

Table of Contents

	Page
Examination Policies and Procedures	2
Exam Rules	3
Exam Question Reviews	5
DxR Clinician	6
Excused Absences for Observance of Religious Holidays	7
Microbiology	8
Pathology.....	13
Pharmacology	18
Introduction to Clinical Medicine	23
Psychopathology	31
Bioethics.....	33
Community and Preventive Medicine.....	35
Healthcare, Policy & Finance	38

IFM Website: <http://webcampus.drexelmed.edu/ifm>

Examination Policies and Procedures

Missed Examinations- Preclinical Years

Students are responsible for knowing the examination schedule and for noting any published changes in an examination schedule. If a student misses an examination without the Associate Dean for Student Affairs or his/her designee validating the reason, the course director may assign a grade of zero (0) for that examination. Students in all years of study, who must miss a scheduled examination, must have their reasons validated by the Associate Dean for Student Affairs, or by that individual's designee.

ONE make up date will be assigned for each scheduled examination. Students who are excused from the initial examination will be required to take the make up examination at that time. In the event that a student is unable to take the make up examination at the scheduled make up date, the examination will be offered during the final week of Winter Break, during Spring Break, or during the first week of the Summer Break, which ever is closest to the original date of the examination. This will be the final offering of the examination, and students who do not take missing examinations at this date will receive a zero (0) for the examination.

As many examinations are cumulative in nature, the student is held responsible for all material tested during examinations, whether the student has taken the initial examination or whether the student will be taking the make up examination at a later date.

Valid reasons for missing an examination include:

- Emergencies: personal or family.
- Unplanned emergency travel (usually related to the above).
- Personal illness (requires a physician's note).
- Special categories (includes, for example, childbirth or complications of pregnancy).
- Major family events over which the student has no scheduling control.

Unacceptable reasons to miss a scheduled examination:

- Not feeling prepared for the examination.
- Test anxiety.
- Non-emergency travel reservations at a time conflicting with a scheduled exam or exams, regardless of when they were made.
- Business or other appointment at a time that would conflict with an examination.

The Associate Dean for Student Affairs or his/her designee evaluates each student's request on its individual merit. Students in the first two years with approved absences from examinations are responsible to arrange the timing of make-up examinations with the individual course directors. **IFM policy is that exams may not be taken early.**

YEAR 1 AND 2 EXAM RULES

When you start the examination:

- Students are expected to be in place at their test site approximately 10 minutes prior to the start of each examination. Students must have a clear desktop and may NOT have study materials open at this time.
- No additional time will be given to latecomers. If you arrive more than 20 minutes late for an examination, you must report to the Dean of Student Affairs.
- The only questions you may ask during an exam pertain to the physical condition of the exam, such as a missing page, incorrect question numbering, or illegible copy.
- **Issues of content (including possible typographical errors) can be addressed during the examination review session.**
- All Year 1 module exams are timed by multiplying the number of multiple-choice questions by 1.4 minutes and rounding up to the nearest 5 minute interval (e.g., a 92 minute test would be given 95 minutes).
- All Year 2 module exams are timed by multiplying the number of multiple-choice questions by 1.3 minutes and rounding up to the nearest 5 minute interval.
- Laptop computers, PDA's and other graphing calculators and **other programmable computer-like devices are not allowed.** You will be given a calculator to use during certain exams. You must return it after the exam. Cell phones must be turned off during examinations. Headphones and CD players are not allowed in the examination room.
- **Year 1- Upon completing your examination, follow the instructions regarding returning or keeping the exam booklet.**
- **Year 2- The last page of your exam booklet is a blank answer key, which you should use to record your answers. This portion of the exam booklet you may keep, and you should detach it from the booklet.**

When you finish the exam:

- When time is called, **ALL PENCILS MUST BE PUT DOWN IMMEDIATELY.** Failure to do so is a violation of the HONOR CODE. In addition, if you do not comply with this regulation, you will be reported to the Dean of Student Affairs. You must write your name and ID number on all sheets and finish filling out your answer key **BEFORE** time is called.
- Upon finishing, you must turn in your answer sheet and exam booklet, unless instructed to keep the exam booklet (Some exams in Year 1 permit the student to keep the exam booklet- Instructions will be noted on the exam booklet). **There are no "KEEP" booklets in Year 2.** You should tear the answer key from the exam booklet if you have not already done so. Not returning an exam booklet is considered an **HONOR CODE VIOLATION**, and non-complying students will be reported to the Dean of Student Affairs.
- **You must leave the auditorium and may not remain in the atrium to talk.** Atrium noise is disruptive to students still taking the examination.
- Students completing their examinations within 10 minutes of the official end time for the exam will be required to remain in the examination room until all exams have been completed and collected.

What If:

- **You cannot take the exam at the scheduled time?**
You must first contact the Dean of Student Affairs for permission to take the exam at a later date. No students will be allowed to take a make-up exam without the Dean's permission. IFM policy is that examinations may not be taken early, although exceptions may be made by the Dean of Student

Affairs. All make-up exams will be administered on a predetermined date and time by the IFM office (contact Mrs. Books x8140 for Year 1 and Ms. Maddox x8142 for Year 2). If a student cannot take the exam on the predetermined date, then the make-up exam MUST be taken during the next student break (Winter Break, Spring Break, Summer Break)

- **The score you receive does not seem correct?**

The optical mark scanner to score exams is remarkably accurate. However, if after reviewing your answers during the exam review, or after answers are posted for Year 1, you feel strongly that your score is incorrect, please record the date of the exam, the subjects tested, and keep your answer key. There will be a "Scantron Reconciliation Day" scheduled at year's end. At that time you may make an appointment to review the exam booklet(s) and scantron(s) in question to determine whether a scoring error was made. Information will be forwarded to the class concerning the process and scheduled dates.

EXAM QUESTION REVIEWS (Fundamentals & Cardio-Pulmonary Exams)

In the second year IFM curriculum, all of the exams are protected. Course directors and faculty spend a lot of time and energy composing high quality board format exams which are used to evaluate student progress. However, exams are learning tools as well and we want you to learn from your errors. To accomplish this, we have developed the EXAM REVIEW session as one way for you to learn from the exam.

Approximately one week after each exam, a session designated Exam Review has been scheduled. The time at which they are scheduled varies, so please check the schedule. At that time, the course director will go over exam questions or concepts covered in the exam with which a large percentage of the class had difficulty. Time permitting, questions from students present at the session will be addressed. **These sessions will not be taped and students CANNOT take notes. It will be considered an Honor Court violation for a student to attend the session who did not yet take the exam.**

These sessions are optional. We anticipate that these sessions will fill the needs of most students; however, if you failed or barely passed an exam, you are encouraged to make an appointment with the course director to review the entire exam.

The formal exam review sessions will be held for the first two exams only. For the remaining exams, you must make an appointment with the appropriate course director or their course assistant to view an individual exam. If you make an appointment to see your exam, you will be given a copy with the correct answers indicated. **You will NOT see YOUR exam.** You should bring your tear-off exam answer sheet to the session to increase efficiency and productivity of the session.

DxR Clinician

Several years ago the College of Medicine purchased an exciting new web-based software package, DxR Clinician, which helps to teach and evaluate clinical reasoning skills. DxR Clinician also allows the student to apply basic science knowledge to this clinical reasoning and management process. Students are presented with virtual patients from whom they will take histories, perform physical diagnoses, and order laboratory studies. While collecting this data, students will compile and narrow a list of working diagnostic hypotheses. Finally students will form a problem list and management plan.

This year, during many of the modules, we will assign a multidisciplinary case that will pertain to that module. Students will have a deadline for finishing each case. Following student completion of a particular case on-line, the faculty will provide teaching and feedback through an on-line didactic.

Excused Absences for Observance of Religious Holidays

Students may request an excused absence from mandatory academic activities including quizzes, exams, conferences, clinical experiences etc... in order to observe a religious holiday. All requests to observe religious holidays during the 2010-11 academic years must be made in writing to the Dean of Student Affairs by August 23, 2010 and must include the name of the religious holiday and the corresponding date(s). Request for travel time will not be honored. Students will be required to make up missed mandatory activities as indicated by the Dean of Student Affairs or appropriate course/clerkship director.

INTRODUCTION TO MEDICAL MICROBIOLOGY

MEDICAL MICROBIOLOGY COURSE OBJECTIVES

Medical Microbiology presents the basic biology of and disease processes caused by the major human microbial pathogens. A strong emphasis is placed on recognizing organisms as etiologic agents in the context of a clinical presentation. We feel that this approach is appropriate for 2nd year medical students who are beginning to develop clinical reasoning skills. The course is taught in an organ system approach and the material is integrated/coordinated with Pathology, Pharmacology and Introduction to Clinical Medicine. At the end of this course, you should be able to:

- Describe the major differences between viruses, bacteria, fungi, and parasites in terms of structure and morphology, reproduction, physiology and laboratory identification.
- Describe the pathogenesis and virulence factors of medically important microorganisms and the diagnosis, epidemiology, immune response, treatment and prevention of diseases caused by them.
- Identify these organisms in the context of a clinical presentation of a patient.
- Develop a rational differential diagnosis (organisms) when presented with a clinical vignette.
- Understand how clinical microbiology labs handle clinical specimens and establish a diagnosis. Critically evaluate clinical laboratory data including Gram Stain results.
- Use the appropriate resources, including peer reviewed scientific and medical literature to research current information about medically important pathogens.
- Develop the ability to work with peers/colleagues in a group setting to achieve common learning objectives.

I. COURSE ADMINISTRATION

The Course Director for Medical Microbiology is **Donna M. Russo, Ph.D.** My office is G47 at Queen Lane and I can be reached at 991-8556 (office). All matters relating to the course, particularly matters of organization and grading, should be addressed to me. Please see me promptly, if you run into academic difficulty in the course.

II. COURSE EXEMPTION

Students who have taken an equivalent medical school level Medical Microbiology course may submit a written request (email) to Dr. Russo by August 13, to take an exemption exam. The request should provide the course syllabus, grade, where and when the course was taken. Each student will be notified whether or not she/he qualifies to take the exam. The exam will be given on Tuesday, August 24th, from 7am to 9am in room G46. Required minimum grade for exemption is 70%.

III. EXAMS, EXAM REVIEW AND GRADING

Students are responsible for information in lectures, module notes, required reading assignments, self studies, laboratories and conferences.

Each module exam is partially cumulative. The cumulative nature of module exams is in the area of broad topic areas such as those covered in Fundamentals or in topics that cross modules ie., vaccines. Also, once an organism has been introduced in the course, it may be used in the options lists of any module exam and in fact, it may be the answer. **Many questions start with a clinical vignette and many include pictures of organisms, gram stains of clinical specimens, rashes etc..** In addition, 2.0% of the final grade will be based on laboratory and conference participation. The final comprehensive microbiology exam will have approximately 80 questions covering the entire course with an emphasis on recognizing microorganisms in a clinical presentation and is worth 18%.

Students must meet two criteria in order to pass the course: 1) **achieve a total score of at least 70% including the final exam and 2) pass the final comprehensive exam.** Students who achieve 70% or greater in the course but who fail the final exam will get a grade of **Marginally Unsatisfactory**. They will have the opportunity to remediate this deficiency by passing the NBME Microbiology shelf exam. Students whose course average is below 70% or who fail to remediate the comprehensive final by passing the shelf exam will receive a grade of **Unsatisfactory** and must repeat the course or take a summer course. Students with an overall course average of 92% or above will receive the grade of **Honors** while those with course averages between 90% and 91% will receive the grade of **Highly Satisfactory**. **There is no rounding up when assigning Honors or High Sat grades.**

Students will have the opportunity to fill out a separate answer key during each exam. This is for the students own use and is NOT the official answer key. Students may request an appointment with either the course director or the course coordinator to review an exam within 3 weeks of that exam. Your individual exam is not available, however an exam with the correct answers will be provided that you can compare against your answer key. If you did well on the exam (near or above the mean), make the appt with the course *coordinator*. If you failed the exam or did significantly lower than the class mean, you should make an appt with the course *director*. **In general, module exams are NOT available for review prior to the final comprehensive exam in May.**

IV. LABORATORY AND CONFERENCE

Attendance at laboratory and conference sessions is **HGHLY RECOMMENDED** but not required. There are no makeup sessions. Points for lab/conference participation are only awarded if you **attend** and complete the assigned exercises. **All lab and conference material may be tested on exams.** Some of the material presented in lab/conference supports lecture content but a percentage of lab/conference material is new and will only be presented in that venue.

Conferences: Conferences are run with several different formats. In some sessions, you will come to conference and work on cases or problems in class as small group. These are meant to enhance clinical applications and to provide practice in differential diagnosis for the organisms covered. Conference material is **NOT** provided on the web. It combines a review of organisms covered in lecture with new material that will not be covered in lecture.

V. BREAKDOWN OF COURSE GRADE

Module	Lectures/Self-Studies	Labs	Conferences	% of Grade
Fundamentals	20.5	4	0	18
Cardiovascular	2.0	1	0	2.0
Pulmonary	8	0	1.5	10.5
Renal	0	0	1	0.5
Derm/Rheum	9.5	0	1.5	13
Neuro-Psych	7.5	0	1	11
Gastrointestinal	10.5	0	1	12.5
Reproductive Health	4.5	1.5	0	6
Oncology/ Immunocompromised	3.5		2	5
Final Exam	-	-	-	18%
Lab & Conference Participation	-	-	-	1.5%
Pathogen Paper				2.0

Laboratory / Conference Grade Breakdown

Pure Culture/Normal Flora Worksheet (WS)	1 points
Gram Stain WS	1
Viral Diagnostics WS	1
Pulmonary Conference	1
DxR Cases	4
Unknown Exercise	4
Heme/Onc Conference	3
TOTAL	15 points – 1.5% of total grade)

VI. PATHOGEN PAPER

The purpose of this paper is to develop each student's skill in accessing the primary literature, critically reviewing and analyzing this literature and to demonstrate good writing skills.

Sometime in September each student will be assigned a pathogen to research. You may have the same assignment as the other students in the class but you are required to work alone. The format of the paper is as follows. It is two to three pages SINGLE SPACED with 1 inch margins – including references. There are three sections and each will be graded separately; 1) Pathogen Overview, 2) Research and 3) References.

In the Pathogen Overview, you should cover a review of the organism which includes morphology, transmission, epidemiology, pathogenesis, diagnosis and treatment/prevention. This should be covered in approximately 1 to 1.5 pages. Textbooks and review papers are good resources for this part of the paper. In the Research Section, choose ONE area that you are interested in learning more about and use at least **two primary research articles not review articles** to research and summarize the topic. Choose one area to investigate; for instance a new therapy, or vaccine that is in development, a novel diagnostic tool or some research into pathogenesis/virulence. Write a summary of the two articles that covers 1) the research question 2) how it was addressed and 3) the findings, conclusion and significance. Explain what these studies add to the field. This section should be 1 to 1.5 pgs in length. The primary papers that you cite should be fairly recent – no more than 3 years old. Please remember that you must cite all references fully and DO NOT plagiarize texts, websites, other students etc... Write it in your own words. If you need help, feel free to consult with your lab facilitator or with me. All reference material should be cited in the text (by number) as appropriate and the full citation listed in a section labeled References at the end of the paper. Do not use footnotes. Sample reference: 1. Russo, D., F Smith and J Jones. "Title of article", Journal of Great Stuff, 151:114-118, 2008.

You will get your assignment in September and the paper is due on **February 15th by 5pm**. You may turn it in at any time during the year prior to this date, but all papers must be turned in by the due date. The penalty for turning in a late paper is 10% per day. You will email your paper to a conference facilitator who will grade all of the papers written on that pathogen. Your grader may not be your conference facilitator. Papers will be graded using the rubric listed on the course web site and all papers will be returned in April regardless of when they are turned in. My estimate for an Excellent to Very Good paper is that this assignment should take at ~ 10 hours.

VII. MAKE-UP EXAMS

In the event of illness or other circumstances that prevent the student from sitting for an examination, students must contact Dr. Samuel Parrish, Associate Dean of Student Affairs. With permission from Dr. Parrish a make-up exam will be administered by the IFM office at the scheduled time. Make-up exams will be comparable to the exams given to the general class.

VIII. RECOMMENDED TEXTBOOKS:

Each book has its strength and weaknesses for certain content areas in microbiology. Please look them over and purchase the one that suits you best. Faculty will assign readings from one or both of the books, depending on which book treats the content area best. Both books are on reserve in the library and periodically you may have to use the book that you did not purchase

1. Murray, Rosenthal, Kobayashi, & Pfaller, Medical Microbiology, 6th edition (Mosby, 2008).
Good comprehensive coverage of every organism – reasonable pictures and tables- a bit of a dry read.

Murray, Rosenthal, Review of Medical Microbiology, 2005 *This is an excellent source of questions with annotated answers and it references sections in the parent book. However, it can be used as a stand alone question resource. I highly recommend it as a source of practice questions.*

2. Schaechter's Mechanisms of Microbial Disease LWW 2006
This book is divided into 2 sections – it has an overview of the pathogens organized by genera and an organ system approach as well. It's extremely well written and very interesting to read - really puts the pathogens in context, great cases and pictures. It is not a comprehensive text as it tends to focus on model pathogens. It comes with online access to 300 board style questions.

IX. TEACHING FORMATS

We realize that individual students learn in different ways. Some learn best when they read, others when they hear it in lecture. Some prefer "just the facts", while others prefer descriptions of clinically-oriented situations. In an effort to fulfill the needs of all students, our faculty utilize various teaching strategies:

1. **Lectures** – many instructors present “the facts” using clinical cases or other clinically relevant material.
3. **Laboratory**: “Hands-on” development of clinically-relevant skills, and development of ability to apply and critically evaluate laboratory data. Also reinforces lecture material and demonstrates its application.
4. **Conferences** are designed to reinforce important concepts, apply basic science concepts to clinical situations and to practice and improve your professional peer interaction skills and your ability to critically evaluate data.

X. Participating Faculty in the Department of Microbiology

Faculty	Phone Number	Email
Brian Wigdahl, Ph.D Professor and Chair	991-8357	bwigdahl@drexelmed.edu
Donna M. Russo, Ph.D Professor Course Director	991-8556	drusso@drexelmed.edu
James M. Burns, Jr Professor	991-8490	jburns@drexelmed.edu
Thomas Edlind, Ph.D Professor	991-8377	tedlind@drexelmed.edu
Fred Krebs, Ph.D Associate Professor	991-8335	fkrebs@drexelmed.edu
Burton Landau, Ph.D Professor	991-8525	blaundau@drexelmed.edu
Richard Rest, Ph.D Professor	991-8382	rrest@drexelmed.edu
Akhil Vaidya, Ph.D Professor	991-8557	avaidya@drexelmed.edu
Donna M. Murasko, Ph.D Professor and Guest Lecturer		donna.murasko@drexel.edu
Course Administrator Maryann Mendoza	991-5353	mmendoza@drexelmed.edu

Pathology Course Description and Expectations 2010-2011

The purpose of the course in Pathology and Laboratory Medicine is to serve as a bridge between the basic sciences and clinical material. With this in mind, the course will attempt to enable the student to recognize and understand the diseases that s/he will encounter in clinical practice. The methodology of this presentation and expectations are discussed below.

GENERAL COURSE OUTLINE

- A. The course is presented in the form of lectures and regular seminar/laboratory sessions which serve to reinforce the lecture material.
- B. The course material will be presented throughout the year and the final examination will be given at the end of the year, after the last module exam has been administered.

ORGANIZATION

- A. **Lectures:**
Students are expected to attend the lectures. The primary purpose of the lectures is to present and review the most important aspects of the respective subject material. The lectures are not intended to be all encompassing in regards to the material.

Pathology is a very visual discipline and student's missing lecture will be at a disadvantage. The student is also expected to read the corresponding material in the textbook.

- B. **Laboratories:**
For the Laboratory sessions, the class will be divided into 6 groups of 30-35 students in each group. Each student will be required to attend the laboratory group to which they are assigned.
 - 1. The goals of the laboratory sessions are:
To discuss, review in depth, and further explore topics covered during the preceding lectures in a seminar atmosphere, using clinical, gross, and microscopic materials. The lab images, which are projected during the laboratory sessions, are available for student study at any time via the School's web page. The URL for the lab images is: <http://webcampus.drexelmed.edu/ifm> then go to the Pathology course web site (this page) and click the link at the top of the page.
 - 2. To review pathology "virtual slides" – these are digitized images of glass slides which allow for viewing at different magnifications and allow movement around the slide under the viewer's control. The website for these images is:
<http://www.path.uiowa.edu/virtuallidebox/>

Several virtual slides are integrated into the lab exercises; these will be reviewed

during lab session with your instructor.

C. Syllabus:

All lecture and laboratory syllabus material will be incorporated in the respective module syllabus distributed at the beginning of each module.

D. Other Departmental Opportunities:

Students are encouraged to attend conferences which are held in the Department of Pathology. See the Course Director for more information.

Students who are interested in attending an autopsy should contact the Course Director. Autopsies are not performed on a regular time basis but are handled when required.

E. Examinations and Grades:

Student grades for examinations and the final grades will be sent by email and posted on the course web site following analysis of performance on each examination.

Students with an unsatisfactory or marginal unsatisfactory grade on an exam will be notified by the Pathology Department and will be expected to contact the course director to discuss exam performance.

All requests by individual students to be excused from, or to reschedule an examination must be made through the Dean of Students

In order to stress the cumulative nature of this material, up to 25% of the questions on each exam may be from past modules.

Practical (image-based) Exam Questions:

Most Module Examinations will include a number of "image" associated questions. Students will be expected to recognize the images and answer questions relating to them. The images will be primarily derived from the images discussed during the laboratory sessions, however important images presented in the lectures or present in the textbook may also be utilized.

F. Evaluation (Grades)

The overall scheme for the evaluation of students in the course is outlined below. The final grade for the course will be based on the percent of the total achievable points listed below. Each point has the same weight, i.e. each exam question counts for approximately 1/475th of the final grade for the course.

Course Evaluation Summary
COURSE TOTAL 475 POINTS

Module Exams:

Fundamentals Exam	16% of total grade (approx 76 questions)
Cardiopulmonary Exam	15% of total grade (approx 71 questions)
Endo/Nephro Exam	10% of total grade (approx 47 questions)
Musculoskel Exam	6% of total grade (approx 30 questions)
NeuroPsych Exam	7% of total grade (approx 35 questions)
GI Exam	10% of total grade (approx 46 questions)
Repro/HemeOnc Exam	17% of total grade (approx 80 questions)
<hr/>	
Total for Module Exams	81% of total grade (approx 385 questions)
<hr/>	
DxR Cases	1% of total grade (5 points)
Final Exam	18% of total grade (approx 85 questions)
<hr/>	
Total Course Grade	100% of total grade 475 points
<i>Note: Each question equals one point toward the total of 475.</i>	

In order to pass (receive a grade of Satisfactory or above in) the Pathology Course, two criteria must be satisfied:

1. The student must have a passing cumulative grade in the course.
2. The student must attain a passing grade on the final examination in the course.

Based on previous experience, it is anticipated that the grade for passing both of these components will be 70% but this number may vary slightly based on statistical analysis.

In the past, Passing grades have been further subdivided into the following categories:

Honors has been awarded to students with grades in approximately the top 10 percent of the class (historically a grade of 91-92 percent and above)

Highly Satisfactory has been awarded to the next approximate 15 percent (historically grades of 88-90 percent).

Satisfactory has been awarded to the remaining students who pass the course (historically grades of 70% or above)

Remediation:

Students who fail to obtain a passing grade on the Final Examination will receive a grade of Marginal Unsatisfactory (MU) for the course regardless of their cumulative average heading into the examination.

To remediate the MU grade, a student will be required to take a remedial exam, (the National Board of Medical Examiners Pathology Subject "Shelf" exam) if granted permission to do so by the Pre-Clinical Promotions Committee.

A student who scores at or above the required level on the shelf exam will have the MU grade replaced on the transcript by a grade of Satisfactory.

A student who fails the remediation (shelf exam) will have the MU grade replaced on the transcript by a grade of Unsatisfactory.

Information for students who receive a grade of Unsatisfactory in the course:

The Pre-Clinical Promotions Committee will determine whether each student will be allowed to remediate the unsatisfactory grade and how that remediation may take place. Students who are permitted to remediate will most likely be offered the chance to take a summer course (**if one is offered – in Summer 2009 a course was available in West Virginia**).

G. Text books:

There are two major series of Pathology Textbooks available – the ‘Robbins’ series and the ‘Rubin’ series. One of the two major textbooks is **required** for this course. You may either select the Robbins or the Rubin textbook since both now have excellent adjuncts including ‘question books’ for review.

ROBBINS textbook and adjuncts:

- *Robbins and Cotran Pathologic Basis of Disease, 8th Edition*; Kumar, Abbas, Fausto and Aster, Elsevier, 2009.
- A **highly** recommended review book keyed to Robbins with lots of excellent board-type questions is: *Robbins and Cotran Review of Pathology, Klatt and Kumar, 2nd edition*, Elsevier, November, 2004. **Note: A new edition of this book is expected soon, but has not been released as of July, 2009.**
- Another text which some students find useful is *Basic Pathology, 8th Edition*, Kumar, Cotran, & Robbins, Elsevier, 2007. While not as complete or as detailed as ‘Big Robbins’ this text is nicely illustrated and presents ideas in a succinct fashion. (You may hear this called “Baby Robbins”).
- The Robbins series also features an Atlas that includes gross and microscopic images that are not found in the Robbins or Baby Robbins textbooks. Some students have found this useful. Here is the information about the book: Robbins and Cotran Atlas of Pathology, 1st Edition, Elsevier, 2006. **A new edition appears on the Publisher’s website, but I haven’t seen it in stores yet, it looks like it will be a paperback.**
- For a quick, handy, review outline, try *Pocket Companion to Robbins Pathologic Basis of Disease*, 7th edition, by Mitchell, Kumar, Abbas and Fausto, Elsevier, 2006. (You may hear this called “Fetal Robbins”).

RUBIN textbook and adjuncts:

- *Rubin's Pathology; Clinicopathologic Foundations of Medicine, fifth edition*, Rubin and Strayer, Lippincott, 2007.
- Another text which some students find useful is *Essential Pathology, 5th edition*, Rubin and Reisner, Lippincott, 2008. While not as complete or as detailed as the ‘Big Rubin’ this text is nicely illustrated and presents ideas in a succinct fashion. (You may hear this called “Baby Rubin”).

- The review book keyed to Rubin with lots of excellent board-type questions is: Lippincott's Review of Pathology, Fenderson and Rubin, Lippincott, 2006.
- The review outline version for Rubin is called Lippincott's Pocket Pathology, Hansel and Dintzis, Lippincott, 2005. (This could be called "Fetal Rubin").
- The Rubin series does not have an Atlas, but the Robbins Atlas would be fine to use.

Students are strongly encouraged to use the required textbook as a primary source. The syllabus, lecture notes, lectures, and laboratory-seminars cannot cover all the material you will be required to know, but will instead serve as a guide. The text will provide additional content. Ideally, the topics to be presented should be previewed in the text prior to the lecture/seminar presentation.

I. Computer-Assisted Instructional Material

The following are some additional web sites with pathology and related materials or information that may be useful or of interest.

<http://library.med.utah.edu/WebPath/webpath.html>

<http://www.path.uiowa.edu/virtualslidebox/>

<http://oac.med.jhmi.edu/Pathology/Viewer/MainMenu.html>

For information about the field of Pathology and career opportunities, try:

<http://www.asip.org/career/index.htm>

J. Contact Information:

Course Director:

Cheryl A. Hanau, M.D.

Hahnemann Office: Room 5110, New College Building - Mailstop # 435

Queen Lane: Room 111, next to Marie Hartman, across from the mailboxes

Tel: 215-762-8375

Beeper: 215-762-PAGE; then enter 17524#

Fax: 215-246-5918

E-mail: CHanau@drexelmed.edu

Academic Program Coordinator

Cheryl Simpson

Office: Hahnemann University Hospital (Center City Campus)

Room 5209, New College Building – Mailstop # 435

Tel: 215-762-6247

Fax: 215-246-5918

E-mail: CSimpson@drexelmed.edu

MEDICAL PHARMACOLOGY

INTRODUCTION

A primary objective of the Medical School curriculum is **to coordinate the teaching of basic science disciplines and clinical subjects, because present knowledge recognizes them as integral parts of a whole rather than as isolated fields of study.**

In the organization of the Pharmacology course, emphasis is placed on the scientific principles of drug actions. This implies that the selection of drugs for this study is based primarily on the clarity with which they can illustrate these general principles. In your study of these principles, you will find it necessary to draw constantly on your knowledge of Biochemistry, Anatomy and Physiology. This reflects the fact that Pharmacology covers, in essence, a continuum from the physical chemistry of drug-receptor interactions to the treatment of patients with the same drugs. Insight gained into the intervening mechanisms of action, and factors of metabolism and distribution of drugs in the living organisms are indispensable prerequisites for a complete understanding of drug actions.

You should realize that the Pharmacology faculty will not teach you clinical therapeutics per se; rather, they will attempt to guide you through lectures, demonstrations, conferences, and discussion, to help you understand the important principles of drug action (both desired and undesired (i.e. side effects)). You will soon realize that the diligent study of experimental pharmacology is the medium through which the recognition of these principles becomes transformed into a habit of scientific reasoning with regard to the action of drugs. When this is achieved, you will find yourself equipped with an essential prerequisite for meeting one of your future responsibilities; namely with the ability to make intelligent judgments on the therapeutic use of drugs in patients.

While the basic philosophy behind the Pharmacology Course does not encompass therapeutics as such, the fact remains that intelligent therapy is a reasonable and readily identifiable ultimate goal of pharmacological instruction in a medical environment. An early step toward this goal, second only in practical importance to the basic principles of Pharmacology, is the association of drugs with specific therapeutic objectives. Whenever possible, such relationships will be emphasized, but the major responsibility in this direction must be borne by the student as he/she approaches the clinical setting where the relationships can become more meaningful. The learning of names of drugs is a part of this process. Formal instruction will deal largely with prototypes, for the reasons outlined above. However, the student who limits his knowledge to prototypes will suffer a severe handicap.

Conferences, discussions and the laboratory play an important role in this course. They are intended to help you develop reasoning ability with regard to drug actions.

The required text is the Second edition of Principles of Pharmacology: The Pathophysiological Basis of Drug Therapy by Golan et al. The recommended texts are Katzung and Trevor's Pharmacology: Examination and Board Review and Antibiotics Simplified by Gallagher and Conan. The student is expected to use the assigned reading to gain a deeper understanding of the material covered in lecture. Examination questions may be taken directly from the textbook, generally focusing on those areas covered in lecture.

Pharmacokinetics Simulation

This is a computerized web-based simulation that will reinforce some of the concepts covered in the pharmacokinetics lectures. Students will be expected to work through the problem set in the manual. This exercise will take place on Thursday August 12, 9:00-11:00 am and 11:00-1:00 pm. Please see the list in the module guide to determine your laboratory assignment and time. Students will use their own laptops for this exercise. To ensure that there are enough computers, everyone should bring their computer to the laboratory.

WebDog Laboratory

This is a computerized web-based laboratory to examine the actions of autonomic drugs on a virtual dog. It will take place on August 23, 9-11:00 am and August 24, from 9-11:00 am. Please see the list in the module guide to determine your laboratory assignment and time. A lab report reporting the student's identification of six unknowns is required. **Although no grade will be given for this exercise, it is required to complete the course.** The groupings for this laboratory are the same as for the Pharmacokinetics Simulation. Students will use their own laptops for this exercise. To ensure that there are enough computers, everyone should bring their computer to the laboratory.

CONFERENCES

Conferences related to specific areas in the course are scheduled at appropriate intervals. There will be two conferences. These conferences will offer the students a chance to clarify material, and use information in problem solving sessions.

PAPER

Students will be expected to complete a paper evaluating a drug recently approved for clinical use. Please see the following pages for specific instructions. The paper will be graded pass/fail and will constitute 2% of the final grade. Students who have written a superior paper will receive a bonus percentage point. All papers will be read by at least one Pharmacology faculty member. The paper will be due March 25th at 5:00 pm.

DXR CASES

Several cases will be offered during the year. These cases will integrate clinical and basic sciences. There will be a pharmacological component in each case, which will reinforce topics covered in lecture. Students will get a 0.5 % credit for completing all of the cases. Credit will be given on a prorated basis if only some of the cases are completed.

EXAMS

There will be seven exams plus a cumulative final. For exams 1-7 there will be two to three multiple-choice questions per hour of lecture. The final will consist of approximately one question per lecture hour. Exam questions will cover material presented in lecture, assigned reading and conference material.

Exam 1 -- Fundamentals I and II

Exam 2 -- Cardiovascular and Pulmonary

Exam 3 -- Nephrology and Endocrine

Exam 4 -- Dermatology and Rheumatology

Exam 5 -- Neuropsychology

Exam 6 -- Gastrointestinal

Exam 7 -- Reproductive Health and Hematology/Oncology

Final --All modules except for the last one covered, approximately one question on each hour of lecture.

GRADES

In order to pass the course, a student must have a weighted average of 70% for all exams PLUS a score of 70% or better on the cumulative final.

The final will be given on March 7, 2011. There will be approximately one question per lecture hour.

The criteria for honors and remediation will be determined by the faculty at the end of the course. The Pharmacology faculty will make the final decision on all grades.

The distribution of course credit will be as follows.

17.01%	Fundamentals (55 questions)
14.23%	Cardiovascular +Pulmonary (46 questions)
6.81%	Nephrology Endocrine (22 questions)
10.21%	Derm.Rheum (33 questions)
17.63%	Neuropsychology (57 questions)
7.73%	Gastrointestinal (25 questions)
5.88%	Reproductive Health + Heme Onc (19 questions)
2.00%	New Drug Evaluation Paper (1% bonus for superior paper)
0.5 %	DxR cases (credit will prorated on a per case basis)
18.00%	Final

COURSE ADMINISTRATION

The course director for Pharmacology is Dr. Joel Horwitz. All matters relating to the course should be addressed to him. Please contact him by calling 762-2351 or by e-mail (Horwitz@Drexelmed.edu). His office is room number 8402 New College Building. Ultimate responsibility for the course lies with the Chair of the Department, Dr. James Barrett. Feel free to communicate with him directly with any issue by either e-mail (James.Barrett@Drexelmed.edu) or telephone (762-4530).

TOPICS NOT COVERED IN THE PHARMACOLOGY COURSE

The following topics are not covered in the Pharmacology Course but the student should have some knowledge of them:

- I. Drugs Influencing Growth and Development
- II. Dermat mucosal Agents
- III. Vitamins and Nutrient Supplements
- IV. Drugs Affecting Calcium Metabolism

NEW DRUG EVALUATION

One of the many ways you will utilize your knowledge of Pharmacology throughout your careers will be in evaluating a new drug for its effectiveness. To perform this task, you will need to have some knowledge of the sources of information about the drug, which will provide you with reliable, objective data. To introduce you to this process we would like you to evaluate a new drug. This is a required exercise. Students will work individually.

The report need not be limited to the questions listed below, if the student feels other information is relevant. The paper should be typed and double-spaced. There is no set length but in the past these reports have been about 3-4 pages.

PREPARING FOR THE REPORT

1) **Choose a new drug.** Each student will be given a choice of two new drugs. The list of students with the assigned drugs will be posted on Pharmacology Course web site, by December.

2) Databases such as Medline can be accessed through the library. There are other resources under "databases" including: STAT!REF, AHFS Drug Information, Mosby's Drug Consult, and USP DI Information. Electronic texts and references will give you up-to-date information. You may also use the Physician's Desk Reference. In addition, some useful links have been posted on the Pharmacology Course Web site.

4) The final report will be due March 25th, 2011, by 5:00 pm. Please submit hardcopies to a box that will be placed at the back of auditorium B. The report will be graded pass/fail and will constitute 2% of your grade. A bonus of up to 1% will be given to students who write a superior paper, which indicates extra effort and thought. If you do not complete the report on time and in acceptable manner you will not receive the credit.

POINTS TO CONSIDER

Select the primary source for the drug information

- a. Journal advertisement
- b. Advertising brochure (available from company representative)
- c. Package insert
- d. Company web site

Critique the primary source that introduced the drug to you, using the following points as a guide.

- 1) Summarize the basic points about the drug, including its mechanism of action, major side effects, and place in therapy.
- 2) How does the information from the pharmaceutical company compare with information for this drug available from independent sources? Indicate whether conflicts exist and identify the nature of the conflict.
- 3) Identify any statements in the primary source that were misleading, incomplete, inadequate or exaggerated.
- 4) By examining data from independent sources, indicate whether the listing of side effects and toxicities in the primary source was truly informative as to the relative importance.

- 5) If voids or inadequacies were present in the primary source, was the manufacturer willing to provide the necessary clarifying information. Evaluate the company's response.
- 6) Does the drug offer any clear advantages over currently available therapies? If so, what are they?
- 7) What sources in the clinical and scientific literature were most valuable to you in making your evaluation?
- 8) Identify any interpersonal communications which were of value in guiding your decision-making process, e.g. company representatives, hospital or community pharmacist, physician, colleague, other.
- 9) Reference your work.

**INTRODUCTION
TO
CLINICAL MEDICINE
(ICM)**

Course Description
and
Requirements

7/14/10

**INTRODUCTION TO CLINICAL MEDICINE
2010-2011
Course Overview**

The Introduction to Clinical Medicine (ICM) course serves as a bridge between the Basic Science and Clinical years. The purpose of the course is to lay the clinical foundation for your development into a physician. Numerous members of the clinical faculty, each sharing their area of expertise, will teach the course. The goals of this course are listed below. These goals will be accomplished through didactic lectures, small group case discussions, on-line patient cases, clinical skills workshops, standardized patient exercises and hospital-based instruction in physical diagnosis.

I. GOALS

1. To develop a medical knowledge base in the clinicopathology and pathophysiology of diseases.
2. To develop interviewing skills and the ability to conduct a thorough history, always focusing on the patient as a person.
3. To become proficient in the complete physical examination.
4. To understand the utility of adjunctive clinical tests, learning to use them cost effectively and as a means to answering specific questions.
5. To begin to develop the process of clinical reasoning.

II. COURSE DESCRIPTION

The ICM course is comprised of two components: Didactics and Clinical Skills.

A. Didactics Material:

1. Lectures: Given by the clinical faculty.
2. Small group case discussions and DxR Assigned Cases

a. Small group case discussions:

The goal of these sessions is to integrate the didactic material through actual clinical cases. Students will learn to dissect symptoms and signs, process clinical data, utilize tests and radiologic studies and finally generate a differential diagnosis. These sessions will be student driven with faculty facilitation. Students will receive cases and questions in advance.

b. DXR

The goal of these multidisciplinary online cases is also to integrate didactic material through clinical cases. Using assigned online cases, students will take histories, select elements of the physical examination, order laboratory and radiographic studies, make diagnostic hypotheses, and make management decisions. The focus of DxR is clinical reasoning. After students are given time to complete each case there will be teaching and feedback through an on-line didactic.

Attendance at small group sessions and completion of DxR cases is *expected*. A bonus point will be added to the final course grade for students who attend/complete the majority of these sessions/cases. Students who miss 2 or more sessions/cases will forfeit this bonus. You must have a passing course grade to be eligible for the bonus.

B. Clinical Skills

1. Clinical Skills Workshops

During the fall and early winter, there are multiple Clinical Skills Workshops each focusing on teaching a different component of the physical examination. Each workshop begins with a demonstration of the exam followed by supervised practice in small groups. In the fall are workshops in: Cardiology, Pulmonary, ENT, GI, and Musculoskeletal examination. In addition, there will be a CEAC practice session to practice the exam skills learned in the fall. In the spring there is a workshop in Female Breast/Male GU exams.

2. Standardized Patient Exercises

Nine Standardized Patient (SP) exercises occur during the year. In the fall, these are: 1) History taking Exercise 2) the Physical Exam Practice (SP#1) and 3) the Ophthalmology Exam. In the Winter/Spring these are: 1) Neurological Exam 2) Group Clinical Reasoning Exercise 3) SIM session, 4) Pelvic/Breast/Male GU Exam 5) Full history and Physical Exam session and 6) the CPEX (end of year Clinical Practical Exam, discussed later).

3. Physical Diagnosis Segment:

Beginning in January, you will put it all together and perform the complete History and Physical Examination on patients in the hospital. Faculty preceptors and fourth year medical student co- preceptors will supervise and guide you through these exercises. You will be divided into groups of 4 students and attend the hospital or office on either a Monday, a Wednesday, or a Friday. Full details will follow later in this semester.

SCHEDULING: Most clinical activities occur during the Monday and Wednesday afternoon sessions designated “ICM Clinical Skills” in your schedules, starting September 8, 2010. On any given Monday or Wednesday, only a portion of the class will be engaged in a workshop. The syllabus for Clinical Activities in ICM including all class divisions, schedules and handouts for clinical sessions will be distributed separately.

Attendance at all Clinical Skills Workshops, Standardized Patient Exercises and Physical Diagnosis sessions is required. All absences must be remediated.

Excused Absences: If necessary, you can change a clinical skills workshop or a Standardized Patient Session by switching with another student. All such switches must be approved and reported to the ICM Clinical Skills Coordinator, Kaye Finneran (215-991-8527) **at least 7 days prior to the scheduled session**. In the event of an emergency (including illness), you must contact the ICM office **before** the activity and arrangements will be made to remediate.

Unexcused Absences: Unexcused absences are considered unprofessional behavior and will be reported to the Dean of Students. In addition, students will be required to research a topic and write a paper on a clinical skills topic. Students who have an unexcused absence from a standardized patient session will be required to pay for the rescheduled standardized patient session as well as write a research paper on an assigned topic. The research paper will be due 14 days from the date of the missed activity. If the paper is not received by that date, 1% point will be deducted from the final ICM grade with an additional 1% point deducted for each additional week the paper is late.

III. GRADING AND REQUIREMENTS FOR ACHIEVING A “SATISFACTORY” IN ICM

A. Examinations

1. Written Module Examinations

All examinations must be taken. In the event of an emergency or an anticipated problem in taking an exam, students **must meet with Dr. Sam Parrish or Dr. Amy Fuchs in order to make any changes in the exam date.**

Material for exams will be derived from lectures, small group discussions and workshops. In calculating the cumulative examination grade, module exams are weighted to reflect the amount of material covered:

<u>Exam (Module)</u>	<u>% of Final Grade</u>
Cardiovascular/Pulmonary	17%
Nephrology/Endocrine	14%
Ophtho/Derm/Rheum	9%
Neuro-Psych	10%
GI	10%
Reproductive Health/Heme/Onc	<u>20%</u>
	80% of cumulative examination grade

Exam Review Policy: Module exams will be available for review in the ICM office for one month after the exam was given. No review of the final course exam is permitted. Students must make an appointment to review an exam with Linda Freer, ICM Course Coordinator.

2. Clinical Practical Exam (CPEX)

In March and April, each student will be scheduled for a one hour CPEX to assess his/her clinical skills in the History and Physical Examination. The student will

perform a complete history and physical on a standardized patient. This is the only standardized patient exercise that will be videotaped. The checklist for grading will consist of the essential components of a complete History and Physical Examination.

The CPEX grade will constitute 5% of your ICM cumulative examination grade. In addition, however, you must achieve a passing grade in this CPEX in order to complete ICM.

Absences: Absences must be approved by Dr. Sam Parrish or Dr. Amy Fuchs. Failure to do so constitutes an unexcused absence.

Unexcused CPEX Absences: Unexcused absences are considered unprofessional behavior and will be reported to the Dean and to the Student Promotions Committee.

Remediation of a Failure in the CPEX: Students who receive less than 70% in the CPEX will be required to remediate. The number of remediation sessions will be dependent on the degree of the deficit in Clinical Skills. This will be followed by a remediation CPEX examination which must be passed.

3. Final Examination

The final examination in ICM is a cumulative exam given after all modules are completed. It is aimed at testing the core concepts covered in each module. The examination is worth 15% of the Final Course grade. However, **you must pass the final examination in order to achieve a Satisfactory in ICM.**

4. Cumulative Examination Grade

Written Examinations.....	80%	of Cumulative Course Grade
CPEX.....	5%	of Cumulative Course Grade
Final Examination.....	15%	of Cumulative Course Grade
	100%	

B. Physical Diagnosis Preceptor Evaluation

In addition to a satisfactory Cumulative Grade as described below, **each student must receive a Satisfactory evaluation in the Physical Diagnosis segment from his/her faculty preceptor in order to receive a final course grade of Satisfactory.** The Clinical Skills assessed in these evaluations include: medical knowledge, history taking skills, physical exam skills, clinical reasoning, communication skills and professionalism. It will be emphasized to the preceptors in evaluations that we are interested in development and improvement of your skills, not perfection. **Attendance at all sessions is required.**

Remediation of a less than satisfactory evaluation may require the performance of additional H&P's at the conclusion of the course as determined by the preceptor.

C. Final Grade

The final course grade will be determined by factoring in the Cumulative Examination grade, attendance at small group case sessions/completion of DxR online cases, and the Physical

Diagnosis Preceptor Evaluation. **Students who do not achieve a Satisfactory grade in Professionalism may fail ICM on that basis alone.**

D. **Achieving a Satisfactory**

In order to receive a grade of Satisfactory in the ICM Course, students must have:

1. Attended all clinical skills activities
2. A final cumulative grade of $\geq 70\%$ in the course
3. A passing grade on the final examination
4. A CPEX grade of $\geq 70\%$
5. A satisfactory or better physical diagnosis grade

E. **Achieving Honors and High Satisfactory**

Students with a cumulative grade of 91 – 100% will be candidates for Honors. Students with a cumulative grade of 88-90% will be candidates for High Satisfactory. It is possible for students whose grade just borders the cutoff for Honors or High Satisfactory to achieve that final course grade by a superior performance in the Physical Diagnosis Segment of the course.

IV. **TEXTBOOKS**

A. **Required Texts**

1. *Cecil Essentials of Medicine* 10th ed Andreoli
2. *Guide to Physical Examination and History Taking* 10th ed Bates
3. *Rapid Interpretation of EKG's* 6th ed Dubin

B. **Strongly Recommended Texts (also used in third year clerkships):**

1. *Nelson Textbook of Pediatrics* 18th ed Behrman
2. *Obstetrics and Gynecology* 6th ed Beckmann

V. **COURSE LOGISTICS**

A. **IFM Website: webcampus.drexelmed.edu/ifm
ICM Website: webcampus.drexelmed.edu/icm**

B. **Class Divisions**

The Introduction to Ambulatory Care II Course, a separate course from ICM, consists of three separate 4-week sessions on Monday or Wednesday afternoons. During any one of these days, 1/6th of the class will be occupied with the Ambulatory Care Course. A portion of the remainder of the class will be involved in ICM Clinical Activities. Scheduling for these sessions is based on the division of the class for the Ambulatory Care Course, with the designation Groups A1, A2, B1, B2, C1, C2. These group listings are in the Clinical Activities Syllabus (posted on the Web) and on the ICM Bulletin Board located on the second floor. **Even if you are exempt from Ambulatory Care II, you will be listed in one of these 6 groups for the purpose of scheduling.**

Please note that if you have a problem with scheduling related to Ambulatory Care II, you should contact Kaye Finneran at (215) 991-8527 (IAC is a separate course from ICM but Kaye coordinates both of these courses.)

C. **Clinical Activity Scheduling**

The complete schedule for Clinical Activities will be distributed separately.

Upon receipt, please review your schedules immediately for your clinical activities dates. Note that a group may be listed for the same activity on two separate dates if the whole group could not be accommodated on one date. Be sure to locate your name on one of the two dates, and record.

D. **Equipment and Dress Code**

You will be expected to **dress professionally for all SP clinical activities and should wear your white jackets. You must also dress professionally for the ENT workshop in Dr. Divi's office.** You may dress casually for the other workshops during which you practice on each other but you should bring your instruments. You should be prepared at all clinical activities with your full set of instruments including stethoscope, otoscope, ophthalmoscope, reflex hammer, tuning forks-128 HZ and 512 HZ, pocket card to test visual acuity, and penlight.

E. **Supplemental Material**

Please utilize these materials, which have been specifically created to deepen and strengthen your clinical skills in patient interviewing, physical diagnosis, and clinical reasoning. **A collection of videos demonstrating individual components of the physical examination is available on the ICM Website. You can access questions for self-assessment on each component of the exam on the clinical skills portal. In addition, there are links for many of the workshops for supplemental material you can access from the course website.** There are also 6 blood pressure cuffs in the library which can be checked out for 3 hours at a time to use to practice taking blood pressures with a friend.

F. **Professionalism**

The standard University Professionalism forms will be utilized in this course for commendable and unprofessional behavior.

G. **Notification of Changes and Other Critical Information**

We will routinely use E-mail to notify you of important information in ICM. Important information will also be placed on the ICM Bulletin Board, but the best vehicle will be E-mail. The ICM Bulletin Board is located on the second floor in the corridor leading to the CEAC (Clinical Education Assessment Center).

H. **Course Administration** (Suite 221 - Queen Lane)

Course Director Deborah Ziring, M.D.
Phone (215) 991-8589

Beeper.....13185
Fax.....(215) 843-5495
E-Mail.....Deborah.Ziring@DrexelMed.edu

Assistant Course Director for ICM Clinical Skills.....Joanna Bell, M.D.
Phone.....(215) 991-8589
Beeper.....41395
Fax.....(215) 843-5495
E-Mail.....jbell@drexelmed.edu@drexelmed.edu

Course Coordinator Linda Freer
Phone.....(215) 991-8589
Fax.....(215) 843-5495
E-Mail.....lfreer@DrexelMed.edu

Course Coordinator, Clinical Skills..... Kaye Finneran
Phone.....(215) 991-8527
Beeper.....42142
Fax.....(215) 843-5495
E-Mail.....kfinnera@DrexelMed.edu

Dilip Ramchandani, M.D.
Professor
Department of Psychiatry
Friends Hospital
Telephone: 215-831-5369
Fax: 215-289-2053
E-mail: DRamchan@drexelmed.edu

MEMO

To: CLASS OF 2013
DREXEL UNIVERSITY COLLEGE OF MEDICINE

From: Dilip Ramchandani, M.D.
Director, Second Year Psychopathology Course

Subject: PSYCHOPATHOLOGY

Date: November 1, 2010 – February 10, 2011

Welcome to Psychopathology. The course will provide you with an introduction to the medical specialty of psychiatry and prepare you for the USMLE Step 1 examination and the psychiatry clerkship next year. These sessions, plus the clerkship, will teach you the basics of psychiatry necessary to practice good medicine.

For approximately three weeks in the Neuropsych module (and 4 hours in the GI module), we will meet for several two-hour sessions. The first hour will be a lecture and the second hour, an illustrative video of an interview with a patient, a standardized patient or a movie clip/s. The text, *Introductory Textbook of Psychiatry* by Andreasen and Black, 5th edition, contains **required reading** for the course. Lecture objectives will highlight what we think is important for the students to learn. Examination questions will reflect the **lecture objectives**.

The second hour is an essential supplement to the lecture presented in the first hour and will reinforce it by illustration and discussion. Some lecturers will integrate the lecture content and illustrative videos in a continuous 2-hours long session with a short break in-between. There will be some stand-alone lectures.

In the Neuropsych module, the course directors and many of the teaching faculty for psychopathology and pharmacology have made a concerted effort to coordinate their lectures. There is also a joint psychopharmacology-psychiatry conference toward the end of this module that we hope you will find useful

To encourage class attendance in the psychopathology course, you will receive 1 point for each 2-hour clinical session you attend. A sign-in sheet will document your presence. The sign-in procedure will be in keeping with the honor code. Signing in and leaving, coming in late to sign the attendance sheet or similar abuses will be regarded as cheating.

If you attend 75% of the 2 hour sessions, you will accumulate 1 point on your psychopathology examination to be able to elevate your final course grade. For example, someone who failed the exam by one point, but met the 75% threshold of attendance, would pass. Similarly, someone who was one point short of an “Honors” or “HS” on the course examination would benefit. This practice was put into effect at the recommendation of the class presidents about 15 years ago.

The final course grade would be determined by your score on the final examination in Psychopathology that is covered mostly in the Neuropsych Module and additional questions in the Endocrine and GI module examinations. Over the past several years, the mean percent correct of Psychopathology scores has shown great variability ranging from about 67% up to 82%. We, therefore, do not designate a passing raw score for the exam. Instead, we will tally the individual examination grades for each student. With that data, we prepare a histogram showing the distribution of the sum of the three scores for the entire class. If all of the students in a given class were closely bunched together at the low end of the curve, all students would receive a passing grade with no requirement for remediation. That has never happened. Typically, the distribution of scores shows an extended tail to the left (i.e., the lower end of score distribution). As a result, approximately 5 – 12 students are required to undergo a remediation examination upon the recommendation of the Pre-clinical Promotions Committee.

Remediation Process: Most students who have been required to remediate, have taken the remediation process seriously, have reviewed the Syllabus and assigned readings, and have passed the remediation examination on the first attempt. A few have not. The Pre-clinical Promotions Committee usually advises another period of remediation followed by retesting.

Remediation Examinations: The remediation examinations typically consist of the following: approximately 20 short answer questions focusing heavily on the self-assessment objectives in the textbook; some multiple choice questions based on clinical vignettes.

There is a discussion Bulletin Board available for clarifications and questions that is regularly monitored by me during the course. You may also reach me by email at dramchan@drexelmed.edu or by calling my assistant, Carole Szylobryt at 215-831-6927 or by email at cszylobr@drexelmed.edu.

COURSE SYLLABUS

Goal: The goal of the Bioethics Course is prepare students to engage in, and work through, ethical dilemmas as they arise in clinical practice. Students are introduced to the methods of ethical analysis, and are provided with a framework for understanding the major clinically relevant, bioethical issues of today. At the conclusion of this course, students should be able to recognize and analyze a range of common ethical dilemmas and justify a course of action.

Requirements: Required course material is presented through lectures, small group discussions, readings, and computer based learning modules. Students must complete a final course evaluation and pass a final multiple choice question exam:

a) Lectures & Small Group Discussions: Bioethics meets on Tuesdays and Thursdays. Bioethics lectures on Tuesdays are often followed by small group discussions led by a physician-facilitator. Small group assignments are posted online. Please attend the group to which you are assigned and sign in. Talk with your group leader, in advance, if you will be absent. Group times and room locations will vary - please check weekly posting. (Student small group meeting times will alternate between 3:00-4:00 and 4:00 to 5:00.)

b) Readings. Required readings are primarily in Resolving Ethical Dilemmas: A Guide for Clinicians, **fourth** edition by Bernard Lo. Additional required readings are posted on the course calendar or held on digital reserve in the library, as indicated in the session handout. Readings are best completed prior to lecture.

c) Computer Based Learning (CBL): Four CBL modules are assigned and each (Lakeside, Wagner, Hernandez, Watanabe) take 30-45 minutes to complete. Like the readings, modules should be completed prior to the class session in which the module will be discussed. You are responsible for the entire content including the material presented by the expert consultants. To access the program, go to *MedEthEx Online* at <http://webcampus.drexelmed.edu/MedEthEx>.

Note:

- You do NOT have to log in when working the case – you can skip the log-in prompt.
- The interactive technology has its technical limitations. The most important task is to elicit the details of the case by asking enough questions, access the information available from all the consultants, and formulate your own resolution to the case.

d) Final Exam: The exam includes multiple-choice questions in the format used by the National Board of Medical Examiners. Exam questions will be drawn from lectures, small group discussions, computer based learning, and readings. The exam is worth 100 points.

Grading: Course final grade is the final exam score (0-100). Students who receive a grade of Honors in Small Group will receive 2 bonus points toward their final course numerical grade. Criteria for Honors in small group are part of the Small Group Student Evaluation Form, posted on the course website. Grades are assigned as follows:

≥90 = Honors

80-89 = High Satisfactory

70-79 = Satisfactory

Below 70 = Requires remediation, subject to approval by Promotions Committee.

Schedule

DATES	TIME	TOPICS
Sept 14	2-3	1. Intro to Clinical Ethics & Medical Students' Ethical Dilemmas
	3-4 or 4-5	Small Groups
Sept 21	2-3	2. Informed Decision-Making: Consent and Refusal
	3-4	3. Confidentiality: Ethics, Law & Public Health
Sept 23	2-4	4. Ethics & Clinical Research
Sept 28	No Class	
Sept 30	No Class	
Oct 5	2-3	5. Ethics, Culture and Health Beliefs
	3-4 or 4-5	Small Groups
Oct 19	2-3	6. Ethics in Palliative Care – Part 1
	3-4 or 4-5	Small Groups
Oct 21	2-4	7. Ethics in Palliative Care – Part 2
Oct 26	2-3	8. Ethical Issues in Healthcare Allocation: Transplantation
	3-4 or 4-5	Small Groups
Oct 28	2-3	9. Ethics in Crisis
Nov 2	2-3	10. Health Law, Medical Mistakes & Malpractice: An Afternoon in Law School
	3-4 or 4-5	Small Groups
Nov 4	2-3	11. Ethics & Medical Professionalism
	3-4	12. Ethics & Legal Issues in Reproductive Choice
Nov 9	No Class	
Nov 11	No Class	
Nov 16	2-3	13. Ethical Issues in Pediatrics
	3-4 or 4-5	Small Groups
Nov 22	9:00–11:00	Bioethics Final Exam

Community & Preventive Medicine (CPM) Fall2010

Course Description and Requirements

Faculty

[Back to Top](#)

Rosemary Harris, MD

Assistant Professor

Co-Director Course in Community and Preventive Medicine

Department of Family Community and Preventive Medicine

Drexel University College of Medicine:

Family Medicine at Warminster Hospital

Phone: 215-441-7560

Email: rharris@drexelmed.edu

Julie Yeh, MD, MPH

Assistant Professor

Co-Director Course in Community and Preventive Medicine

Department of Family Community and Preventive Medicine

Drexel University College of Medicine:

Phone: 215-991-8746

Email: jyeh@drexelmed.edu

Goals

[Back to Top](#)

- To introduce students to the fundamental principles of and concepts in community health and preventive medicine, and to encourage their integration into the practice of medicine.
- To develop students' knowledge of the range of clinical and public health interventions to prevent disease and promote health.
- To provide examples of how clinicians can participate in disease prevention and health promotion activities in both the clinical setting and the community.
- To develop the students' understanding of how social, economic, cultural and political forces affect health behaviors, health status, health services delivery and the individual doctor-patient relationship.

Format

[Back to Top](#)

The instructional format will vary throughout the course, and will include lectures, problem-solving exercises, self-study and readings.

Handouts and Lecture Outlines

[Back to Top](#)

The handouts and articles for each session will be distributed as part of the module guide. Please remember to bring the lecture outline to the class. We will NOT have any extra copies in lecture for those who forget to bring their handout(s). Session outlines will also be posted on the university web site whenever possible.

Recommended Resource Text

[Back to Top](#)

No required textbook.

US Preventive Services Task Force. Guide to Clinical Preventive Services,

<http://text.nlm.nih.gov/frs/dbaccess/cps>.

F Douglas Scutchfield, C William Keck - Editors Principles of Public Health Practice: (3rd ed) 2003, Australia, UK, USA, Thomson Delmar Learning

Course Requirements

[Back to Top](#)

Exams

There is an exam at the end of the following modules: Cardiovascular/Pulmonary (exam 1), and Ophtho/Dermatology/Rheumatology. Exams will cover class material, readings and in-class handouts.

Grading

There will be approximately 3-5 exam questions per each hour lecture. To pass the course, students must obtain an overall average grade of 70%. Students who achieve an overall course score of 90% or higher will receive the grade of **Honors**. Those who achieve an overall score of at least 80% will receive the grade of **Highly Satisfactory**. The remainder of students with passing grades will receive the grade of **Satisfactory**. Students whose overall class score is below 70% will receive the grade of **Unsatisfactory**.

Course Announcements & In-Class Handouts

Important announcements made in class will also be posted by e-mail/Bulletin Board.

Every effort has been made to include as many of the handouts in the packet of materials distributed at the beginning of each block. Nevertheless, there will be some materials distributed in class from time to time. If a student is not in class, it is the student's responsibility to find out what material, if any, was handed out and then arrange to obtain a copy from the IFM Office.

Exemption

Students with a Master in Public Health or equivalent significant documented graduate level experience may be eligible for an exemption from this course.

Please contact Dr. Harris or Dr. Yeh to discuss CPM exemptions. Copies of both your transcripts and relevant course syllabi are required for exemptions. **Requests for exemptions must be filed no later than 5 pm, Friday, August 27, 2010.**

Additional Resources

Community & Preventive Medicine course resources can be found on the course web page.

Resources for Community and Preventive Medicine

The resources listed include people, databases, textbooks and web sites. If an issue addressed in the course stimulates your interest in obtaining more information, these are the resources you should use initially. Of course, you should talk to the course directors if you have a problem or want some initial guidance to accessing the appropriated resource. Researching these learning issues often requires more than a textbook or a Medline search can offer. Here are a few suggestions on ways to approach these issues that hopefully will increase your repertoire of learning strategies, while enhancing your ability to address the vast array of community health and preventive medicine issues that arise in patient care.

Community Resources

[Back to Top](#)

1. Social Workers
2. Hospital Chaplain

3. Call and/or visit relevant public and private agencies including advocacy groups, support groups, technical assistance organizations, etc. These can be identified by:
 - o In Phila: calling the local United Way office's First Call for Help 215-568-3750. The receptionist has over 3,000 listings of local health and human service agencies.
 - o In Erie: consulting the "Service Directory for Human Resources in Erie County" published bi-annually by Gannon University. Bobbi Jo Fye has copies of this. Bobbi Jo can be reached at 814-871-7263.
 - o In Pittsburgh: consulting "Where To Turn" published by Allegheny County United Way. For information, please refer to <http://www.unitedwaypittsburgh.org>
 - o Browsing through the Guide to Human Services (blue pages) at the front of the Yellow Pages of the phone book.
 - o Talking with the receptionist, nurse, or other staff members at your office.

Databases

[Back to Top](#)

Medline gets you into the medical literature which is long on diagnosis and treatment but often short on discussion of preventive and public health aspects of patient care. The following databases may prove to be much more fruitful avenues of research: CINAHL (nursing and allied health literature), and PsychLIT.

Textbooks

[Back to Top](#)

No required textbook for the course. We will be posting notices about readings for individual lectures. Please check your email and Blackboard frequently.

Data Sources – will be posted on course website

Health Care Policy IFM Course
November – December 2010
Michael S. Weingarten, MD, MBA, FACS

Course, Description, Objectives and Policies

Description:

The Health Care Financing Course is an 8 hour lecture course reviewing health care economic issues from the perspective of a practicing physician.

Objectives:

Students at the end of the course should be able to:

1. Explain how the United States health care system has evolved.
2. Describe how federal tax laws have favored employer provided health insurance.
3. Discuss how government provided health insurance (Medicare, Medicaid, and SCHIPS) has evolved.
4. Discuss factors leading to the rise and fall of health maintenance organizations.
5. Discuss how current payment programs for health care providers affect the quality and cost of services.
6. Discuss the role of pharmaceutical companies in the health care system.
7. Explain the role of the Food and Drug Administration in regulating the health care market.
8. Discuss financial and political forces impacting physician training and specialty selection.
9. Discuss various state health care initiatives and their limitations.
10. Discuss health care systems in other countries.
11. Compare the health care proposals put forth by the current United States presidential candidates.
12. Explain health care initiatives supported by the current administration.

Attendance Policies:

1. Attendance at all four lectures is required.
2. Attendance will be taken at the beginning and end of each lecture.
3. Attendance sheets will be made available – name and student ID number are required.
4. Attendance requirements are similar to attendance requirements at professional meetings.

Student Evaluation:

1. The Health Care Financing Course will be graded on a Pass/Fail basis.
2. A pre-assessment examination will be given at the beginning of the first lecture.
3. The pre-assessment examination will consist of 25 multiple choice questions to be answered over 30 minutes.
4. The results of the pre-assessment examination will not count in the final grade.
5. A fifty question multiple choice examination will be given at the end of the course.
6. A minimum grade of 70% on the fifty question multiple choice examination and attendance at all lectures is required to pass the course.

7. Students attaining a grade of less than 70% on the fifty question final examination will be required to remediate the course by writing a minimum of a five page paper with at least five references on a health care topic assigned by the course director.
8. Students who fail to attend the lectures will be required to write two papers, each a minimum of five pages and each with at least five references on two different topics chosen by the course director.
9. Students failing to attend the lectures will be subject a Professional Citation as per the guidelines set forth by the Medical School.