Emory Pediatrics Clerkship 2024-2025

Guiding Principles

Vision: To be the clerkship that students rave about and nurture a culture of teaching and learning in the Department of Pediatrics.

Mission: To provide EUSOM students a comprehensive experience in pediatrics and a comprehensive education in pediatric fundamentals.

Goals: The Clerkship will focus on patient care experiences and problem-solving strategies to:

- Teach students about Pediatrics.
- Inspire some students to pursue training in Pediatrics.
- Provide a solid foundation for Step 2 CK.

Pediatric Clerkship Student Objectives

Clinical Care

- Take a patient-centered history (focused and complete) on children across ages and developmental stages.
- Perform a physical examination (focused and comprehensive) and recognize normal and abnormal findings on children across ages and developmental stages.
- Interpret clinical information, including common diagnostic tests, with an awareness of age-related norms.
- Search for and apply information from appropriate reference sources to inform clinical decision-making with the relevant evidence base.

Medical Knowledge

- Outline the components of a pediatric well child visit for newborns, infants, toddlers, school-aged children and adolescents.
- List the clinical features associated with common pediatric illnesses.
- Create a differential diagnosis for common pediatric presenting symptoms or complaints.
- Generate patient-centered and age-appropriate evaluation and management plans.

Communication and Professionalism

- Present a well-organized synopsis of patient history and physical exam findings along with assessment and plan, tailored to the clinical situation.
- Demonstrate compassion, cultural humility and respect in interactions with children of different ages and their caregivers and support systems regarding their care.
- Display respect for the entire care team in clinical encounters and scenarios.
- Demonstrate maturity, punctuality, and positive attitude in clinical settings, educational sessions, and other obligations of the pediatric clerkship.

Clerkship Structure:

- 2 weeks General Inpatient Ward team at Egleston, Hughes Spalding, or AMB
- 2 weeks Outpatient Primary Care in a Community Practice
- 1 week Subspecialty Practice at Egleston, AMB, or CAP
- 1 week Nursery/ Emergency Department
 - Grady Nursery
 - Egleston/AMB & Hughes Spalding Eds

(AMB=Arthur M. Blank Hospital, scheduled to open Fall 2024)

Evaluation:

Student grades will be comprised of:

- 25% inpatient attending clinical evaluation (Clinical Assessment Forms)
- 25% outpatient attending clinical evaluation (Clinical Assessment Forms)
- 15% Aquifer case completion (20 cases)
- 15% oral exam (summative)
- 10% simulation exercises (OSCEs) (formative)
- 10% observed effort and participation

In addition, to pass the clerkship, students must:

- Complete Aguifer Calibrate pre- and post- assessments
- Complete and turn-in required paperwork
- Receive average of meets expectations low (or higher) on clinical assessment forms
- Achieve a total score of 60% or higher on the clerkship
- Complete the OSCE exercise
- Complete required clerkship clinical time, including any required make up time per the School
 of Medicine Absent from Clinical Duties policy

Summary Evaluation - The narrative portion of the pediatric clerkship summary evaluation (for the MSPE) is derived from performance on each aspect of the clerkship and draws from narrative comments obtained on all clinical assessment forms as well as the OSCE standardized patient feedback.

If students do not achieve the above benchmarks to pass the clerkship, they will be provided an opportunity to remediate. If students need to make-up the OSCE exercise and/or clinical duties, they will receive an "Incomplete" until completion of these activities.

Student Assessment and Objectives/Student Professional Activity (SPA) mapping 2023

Clinical Care	New	Evaluation/Assessment
	<u>SPA</u>	
 Take a patient-centered history (focused and complete) 	PC-05	Clinical Assessment
on children across ages and developmental stages.		Form (CAF)
Perform a physical examination (focused and	PC-06	• CAF
comprehensive) and recognize normal and abnormal		
findings on children across ages and developmental		
stages.		
Interpret clinical information, including common	MK-10	Oral Exam
diagnostic tests, with an awareness of age-related norms.		
Search for and apply information from appropriate	PL-14	• CAF
reference sources to inform clinical decision-making with		
the relevant evidence base.		
Medical Knowledge		
Outline the components of a pediatric well child visit for	PC-05	Aquifer formative
newborns, infants, toddlers, school-aged children and	PC-06	
adolescents.		
List the clinical features associated with common pediatric	PC-07	Aquifer formative
illnesses.		
Create a differential diagnosis for common pediatric	PC-07	• CAF
presenting symptoms or complaints.		Oral Exam
Generate patient-centered and age-appropriate	PC-08	Oral Exam
evaluation and management plans.		Simulations
Communication and Professionalism		• CAF
Communication and Professionalism	IC-20	Oral Exam
Present a well-organized synopsis of patient history and physical even findings along with assessment and plan	IC-20	Oral Exam
physical exam findings along with assessment and plan, tailored to the clinical situation.		
	IC-18	Simulations
Demonstrate compassion, cultural humility and respect in	IC-18 IC-19	Simulations
interactions with children of different ages and their	10-19	
caregivers and support systems regarding their care.	CD 24	- CAE
Display respect for the entire care team in clinical	SP-24	• CAF
encounters and scenarios.	DD 04	Observed -fft
Demonstrate maturity, punctuality, and positive attitude	PP-01	Observed effortAquifer formative
in clinical settings, educational sessions, and other		Aquilei ioiiliative
obligations of the pediatric clerkship.		

Required Experiences Checklist

Aquifer cases may be used for up to 4 requirements.

- Assess jaundice in a newborn
- Calculate fluid orders
- Calculate/Plot BMI
- Determine Immunizations needed
- Discuss how chronic illness affects the child/family
- Evaluate acute/chronic abdominal pain
- Evaluate acute/chronic cough/wheeze
- Evaluate CNS problem (headache/seizure)
- Evaluate diarrhea
- Evaluate ear pain
- Evaluate fever
- Evaluate joint/limb pain
- Evaluate rash
- Evaluate rhinorrhea
- Evaluate sore throat
- Evaluate vomiting
- Perform SHADESS/HEADSSS assessment in a teenager
- Perform newborn exam
- Perform Toddler checkup (1-4 yo)
- Perform School-age checkup (5-11 yo)
- Perform Teenage checkup (12+)
- Plot growth curve
- Write Rx (prescription)/Calculate doses