

# Cler608-Essentials of Clinical Practice and Professionalism

## Syllabus

**June 20 – June 24, 2005**

**June 27 – June 30, 2005**

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### Overview:

The purpose of the Essentials of Clinical Practice and Professionalism (ECPP) course is to assist third year medical students in preparing for their clerkships by providing training and resources that will help them excel. This course builds upon the foundation established in the Essentials of Clinical Medicine course (ECM), by reinforcing clinical competency as well as social and cognitive skills. It combines lectures, small group exercises, and hands-on clinical practice to achieve these goals.

ECPP was developed in response to two events: First, results of the M4 clinical skills exam pilot project in the winter of 2003-2004 showed that significant numbers of students had not mastered basic clinical skills regarded as appropriate graduation competencies. These findings also led to the development by the College Committee on Instruction and Appraisal to assemble a "Technical Procedures and Skills List" that includes procedures in which the graduating student should be able to demonstrate competency as well as those that the student should have observed. This list, included in the syllabus, is optional for students graduating in 2006, but will be mandatory for the 2007 class.

The second impetus for ECPP was the need to ensure that students receive reinforcement in the graduation competencies established by the College of Medicine, that parallel the ACGME general competencies for residents (see [www.acgme.org](http://www.acgme.org) for details). These competencies include areas relating to communication skills and professionalism, and therefore a second objective is to provide instruction and practice in these areas.

On behalf of the ECPP faculty, I welcome you to the course and trust that your experience will be challenging and rewarding.

Leslie J. Sandlow, MD

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## Attendance and Attire Policy & Evaluation

ECPP evaluation is based upon the direct observation of your skills, attitudes, and problem solving abilities, thus you must be present at all sessions. Performance will be rated as satisfactory and unsatisfactory.

Failure to attend **any of the course components may result in a grade of "Needs Remediation" which could result in an overall grade of "Unsatisfactory"** if the problem persists or is sufficiently serious. As with other clinical grades, an "Unsatisfactory" in ECPP will trigger a "Drop" recommendation from the Student Advancement Committee.

The course director must approve absences; via course coordinator, Susan S. O'Keefe, [sokeefe@uic.edu](mailto:sokeefe@uic.edu), all others will be recorded as unexcused. Any and all sessions that you arrived more than fifteen minutes late and/or did not attend are required to be made-up. The method of make-up will not be uniform, because opportunities for each student may differ, and we will try to be accommodating.

Missing any part of the Clinical Skills will require you to attend an Open Skills Session and submit documentation showing that you have completed that portion of ECP&P. A form maybe picked up from Susan S. O'Keefe, Course Coordinator, [sokeefe@uic.edu](mailto:sokeefe@uic.edu) in UGME, room 151 CMW

ECP&P is designed to prepare you for your clerkships by reinforcing clinical competency as well social and cognitive skills. A part of social skills is professional attire. Casual attire or scrubs are appropriate for most sessions of ECP&P. Scrubs are the preferred choice for Clinical Skills; Business casual, with white coats, should be worn for all patient or standardized patient encounters.

We will be in many areas/rooms throughout the campus. Remember the temperature on campus is unpredictable. It might be cool in one room, but hot in another. Be prepared for both.

## **Course Schedules & Roster**

**See separate weekly schedule and roster for room and group assignments.**



## Session Descriptions

### **Cardiac EKG Skills**

**Date: Monday**

**Time: 3:30 – 5:00**

**Faculty: Dr. S. Crossman, MD**

**Objectives:**

1. To begin to learn how an approach to interpretation of a normal electrocardiogram.

Students are scheduled for one of three groups (see roster for assignment). Times for each group are as follows:

**Format: Small group and large session facilitating and interpretation of common, clinically important findings.**

## Session Descriptions

### Clinical Skills Training - CPC

**Date & Time:**            **Thursday**        **7:45 am – 5:30 pm**

**Location: Room 106 CMW & Clinical Performance Center**

Students must meet in room 106CMW prior to 7:45 am; from there they will be directed to the CPC.

**Faculty: Rachel Yudkowsky, MD, MHPE**

**Objectives:**

At the end of the workshop, students will be able to do the following procedures:

- Catheterizations.
- Suture wound & tie
- IV insertion
- Phlebotomy (blood draw) & ABG
- EKG
- Injections
- Eye/Ear
- Breast Exam

**Workshop description**

Using simulator models, students will be instructed on a series of procedural skills important for clinical rotations. Students will rotate through skills stations in groups of 2-4 and have the opportunity for individual supervised practice.

Models will be available periodically during the year for additional practice.

**Clinical Skills Module Schedule  
By Assigned Student Group  
(See roster for assigned groups)**

## Session Descriptions

### Clinical Skills Training - Pharmacology

**Date & Time:** Wednesday Pharmacology 7:45 am – 12:30 pm

**Location:** College of Pharmacology  
833 S. Wood Street  
Chicago, Illinois

Group 1 Room 470  
Group 2 Room 498  
Group 3 Room 570  
Group 4 Room 598.

(See Roster for Group Assignment.)

**Faculty:** Brad Cannon, Pharm D.

### Objectives:

#### *Inhalers/Spacers/Peak Flow Meters:*

1. Demonstrate proper metered-dose inhaler (MDI) administration technique.
2. Demonstrate proper dry-powder inhaler administration technique.
3. Differentiate between MDI and dry-powder inhaler administration technique.
4. Perform proper peak flow meter technique.
5. Describe the use of a peak flow meter measurement device in monitoring asthma.
6. Describe the correct assembly procedures for the jet nebulizer machine.

#### *Home Diagnostics:*

1. List the indications for the home diagnostic products discussed in class.
2. Describe the factors that interfere with the accuracy of the home diagnostic products discussed.
3. Explain the proper use of home diagnostic products to patients.
4. Given a patient case scenario, determine if a home diagnostic product is appropriate.

#### *Insulin Delivery Devices:*

1. Discuss characteristics and pharmacokinetics of insulin
2. Describe methods of insulin administration
3. Identify factors which alter subcutaneous absorption
4. Evaluate insulin pen, insulin dosers, syringe and pen needle products

## Session Descriptions

### **Critical Images**

**Date:** Tuesday

**Time:** 10:30 - 12:00 pm

**Location:** Room 106 CMW

**Faculty:** Dr. Talwar, MD

**Objectives:**

1. To learn the applications and implications of imaging in medical practice
2. To recognize when, what, and how to request an imaging study for diagnosis of a given medical problem.
3. To use a radiologist as a consulting physician.

## Session Descriptions

### Ethics and Professional Standards

**Date: Monday**

**Time: 1:30 - 2:30 am**

**Faculty: Timothy Murphy, PhD or Mary Lou Schmidt, MD**

Timothy F. Murphy is Professor of Philosophy in the Biomedical Sciences at UIC College of Medicine. He is the author of *Case Studies in Biomedical Research Ethics* (MIT Press). He serves on the ethics committee of the American College of Surgeons Oncology Group and is associate editor for the ethics section of the journal *Pain Medicine*. He is the author of recent articles on the ethics of sexual orientation research (in the *British Medical Journal*) as well as an article on physician involvement in criminal executions (in *Journal of Clinical Ethics*).

Mary Lou Schmidt, M.D., a pediatric oncologist, is Associate Professor of Pediatrics at UIC College of Medicine. She completed a Traub-Byfield Fellowship in Clinical Ethics and is currently co-chair of the University of Illinois Medical Center ethics committee. She is the co-author of a forthcoming article on transplantation practices (in *Journal of Clinical Ethics*).

#### **Objectives:**

1. Identify sources of professional standards, including the American Medical Association Code of Ethics and relevant Illinois Statute.
2. Learn to apply these standards to representative cases, including such topics as sexual misconduct, referrals, problematic patients, and 'boutique medicine' (also known as retainer practices).

## Session Descriptions

### **Evidence Based Medicine (EBM)**

**(From Evidence-Based Medicine to Medical Decision Making: Taking the Next Step)**

#### **Date & Time:**

<b>Monday</b>	<b>10:30 am – 12:30 pm</b>
<b>Thursday</b>	<b>10:30 am – 12:30 pm</b>

#### **Faculty: Alan Schwartz, PhD**

Dr. Schwartz is an Associate Professor in the Department of Medical Education and Senior Research Specialist in the Department of Pediatrics. His field is clinical decision making. He has spent the last five years teaching evidence-based medicine and conducting research on learning EBM.

#### **Objectives:**

Upon completion of this portion of the course, learners will be able to:

1. Describe uncertainty in clinical diagnosis and treatment decisions
2. Appreciate psychological heuristics and biases that may lead to inferior decision-making
3. Appreciate the importance of patient utility in medical decision-making
4. Understand methods of assessing patient utilities for health outcomes
5. Understand the concept of expected utility
6. Integrate patient values and probability evidence into simple decision trees
7. Determine probability thresholds for clinical action

## Session Descriptions

### Management of Occupational Blood Exposures

**Date & Time:****Monday****9:00 am – 10:00 am****Faculty: Patrick A Tranmer M.D. M.P.H.**

Patrick Tranmer received his MD from the University of Iowa Medical School in 1977 and attended the U of I affiliated residency program at Broadlawns Polk County Hospital in Des Moines, Iowa, graduating in 1980. From there he entered private group practice in Muscatine, Iowa, a town of 25,000 people, staying until 1986.

In January, 1987, he began work at the University of Illinois at Chicago as faculty in the Department of Family Medicine, and has served such roles as Acting Head, Medical Director of UIHMO, Center Medical Director for Family Medicine, and currently, Head.

He received his M.P.H. from the University of Illinois at Chicago in 1990, and is currently the President of the Medical Staff at the UIC Medical Center. His areas of interest include ambulatory care management, managed care, HIV and chronic illness care, and medical education.

**Objectives:**

Upon completion of this portion of the course, learners will be able to:

1. Understand the risks involved in occupational exposures
2. Know where to go and what to do if an incident occurs
3. Understand how to assess risk for oneself and others if exposure occurs
4. Become aware of evaluation and monitoring procedures, and of PEP

## Session Descriptions

### On-line Evaluations

**Date:** Friday

**Time:** before 12:00 pm

**Location:** On-line

**Objectives:**

To complete the on-line course evaluation which will be available in Blackboard later in the week. This must be completed by Friday Noon.

Session Descriptions

### **Online Resources - Library Searching Skills and more**

#### **Date & Time:**

**Monday 2:30 – 3:30**

**Faculty: Resident Librarian**

**Objectives:** This session reintroduces students to medical literature research as well as providing them with additional tools for on-line searching. While there students will have the opportunity to research current opinions and review current paper or papers for the Journal Club groups.

#### **Health Science Library: Secondary Literature, Point-of-care Resources and Keeping Current.**

**Synopsis:** This session prepares students to apply search strategies and competencies in databases that cover secondary medical literature, demonstrates point-of-care clinical tools and imparts the information students will use to keep current in the field.

#### **Competencies:**

In the process of completing this class, students will acquire the following competencies:

- Describe the difference between primary and secondary literature and their appropriate uses.
- Utilize the Library's resources for clinicians.
- Demonstrate the search skills necessary to keep abreast of current medical literature.
- Identify point-of-care resources, including PDA resources.

#### **Instructional Features:**

- Demonstration of EBM Resources (Cochrane, ACP Journal Club, DARE).
- Hands-on searching with scenarios taken from clinical experience.
- Demonstration of point-of-care and PDA Resources.
- Discussion and reminder of the tenets of Evidence Based Medicine with an emphasis on how these concepts will aid future literature searching and staying current in the field.
- Demonstration of Clinical Resources available through UIC.

#### **Class Outline:**

##### **EBM Finished products:**

- LHS Gateway: **Resources for Clinicians** at: <http://www.uic.edu/depts/lib/lhs/resources/clinical.shtml>
- **EBM Reviews – Cochrane, DARE, ACP Journal Club**
  - Otitis media and antibiotics
  - Cochrane Reviews—considered highest level of evidence (evaluation of studies on a particular topic that meet certain requirements)
  - ACP gives a review of article—may find useful in preparing your own presentations
- Various, look at: **Practice Guidelines (HSTAT) & Clinical Evidence**

##### **PDA Resources:**

- PDA Page, <http://www.uic.edu/depts/lib/lhs/resources/pda/>
- Databases owned at UIC with PDA component (show both the web and point out the PDA)
  - InfoPoems (includes 5MCC)
  - First Consult
  - MdConsult - now includes Drug database too (point out generic vs. personal)

Setting up saved searches via PubMed's Cubby and other database SDIs.

**Other things that will be of use in the clinic:**

- [Books@OVID](#), (Interpretation of Diagnostic Tests)
- SAM online (now ACP online)
- Access Medicine: Harrison's Online, CMDT (will include ability to quickly download content to PDA)

## Session Descriptions

### Presentation Skills

**Date:** Tuesday

**Time:** 9:00 am – 10:00 am

**Location:** Room 106

**Faculty:** Fred Zar, MD

### **Objectives**

After participating in this interactive discussion the student should be able to:

1. Differentiate the purpose of taking a history and physical from presenting a history and physical.
2. Recognize more appropriate ways to organize patient related data in preparation for a presentation on rounds or at a conference.
3. Be aware of common mistakes in presenting a case, and determine how to avoid them.

## Session Descriptions

### Presentation Skills Workshop – Communications: The Case of the Case Presentation

**Date:** Tuesday

**Time:** 12:30 – 1:30

**Location:** Room 106

**Faculty:** Gary Loy, MD

#### **Objectives**

Overall goal is to integrate the skills of communication, judgment, and constructive criticism and feedback.

1. Use your knowledge of case presentation skills to critique a colleague's case presentation
2. Deliver this case presentation critique as feedback to a colleague
3. Critique a colleague's ability to deliver accurate and effective feedback
4. Play a convincing role of a student presenting a case, a case with some specific deficiencies, a student with some specific "issues".
5. Identify what makes you most uncomfortable in these scenarios and why

**You will accomplish each of these objectives in turn.**

**The set up:** get in groups of 3 and assign yourself a number (1,2, or 3)

Student 1: (Presenter) Review an outline of a case presentation; read about and understand your case's specific deficiency; and prepare for your role of a student with a specific "issue".

Student 2. (Evaluator) Review the categories on the form used to assess the case presentation.

Student 3. (Observer) Review the categories on the form used to assess the quality of the feedback delivered by your colleague

**Then:** (After a class feedback session a second round will take place. )

Student 2 (Presenter) delivers the case presentation to student 3.

Student 3 (Evaluator) analyzes and critiques the case presentation.

Student 1 (Observer) provides a critique of the critic- specifically regarding the effectiveness of the feedback and handling of the student two's issues.

## Appendix: Clinical Skills for graduating medical students

### **Procedures to be Learned and Successfully Accomplished**

1. Venipuncture
2. Inserting an intravenous catheter
3. Inserting a nasogastric tube
4. Urologic catheterization, male and female (Inserting a Foley catheter)
5. Skin suturing/ removal of sutures
6. EKG lead placement
7. Demonstrate proper use of an inhaler
8. Perform an adequate Pap smear
9. Perform routine vaginal delivery
10. Perform and record physical examination of a healthy newborn
11. Manage an airway, including endotracheal intubation
12. Know and perform universal precautions
13. Sterile technique (Scrub, gown, glove)

### **Procedures to be Learned, Which May Be Successfully Demonstrated on a Model**

1. Arterial puncture
2. Lumbar puncture
3. Perform cardiopulmonary resuscitation (Basic life support)
4. Injections: subcutaneous, intradermal and intramuscular

### **Interpretation of Commonly Used Diagnostic Procedures or Common Principles**

1. Arterial blood gas
2. EKG; heart rate/ rhythm monitor
3. Gram stain, KOH wet mount, urine sediment analysis
4. Fecal occult blood testing
5. Pulse oximetry (oxygen saturation) monitoring/ placement & interpretation
6. Peak flow meter instruction and interpretation
7. Standard chest x-ray
8. Routine laboratory results including clinical chemistries, liver function studies, complete blood count, urine analysis
9. Understand point of care testing (POCT) <sup>1</sup>
10. Home glucose testing instruction/demonstration
11. Basic types of exercise stress testing
  - a. Non-pharmacological: routine stress testing, exercise echo, nuclear stress
  - b. Pharmacological: dobutamine stress testing, persantine/ nuclear stress testing

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<sup>1</sup> As defined by the College of American Pathologists, "analytical patient testing activities provided within the institution, but performed outside the physical facilities of the clinical laboratories. It does not require permanent dedicated space, but instead includes kits and instruments, which are either hand carried or transported to the vicinity of the patient for immediate testing at that site".

**Skills/ Procedures to be Observed in Real Time or Through Instructional Video Demonstrations**

1. Thoracentesis, including chest tube insertion and treatment of pneumothorax
2. Cardiac catheterization
3. Care and use of access ports
4. Cast and splint placement
5. Central line insertion and management
6. CT and MRI procedures, including an understanding of the underlying principles
7. GI endoscopy, upper *or* lower
8. Repair vaginal lacerations
9. Routine resuscitation of a newborn
10. Ultrasound
11. Moderate/ conscious sedation
12. Arterial line
13. Swan Ganz
14. Exercise Stress Test
15. Skin punch biopsy
16. Skin shave biopsy
17. Cryotherapy for warts and other skin lesions
18. Incision & drainage
19. Pulmonary function testing
20. Bronchoscopy
21. Dialysis
22. Intraarticular joint aspiration
23. Ventilator management

Approved by College Committee on Instruction and Appraisal 4 August 2004

University of Illinois  
COLLEGE OF MEDICINE

GRADUATION COMPETENCIES

1. PATIENT CARE

*The competent graduate must be able to provide patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health. He/she will be required to construct appropriate management strategies (diagnostic and therapeutic) for patients with common health care problems, while considering costs for the patient and others. This includes emergent, acute and chronic problems across the spectrum of disciplines and must be able to combine knowledge of basic biomedical, clinical, and cognate sciences to accomplish the above.*

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The competent graduate must be able to:

- Obtain a medical history appropriate to the patient's medical concerns;
- Perform a skillful physical examination;
- Formulate a differential diagnosis and problem list;
- Perform, order and interpret diagnostic investigations that result in accurate diagnosis and treatment;
- Utilize data to reason and solve problems;
- Develop management plans;
- Consider cultural and socioeconomic factors in management options;
- Form an effective therapeutic relationship;
- Recognize life threatening health problems and institute appropriate initial therapy;
- Construct a therapeutic plan for relieving pain and ameliorating suffering;
- Counsel and educate patients and their families;
- Apply the principles of epidemiology and evidence-based medicine.

## MEDICAL KNOWLEDGE

*The faculty of the University of Illinois College of Medicine believes that any statement of graduation competencies must include mastery of the necessary body of knowledge within the basic, clinical, and cognate sciences to manage patients' health. Moreover, graduates must demonstrate the skills that will enable them to utilize the concepts and knowledge that will be discovered throughout the years following medical school.*

The competent graduate must have a thorough understanding of the:

- Scientific principles of basic and clinical sciences that will enable him/her to competently practice evidence-based medicine;
- Determinants of poor health, disease-based risk factors, factors for disease prevention and healthy lifestyles (principles of preventive medicine);
- Elements of health education;
- Principles of epidemiology and population-based medicine;
- Principles, risks, and possible benefits of complementary and alternative medicine;
- Concepts, principles, and application of evidence-based medicine;
- Cultural factors important to health care;
- Relevant legal and ethical concepts.

## PRACTICE-BASED LEARNING AND IMPROVEMENT

*The competent graduate must be able to study, reflect, and evaluate patient care practices, appraise and assimilate scientific evidence, and understand their learning needs.*

The competent graduate:

- Sets clear learning goals, pursues them, and continuously integrates knowledge gained and applies it to improve medical care;
- Assesses his/her strengths and weaknesses in order to improve performance and identify effective ways to address limitations and enhance expertise;
- Accesses information effectively, efficiently, critically appraises the information and relates it to their patients' health problems;
- Admits his/her limits of knowledge, knows what to do when those limits are reached, can deal with uncertainty, and respects the opinions of others;
- Recognizes the need to learn is continuous;
- Balances personal and professional commitments to ensure that the patients' medical needs are always addressed.

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## **INTERPERSONAL AND COMMUNICATION SKILLS**

The competent graduate provides compassionate, effective, culturally sensitive patient care.

The competent graduate:

- Listens attentively;
- Communicates clearly with colleagues, consultants, patients, and patients' families in both verbal and written manner.

## **PROFESSIONALISM**

The competent graduate approaches medicine with integrity and respect for human dignity. They must demonstrate awareness of and commitment to the principles and responsibilities of medical professionalism.

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The competent graduate:

- Provides leadership in patient care, while respecting the views and interests of all members of the health care team, the patient and patient's family;
- Maintains and respects patient confidentiality, and is aware of the unique doctor/ patient relationship;
- Knows and admits to his/her limits of knowledge;
- Can deal with uncertainty;
- Respects the opinions of others;
- Recognizes the need to learn is continuous;
- Balances personal and professional commitments to ensure that the patient's medical needs are always addressed;
- Recognizes and avoids conflicts of interest in financial and organizational arrangements for the practice of medicine;
- Demonstrates integrity;
- Demonstrates respect for human dignity;
- Deals honestly;
- Recognizes key ethical dilemmas and applies ethical principles.

## SYSTEMS-BASED PRACTICE

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*The competent graduate demonstrates an awareness of and responsiveness to the larger context and systems of health care.*

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The competent graduate:

- Understands the principles of health care delivery and can describe the organization of a health care delivery system in those terms;
- Knows how to partner with health care managers and health care providers to assess, coordinate, and improve health care and knows how these activities can affect system performance;
- Describes how to appropriately utilize and integrate the services of multidisciplinary health providers;
- Defines health in terms of the community in which the patient lives (population-based medicine);
- Evaluates and integrates community resources into the health maintenance of individual patients and their families;
- Assesses the effect of the physical environment on community health;
- Applies key legal concepts and is aware of professional requirements governing medical practice.