

2022-23 HEALS Course Objectives

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Year One

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 within medicine including its sequela.
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 that 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 draft a personalized vision statement for their medical education 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. Engage longitudinally as active participants in, as opposed to passive observers of, an on-site, in-person clinical and/or community healthcare experience (e.g., direct medical care, health advocacy, social services provision, health education, care coordination, etc.).
2. Add value to their EACE site by contributing to the healthcare-related functions and tasks of their EACE
3. Identify the roles (e.g., peer support specialists, social workers, case managers, physicians, nurses, nurse practitioners, physician assistants, behavioral health specialists, psychologists, nutritionists, pharmacists, medical assistants, support staff, physical/occupational/speech language therapists, front desk staff, interpreters, etc.)

represented at their EACE site and that comprise their EACE site's interprofessional team, and define the responsibilities (i.e., tasks, duties) generally associated with those roles.

4. Rate as important each of the team members at their EACE site and explain and distinguish how each of the team members at their EACE site contributes to addressing the health and healthcare-related issues their EACE site's patients, clients and/or community face.
5. Integrate effectively into their EACE site's existing system(s) of providing healthcare, advocacy and/or social services and practice teamwork that is respectful of the experience and expertise of their EACE site's team members, patients, and community
6. Demonstrate interaction skills with patients, clients, caregivers, and interprofessional team members through words, body language and active listening to foster a respectful and collaborative environment and provide, with cultural humility and compassion, care that is nonjudgmental, unbiased, trauma-informed, thoughtful, and attentive.
7. Explain how the social and structural determinants of health – including but not limited to race, gender, culture, income, education, immigration, neighborhood environment, economic forces, public policies, language, country of origin, sexual orientation, religious affiliation – contribute to health and health care inequity among the patients, clients and/or neighborhoods their EACE site serves.
8. Look for, identify, and utilize resources to mitigate the effects of the social and structural determinants of health for the patients, clients and/or neighborhoods their EACE site serves.
9. Begin to employ a process of reflection (i.e., review, interpretation and understanding of experiences) to guide present and future behavior and to inform emerging professional identity development.

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, including the patient history and physical exam.
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 health information technology and electronic medical record systems to effectively create and communicate patient-centered and team-based assessments and care plans.
7. Practice teamwork that is collaborative, interprofessional, and respectful of the role and value of individual healthcare team members.
8. Integrate social determinants of health (the social, structural, and environmental factors that influence health) into the development of a diagnostic and therapeutic plan; identify, orally or in writing, biases and inequities that influence clinical reasoning and potential strategies to mitigate the impacts of social determinants of health in clinical care.
9. Demonstrate the basic operation of POCUS (point of care ultrasound) to perform and identify normal and abnormal findings including diagnostic bedside examinations of the heart, major blood vessels, lungs, and abdominal organs and the basic principles of POCUS technology, as well as the indications, benefits, and limitations of incorporating POCUS into bedside examination.
10. Describe, orally or in writing, 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, bias, etc. as they show up in clinical, research, and social advocacy settings).
11. Demonstrate professional development with the skills needed to receive and give feedback for growth and improvement; using the ADAPT Model (ask, discuss, ask, plan together), as well as incorporating lessons from personal reflection, coaching sessions, and group debriefing.

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 all stages of life.
2. Identify anatomical and histological structures of the human body that are relevant to the practice of medicine.
3. Efficiently obtain and critically appraise information related to medical practice from sources that include biomedical literature and databases.

Pre-Clerkship Theme Objectives

Medical Ethics

1. Define foundational concepts and principles of medical ethics, including autonomy, confidentiality, justice, surrogate decision making, informed consent, shared decision making, and trust.
2. Identify and articulate the ethical dimensions of common clinical and research cases across various subfields.
3. Apply and critically analyze foundational ethics concepts in common clinical and research cases using the DGSOM ethics framework.
4. Provide and critically evaluate justifications for a moral position and a plan of action for common clinical and research ethics cases using the DGSOM ethics framework.

5. Show appreciation for uncertainty, diverse perspectives and values, and pluralism in evaluating ethics cases.
6. Demonstrate willingness to talk openly, respectfully, and curiously about ethics with faculty and peers.
7. Respond to moral considerations in practice, such as patient values, trust, and structural inequities, through the development of moral courage and practical behaviors in interactions with standardized patients, real patients, faculty, and peers.

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

1. Define racism and understand how it operates at individual/interpersonal, institutional, and structural levels.
2. Develop an understanding of race as a social and historical construct rather than a biological/genetic construct.
3. Begin to understand health disparities as a reflection of structures of oppression and not biological/genetic determinism.
4. Describe the intersectional systems of power that influence individual and community health.
5. Understand the harms of using race as a biological/genetic construct as a paradigm in medicine.
6. Learn examples of how racism has been a historical driving force of oppression within the institution of medicine.
7. Understand the potential for physicians and healthcare to support movements for healthy equity and justice.

Year Two

Discovery Preparation

1. Generate a scholarly question in their area of interest.
2. Identify behaviors of a successful mentee.
3. Prepare a project proposal.
4. Create individual goals and objectives for their Discovery Year experience.

5. Identify the principles of ethical decision-making and conduct in research and scholarship.
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.

Intersessions

1. Explain the role 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 key basic science concepts to the diagnosis and management of common diseases and conditions encountered in clinical medicine.
4. Apply fundamental concepts in epidemiology and biostatistics to improve the interpretation of primary literature and inform evidence-based clinical practice.
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. Discuss the impact that social determinants of health have on patient access to care and outcomes, as well as develop strategies that can be used to optimize care for individuals facing these challenges.
9. Describe systems and employ best practices that support patient safety in the healthcare environment.
10. Demonstrate the knowledge and skills required to perform a quality improvement project.
11. Apply best practices in research and project management towards scholarly activities during the upcoming DGSOM Discovery Year.
12. Utilize critical reflection, feedback, and resilience training to promote identity formation, personal and professional growth, and wellbeing during the clinical years.

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:

Essential Chief Complaints	Essential Diagnoses
Chest pain	ACS
Abdominal pain	Acute abdominal diagnosis (i.e., appendicitis, diverticulitis, cholecystitis)
Shortness of breath	Sepsis
Altered mental status	MSK Injuries (i.e., fracture, sprain)
Headache	Acute Psychiatric Emergency (i.e., Suicidality, Homicidally, Psychosis, etc.)
Musculoskeletal Injury/Trauma	Wound care (i.e., laceration repair, Incision, and drainage)
Fever	DKA/Hyperglycemia
Vomiting	Asthma/COPD
Dizziness/Lightheadedness	Substance Abuse/Dependance
GI Bleed	GI Bleed
	Presyncope/Syncope

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. Perform basic life support techniques including:
 - a. Basic airway maneuvers including head tilt, chin lift, and jaw thrust.
 - b. Use of airway adjuncts such as oral and NP airways.
 - c. Correct BVM technique.
12. 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)
13. Perform common ED procedures.
14. Perform point of care ultrasound (POCUS) for common ED chief complaints/indications.
15. Demonstrate an approach to Electrocardiogram (ECG) interpretation by systematically analyzing an ECG and appreciating a “normal ECG.”
16. Describe strategies for managing pain using common oral and parenteral medications and describe the use of common local analgesics for wound repair.
17. Demonstrate ability to navigate the literature to find evidence-based answers to clinical questions.

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 leaders in:
 - a. 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. Account for structural determinants of health and other barriers to health when developing patient-focused management plans.
8. 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.
9. 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

1. 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 arrhythmia, 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, dietitians, 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.

Obstetrics & Gynecology Clerkship

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

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.

Year Three

Longitudinal Preceptorship

1. Improve clinical acumen through history-taking and physical examination skills. Through experiential and observed encounters and discussion, students should improve their:
 - a. accuracy in collecting clinical data.
 - b. proficiency with the physical examination.
 - c. ability to present findings for discussion.
 - d. ability to conduct a focused work-up.
2. Identify the range of clinical problems and treatment options particular to selected specialties. Through experience in clinical practice and career exploration, the students learn:
 - a. qualities of the clinical decision-making process.
 - b. skills needed for successful patient care.
 - c. types of notes and charts needed for competent care.
 - d. rewards and demands of various types of practice.
 - e. breadth and diversity of professional opportunities within the specialty
3. Clinical research exploration and development. Through mentored participation in literature reviews, data collection and analysis, safety assessment, risk / benefit analysis, etc., students have the opportunity:
 - a. to improve skills as a physician-scholar.
 - b. for in-depth one on one mentorship within academic medicine
 - c. to continue research projects initiated during the first two years of medical school or to initiate research that may be carried into the 4th year. (Note: research for which a PhD is earned cannot also count toward completion of this course).

Systems-Based Healthcare

Systems-Based Practice

1. Know the structure and functions of the health care delivery and insurance systems currently in place in California and the United States. Compare and contrast these to alternative systems used in other industrialized countries.
2. Describe major current health system reform initiatives, including possible benefits and barriers to achieving them.
3. Discuss the concept of a medical safety net and strategies for lowering access barriers for vulnerable populations.
4. Define an integrated delivery system, list its key components and describe how they function together to deliver optimal patient care and outcomes.
5. Discuss applications of health information technologies including electronic health records, patient registries, and computerized order entry and prescribing.

6. Understand and explain the concept of value in health care, and provide examples of methods physicians use to improve value, including comparative effectiveness research, evidence-based guidelines, and quality improvement.
7. Compare current and emerging physician reimbursement methodologies, and discuss their likely impacts on utilization, costs, quality, access and provider incomes.
8. Distinguish the roles of primary care providers and specialists, and discuss the options communities have to achieve an appropriate balance between primary and specialty care.
9. Understand the flow of funds through the U.S. health care system, from their points of origin through public (Medicare and Medicaid) and private (insurance companies and health plans) intermediaries, down to the provider tier (physicians and hospitals).
10. Distinguish between costs and charges.
11. Identify and use resources and ancillary health care services for patients in situations in which social and economic barriers to access exist.
12. Articulate the physician's special responsibilities toward both individual patients and society at large, and discuss ways to balance these competing needs and priorities.

Professionalism

1. Demonstrate reliability, dependability, and integrity in interactions with colleagues and patients.
2. Deal with professional mistakes openly and honestly in ways that promote patient trust and self-learning.
3. Accurately assess one's personal strengths and limitations, relevant to one's practice of medicine and continued learning.
4. Develop abilities to receive and provide constructive feedback as part of peer and self-assessment of professional behaviors.
5. Understand appropriate coping mechanisms for dealing with stress, intellectual uncertainty, interpersonal conflict, and issues related to power.
6. Use basic ethical concepts and approaches to identify and analyze the ethical dimensions of common situations in medical practice, health policy, and research.
7. Understand the obligation to treat the individual patient, and discuss the conflicts between caring for a patient and caring for a population.
8. Recognize an obligation to the health of society, locally, regionally, and nationally.
9. Demonstrate the ability to provide leadership to groups of colleagues or patients.

Interprofessional Education

1. Work with individuals of other professions to maintain a climate of mutual respect and shared values.
2. Use the knowledge of one's own role and those of other professions to appropriately assess and address the healthcare needs of the patients and populations served.
3. Communicate with patients, families, communities, and other health professionals in a responsive and responsible manner that supports a team approach to the maintenance of health and the treatment of disease.

4. Apply relationship-building values and the principles of team dynamics to perform effectively in different team roles to plan and deliver patient-/population-centered care that is safe, timely, efficient, effective, and equitable.

Year Four

Foundations for Fourth Year

1. Demonstrate appropriate management of core arrhythmias, including the provision of Basic Life Support.
2. Perform basic procedures with assistance.
3. Recognize patients requiring urgent evaluation and initiate management of patients with common complaints and core diseases.
4. Perform a complete patient handoff using an organizational tool.
5. Work as a team in the care of critically ill patients.
6. Utilize ultrasound to determine fluid-responsiveness in patients with shock.
7. Recognize and diagnose common and key EKG abnormalities.
8. Recognize and diagnose common and key chest radiographic abnormalities.

Assessment for Internship

1. Perform basic procedures in your specialty without assistance.
2. Demonstrate proficiency in obtaining informed consent for basic treatments and procedures.
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. Work as a team in the care of critically ill patients.
7. Communicate effectively with other healthcare professionals in the management of patients.
8. Initiate appropriate management of patients over the phone in response to pages.