SIUSOM Objectives for Graduation

Objectives for graduation have a number of important functions. They provide:

1. A description of the basic skills, knowledge, and behavior expected of graduates of the School of Medicine;
2. A basis for assessment and evaluation of performance;
3. A blueprint for curricular development and implementation;
4. A tool for evaluation of curricular development and implementation;

I. THE PATIENT ENCOUNTER – CLINICAL SKILLS

When the student encounters a patient with a presenting complaint (or complaints), the student should be able to:

A. Obtain an accurate medical history. When using an EHR or in a telehealth encounter, do so in a manner that does not interfere with the patient-doctor relationship.

B. Perform a complete and appropriately focused organ system specific physical examination, including a mental status examination.

C. Accurately interpret patient responses and physical findings.

D. Develop a problem list that includes the consideration of all psychosocial and social variables.

E. Demonstrate an investigatory and analytic approach to the information obtained to reach a working or provisional diagnosis (clinical reasoning).

F. Develop a plan for any necessary investigations to confirm the diagnosis. The following should be considered:
   a. Availability, reliability, and validity of the requested tests or procedures. (Principles of evidence-based medicine) In doing so, students must:
      i. Appropriately use sensitivity, specificity, and predictive values of the test.
      ii. Understand the importance of the prevalence of disease in interpretation of tests.
      iii. Estimate pre-test and post-test probability of disease.
   b. Risks and complications
c. Discomfort and inconvenience to the patient
d. Cost and its impact on the patient and society
e. The patient’s wishes and values.

G. Accurately interpret the results of all tests ordered and modify the problem list and the differential diagnoses accordingly.

H. Design and implement a comprehensive management plan for the patient. The following should be considered:
   a. Therapeutic goals;
   b. Informed consent, including benefits, risks, and treatment alternatives of the proposed interventions;
   c. Discomfort and inconvenience to the patient;
   d. The patient’s goals, expectations, and ability to adhere to treatment proposals;
   e. The patient’s cultural and religious values;
   f. The indications, contraindications, and side effects of the therapies involved;
   g. Available resources (including patient, family, health care system and community);
   h. Legal and ethical requirements;
   i. The structure and function of health care delivery and payment systems, and how payments for medical care affect decision-making and care provision.

I. Consult other health care professionals to enhance the quality of care.

J. Arrange for follow-up on all problems identified.

K. Monitor the effectiveness of therapy and modify when indicated.

L. Recognize patients with immediate life-threatening conditions and institute initial care.

M. Identify and design plans to manage situation that require on-going support: chronic, complex illness; chronic pain, permanent disability; death and dying.

N. Provide appropriate health maintenance, health counseling and disease-prevention strategies.

O. Comply with infection control guidelines and the use of universal precautions.

P. Perform common technical procedures.
   a. Venipuncture
   b. IV catheter insertion
   c. Suturing of lacerations
   d. NG tube insertion
   e. Foley catheter insertion
   f. Arterial puncture
II. KNOWLEDGE

Students should be highly knowledgeable about medicine to provide the best possible care for patients; they should demonstrate:

A. An understanding of the importance of the scientific foundation upon which medicine is based and a commitment to the need for lifelong reflection and learning for the purpose of maintaining and enhancing professional competence.

B. Knowledge of the normal structure and function of the body and each of its major organ systems.

C. Knowledge of the molecular, biochemical and cellular mechanisms that are important in maintaining the body’s homeostasis.

D. Knowledge of the altered structure and function (pathology and pathophysiology) of the body and its major organ systems that are seen in various diseases/conditions/patient presentations.

E. Knowledge of the rational use, risks, and benefits of medical therapies.

F. Apply established and emerging principles of clinical sciences to diagnostic and therapeutic decision-making, clinical problem-solving, and other aspects of evidence-based health care.

G. Apply principles of social-behavioral sciences to provision of patient care, including assessment of adherence, and barriers to and attitudes toward care. Such factors include:
   a. Specific cultural, ethnic, and societal beliefs and behaviors;
   b. Patients’ age, education, primary language, finances, and family resources;
   c. Alternative or complementary medical practices.

H. Apply principles of epidemiological sciences to the identification of health problems, risk factors, treatment strategies, resources, and disease prevention/health promotion efforts for patients and populations.

I. Knowledge of the capabilities and limitation of information technology and the management of knowledge, including:
   a. Searching, collecting, organizing, and interpreting health and biomedical information from different databases and sources;
   b. Retrieving patient-specific information from an electronic health record.
   c. Using information and communication technology to assist in diagnostic, therapeutic, and preventive measures, and for surveillance and monitoring health status;
   d. Maintaining practice records for analysis and improvement.
III. INTERPERSONAL AND COMMUNICATION SKILLS

Demonstrate interpersonal and communication skills that result in the effective exchange of information and collaboration with patients, families, health care professionals/teams.

A. Communicate with patients, families, health care professionals and the public as appropriate with respect, sensitivity, and compassion in a culturally sensitive and jargon-free manner.

B. Provide a well-organized, concise, and thorough oral presentation of a patient’s problem.

C. Produce comprehensive and timely written documentation to facilitate patient care, including initial history and physical examination, follow-up notes, physician orders, and prescriptions.

D. Function as an effective member of the health care team through cooperative interaction with health and social service professionals, families, and other caregivers.

E. Demonstrate sensitivity, honesty, and compassion in difficult conversations, including those about death, end of life, adverse events, bad news, disclosure or errors, and other sensitive topics.

F. Demonstrate insight and understanding about emotions and human responses to emotions that allow one to develop and manage interpersonal interactions.

G. Apply negotiation and conflict resolution skills in interpersonal relationships.

IV. COMMUNITY/PUBLIC HEALTH/PREVENTIVE MEDICINE

Students should be highly knowledgeable about community and public health to provide the best possible care for populations. Students should be able to:

A. Articulate the importance of public health measures in promoting health and wellness and preventing disease.

B. Advocate for quality patient care and optimal patient care systems.

C. Describe the health status of a defined population and identify subgroups whose health status differs significantly from the population at large.

D. Define specific public health problems in terms of incidence, prevalence, risk factors, and socioeconomic impact.

E. Define the roles for the physician in relation to other service providers and community agencies in preventing health problems or maintaining health.

F. Participate in identifying system errors and implementing potential systems solutions.

G. Apply the principle of preventive medicine, including screening and case findings, for individual patients and populations.
H. Know when and how to report incidents of domestic violence, including child, elder and spousal abuse.
I. Describe other legal and regulatory reporting responsibilities.

V. SELF-ASSESSMENT/PROFESSIONAL DEVELOPMENT SKILLS

Students should be able to assess their own skills, those of their colleagues, and those of the programs in which they participate. This assessment should provide thoughtful, appropriate, and constructive feedback for professional development. Students should be able to:

A. Evaluate their own skills, deficiencies, and limits in their own practice patterns, fund of knowledge and communication abilities. In areas that are lacking, the student should have the ability to commit him/herself to making a change, set learning and improvement goals and seeking appropriate resources and guidance to do so.
B. Assess the practice patterns, teamwork, and communication skills of their colleagues and offer meaningful formative feedback as appropriate.
C. Continually identify, analyze, and implement new knowledge, guidelines, standards, technologies, products, or services that have been demonstrated to improve outcomes.
D. Critically analyze the medical literature using the principles of evidence-based medicine.
E. Participate in the education of patients, families, students, trainees, peers and other health care professionals.
F. Provide leadership skills that enhance team functioning, the learning environment, and/or the health care delivery system.
G. Demonstrate healthy coping mechanisms to respond to stress.

VI. PROFESSIONAL AND ETHICAL BEHAVIOR

The student should demonstrate a commitment to carrying out professional responsibilities and an adherence to ethical principles in all activities, both with patients and all members of the health care team. The student should be able to demonstrate:

A. Treatment of the patient as a person, not a disease.
B. Respect of the patient’s rights, autonomy, and privacy, and maintaining confidentiality of patient information.
   Compassion, integrity, and respect for others.
C. Accountability to patients, society, and the profession.
D. Self-motivation; self-discipline; and personal integrity, including both honesty and reliability.
E. A professional image that is consistent with the medical professions’ accepted contemporary standards in the community.
F. Sensitivity and responsiveness to a diverse patient population, including but not limited to diversity in gender, age, socioeconomic status, culture, race, religion, disabilities, and sexual orientation.

G. Recognition of personal biases and steps taken to disallow personal bias to interfere with care.

H. Recognition of personal limitations (intellectual, physical, or emotional) and work with, accept help, or otherwise adapt to them.

I. Recognition of the importance of personal and family roles and the need to balance them with professional demands.

J. Recognition that personal self-care is vital to the health of the student and the care he/she provides.

K. Application of principles that govern critical decision-making to common ethical dilemmas faced by physicians.