

AIM Clerkship Goals= IM Clerkship goals (in box below) plus:

Clerkship Specific Learning Objective	Level of Competence	Evaluation Methods	UVa #
1. Obtain an accurate and complete clinical history of new admissions in the inpatient setting.	Knows	G, CL, Log, RecR,	2,3,4
2. Obtain an accurate, focused clinical history in the outpatient setting.	Knows	G, CL, Log, RecR, OSCE	2,3,4
3. Obtain an accurate and complete physical examination of new admissions in the inpatient setting	Knows	G, CL, Log, RecR,	2,3,5
4. Obtain an accurate focused physical examination in the outpatient setting	Knows	G, CL, Log, RecR, OSCE	2,3,5
5. Select appropriate laboratory investigations, including chemical, serological, radiological, and functional	Knows how	G, RecR	2,8,9
6. Interpret basic laboratory tests	Knows how	G, CL, RecR, MCQ	2,9
7. Interpret the totality of the collected clinical data correctly and derive from that interpretation an appropriately ordered differential diagnosis.	Knows how	G, CL, RecR, MCQ	2,4,6, 8,9,10
8. Set priorities in developing management plans, so the patients' most critical problems are addressed first.	Knows how	G, CL, RecR, MCQ	2,6,7,8
9. Implement plans with compassion, efficacy, and efficiency.	Shows how	G, RecR	1,2,3, 7,12
10. Apply principles of medical ethics to the clinical process	Shows how	G	1,3,12
11. Present information to colleagues correctly, completely, and efficiently	Shows how	G	2,4,5, 6,7
12. Acquire a basic fund of knowledge about common clinical problems in internal medicine.	Knows	G, RecR, MCQ	2,10
13. Formulate appropriate questions about clinical problems and find the answers efficiently, making use of textbooks, computers, and the primary medical literature.	Knows	MCQ, G, OSCE	2,10
14. Gain experience with the practice of evidence-based medicine.	Does	G	2,10
15. Gain experience in the coordination of ancillary services, such as PT, OT, Social Work	Does	G	3,7,12
16. Gain experience in the use of consultants.	Does	G	2
17. Practice humanism	Does	G	1,7,13

18. Practice professionalism	Does	G	1,7,12
19. Practice cost-effective medicine in a variety of settings.	Does	G	3,7,9,12

Learn to communicate findings and plans effectively to team members both orally and in writing.

Learn recommendations for adult health maintenance and how to incorporate them into practice.

Learn to recognize and manage the interaction between the social setting, patients, and illness particularly in regard to the chronic disease model.

Gain experience with common clinical skills and disease states, especially those identified in the Passport.

Gain sufficient technical skill with the ophthalmoscope to be able to identify:

1. Landmarks in the anterior chamber.
2. Venous pulsations.
3. Arteriovenous crossings.
4. Cup to disk ratio.

Learn a strategy for interpreting electrocardiograms and be able to identify common abnormalities of rate, rhythm, axis, intervals and waveforms.

Learn to identify and address personal clinical knowledge deficits. Learn to access and critically appraise medical information resources.

Learn:

1. Evaluation of urinalyses (including microscopy) and correlation with clinical diagnoses.
2. Assessment of kidney function.
3. Differentiation of acute versus chronic kidney disease.
4. Common presentations of kidney disease.

Learn a Chest X-ray interpretation strategy and recognize common findings.

Learn a logical approach to interpreting PFTs including:

1. How to differentiate obstructive from restrictive respiratory diseases.
2. How to interpret a flow-volume curve.
3. The differential diagnosis of obstructive and restrictive diseases.

Learn: Common cardiac auscultatory findings and a strategy for identifying them correctly.

Learn the physiologic differences seen in the geriatric population and incorporate this knowledge into prescribing practices.

Learn to:

1. Recognize the top 7 etiologies for shoulder pain in the primary care setting.
2. Assess and understand importance of shoulder range of motion assessments
3. Palpate AC joint, supraspinatus tendon, biceps tendon
4. Assess rotator cuff integrity and strength
5. Assess for shoulder impingement signs
6. Assess for bicipital weakness and pain
7. Assess for shoulder instability
8. Assess for referred sources of shoulder pain, primarily cervical spine

The student will be able to identify the major categories of 3rd party payors for medical services. The student will be able to demonstrate how billing affects patient costs, societal costs and physician reimbursement.

Students will become familiar with strategies to: distinguish infectious from noninfectious etiologies of various syndromes and learn principles of appropriate antibiotic use.

Students will: 1. have a chance to rehearse a bad news conversation 2. learn an organized approach to bad news conversations 3. learn the purpose and function of hospice 4. learn to solicit advance directives while guiding patients in the process