

# 1a. Internal Medicine Curriculum

## INTERNAL MEDICINE

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#### 1. COURSE OVERVIEW:

|                              |   |
|------------------------------|---|
| <b>COURSE</b>                | Internal Medicine Core Rotation   |
| <b>LENGTH</b>                | 12 weeks  |
| <b>SUPERVISING FACULTY</b>   | Dr. Ravi Gupta, Chair of Internal Medicine<br>Dr. Richard Pestell, Dean of Clinical Sciences<br>Long Island Community Hospital, Patchogue, NY<br><br>Wyckoff Heights Medical Center, Brooklyn, NY   |
| <b>MAJOR HOSPITAL SITES</b>  | Mercy Medical Center, Rockville Center, NY<br>St. Agnes Hospital, Baltimore, MD<br><br>Northwest Hospital, Randallstown, MD<br><br>Jackson Park Hospital, Chicago, NY   |
| <b>METHODS OF EVALUATION</b> | Attendance<br>Attitude, professional behavior<br>Patient evaluation, case presentation and summaries [written and oral]<br>Knowledge of differential diagnosis, initial and ongoing therapies Technical skills, where required<br>Oral and written quizzes<br>NBME Clinical clerkship examination<br>Mid-course [three and six week] formal feedback session [not part of final grade]<br>75% - Preceptor Evaluation<br>10% - Final Examination [NBME]<br><br>10% - Clinical Logs |
| <b>GRADING</b>               | 5% - Attendance<br><br>Notes: A minimum passing grade on each area listed above is required to receive a final grade.<br><br>No grade will be given until complete clinical logs and multimedia assignments have been completed and submitted   |
| <b>On-call</b>               | No more than two nights per week and three weekends   |

**Note:** See the XUSOM Academic Policies and Procedures Manual for students for information on overall academic and financial policies governing all rotations.

# INTERNAL MEDICINE CORE ROTATION

## 2. COURSE DESCRIPTION:

This course is designed to develop the students' logical approach to the diagnosis and treatment of the patient's complaint. This involves obtaining a complete history, eliciting and assessing information from the patient, performing a competent physical examination, and formulating a differential diagnosis list in order of probability with a diagnostic and management plan. The student then, follows a patient through diagnostic studies and therapy. In addition, the student learns effective communication with patients and with medical, nursing, and other ancillary staff. Each student is required to perform a thorough history and physical examination on a number of patients as presented below in the "guidelines". These patients may be presented at work rounds or faculty rounds and should be followed throughout their hospital stay. These cases form the basis for reading about etiology, pathology, complications and treatment of problems in internal medicine. In this way a large amount of experienced- based knowledge will be accumulated by the end of the rotation.

This course will be taught through a series of lectures, group discussions, observation, Grand Rounds, clinical/hospital interaction, assignments, and case studies under the direction of the doctors and/or senior residents at the hospital, clinic, or private office. Students will further demonstrate knowledge of the core through completion of case studies and assignments as determined by the doctors and/or senior residents.

## 3. COURSE OBJECTIVES:

Upon successful completion of this course the student should be able to:

- Undertake an adequate, complete and relevant medical history including the identification of the possible relationships or independence of signs and symptoms to each other;
- Undertake an adequate, complete and relevant medical physical examination including the identification of possible relationships or independence of signs and symptoms to each other;
- Synthesize the data gathered in the history and physical examination into a rational differential diagnosis;
- Describe the mechanisms of disease and pathology of commonly observed medical diseases in the adolescent and adult population;
- Outline the relevance and indication for interpretation of major laboratory tests in commonly diagnosed medical diseases;
- Understand the mechanisms of actions, toxicity, and proper use of the major pharmacological agents used in Internal Medicine.
- Be able to describe [including complications] and undertake [where possible] common procedures such as venipuncture, lumbar puncture, thoracentesis, arterial puncture, insertion of intravenous lines, and urinary bladder catheterization;
- Appreciate and conduct oneself in a professional and compassionate doctor/patient relationship including communication of the diagnosis, treatment and prognosis of diseases diagnosed;
- Begin to develop an appreciation of the greater scope of medical practice within the community, state and nation.

#### 4. OBJECTIVES OF CLINICAL SKILLS TRAINING (MODIFIED AND ADOPTED FROM ASSOCIATION OF AMERICAN MEDICAL COLLEGE (AAMC) GUIDELINES FOR UNDERGRADUATE MEDICAL EDUCATION (UME):

1. The ability to understand the nature of, and demonstrate professional and ethical behavior in, the act of medical care. This includes respect, responsibility and accountability, excellence and scholarship, honor and integrity, altruism, leadership, cultural competency, caring and compassion, and confidentiality.
2. The ability to engage and communicate with a patient, develops a student-patient relationship, and communicate with others in the professional setting, using interpersonal skills to build relationships
3. For the purpose of information gathering, guidance, education, support and collaboration.
4. The ability to apply scientific knowledge and method to clinical problem solving.
5. The ability to take a clinical history, both focused and comprehensive.
6. The ability to perform a mental and physical examination;
7. The ability to select, justify and interpret selected clinical tests and imaging;
8. The ability to understand and perform a variety of basic clinical procedures;
9. The ability to record, present, research, critique and manage clinical information.
10. The ability to diagnose and explain clinical problems in terms of pathogenesis, to develop basic differential diagnosis, and to learn and demonstrate clinical reasoning and problem identification;
11. The ability to understand and select clinical interventions in the natural history of disease, including basic preventive, curative and palliative strategies
12. The ability to understand and to formulate a prognosis about the future events of an individual's health and illness based upon an understanding of the patient, the natural history of disease, and upon known intervention alternatives.

#### 5. LINKAGE WITH THE EDUCATIONAL OBJECTIVES OF XUSOM:

| <b>XUSOM Educational objective</b>  | <b>Course objectives</b>  | <b>Learning methods</b>   | <b>Assessment methods</b>   |
|---|---|---|---|
| <b>The Science and Practice Of Medicine</b>   |   |   |   |
| <ul style="list-style-type: none"> <li>• Apply scientific principles and a multidisciplinary body of scientific knowledge to the diagnosis, management, and prevention of clinical, epidemiologic, social and behavioral problems in patient care and related disciplines.</li> <li>• Understand the variation in the expression of health and disease through critical evaluation of both patients and the scientific literature.</li> <li>• Apply knowledge of study design and statistical methods to the appraisal of clinical studies and other information on diagnostic and therapeutic effectiveness</li> </ul> | <ul style="list-style-type: none"> <li>• Outline the relevance and indication for interpretation of major laboratory tests in commonly diagnosed medical diseases;</li> <li>• Understand the mechanisms of actions, toxicity, and proper use of the major pharmacological agents used in Internal Medicine</li> </ul>   | Lectures<br>Group discussions<br>Assignments<br>Case studies  | Preceptor Evaluation<br>Multimedia assignments<br>On-call evaluation              |
| <b>Clinical Competence</b>  |   |   |   |
| <ul style="list-style-type: none"> <li>• Obtain a sufficient level of medical knowledge to understand the basic facts, concepts, and principles essential to competent medical practice.</li> <li>• Exhibit the highest level of effective and efficient performance in data gathering, organization, interpretation and clinical decision making in the prevention, diagnosis, and management of disease.</li> <li>• Communicate effectively using caring and respectful behaviors when interacting with patients, families and members of the health care team.</li> </ul>  | <ul style="list-style-type: none"> <li>• Undertake an adequate, complete and relevant medical history including the identification of the possible relationships or independence of signs and symptoms to each other;</li> <li>• Undertake an adequate, complete and relevant medical physical examination including the identification of possible relationships or independence of signs and symptoms to each other;</li> <li>• Synthesize the data gathered in the history and physical examination into a rational differential diagnosis;</li> </ul> | Lectures<br>Group discussions<br>Observation<br>Grand rounds<br>Clinical/hospital interaction,<br>Assignments | Preceptor Evaluation<br>Log books<br>Multimedia assignments<br>On-call evaluation |

- Perform all technical procedures accurately and completely, to the extent considered essential for the area of practice and level of education
- Understand and appropriately use medically related information technology disease, preventing future health problems and maintaining the health of individuals

Case studies

### The Social Context Of Medicine

- Understand and respond to factors that influence the social, behavioral, and economical factors in health, disease and medical care working to be able to provide care that is of optimal value.
- Advocate for quality patient care and assist patients in dealing with system complexities
- Begin to understand the complexities of the entire health care practice and delivery system, managers, payers, providers, organizations and bureaucracy in defining access, cost, value and outcomes

Lectures

Group discussions Preceptor Evaluation

- Describe the mechanisms of disease and pathology of commonly observed medical diseases in the adolescent and adult population;

Observation Log books

Clinical/hospital interaction, Assignments Multimedia assignments On-call evaluation

Case studies

Lectures

Preceptor Evaluation

Grand rounds Log books

Clinical/hospital interaction, Assignments Multimedia assignments On-call evaluation

Case studies

### Communication

- Demonstrate effective and compassionate interpersonal communication skills toward patients and families necessary to form and sustain effective medical care.
- Present information and ideas in an organized and clear manner to educate or inform patients, families, colleagues and community.
- Understand the complexity of communication including non-verbal, explanatory, questioning and writing in a culturally appropriate context

- Be able to describe [including complications] and undertake [where possible] common procedures such as venipuncture, lumbar puncture, thoracentesis, arterial puncture, insertion of intravenous lines, and urinary bladder catheterization;

Lectures

Group discussions Preceptor Evaluation

Grand rounds Log books

Clinical/hospital interaction, Assignments Multimedia assignments On-call evaluation

Assignments

Case studies

Lectures

Group discussions Preceptor Evaluation

Grand rounds Log books

Clinical/hospital interaction, Assignments Multimedia assignments On-call evaluation

Assignments

Case studies

### Professionalism

- Display the personal attributes of compassion, honesty and integrity in relationship with patients, families, and the medical community.
- Adhere to the highest ethical standards of judgment, conduct and accountability as each applies to the health care milieu.
- Demonstrate a critical self-appraisal in his/her knowledge and practice of medicine, as well as received and give constructive appraisal to/from patients, families, colleagues and other healthcare professionals.
- Demonstrate a commitment to ethical principles pertaining to provision or withholding of clinical care, confidentiality of patient information, informed consent, and business practices
- Demonstrate sensitivity and responsiveness to patients' culture, age, gender, and disabilities

- Appreciate and conduct oneself in a professional and compassionate doctor/patient relationship including communication of the diagnosis, treatment and prognosis of diseases diagnosed;

### Lifelong Learning

- Understand the limits of personal knowledge and experience and demonstrate the intellectual curiosity to actively pursue the acquisition of new scientific and clinical knowledge and skills necessary to refine and improve his/her medical practice, assure excellent care of patients, or to contribute to the scientific body of medical knowledge throughout a career.
- Understand the concepts of analyzing practice experience and perform practice-based improvement activities using a systematic methodology
- Understand methods to obtain and use information about their own population of patients and the larger population from which their patients are drawn

- Begin to develop an appreciation of the greater scope of medical practice within the community, state and nation.

## 6. OVERALL CURRICULUM:

### Note to the student:

- This is a suggested weekly curriculum.
- By the end of the rotation, the student should have covered all topics listed, and completed all assignments.
- The individual preceptor, based on scheduling, patient population and other factors may alter the order of the topics or assignments.
- At the end of week 3, 6 and 9, the student should request a **formal feedback** session from the preceptor on their progress.
- At the end of week 10, or beginning of week 11, the student should **ensure that the Comprehensive Examination has been scheduled.**

### Week One:

#### Introduction to the Internal Medicine Patient:

- Approach to history and physical examination

#### Allergy and Immunology:

- Polymyositis, Serum Sickness,
- Stevens-Johnson Syndrome

#### Dermatology:

- Dermatitis,
- Atopic-Dermatitis,
- Contact-Dermatitis,
- Exfoliative Erythema Multiform,
- Granuloma Annulare
- Pyogenic Hidradenitis Suppurativa,
- Molluscum Contagiosum,
- Pityriasis Alba
- Pityriasis Rosea,
- Psoriasis,
- Urticaria,
- Warts-Genital, Warts-Plantar

### **Assignments- Week1**

Harrison- Part1, Sections1,3,4,10,11,18;70.71.72,73,74,75,76e;

Part 15 - all chapters [372e – 398]

SIMPLE - Case 17: 28-year-old male with rash - Mr. Moeller

SIMPLE - Case 32: 39-year-old woman with joint pain - Ms. Dickerson

### Week Two:

#### Cardiovascular:

- Aneurysms Abdominal,
- Angina,
- Aortic Regurgitation,

- Aortic Stenosis
- Atrial Fibrillation, Atrial Flutter,
- Cardiomyopathy Dilated,
- Cardiomyopathy Restrictive,
- Congestive Heart Failure
- Pulmonary Edema,
- Deep Venous Thrombosis and
- Thrombophlebitis,
- Dissection-Aortic,
- Dissection-Carotid Artery,
- Dissection-Vertebral Artery,
- Heart Block-First Degree,
- Heart Block- Second Degree,
- Heart Block-Third Degree,
- Hypertensive Emergencies,
- Mesenteric Ischemia,
- Mitral Regurgitation,
- Mitral Stenosis,
- Mitral Valve Prolapse,
- Multifocal Atrial Tachycardia,
- Myocardial Infarction,
- Myocarditis,
- Cardiac Myopathies,
- Pericarditis and Cardiac Tamponade,
- Peripheral Vascular Disease,
- Pulmonary Embolism,
- Shock-Cardiogenic,
- Thoracic Outlet Syndrome,
- Thrombophlebitis,
- Transplants-Heart,
- Ultrasonography, Cardiac,
- Venous Air Embolism,
- Ventricular Fibrillation,
- Ventricular Tachycardia

### **Assignments- Week 2**

Harrison - 19, 27, 29, 47e, 48, 49, 50, 51e, 52, 264, 266e,  
Part 10 - Cardiovascular, Sections 2, 3, 4, 5 - all chapters

SIMPLE - Case 1: 49-year-old man with chest pain - Mr. Monson

SIMPLE - Case 2: 60-year-old woman with episodic chest discomfort - Ms. Johnston

SIMPLE - Case 3: 54-year-old woman with syncope - Mrs. Koda

### **Week Three:**

Ear, Nose, and Throat:

- Dental-Avulsed Tooth,
- Dental-Displaced Tooth,
- Dental-Fractured Tooth,
- Dental-Infections,

- Epiglottitis,
- Adult-Epistaxis,
- Foreign Bodies-Ear,
- Foreign Bodies-Nose,
- Foreign Bodies-Trachea,
- Gingivitis, Otitis Externa, Otitis Media, Perilymph Fistula,
- Peritonsillar Abscess
- Pharyngitis,
- Retropharyngeal Abscess,
- Sinusitis

### **Assignments - Week 3**

Harrison - Part 2, Section 4 - eyes, Ears, Nose, Throat - all chapters [39-46e]

SIMPLE - Case 4: 67-year-old woman with shortness of breath and leg swelling -Mrs. Rivers

SIMPLE - Case 5: 55-year-old man with fatigue - Mr. Kish

SIMPLE - Case 6: 45-year-old man with hypertension - Mr. Hicks

SIMPLE - Case 7: 28-year-old woman with lightheadedness - Ms. Williams

### **Week Four:**

Endocrine and Metabolic:

- Adrenal Insufficiency and Adrenal Crisis,
- Alcoholic Ketoacidosis,
- Cushing Syndrome,
- Diabetes Mellitus, Type 1 - A Review;
- Diabetes Mellitus, Type 2 - A Review;
- Diabetic Ketoacidosis,
- Hypercalcemia
- Hyperthyroidism,
- Thyroid Storm and Graves' Disease
- Hypocalcemia
- Hypoglycemia
- Hypokalemia
- Hypomagnesemia
- Hyponatremia
- Hypoparathyroidism Hypophosphatemia

### **Assignments - Week 4**

Harrison - Part 16 - all chapters [399 - 436e]

SIMPLE - Case 8: 55-year-old man with type 2 diabetes mellitus - Mr. Morales

SIMPLE - Case 16: 45-year-old man with obesity - Mr. James

### **Week Five:**

Pulmonary:

- Acute Respiratory Distress Syndrome,
- Asthma,
- Bronchitis,

- Chronic Obstructive Pulmonary Disease
- Emphysema,
- Pleural Effusion,
- Pneumonia-Aspiration,
- Pneumonia-Bacterial,
- Pneumonia-Empyema and Abscess,
- Pneumonia-Immunocompromised,
- Pneumonia-Mycoplasma,
- Pneumonia-Viral,
- Pneumothorax, Iatrogenic, Spontaneous,
- Pneumomediastinum,
- Respiratory Distress Syndrome, Adult
- Transplants-Lung

#### Rheumatology:

- Arthritis-Rheumatoid,
- Costochondritis,
- Gout and Pseudogout,
- Polymyalgia Rheumatica,
- Reiter Syndrome,
- Rheumatic Fever,
- Systemic Lupus Erythematosus,
- Temporal Arteritis,
- Temporomandibular Joint Syndrome
- Tendonitis,
- Tenosynovitis

#### **Assignments – Week 5**

Harrison - 47e, 48, 49;

Part 11 - all chapters [305 – 320e];

Part 15 - all chapters [372e – 398]

SIMPLE - Case 13: 65-year-old woman seen for annual physical - Mrs. Thompson

SIMPLE - Case 14: 18-year-old woman seen for a pre-college physical - Ms. Pham

SIMPLE - Case 15: 50-year-old man with cough and nasal congestion - Mr. Taleb

SIMPLE - Case 30: 55-year-old woman with left leg swelling - Ms. Bond

#### **Week Six:**

#### Gastrointestinal:

- Abdominal Pain in Elderly Persons,
- Anal Fistulas and Fissures,
- Appendicitis- Acute,
- Bowel Obstruction-Large,
- Bowel Obstruction-Small,
- Cholecystitis and Biliary Colic,
- Cholelithiasis,
- Constipation,
- Disk Battery Ingestion,



- Diverticular Disease,
- Esophageal Perforation, Rupture and Tears,
- Esophagitis,
- Foreign Bodies-Gastrointestinal,
- Foreign Bodies-Rectum,
- Gastritis and Peptic Ulcer Disease,
- Gastroenteritis,
- Hemorrhoids,
- Hepatitis,
- Hernias,
- Inflammatory Bowel Disease,
- Pancreatitis,
- Perirectal Abscess,
- Proctitis,
- Rectal Prolapse,
- Transplants-Liver,
- Ultrasonography-Abdominal

### **Assignments - Week 6**

Harrison - 53, 54, 55, 56, 57, 58, 59;

Part 6 - all chapters [95e-98e];

Part 14 - all chapters [344 – 371]

SIMPLE - Case 9: 55-year-old woman with upper abdominal pain and vomiting - Mrs. Turner

SIMPLE - Case 10: 48-year-old woman with diarrhea and dizziness - Ms. Blake

SIMPLE - Case 11: 45-year-old man with abnormal LFTs - Mr. Chapman (formerly case 11a)

SIMPLE - Case 12: 55-year-old man with lower abdominal pain - Mr. Wilson

### **Week Seven:**

Genitourinary:

- Balanitis,
- Bartholin Gland Diseases,
- Epididymitis,
- Fournier Gangrene,
- Hydrocele,
- Phimosis and Paraphimosis,
- Priapism,
- Renal Calculi,
- Renal Failure-Acute,
- Renal Failure-Chronic and Dialysis Complications,
- Testicular Torsion,
- Torsion of the Appendix and Epididymis,
- Transplants-Renal,
- Urethritis-Male,
- Urinary incontinence,
- Urinary Obstruction,
- Urinary Tract Infection-Female, Urinary Tract Infection-Male

Hematology and Oncology:

- Anemia-Acute,
- Anemia-Chronic,
- Anemia-Sickle Cell,
- Disseminated Intravascular Coagulation,
- Hemolytic Uremic Syndrome,
- Hemophilia-Type A,
- Hemophilia-Type B,
- Hyperviscosity Syndrome,
- Neoplasms-Brain & Spinal Cord
- Neoplasms-Lung,
- Neoplasms – Gastrointestinal tract
- Neoplasms – Breast
- Neoplasms- Genitourinary tract,
- Neoplasms – Sarcomas
- Neoplasms - Skin
- Transfusion Reactions

### **Assignments – Week 7**

Harrison - 60e, 61, 62e, 63, 64e, 65, 66;

Part 7 - all chapters [99 – 143];

Part 13 - all chapters [332e – 343]

SIMPLE - Case 19: 42-year-old woman with anemia - Ms. Winters

SIMPLE - Case 28: 70-year-old man with shortness of breath and leg swelling - Mr. Honig

### **Week Eight:**

Infectious Diseases:

- Body Fluid Exposures,
- Brain Abscess,
- Breast Abscess and Masses,
- Candidiasis,
- Cat scratch Disease,
- Cellulitis,
- Chlamydia,
- Cysticercosis,
- Diphtheria,
- Endocarditis,
- Epidural and Subdural Infections,
- Gas Gangrene,
- Gonorrhea,
- HIV Infection and AIDS,
- Hand Infections,
- Hantavirus
- Cardiopulmonary Syndrome,
- Herpes Simplex,
- Hookworm,
- Impetigo,
- Legionnaire Disease,
- Lice,
- Lymphogranuloma Venereum

- Malaria,
- Meningitis,
- Mononucleosis,
- Mumps,
- Needle-stick Guideline,
- Orbital Infections,
- Osteomyelitis,
- Pediculosis,
- Pilonidal Cyst and Sinus,
- Pinworms,
- Prostatitis,
- Rabies,
- Salmonella Infection,
- Scabies,
- Scarlet Fever,
- Shock-Septic,
- Spontaneous Bacterial Peritonitis,
- Staphylococcal Scalded Skin Syndrome,
- Syphilis,
- Tapeworm Infestation,
- Tetanus,
- Thrombophlebitis-Septic,
- Tick-Borne Diseases,
- Lyme,
- Rocky Mountain Spotted Fever,
- Toxic Shock Syndrome,
- Toxoplasmosis,
- Trichinosis,
- Trichomoniasis,
- Trichuris ,
- Tuberculosis,
- Yellow Fever

### **Assignments – Week 8**

Harrison - Part 8, all chapters [144 – 260]

SIMPLE - Case 20: 48-year-old woman with HIV - Ms. Hunt

SIMPLE - Case 21: 78-year-old man with fever, lethargy and anorexia - Mr. Ramirez

SIMPLE - Case 22: 71-year-old man with cough and fatigue - Mr. Groszek

SIMPLE - Case 29: 55 year-old woman with fever and chills

### **Week Nine:**

- Neurology:
- Amyotrophic Lateral Sclerosis,
- Bell Palsy,
- Benign Positional Vertigo,
- Cavernous Sinus Thrombosis,
- Central Vertigo,
- Delirium,
- Dementia and Amnesia,
- Encephalitis,

- Guillain-Barre Syndrome,
- Headache-Cluster,
- Headache-Migraine,
- Headache-Tension,
- Herpes Simplex
- Encephalitis
- Huntington Chorea,
- Meniere Disease,
- Multiple Sclerosis,
- Reflex Sympathetic Dystrophy,
- Spinal Cord Infections,
- Spinal Cord Injuries,
- Stroke-Hemorrhagic,
- Stroke-Ischemic,
- Subarachnoid Hemorrhage,
- Transient Ischemic Attack,
- Vertebrobasilar Atherothrombotic Disease,
- Vestibular Neuronitis,
- Wernicke Encephalopathy

### **Assignments – Week 9**

Harrison - 27, 28, 29, 30, 31, 32, 33e, 34, 35, 36, 37e, 38;

Part 17 – all chapters [437 – 464e]

SIMPLE - Case 18: 75-year-old man with memory problems - Mr. Caldwell

SIMPLE - Case 23: 54-year-old woman with fatigue - Ms. Torres

SIMPLE - Case 24: 52-year-old female with headache, vomiting, and fever - Mrs. Cole

### **Week Ten:**

Ophthalmology:

- Acute Compressive Optic Neuropathy,
- Burns-Ocular,
- Cataracts,
- Chalazion,
- Conjunctivitis,
- Corneal Abrasion,
- Corneal Laceration,
- Corneal Ulceration and Ulcerative Keratitis,
- Endophthalmitis,
- Glaucoma,
- Acute Angle-Closure,
- Globe Rupture,
- Hordeolum and Stye,
- Iritis and Uveitis,
- Periorbital Infections,
- Retinal Artery Occlusion,
- Retinal Detachment
- Retinal Vein Occlusion,
- Ultraviolet Keratitis,
- Vitreous Hemorrhage

## **Assignments – Week 10**

Harrison

SIMPLE - Case 33: 49-year-old woman with confusion - Mrs. Baxter

SIMPLE - Case 35: 35-year-old female with three weeks of fever - Ms. Jankowski

SIMPLE - Case 36: 45-year-old man with ascites – Mr. Berlusconi (formerly case 11b)

## **Students catch up on reading from prior weeks**

### **Week Eleven:**

Toxicology:

- Methemoglobinemia,
- Neuroleptic Malignant Syndrome,
- Plant Poisoning, Alkaloids - Tropane,
- Plant Poisoning, Glycosides - Cardiac,
- Plant Poisoning, Hemlock,
- Plant Poisoning, Herbs,
- Plant Poisoning, Hypoglycemics,
- Plant Poisoning. Resins,
- Plant Poisoning, Toxicodendron,
- Toxicity-Acetaminophen,
- Toxicity-Alcohols ,
- Toxicity-Ammonia,
- Toxicity-Amphetamine,
- Toxicity, Antidepressant,
- Toxicity-Antihistamine,
- Toxicity-Arsenic,
- Toxicity-Barbiturate,
- Toxicity-Carbon Monoxide,
- Toxicity-Caustic Ingestions,
- Toxicity-Chlorine Gas,
- Toxicity-Cocaine,
- Toxicity-Cyanide,
- Toxicity-Cyclic Antidepressants,
- Toxicity-Digitalis,
- Toxicity-Ethylene Glycol,
- Toxicity-Hallucinogen,
- Toxicity-Heavy Metals,
- Toxicity-Hydrocarbon Insecticides,
- Toxicity-Hydrocarbons,
- Toxicity-Lead.
- Toxicity-Lithium,
- Toxicity-Local Anesthetics,
- Toxicity-MDMA,
- Toxicity-Medication-Induced Dystonic Reactions,
- Toxicity-Mercury,
- Toxicity-Methamphetamine,
- Toxicity-Mushroom - Amatoxin,
- Toxicity-Mushroom - Hallucinogens,
- Toxicity-Narcotics,

- Toxicity-Nitrous Dioxide,
- Toxicity-Sedative-Hypnotics,
- Toxicity-Shellfish,
- Toxicity-Thallium,
- Toxicity-Thyroid Hormone, Withdrawal Syndromes,
- CBRNE - Anthrax Infection,
- CBRNE - Arsenicals, Arsine,
- CBRNE - Biological Warfare Agents
- CBRNE - Botulism,
- CBRNE - Brucellosis,
- CBRNE - Chemical Decontamination

### **Assignments - Week 11**

Harrison - Part 18 - all chapters [472e - 475];

Part 19 - all chapters [476e - 480e]

SIMPLE - Case 25: 75-year-old hospitalized woman with confusion - Mrs. Kohn

SIMPLE - Case 26: 58-year-old man with altered mental status - Mr. Johnson

**Students kindly ensure that Comprehensive Examination has been scheduled**

### **Week Twelve:**

Trauma and Orthopedics:

- Abdominal Trauma-Blunt,
- Abdominal Trauma-Penetrating,
- Ankle,
- Soft-tissue Injuries,
- Back Pain-Mechanical,
- Blast Injuries,
- Bursitis,
- Carpal Tunnel Syndrome,
- Cervical Strain,
- Diaphragmatic Injuries,
- Dislocations-Ankle, Elbow, Foot, Hand, Hip, Knee, Shoulder, and Wrist.
- Epidural Hematoma,
- Fingertip Injuries,
- Fractures- Ankle, Cervical Spine, Clavicle, Elbow, Face, Femur, Foot, Hand, Hip, Knee, Pelvic, Rib, Tibia, Fibula, and Wrist.
- Gamekeeper Thumb,
- Hand Injuries - High-pressure,
- Hand Injuries - Soft-tissue,
- Hanging Injuries and Strangulation,
- Knee,
- Soft-tissue Injuries,
- Lumbar (Intervertebral) Disk Disorders,
- Nail bed Injuries,
- Neck Trauma,
- Osgood-Schlatter Disease
- Peripheral Vascular Injuries,
- Plantar Fasciitis,

- Pneumothorax,
- Tension and Traumatic,
- Rotator Cuff Injuries,
- Shock-Hemorrhagic,
- Sternoclavicular Joint Injury,
- Subdural Hematoma,
- Toe nails-Ingrown,
- Trauma-Lower Genitourinary,
- Trauma-Peripheral Vascular Injuries

### **Assignments – Week 12**

Harrison - Part 12 – all chapters [321 – 331]

SIMPLE - Case 27: 65-year-old man with back pain - Mr. Strout

SIMPLE - Case 31: 40-year-old man with knee pain - Mr. Nelson

SIMPLE - Case 34: 55-year-old man with acute low back pain - Mr. Farber

## **7. LEARNING RESOURCES:**

### REQUIRED READING

1. **Harrison's Principles of Internal Medicine Handbook - Ed. Eisselbacher McGraw-Hill** (Available on Access Medicine)

**OR**

**Harrison's Manual of Medicine, 18e.** Dan L. Longo, Anthony S. Fauci, Dennis L. Kasper, Stephen L. Hauser, J. Larry Jameson, Joseph Loscalzo (Available on Access Medicine)

2. **SIMPLE** - Cases are accessed through MedU

### SUPPLEMENTAL OR ALTERNATIVE READING

3. Davidson's Principle in the Practice of Medicine - Churchill and Livingston

4. Clinical Medicine - Ed. P.J. Kumar and M.L. Clark

5. Medicine - 4th edition - ISBN#0-397-51464-6 - Ed. Fishman, Hoffman, Klausner, Thaler. Lippincott-Raven

6. A Practical Guide to the Care of the Medical Patient - Ed. Ferri Mosbey Current Medical Diagnosis & Treatment 2016 Maxine A. Papadakis, Stephen J. McPhee, Michael W. Rabow (Available on Access Medicine)

7. Oxford Handbook of Clinical Medicine NMS Medicine

8. Scientific American Medicine - Ed. Rubinstein and Federman

9. Heart Disease - Ed. Braunwald. Saunders