

PSC 612
Geriatric Psychiatry
Selective/Elective Clerkship Rotation Syllabus

Psychiatry

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At MSUCOM, we are constantly working to improve our curriculum and to meet new AOA accreditation guidelines. We need to meet the challenges of modern medicine that force us to innovate. While major changes will generally be instituted at the beginning of the school year, most minor changes may be implemented semester to semester.

Please be mindful of the need to read your syllabi before beginning your rotations.

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Pre-Approval and Pre-Requisites

- An application is required for every selective/elective rotation.
- 30-day advance application approval required (applies to a rotation add, change or cancellation)
- Students need to send a copy of the rotation description and name of the Institution where the rotation is to take place to the Department Course Coordinator for Instructor of Record Approval for this elective/selective experience. Once approved upon by the Instructor of Record, the proper selective/elective paperwork needs to be submitted to the Office of the Registrar at OsteoMedReg@hc.msu.edu . Students will only be required to seek the Instructor of Record's approval for rotations that are outside the SCS system.

Introduction and General Description of Course

Geriatric Psychiatry is a 3-6 credit hour; 2-4 week long, elective course designed to give students interested in Psychiatry a more focused experience in the area of Geriatric Psychiatry. The student will work with attending physicians and/or residents in a variety of settings that may include inpatient units, addictions units, consult & liaison services, and outpatient clinics.

Goals and Objectives

- Expose medical students to the field of Geriatric Psychiatry.
- Provide them with experience in a variety of different settings and with a diverse patient population.
- Have them work directly with adult psychiatrists and/or adult psychiatry residents in various facilities.
- Provide the students with information regarding the field of Geriatric Psychiatry as a career choice.

College Program Objectives

In addition to the above course-specific goals and learning objectives, this clerkship rotation also facilitates student progress in attaining the College Program Objectives. Please refer to the complete list provided on the MSUCOM website.

References

Recommended Textbooks

1. *The American Psychiatric Publishing Textbook of Geriatric Psychiatry, Fifth Edition*, 2015, Arlington, VA: American Psychiatric Publishing.
<http://ezproxy.msu.edu/login?url=http://psychiatryonline.org/doi/book/10.1176/appi.books.9781615370054>
2. *Diagnostic and Statistical Manual of Mental Disorders, 5th Edition: DSM-5*, May 2013, Washington, DC: American Psychiatric Association.
<http://ezproxy.msu.edu:2047/login?url=http://dsm.psychiatryonline.org/book.aspx?bookid=556>

Student Responsibilities

During the 4 weeks of the rotation, the student is required to meet clinical and academic responsibilities:

- The student **will** meet the following **clinical responsibilities** during this rotation:
 - Daily clinical rounds with preceptor
 - Prompt attendance for all rounds, team meetings, patient interviews and any other clinical activity as directed by preceptor
 - Demonstrate professional dress and attitude throughout the rotation
 - Effectively communicate with patients, staff, attending physicians, house staff, family and other interested parties
 - Document encounters as directed by the clinical preceptor
 - Students are expected to function collaboratively on health care teams that include health professionals from other disciplines in the provision of quality, patient-centered care.
- The student **will** meet the following **academic responsibilities** during this rotation:
 - Read any recommended materials as suggested by preceptor
 - Follow-up clinical questions with a thoughtful review of pertinent literature
 - Complete all paperwork associated with the experience in a timely manner
 - Students are expected to identify, access, interpret and apply medical evidence contained in the scientific literature related to patient's health problems.
 - Students are expected to: assess their personal learning needs specific to this clinical rotation, engage in deliberate, independent learning activities to address their gaps in knowledge, skills or attitudes; and solicit feedback and use it on a daily basis to continuously improve their clinical practice.

Meeting or not meeting the above responsibilities will be used by the instructor of record in the determination of the final grade in the course (See "Corrective Action Process for Deficient Academic Requirements" Below).

Hospital/Clinical Site Requirements

(To be defined and evaluated by individual hospitals)

Students are responsible for completing any and all additional requirements set by the hospital/clinical site in which the student is completing the rotation. However, students are not responsible for reporting results of requirements outside the ones listed below to the college.

Geriatric Psychiatry (PSC 612) Rotation Clinical Requirements

Requirements	Submission Method	Due Date
Attending Evaluation of Rotation <i>*the determination of a satisfactory attending evaluation is governed by the University's Policy for Retention, Promotion, and Graduation*</i>	To be appropriately submitted per the instruction at the end of each evaluation form	Final Day of Rotation
Student Evaluation of Rotation	"Evaluate" Link in Kobiljak Schedule <i>(this link will activate on the final Monday of the rotation)</i>	Final Day of Rotation

Clinical Clerkship Rotation Evaluation

A standardized Clinical Clerkship Rotation Evaluation is used in all MSU COM Clinical Rotations. The Clinical Clerkship Rotation Evaluation assesses students on the relevant Osteopathic Core Competencies:

- Osteopathic Principles and Practice
- Medical Knowledge
- Patient Care
- Practice-Based Learning and Improvement
- System-Based Practice
- Interpersonal Skills and Communication
- Professionalism

Performance will be rated into two separate overall categories: Clinical Assessment and Professional Assessment with overall grades of Below Expectations, Meets Expectations, and Exceeds Expectations.

Students must print a copy of the evaluation from their schedule in Kobiljak. The evaluation will not be active until the first day of the rotation and will remain active until it has been turned into Student Services by the Psychiatry Department.

GRADING

- **Pass:** Students may receive up to 1 Below Expectations Mark in any subcategory with the overall categories at Meets Expectations. In addition, there will be a meeting

scheduled with the Campus Clerkship Director or Lead Clerkship Director to discuss the Below Expectations evaluation score.

- **Honors:** Students must receive all Meets Expectations or above in the subcategories and Meets or Exceeds Expectations in the overall category.
- **No Pass:** Any one of the following conditions will result in a No Pass Grade in the clerkship:
 - Receiving more than 1 Below Expectations Mark in any subcategory
 - Any Overall Category Grade with a Below Expectations

Special Considerations Accommodations (VISAs) for Disabilities

Michigan State University is committed to providing equal opportunity for participation in all programs, services and activities. Requests for accommodations by persons with disabilities may be made by contacting the Resource Center for Persons with Disabilities at 517-884-RCPD or on the web at www.rcpd.msu.edu. Once a student's eligibility for accommodation has been determined he/she may be issued a Verified Individualized Services and Accommodation ("VISA") form. Please present this VISA form to Cheryl Luick, luick@msu.edu, A-331 East Fee Hall at the start of the semester and/or two weeks prior to the accommodation date (test, project, labs, etc.). Requests received after this date will be honored whenever possible.

It is the responsibility of the student with accommodations to contact the Elective Coordinator two weeks prior to the start of the term, or two weeks prior to the scheduled assessment event or other planned use of accommodations. Requests received after this date will be honored whenever possible.

It is the responsibility of the student to submit or have submitted an updated version of their accommodations to Cheryl Luick each semester that a student plans to use their accommodations.

MSU College of Osteopathic Medicine Standard Policies

The following are the standard MSUCOM policies students must adhere to across all Clerkship courses/rotations.

ATTENDANCE POLICY

In order to gain the knowledge and skills to successfully complete the MSUCOM clerkship program, consistent participation/attendance in program activities is essential. Any time off must not interfere with the quality of the rotation.

1. In the event a student needs to be absent from any rotation for the reasons listed below and permissible by the rotation syllabus, students may request time off.
2. Any absence (unless emergent) must be approved in advance (at least 30 days) of absence by the medical education department (student coordinator/director or DME), utilizing the Clerkship Program Excused Absence Request Form. Students must notify rotation team and medical education of emergent/illness absences on day of absence.
3. A student may not be absent more than 2 days on any one 4 week rotation (no time off allowed for rotations of 2 weeks or less) for the reasons below (exception Interview absences or Conference absences as below).
4. Any additional time off any one rotation must be approved by the MSUCOM Instructor of Record for the course the absence will occur.

Absence due to interviews:

For the purpose of interviewing only, a student may be absent 4 days on a 4 week rotation (2 days on a 2 week rotation) during the months of September to January in the OMS year 4. Interview invitations must accompany the Clerkship Program Excused Absence Request Form.

Absence due to examinations:

Examination	Maximum Time Off (includes travel time)
COMLEX USA Level 2 CE/USMLE Step 2 CK/Canadian MCCEE	1 day
MSUCOM COMLEX PE Simulation at MSU	1 day for each scheduled simulation
COMLEX USA Level 2 PE/USMLE Step 2 CS(Canadian Students Only)	2 days
COMAT/SHELF examinations	Travel time and time for exam

Personal Day Absence:

Students are allowed 5 personal days per academic year in OMS 3 and OMS 4. These days are not carried over from third year to fourth year. These are to be used for illness, physician appointments, and special events (weddings, graduations, special anniversary events) and must not exceed 2 days on any 4 week (#3 above). Prolonged illness and bereavement will be handled on a case by case basis between MSUCOM Director of Clerkship and the base hospital/medical education department. Students must notify rotation team and medical education of emergent/illness absences on day of absence.

Hospital organized community events that might lead to periodic absence from rotations – student participation is encouraged and if base hospital approved, would be considered part of the rotation and not a personal day absence.

Jury duty – when obligated, student participation is not considered a personal day. Court excuses must accompany any absence. If absence is prolonged, this will be handled on a case-by-case basis between the base hospital/medical education and MSUCOM.

Conference Absence:

While on required/core rotations, no excused absences for any professional meeting will be allowed unless the student is presenting research in which they have participated.

- a. Appropriate paperwork with proof of presentation and copy of conference agenda must accompany the form.
- b. Time off in this situation will be for travel and presentation only.

While on selective/elective rotations: A student may submit a request for an excused absence to attend one (1) professional meeting, time not to exceed 3 days off rotation. The meeting agenda must accompany the Clerkship Program Excused Absence Request Form.

Personal vacations/family reunions, etc. are not part of this policy. Vacations can be scheduled periodically, provided all curriculum requirements will be met, with the assistance of your Student Support Advocate. Vacations will not be permitted on any core rotation or elective rotation.

Policy for Medical Student Supervision

Supervisors of the Medical Students in the Clinical Setting

The MSUCOM curriculum includes required clinical experiences in a variety of clinical learning environments. The role of the student is to participate in patient care in ways that are appropriate for the student's level of training and experience and to the clinical situation. The student's clinical activities will be under the supervision of licensed physicians. This supervising physician may delegate the supervision of the medical student to a resident, fellow, or other qualified healthcare provider, however, the supervising physician retains full responsibility for

the supervision of the medical students assigned to the clinical rotation and must ensure his/her designee(s) are prepared for their roles for supervision of medical students.

The physician supervisor and his/her designee(s) must be members in good standing in their facilities and must have a license appropriate to his/her specialty of practice and be supervising the medical student within that scope of practice as delineated by the credentialing body of the facility.

Level of Supervision/Responsibilities

Clinical supervision is designed to foster progressive responsibility as a student progresses through the curriculum, with the supervising physicians providing the medical student the opportunity to demonstrate progressive involvement in patient care. MSUCOM students will be expected to follow clinical policies of the facility regarding medical records and clinical care. Medical student participation in patient history/physical exam, critical data analysis, management, and procedures will include factors, but not limited to:

- The students demonstrated ability
- The students level of education and experience
- The learning objectives of the clinical experience

First and second year medical students will be directly supervised at all times (supervising physician or designee present or immediately available).

Third and fourth year medical students will be supervised at a level appropriate to the clinical situation and student's level of experience. For some tasks, indirect supervision may be appropriate for some students. Direct supervision would be appropriate for advanced procedures.

Supervising physicians will provide medical students with timely and specific feedback on performance. The supervising physician will complete a mid-rotation evaluative discussion with the medical student. Supervising physicians will complete a summative evaluation and are encouraged to contact the course/clerkship director with any gaps in student performance.

Medical students with any concern regarding clinical, administrative, and educational or safety issues during his/her rotation will be encouraged to contact the supervising physician or clerkship/course director.

STATEMENT OF PROFESSIONALISM

Principles of professionalism are not rules that specify behaviors, but guidelines that provide direction in identifying appropriate conduct. These principles include the safety and welfare of patients, competence in knowledge and skills, responsibility for consequences of actions, professional communication, confidentiality, and lifelong learning for maintenance of professional skills and judgments. Professionalism and professional ethics are terms that signify certain scholastic, interpersonal and behavioral expectations. Among the characteristics included in this context are the knowledge, competence, demeanor, attitude, appearance, mannerisms, integrity and morals displayed by the student to faculty, peers, patients and colleagues in other health care professions. Students are expected to conduct themselves at all times in a professional manner and to exhibit characteristics of a professional student.

STUDENTS RIGHTS AND RESPONSIBILITIES

Each individual student is responsible for their behavior and is expected to maintain standards of academic honesty. Students share the responsibility with faculty for creating an environment that supports academic honesty and principles of professionalism. Proper relationship between faculty and student are fundamental to the college's function and this should be built on mutual respect and understanding together with shared dedication to the education process. It is a fundamental belief that each student is worthy of trust and that each student has the right to live in an academic environment that is free of injustice caused by dishonesty. While students have an obligation to assist their fellow students in meeting the common goals of their education, students have an equal obligation to maintain the highest standards of personal integrity.

FACULTY RESPONSIBILITIES

It is the responsibility of the college faculty to specify the limits of authorized aid (including but not limited to exams, study aids, internet resources and materials from senior students) in their syllabi, and it is the responsibility of students to honor and adhere to those limits. Course instructors shall inform students at the beginning of the semester of any special criteria of academic honesty pertinent to the class or course.

It is the responsibility of the clinical faculty to provide students with ongoing feedback during rotation upon request. Clinical faculty are generally recommended (though not required) to limit student assigned duty hours from 40 to 60 hours weekly (and not exceeding 60 hours). Both faculty and students are to be treated fairly and professionally in order to maintain a proper working relationship between trainer and trainee.

COURSE GRADES

- **P-Pass** – means that credit is granted and that the student achieved a level of performance judged to be satisfactory according to didactic and clinical performance by the department.
- **N-No Grade** – means that no credit is granted and that the student did not achieve a level of performance judged to be satisfactory to be satisfactory according to didactic and clinical performance by the department.
- **ET-Extended Grade** – means that a final grade (“Pass” or “No Grade”) cannot be determined due to one or more missing course requirements. In Years 3 and 4, the ET grade is used instead of an “Incomplete (I)” grade. Once all course requirements have been completed, received, and processed, the ET grade will be changed to a final grade. An “ET” will NOT remain on a student’s transcript.

ROTATION EVALUATIONS

Attending/Faculty/Resident Evaluation of Student Students are responsible for assuring that his/her clinical supervisor receives the appropriate evaluation form. Forms can be accessed via the “Attending Evaluation” link in the student’s Kobiljak online Clerkship schedule.

Students should assertively seek feedback on his/her performance throughout the course of the clinical rotation. Students should also sit down and discuss the formal evaluation with the clinical supervisor. Students should keep a copy of the evaluation and leave the original with the Medical Education Office at the clinical training site where that office will review, sign, and forward the completed form to the COM Office of the Registrar. It is important to know that evaluations will not be accepted by the COM Office of the Registrar if submitted by the student. Any evidence of tampering or modification while in the possession of the student will be considered “unprofessional behavior” resulting in an “N” grade and review by the Committee on Student Evaluation (COSE) and/or the College Hearing Committee.

Grades are held until all rotation requirements, including evaluation forms, are received. Be sure you are using the correct form.

Student Evaluation of Rotation Students will submit their rotation evaluations electronically at the conclusion of every rotation by accessing the evaluation system at:

http://hit-filemakerwb.hc.msu.edu/Clerkship/login_student.html

EXPOSURE INCIDENTS PROTOCOL

A form has been developed by the University to report exposure incidents. These forms will be on file in your DME's office. You can also access the form at www.com.msu.edu/AP/clerkship_program/clerkship_documents/exposure.pdf. Please make yourself familiar with the procedure and the form.

Principles and Practice of Geriatric Psychiatry. Editors: Professor John R. M. Copeland, Dr Mohammed T. Abou-Saleh and Professor Dan G. Blazer. Copyright & 2002 John Wiley & Sons Ltd Print ISBN 0-471-98197-4 Online ISBN 0-470-84641-0. Principles and Practice of Geriatric Psychiatry. Principles and Practice of Geriatric Psychiatry. Editors: Professor John R. M. Copeland, Dr Mohammed T. Abou-Saleh and Professor Dan G. Blazer. Assessment | Biopsychology | Comparative | Cognitive | Developmental | Language | Individual differences | Personality | Philosophy | Social | Methods | Statistics | Clinical | Educational | Industrial | Professional items | World psychology |. Clinical: Approaches • Group therapy • Techniques • Types of problem • Areas of specialism • Taxonomies • Therapeutic issues • Modes of delivery • Model translation project • Personal experiences •. The three Ds of geriatric psychiatry—delirium, dementia, and depression are common and challenging diagnoses among elderly. Delirium is often difficult to diagnose and is an independent risk factor for morbidity and mortality in older adults. Dementia also affects a significant number of older adults and is associated with delirium, depression, fra American Association for Geriatric Psychiatry. 7910 Wood-mont Ave., Suite 1050, Bethesda, MD, 20814. • Research in geriatric psychiatry and related fields focuses on elucidating the epidemiology (how conditions are distributed throughout the population), genetics (inheritance), risk and protective factors, etiology (causal factors), pathophysiology (how the different conditions develop and progress within the body/brain), symptomatology (how different people manifest the conditions), and treatment of mental disorders and. Aims and ScopeThe American Journal of Geriatric Psychiatry is the authoritative source of information for the rapidly developing field of geriatric... • The American Journal of Geriatric Psychiatry. Editor-in-Chief: Charles F. Reynolds III, MD. View Editorial Board.