

Academic Support Network
Student Suggestion Guide
Psychiatry Rotation

Overview: The psychiatry rotation is generally laid back, but very interesting. The breadth of mental illness that you will see depends on the site you are assigned. It is not true that you will receive an outstanding if you are at Great Lakes, and it is not true that you will not receive an outstanding from UIH. You earn the grade you ultimately receive. So work hard, and earn a great score.

Objectives: The idea of a psychiatry rotation is to get a basic understanding of bread and butter mental illness. You'll see a lot of depression, bipolar, schizophrenia, and drug abuse. It is important to take this rotation seriously because as physicians we will see patients of a wide variety, which will include mental illness. Patients with mental illness need primary care physicians, cardiologists, endocrinologists, and surgeons, just as people who don't have mental illness need these same doctors.

On your psych rotation, it is important that you become comfortable obtaining a full history and physical including pertinent positives. Don't forget AH/VH (auditory and visual hallucinations) and SI/HI (suicidal and homicidal ideation) on ALL OF YOUR PATIENTS! You should become comfortable doing a mental status exam on your patients. And, this rotation allows you to practice setting limits on your patients and keeping boundaries set.

When writing up your patients and in morning report, it is wise not to forget to include substance induced or general medical condition induced mood d/o, psychotic d/o, or other mental disturbance. Also, don't forget past psych history. Sometimes, that is key in a diagnosis. Find out what medications the patient has previously tried, as this also can give clues to diagnosis.

The Clerkship: As with all the rotations, show interest, attend morning report, attend all seminars and grand rounds that are scheduled, and to do your work. Stick around and see your patients later in the day. Talk to them and be there for them. Many patients just need an ear to talk to once in a while, and as students, we have time to do that.

The Shelf Exam: This needs no explanation. It's a shelf exam. However, this exam is fair. The best way to study for this exam during the clerkship is to read up on your patients every night. Granted, if you only have depressed patients, you can't read about depression every night. So, pick another topic to read.

The exam covered a lot of psychopharmacology, child psychiatry, eating disorders, mood disorders, neurological testing (PET, SPECT), drugs of abuse and treatments for them. Don't forget SIGECAPS for Depression and DIGFAST for Mania; understand the difference between bipolar and depression. Of all of these things, knowing the right drugs for the right disorder is key. Spend some time understanding the differences between the personality disorders and the more serious disorders (schizophrenia and schizophreniform/schizotypal personality disorders); review the MAD/SAD/BAD lecture from M2 year.

BRS Psychiatry was the book used by many students during the psych rotation. *First Aid for Psychiatry* is also an excellent choice, especially if you prefer outline format. However, *Clinical Psychiatry for Medical Students* by Stoudemire was the required text as it was for psychopath; using might save you some money if you found it useful last year. A few other books that were very helpful for many students were the pocket DSM IV and a small book called *Clinical Strategies Handbook of Psychiatric Drugs*.

Around the fifth week of the rotation, start looking at questions. *Appleton and Lange* is by far the best question book to use. The questions are very representative of what you will see on the exam. Don't let Pre-Test fool you...it's not great for psychiatry.

The Standardized Patient Exam: You thought you were done with SPs, huh? Sorry to haunt you again, but SPs are still in the curriculum, and they score harder than they did during M1 and M2 years. Take this exam seriously. You will have 3 standardized patients. Before you go in,

read about what to ask in regards to depression, panic attacks or generalized anxiety disorder, and bipolar disorder. It is crucial to show empathy for these actors. If you do this, you will likely receive a great grade as the only thing they grade you on is your sympathy. Content of your interview is not assessed as much. If you forget to ask certain things, that will be noticed, but SYMPATHY is key! This exam is 1/3 of 2/3 of your grade.