

Medical Knowledge

- Develop and demonstrate proficiency in **evaluation** the following **common conditions**:
 - Stroke/TIA
 - Seizure
 - Migraine
 - Dementia
 - Neuropathy
 - Myopathy
 - Motor neuron disease
 - Neuromuscular disease
 - Dementia
 - Delirium
 - Demyelinating disease
 - Movement disorders
- Develop and demonstrate basic competencies in dealing with **neurological emergencies**, including:
 - Acute ischemic stroke
 - Intracranial hemorrhage
 - Delirium
 - Status epilepticus
 - Myasthenic crisis
 - Neuromuscular respiratory failure
 - Acute central nervous system infections
 - Spinal cord compression
 - Increased intracranial pressure
 - Acute worst headache

Patient Care

- Develop and demonstrate proficiency in **eliciting historical elements** of and **performing examination techniques** in evaluation of the following complaints:
 - Dizziness, vertigo, and syncope
 - Weakness
 - Headache
 - Sensory loss
 - Memory loss
 - Altered mental status, loss of consciousness, cognitive impairment
 - Back pain
 - Hyperkinesia
 - Hypokinesia
 - Acute muscle weakness
- Develop and demonstrate the ability to **synthesize** clinical data into a **differential diagnosis** and initial treatment plan for patients with common neurological problems.

Systems-Based Practice

- Develop and demonstrate the ability to **acquire, record, and interpret clinical information** about patients who present with common neurological symptoms.

Practice-Based Learning and Improvement

- Develop and refine **history-taking and examination skills** pertinent for all patients, with a special emphasis on techniques for evaluating neurologic problems.

- For patients with common neurological conditions, apply **evidence based principles** to compare and contrast available treatment options with regard to efficacy, risk, benefit, and cost-effectiveness.

Ethics and Professionalism

- Develop and demonstrate **professional comportment** during interactions with patients, families, and other health professionals.
- Demonstrate respect, truthfulness and honesty; appropriate self-assessment; understanding patient's rights; recognizing and responding appropriately to conflicts between personal convictions and patient's choices of medical treatments; and sensitivity to cultural and ethnic diversity.

Interpersonal and Communication Skills

- Develop and demonstrate **professional comportment** during interactions with patients, families, and other health professionals.
- Develop and demonstrate Interpersonal and communication skills that comprise the professional demeanor of a physician which includes:
 - Demonstration of inquiry about family and support systems; understanding of cultural diversity in health care delivery; understanding social, psychological, and economic factors in health care delivery; accurately assessing patient's expectations and assumptions; and effectively engaging patients and families in verbal communication.
 - Demonstration of oral case presentation skills, mastery of traditional organizations of medical data, adequate medical record keeping, and accessing data and information systems.

Longitudinal Clerkship Curriculum

Interdisciplinary conference, every six weeks

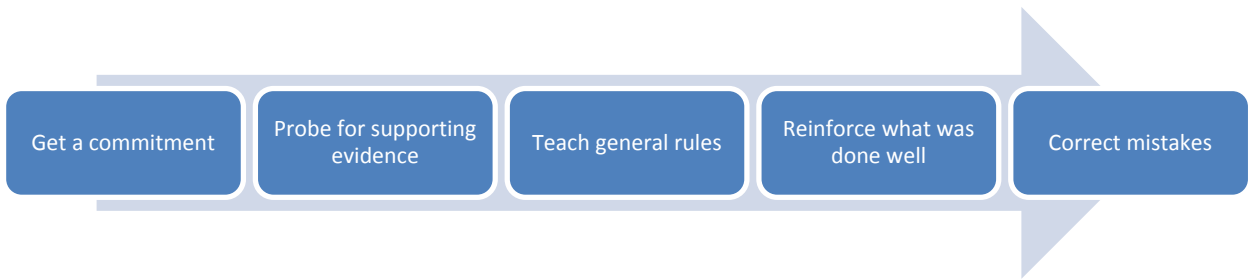
Topics include:

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|-------------------------|--|
| • Ethics & Humanities | • Geriatrics and Principles of Palliative Care |
| • Gender-Based Medicine | • Culture, Health and Society |
| • Medical Informatics | • Patient Safety |
| • Medical Nutrition | • Healthcare Policy |

Expectations for Preceptors

- Direct observation of basic skills
- Advise Learners on complex patient care scenarios
- Teaching and guidance
- Constructive feedback
- If requested, written assessment of student performance following the completion of the rotation. If you did not receive an evaluation form for a student that you would like to evaluate, please contact the Clerkship Coordinator for one. These evaluations make up 55% of the student's final grade for the Clerkship.

One Minute Preceptor



Clerkship Contact Information

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Neurology website: <https://med.ucf.edu/academics/md-program/program-modules/m3-third-year-clerkships/neurology/>

Didactics

A minimum number of contact experiences for specific types of patients has been determined based on published data, consensus of the UCF COM Neurology Clerkship Working Group, and local practice patterns.

Over the course of the six-week rotation students should see and examine a minimum of:

- 3 patients with a vascular disorder (e.g., TIA/stroke, intracranial hemorrhage)
- 3 patients with an episodic disorder (e.g., headache, seizure)
- 1 patient with a coma
- 2 patients with developmental or neurodegenerative disease (e.g., congenital, dementia, movement)
- 2 patients with spinal or peripheral neurologic disease (e.g., radiculopathy, neuropathy)
- 2 patients with a neoplastic, infectious, or immunologic disorder

In addition, students should see and/or assist in performance and interpretation of neurologic procedures, including a minimum of:

- 1 lumbar puncture; (LP simulation meets this requirement)
- 1 EMG/NCS study
- 1 EEG
- 1 CT
- 1 Cerebral Angiogram
- 1 MRI

Every student participates in core didactic sessions on Tuesday afternoon and are excused from clinical activities. Didactics are based on student reading schedule.

Students are required to attend all site conferences and education activities.

Grading Rubric

The final neurology clerkship grade will be based on the following components:

- 55% - Preceptor evaluations (this grade will include professionalism)
- 20% - NBME subject exam, passing set at 5th national percentile
 - 75th national percentile or above is required to be eligible for an “A” in the clerkship.
 - If a student participates in the optional Lifelong Learning-Skill Development Team, the benchmark to be eligible for an “A” is 5th national percentile
 - If the optional Lifelong Learning-Skill Development Team achieves its shelf performance goal, the team members’ benchmark to be eligible for an “A” is 70th national percentile (specifically, the shelf performance goal is as follows: the average neurology shelf exam

percentile for the team must be at least 10 percentile points higher than the average Step 1 percentile for the team)

- 5% - Two clinician-observed history and physicals – form must be turned in to the clerkship coordinator. (First one will equal 2% of final grade; second one will equal 3%.)
- 15% - H&P Write-ups – turned in to the clerkship coordinator.
 - First one is due on Friday at noon, week 2 of the clerkship (4%)
 - You will be assigned one of your peer's H&P's to grade. Using the H&P grading rubric, you will provide feedback due on Friday at noon, week 3 of the clerkship. The quality of your feedback will be graded (5%).
 - Second one is due on Friday at noon, week 5 of the clerkship (6%)
- 5% - Peer assessments of contribution to group work

Attendance at all didactic sessions is expected. Unexcused absences may result in penalty or assignment of remedial work at the discretion of the Clerkship Director.