacity, autonomy)
- **12.** Perform common ED procedures.
- **13.** Perform point of care ultrasound (POCUS) for common ED chief complaints/indications.
- **14.** Demonstrate an approach to Electrocardiogram (ECG) interpretation by systematically analyzing an ECG and appreciating a "normal ECG."
- **15.** Describe strategies for managing pain using common oral and parenteral medications and describe the use of common local analgesics for wound repair.
- **16.** Demonstrate ability to navigate the literature to find evidence-based answers to clinical questions.
- **17.** Describe a "medical screening exam" and highlight some of the legal requirements, ethical underpinnings, and nuances of some of the vulnerable populations that may require this exam.

#### Family Medicine Clerkship

- 1. Understand the role of the Family Physician in the health care system, as it pertains to:
  - a. Continuity and comprehensiveness of care.
  - **b.** Use of appropriate referrals.
  - c. Health promotion and disease prevention.
- 2. Understand the Family Physician's role in the community as a leader
  - **a.** In addressing health equity.
  - **b.** In coordinating various health care personnel in patient care.
- **3.** Encounter and learn management of common acute and chronic problems seen in an outpatient setting.
- 4. Demonstrate understanding of gender and age specific preventive health measures and

apply these skills in patient care when appropriate.

- 5. Demonstrate proficiency in obtaining a focused history, performing an appropriate physical exam, and presenting cases in a complete yet focused manner.
- 6. Assist in common clinic-based procedures.
- **7.** Develop strong communication skills to engage patients in shared decision-making and to ensure that care plans align with patient values and preferences.
- **8.** Account for structural determinants of health and other barriers to health when developing patient-focused management plans.
- **9.** Demonstrate cultural sensitivity and the ability to adapt care to meet the diverse cultural and linguistic needs of patients.
- **10.** Demonstrate awareness of the larger context and system of health care, including optimally coordinating care for all patients, including those facing barriers in access to care.
- **11.** Acquire proficiency in using healthcare technology and electronic health records for documentation, communication, and data analysis.
- **12.** Learn the basics of practicing cost effective care and considering the effects of the individual physician on the health care system.

#### Medicine Clerkship

#### Patient Care

- 1. Obtain a complete, accurate and relevant history.
- 2. Perform a clinically relevant, appropriately thorough physical exam.
- **3.** Develop and prioritize a differential diagnosis for the following chief complaints: Abdominal pain, altered mental status, chest pain, constipation/diarrhea, cough, fatigue, fever, headache, joint pain, lower back pain, shortness of breath, weight concern.
- **4.** Direct the physical exam, laboratory, and diagnostic imaging pursuant to the differential and update the differential as information emerges.
- 5. Contribute to the formulation of an evidence-based, cost-effective, patient-centered treatment plan that includes consideration of a wide array of interventions (including medical, surgical, psychosocial).
- 6. Describe how to assess and monitor the response to, tolerance of and adherence to treatment interventions (including symptoms, exam, labs, imaging).
- **7.** Identify the aspects of a patient's life that may affect disease presentation and response to treatment.

**8.** Recognize an urgent or emergent situation and know when to seek assistance. Medical Knowledge

- Describe the approach to diagnosis and treatment of the following patient concerns: Abdominal pain, altered mental status, chest pain, constipation/diarrhea, cough, fatigue, fever, headache, joint pain, lower back pain, shortness of breath, weight concern.
- 2. Relate knowledge of pathophysiology and foundational biomedical sciences to the care of patients with the following common medical conditions: Acute kidney injury/chronic kidney disease, anemia, asthma/chronic obstructive pulmonary disease, cardiac arrythmia, cancer, cirrhosis, coronary artery disease, depression/anxiety, diabetes mellitus, deep venous thrombosis/pulmonary embolism, electrolyte/acid-base

disorders, end-of-life issues, gastroesophageal reflux disease, gastrointestinal bleeding, heart failure, hyperlipidemia, hypertension, pneumonia, skin and soft tissue infection, substance use disorder, thyroid disease, urinary tract infection/sexually transmitted infection.

- **3.** Integrate health maintenance, individualized risk assessment, preventive health, and age-specific health promotion into treatment plans and patient education.
- **4.** Recognize the interplay of structural and social determinants of health in patient illnesses and integrate the concepts into patient-centered care.

#### Interpersonal and Communication Skills

- 1. Deliver a clear, concise oral case presentation tailored to the setting and situation (ambulatory, inpatient new and follow-up cases, consultation requests).
- 2. Write accurate, timely, complete notes in the medical record to document key information and a problem-oriented assessment and plan supported by clinical reasoning.
- 3. Identify and address the patient's primary concerns, goals, and emotions.
- 4. Communicate effectively with patients and family members from diverse backgrounds with cultural and structural humility.
- 5. Describe the roles and responsibilities of different members of the interprofessional team (including nurses and nurse assistants, dieticians, laboratory, social work, pharmacists, ward clerk and ancillary staff) and recognize the treating physician's role and responsibility to communicate with these team members.
- **6.** Communicate and collaborate effectively with the interprofessional team in a professional and respectful manner.

#### Professionalism

- 1. Treat patients, colleagues and staff with kindness, compassion, and respect.
- 2. Demonstrate integrity, responsibility, and accountability in patient care.
- 3. Display timeliness, preparation, and active participation in required clerkship activities.
- **4.** Apply basic concepts in medical ethics (including confidentiality, informed consent, decision-making capacity, appropriate care) to care of patients.

5. Identify and attend to personal emotional responses to patients and patient care.

Practice-Based Learning and Improvement

- 1. Summarize, interpret, and critique scientific literature that is relevant to the care of a patient, and apply the evidence to the treatment plan.
- 2. Demonstrate intellectual curiosity and a spirit of lifelong learning to identify and fill gaps in knowledge and skills.
- **3.** Reflect on own strengths and areas for growth. Demonstrate receptiveness to feedback and the ability to integrate feedback to improve performance.
- 4. Contribute to a culture of safety and improvement by identifying system failures and, if experienced, reporting significant near-misses or adverse events.

#### Systems-Based Practice

- 1. Identify challenges patients face in navigating the healthcare system in order to obtain acute, chronic, and preventive care.
- 2. In the development of patient-centered treatment plans, consider issues such as cost, insurance and funding, resources, barriers to care, and the need to coordinate care.
- 3. Demonstrate a patient-centered mindset and advocate on behalf of patients.

#### Neurology Clerkship

- 1. Perform a complete neurologic exam.
- 2. Perform an appropriately focused neurologic history and screening exam based on presenting symptoms.
- 3. Localize a lesion based on history and exam findings.
- **4.** Generate an appropriate basic differential diagnosis for common neurologic presentations and diagnoses.
- 5. Recognize neurological emergencies and describe initial steps in their evaluation and management.
- **6.** State the indications for an LP and describe techniques to perform the procedure appropriately and safely.
- **7.** Describe indications for CT and MR imaging of the CNS, emphasizing their use in emergency situations.
- **8.** Describe ethical and psychosocial issues encountered in the care of neurologically ill patients.
- **9.** Describe differential diagnosis, initial evaluation, and basic management of the 10 chief complaints using experience gained through patient interactions or case-based didactics.

#### Obstetrics & Gynecology Clerkship

- 1. Develop competence in the medical interview and physical examination of women, and incorporate ethical, social and diversity perspectives to provide culturally competent health care.
- 2. Apply recommended prevention strategies to women throughout the lifespan.
- 3. Describe common problems in obstetrics (see list of common obstetrical conditions).
- 4. Demonstrate knowledge of preconception care, prenatal care, intrapartum care, and postpartum care.
- 5. Describe menstrual cycle physiology, discuss puberty and menopause, and explain normal and abnormal bleeding.
- **6.** Demonstrate knowledge of common benign gynecological conditions, contraception, and abortion (see list of common gynecological conditions).
- 7. Formulate a differential diagnosis of the acute and chronic pelvic pain.
- **8.** Demonstrate knowledge of perioperative care and familiarity with gynecological procedures.
- **9.** Describe gynecological malignancies, including risk factors, signs and symptoms and initial evaluation.
- 10. Recognize his/her/their role as a leader and advocate for women.

#### Pediatrics Clerkship

- 1. Obtain pertinent historical data from a parent and/or child interview enabling you to develop the historical basis for a comprehensive evaluation of clinical problems.
- 2. Skillfully perform a physical examination on any age child, including an assessment of physical growth and psychomotor development, while mastering the skills to clearly and concisely record your findings.
- 3. Critically evaluate and integrate data in seeking solutions to clinical problems (i.e.,

synthesizing and analyzing the information gathered to develop an approach to the differential diagnosis, and the subsequent formulation of evaluation and management plans).

- 4. Acquire a core fund of knowledge in general pediatrics that may be applied to the evaluation and management of children in both inpatient and outpatient settings.
- 5. Practice both your written and verbal communication skills in multiple settings.
- 6. Address the care of each child with an appreciation of health care systems and the resources available to the patient.
- 7. Assess the impact of psychosocial factors and stresses (for example, family, domestic violence, chronic illness) on the well-being and subsequent evaluation and management of children.
- 8. Gain skills in team-based approach to care in the clinical setting.

#### Psychiatry Clerkship

#### Patient Care

- 1. Elicit and accurately document a complete psychiatric history, including the identifying data, chief complaint, history of the present illness, past psychiatric history, medications, general medical history, review of systems, substance use history, social history, and family history of psychiatric illness.
- 2. Conduct a culturally-sensitive interview that builds rapport and trust.
- **3.** Develop an effective repertoire of interviewing skills including the ability to discuss sensitive topics and manage behavioral or emotional difficulties encountered in the psychiatric interview.
- 4. Perform a psychiatric diagnostic workup, to include: acquiring and organizing the psychiatric history; performing the mental status and physical exam; making decisions regarding further diagnostic studies.
- 5. Develop a ranked differential diagnosis based on clinical history and presentation based on DSM-5 criteria.
- 6. Provide clear and concise oral presentations and documentation of initial psychiatric evaluations and daily progress of patients being treated for psychiatric disorders.
- 7. Develop and help execute an initial treatment plan and ongoing treatment plans for patients being treated for psychiatric disorders.
- **8.** Identify and account for stereotypes, bias and prejudices towards patients from various cultural groups.
- **9.** Discuss the mental health care disparities experienced by racial and ethnic groups, sexual and gender diverse groups and the psychosocial factors that contribute to them.

#### Medical Knowledge

- 1. Describe the major psychiatric diagnoses as defined in DSM-5 and incorporate biopsychosocial formulations, social determinants of health, minority stress, and systemic racism into diagnostic formulations.
- 2. Explain the range of psychiatric interventional therapeutics, specifically: indications for and possible side effects and complications of somatic treatments including psychopharmacologic agents, electroconvulsive therapies and TMS; indications for and general principles of evidence-based psychotherapies.
- 3. Identify LPS criteria for an involuntary psychiatric hold in the state of California.
- 4. Discuss clinical presentations and appropriate treatment of substance use disorders in

general medical and psychiatric clinical settings.

5. Demonstrate and apply clinical knowledge using self-assessments and standardized NBME shelf exam.

#### Practice-based Learning and Improvement

- 1. Discuss the elements of informed consent and describe the elements of decision-making capacity.
- **2.** Collect and incorporate cultural information in the assessment and treatment planning of patients.
- **3.** Demonstrate scholarship in the form of contributing to a positive learning environment, collaborating with colleagues, incorporating evidence-based literature into treatment plans, and performing self-assessment and self-directed learning.
- **4.** Self-assess individual strengths and weaknesses, and actively seek and accept supervision and constructive feedback from residents and faculty.

#### Systems-Based Practice

- 1. Demonstrate an awareness of the larger context and system of health care and effectively call on system resources to provide optimal care.
- 2. Discuss the roles of different physician specialties and non-physician healthcare disciplines, demonstrate respect for interdisciplinary colleagues, and work collaboratively in the care of patients and their families.
- **3.** Discuss the importance of working successfully with patient's families and other agencies in the patient's life (e.g. schools, employers, outpatient providers, etc.) to bring about an optimal clinical outcome.
- 4. Discuss management strategies and propose appropriate community resources as part of a comprehensive treatment plan for each patient including use of psychiatric hospitalization, detoxification and rehabilitative programs, case management, partial hospitalization, intensive outpatient, and residential treatment.

#### Interpersonal Communication Skills

- 1. Demonstrate integrity, responsibility, and accountability in the care of assigned patients.
- 2. Identify and account for personal emotional responses to patients.
- **3.** Demonstrate active listening skills, empathy, responsiveness, and concern regardless of the patient's problems, personal characteristics, or cultural background.
- 4. Demonstrate sensitivity to differences in gender, cultural background, sexual orientation, gender identity, socioeconomic status, level of disability and/or neurodiversity, primary language, educational level, political views, and personality traits.
- 5. Discuss the prevalence and barriers to recognition and treatment of psychiatric illnesses, and recognition of general medical conditions in patients with known psychiatric illness.
- **6.** Reflect on personal biases about mental illness and assess individual well-being and strategies to promote self-care and wellness.

#### Surgery Clerkship

- 1. Recognize the risks and benefits of operative interventions as an approach to disease management.
- 2. Utilize clinical, radiologic, and interventional resources to diagnose surgical problems.
- **3.** Construct and communicate a plan for the pre- and post-operative care of patients, with appropriate consideration for both the planned operation and the patient's underlying

medical problems.

- 4. Evaluate the interplay among clinical parameters, surgical pathology, and the physiological changes resulting from surgical intervention.
- 5. Articulate the role of surgical specialists in healthcare systems, and identify appropriate opportunities for primary surgical management and surgical consultation.
- 6. Identify systemic disparities in surgical health care delivery among a variety of institutional settings (e.g., private, public, academic, primary community, etc.)
- 7. Determine appropriateness of inpatient or outpatient settings for patients with various surgical conditions, analyzing the benefits and limitations of each setting.
- **8.** Coordinate and perform daily tasks that contribute to the team-based practice of inpatient surgical care delivery.
- **9.** Demonstrate skills in performing supervised simple procedures and basic operative tasks.
- **10.** Ensure treatment plans are shared among members of the surgical service, consulting services, nursing staff, patients and families.

#### Longitudinal Radiology

- 1. Develop basic skills in radiological diagnoses (how to read an x-ray).
- 2. Be familiar with the scope of different imaging modalities and be aware of patients' experience in undergoing radiological procedures.
- 3. Know the indications, contraindications, and cost effectiveness of radiological examination.
- 4. Know orderly imaging workup for common clinical disorders.
- 5. Learn how to use the radiologist as a consultant.



### Year Three

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#### **Discovery Preparation**

- 1. Demonstrate ethically responsible conduct of scientific discovery methods.
- 2. Generate a scholarly question.
- 3. Prepare a project proposal.
- 4. Create individual goals and objectives for their Discovery experience.
- 5. Identify the principles of ethical decision-making and conduct in research and scholarship, including IRB training.
- 6. Identify appropriate methods for scholarly work.
- 7. Demonstrate knowledge of foundational statistical concepts.
- 8. Establish relationships with faculty and peers in their area of interest.

#### **Discovery Course**

- 1. Demonstrate ethically responsible conduct of scientific discovery methods.
- 2. Generate a scholarly guestion.
- **3.** Search the literature to answer clinical or scholarly questions.
- 4. Prepare a scholarly research proposal.
- 5. Approach rigorous methods to complete a scholarly project in their area of interest.
- 6. Disseminate their scholarly work through written and oral communication to educate and inform others.
- 7. Participate effectively in mentorship relationships.
- 8. Initiate development of their professional niche.

#### Longitudinal Clinical Experience

- 1. Self-assess areas for growth in clinical skills and personal/professional behaviors and attitudes.
  - Utilize feedback from multiple sources to self-assess areas/skills for growth.
  - Create SMART goals and action plans for self-improvement.
  - Self-advocate for opportunities and feedback from Preceptor-Coaches.
  - Deliberately practice self-identified skills after sharing desired growth areas with Preceptor-Coach.
  - Develop longitudinal relationships with patients and with faculty Preceptor-Coaches.
- 2. Improve skill and performance of entrustable activities required to diagnose infirmities and promote health during patient encounters:
  - Gather complete and accurate histories.
  - Perform pertinent physical examinations.
  - Generate, narrow, and prioritize differentials.
  - Conduct focused evidence-based workups.
  - Present and document findings and assessments.
  - Create plans that utilize best practice and evidence to advance patient care.
  - Improve clinical decision-making in primary and specialty fields.
  - Advocate for patient safety and well-being. •

- 3. Engage in career exploration and development:
  - Enhance skills needed for successful patient care in specialty and sub-specialty fields.
  - Improve specialty-specific skills needed for sub-internships as identified by expert leaders in each field.
  - Experience the rewards and demands of generalist and specialist clinical practice.
  - Augment knowledge of sub-specialties to enhance future generalist care.
  - Explore the breadth and diversity of professional opportunities in different specialties of interest.
  - Self-advocate for career exploration opportunities.



### Year Four

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#### Capstone

- 1. Perform basic procedures on a mannequin including: lumbar puncture (LP), central venous catheterization (CVC), arterial blood gas (ABG), cardiopulmonary resuscitation (CPR), bag-valve-mask ventilation (BVM), and peripheral intravenous (PIV) insertion.
- 2. Demonstrate proficiency in obtaining informed consent for basic treatments and procedures. Begin to navigate difficult discussions regarding diagnostic uncertainty, DNR, and end-of-life care.
- 3. Recognize patients requiring urgent evaluation and initiate management of patients with common complaints and core diseases based on specialty.
- 4. Perform and receive a complete patient handoff.
- 5. Complete basic admission orders for core diseases based on specialty.
- 6. Collaborate as a team in the care of critically ill patients.
- 7. Communicate effectively with other healthcare professionals in patient management, demonstrating professionalism throughout.
- 8. Initiate appropriate management of patients over the phone in response to pages.
- 9. Prioritize a differential diagnosis after a patient encounter, utilizing diagnostic schemas in the evaluation and management of patients.
- 10. Conduct medication reconciliation, including the management and prescription of pain management medications, including narcotics.
- 11. Accurately interpret basic radiographic images and ECGs.
- 12. Reflect on past mentorship and support and identify continued opportunities for mentorship and guidance in future training.

### HEALS Thread Objectives

Thread Objectives Approved by Medical Education Committee 08-21-2024

#### Medical Ethics

- 1. **Define** foundational concepts, duties, and principles of medical ethics, including: confidentiality, privacy, truth-telling, respect for autonomy, beneficence, nonmaleficence, justice and fairness, surrogate decision-making, informed consent, shared decision-making, empathy, vulnerability, and trust.
- 2. **Apply** these ethical concepts and **analyze** their implications in common clinical and research cases.
- 3. **Propose and critically evaluate** an ethical plan of action for common clinical and research ethics cases, integrating these ethical concepts with clinical, biomedical, social, legal, and institutional knowledge.
- 4. **Illustrate and compose** plans of action that navigate uncertainty, diverse perspectives and values, and pluralism in ethics cases.
- 5. **Demonstrate** willingness to talk openly, respectfully, and curiously about ethics and difficult cases with faculty and peers
- 6. **Respond ethically** to patients, families, peers, and communities in practice, through the development of practical reasoning abilities, communication skills, and moral courage.

#### Medical & Health Humanities

- 1. Articulate the purpose and value of humanities and narrative medicine methodologies in medical education and clinical practice.
- 2. Employ humanities and narrative medicine methodologies to enhance communication skills and elicit the values, preferences, and points of view of patients, patients' families, and professional colleagues.
- **3.** Recognize the diversity of individual experiences of health and illness and seek to understand the manners in which individuals perceive and make meaning of illness experiences.
- **4.** Develop skills in critical thinking, perception, interpretation, and navigating ambiguity through the analysis of various art forms.
- 5. Use reflective reading and writing techniques in order to analyze varying perspectives and engage in self-reflection that informs current and future perspectives and practices.

#### Structural Racism & Health Equity

#### SRHE MS1 Objectives

- 1. Define racism and understand how it operates at individual/interpersonal, institutional, and structural levels.
- 2. Recognize race as a social and historical construct rather than a biological/genetic construct and identify harms associated with using race as a biological/genetic construct as a paradigm in medicine.
- 3. Examine health disparities as a reflection of structural violence and not biological/genetic determinism.
- 4. Describe the intersectional systems of power that influence individual and community health as well as community led efforts to enact structural change with a focus on Los

Angeles communities.

- 5. Discuss examples of how racism has been a historical driving force of oppression within the institution of medicine.
- 6. Identify opportunities for health workers to support movements for health equity and justice.
- 7. Collaborate to identify potential solutions to identified structural barriers leading to inequities within our own systems.

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#### SRHE MS2 Objectives

- 1. Analyze histories of oppression, resistance, and barriers to health faced by communities served in a variety of clinical settings in Los Angeles and their lasting impact on community health.
- 2. Identify examples of racism, structural violence, and other barriers to health equity as they present in clinical practice
- 3. Recognize and describe the necessary components of structurally competent and anti-racist clinical practice and programs, including the praxis of harm reduction.
- 4. Generate anti-racist and structurally competent solutions to address health inequities that center patients and communities.

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