**Emory Pediatrics Clerkship**

**Guiding Principles**

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

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

**Goals:** The Clerkship will focus on patient care experiences and problem solving strategies to:
- Teach students about Pediatrics.
- Inspire some students to pursue training in Pediatrics.
- Provide a solid foundation for Step 2 CK.

**Pediatric Clerkship Student Objectives**

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

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

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

- 2 weeks - General Inpatient Ward team at Egleston or Hughes Spalding
- 2 weeks - Primary Care clinic in a Community Practice
- 1 week – Subspecialty Ward team at Egleston
- 1 week – Nursery/ Emergency Department
  - Grady Nursery
  - Egleston & Hughes Spalding EDs

Evaluation:

Student assessments will be comprised of:

- 25% inpatient clinical evaluation (Clinical Assessment Forms)
- 25% outpatient clinical evaluation (Clinical Assessment Forms)
- 20% Aquifer Calibrate completion (Early and Late Assessments and Cases)
- 10% oral exam
- 10% simulation exercises (OSCEs)
- 10% observed effort and participation

In addition, to pass the clerkship, students must:

- Complete Aquifer Calibrate pre- and post-assessments
- Receive satisfactory or higher feedback on clinical care from preceptors
- Achieve a total score of 60% or higher on the clerkship
- Complete the OSCE exercise
- Complete required clerkship clinical time, including any required make up time per the School of Medicine Absent from Clinical Duties policy

If students do not achieve the above benchmarks to pass the clerkship, they will be provided an opportunity to remediate. If students need to make-up the OSCE exercise and/or clinical duties, they will receive an “Incomplete” until completion of these activities.
Student Assessment and Objectives/Student Professional Activity (SPA) mapping 2023

<table>
<thead>
<tr>
<th>Clinical Care</th>
<th>New SPA</th>
<th>Evaluation/Assessment</th>
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<tbody>
<tr>
<td>• Take a patient-centered history (focused and complete) on children across ages and developmental stages.</td>
<td>PC-05</td>
<td>• Clinical Assessment Form (CAF)</td>
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<tr>
<td>• Perform a physical examination (focused and comprehensive) and recognize normal and abnormal findings on children across ages and developmental stages.</td>
<td>PC-06</td>
<td>• CAF</td>
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<tr>
<td>• Interpret clinical information, including common diagnostic tests, with an awareness of age-related norms.</td>
<td>MK-10</td>
<td>• Oral Exam</td>
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<tr>
<td>• Search for and apply information from appropriate reference sources to inform clinical decision-making with the relevant evidence base.</td>
<td>PL-14</td>
<td>• CAF</td>
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<td>• List the clinical features associated with common pediatric illnesses.</td>
<td>PC-07</td>
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<td>• Create a differential diagnosis for common pediatric presenting symptoms or complaints.</td>
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<td>• Generate patient-centered and age-appropriate evaluation and management plans.</td>
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<td>• Present a well-organized synopsis of patient history and physical exam findings along with assessment and plan, tailored to the clinical situation.</td>
<td>IC-20</td>
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<td>IC-18 IC-19</td>
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<td>• Display respect for the entire care team in clinical encounters and scenarios.</td>
<td>SP-24</td>
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<td>PP-01</td>
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Required Experiences Checklist
Aquifer cases may be used for up to 4 requirements.

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