Welcome to Pediatrics!
Clerkship Administration

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What Makes Pediatrics Different

- Old-Fashioned Medicine
  - Less reliance on technology
  - More trust in providers
  - Greater partnership with patients and families

- Benefit
  - Often have better compliance
What Makes Pediatrics Different

- Our patients get better!
  - Frequently infectious disease and/or single organ system derangement

- Children are resilient.
  - Benefit: Immediate Gratification!
What Makes Pediatrics Different

- Pediatric providers are more fun!
  - The physical exam frequently requires an entertaining personality.
  - Child-friendly environs are uplifting.
- Benefit: Relive your childhood!
Rotation Goals

- Obtain knowledge of common pediatric illnesses.
- Become familiar with key topics covered in well child and adolescent visits.
- Develop an approach to interviewing and examining children of all developmental stages.
Orientation to Pediatrics

This clerkship is a smorgasbord of experiences.

- Strengths
  - Broad experiences
  - Primarily general pediatric focus
  - Clinical preceptors are very interested in teaching.

- Weaknesses
  - Multiple supervisors/evaluators
  - Seasonality
  - A short rotation that moves quickly!
Clerkship Overview

- Ambulatory Pediatrics: 3 weeks – may be non-consecutive
- Ward: 2 weeks
- Nursery: 1 week
- Operation Homefront: 2 sessions
Suggested Textbooks

- Nelson Essentials of Pediatrics - Behrman & Kliegman
- Pediatrics for Medical Students – Bernstein & Shelov
- Blueprints in Pediatrics - Marino
- Pretest Pediatrics – practice questions
Internet Education Resources

- CLIPP cases (Computer Assisted Learning in Pediatrics)
  - [http://www.med-u.org/](http://www.med-u.org/)
- Bright Futures
  - [http://brightfutures.aap.org/index.html](http://brightfutures.aap.org/index.html)
- Pediatrics in Review
  - [http://www.pedsinreview.org](http://www.pedsinreview.org)
- Pediatric Board Game
  - [http://msig.med.utah.edu/boardgame](http://msig.med.utah.edu/boardgame)
More Internet Resources

- COMSEP Curriculum
  - [www.comsep.org](http://www.comsep.org)

- *** COMSEP Pediatric Physical Exam Video ***
  - [www.comsep.org](http://www.comsep.org) → Educational Resources → Multimedia Teaching Resources → Pediatric Physical Examination (under COMSEP Curriculum Support Resources)
Loyola Pediatrics Website

- Peds Page on LUMEN
  - Clerkship schedules (call, lectures)
  - Preceptor evaluations of students
  - Competencies
  - Lecture handouts

- Peds Dept website:
  http://www.meddean.luc.edu/depts/peds/Usefullinfo.htm
  - PowerPoints from old morning reports
  - Noon conference schedule
Inpatient Responsibilities

Ward

- “Read around patients” (beyond the text)
- Share with the team (formal and informal)
- Read around and see other interesting patients
- Primary responsibility on call is new pt. work-ups
- 2 weeks is short, so be aggressive

Weekends

*** If you are not on call, you must still round on 1 weekend day.
Ward Weekends

- On call Friday
  - Stay until work is done on Saturday (~noon).
  - Off Sunday, back on Monday

- On call Saturday
  - Stay until work is done on Sunday (~noon)
  - Back on Monday

- On call Sunday
  - Off Saturday
  - Stay until work is done on Monday (~noon)

- No weekend call
  - Pick either Saturday or Sunday (divide among the team), come in to preround on assigned patients, participate in rounds, and stay until work is done (rarely after noon). **No full weekends off during IP.**

- If you are on call Saturday during one ward weekend, you still must come in one morning the other weekend.
Inpatient Responsibilities

Ward

- Assigned to work with PL-1 by matching up call schedules
- Call (2-3 in 2 weeks)
  - Leave at 10P the night before PCM, study days or switch days.
- M – F rounds vary by day and team (but mostly 9 – 12)
- Be the expert on your patients!
- Pre-round before Morning Report/Grand Rounds (or before rounds on the weekends)
Ambulatory Responsibilities

- See a variety of patients – well child and sick visits
  - Practice otoscopy!
- When possible, follow up on patients’ lab results.
- Read about your patient’s problems and share new knowledge with your preceptors.
- Can be fast-paced – learn to think on your feet and synthesize information quickly.
- No weekend responsibilities!
Nursery Responsibilities

- Daily attending rounds
- Pre-round before
- Examine ALL babies everyday
- Work-up new babies
- Attend high risk deliveries
- Neonatology exposure
- Round one weekend morning – divide among the team.
Teaching Conferences

**Pediatric Weekly Schedule** (for Loyola-based students and nearby outpatient students)

- **Morning Report** (8A) – M, W-F – Conf. Rm on North side of Hospital Cafeteria
- **Grand Rounds** (8A) – Tuesdays – SSOM 160
- **Noon Conference** – see schedule for dates/locations – Most in Peds Conf. Rm
- **Friday lecture series** – usually starts at 1P in Peds Conf. Rm, but check schedule.
Clerkship Assignments

- **History and Physical Case Checking**
  - Two very complete H & Ps presented orally and their write ups formally reviewed by your attending. Must be turned in!
  - You should write H&Ps and daily notes on all patients you work up, even after you’ve turned your two in.

- **Directly Observed Newborn Exam**
  - Head-to-Toe Physical Exam reviewed and critiqued (checklist) by your Newborn Nursery attending.
    - Time limit of 10 min.
  - Communication checklist from rounds with parents.
Clerkship Assignments

- CLIPP cases (www.med-u.org/) - complete as many as possible, but the following 8 cases will be required:
  - Cases 4, 11, 18, 19, 21, 23, 24, 31
  - NOTE: Failing to complete required CLIPP cases will affect your final grade! (deduction of 0.5 percentage points per CLIPP case)

- Operation Homefront reflection essay - 1 page
Clerkship Assignments

- Patient logs – (On MyLumen) – See separate info sheet.
  - Yellow cards can be used to track daily tallies, but you must log patients online at least weekly so I can ensure that you’re having adequate exposure to pts.
  - Preceptor (attending or resident) must sign off on a printout of your patients after each rotation block (IP, OP, NBN), and this must be handed in.
  - Additional CLIPP cases may be assigned to you if you have not had exposure to key types of patients. (I will send you an email during the beginning of the 4th week of the rotation if this is the case.)
  - If you do not log patients in by 2 weeks after the end of the clerkship or turn in your signed printouts, your Professionalism Competency will be marked “with concern”.
## Grading Policy

**Subjective Evaluations**  
<table>
<thead>
<tr>
<th>Component</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ambulatory</td>
<td>30%</td>
</tr>
<tr>
<td>Ward (2 H+Ps)</td>
<td>25%</td>
</tr>
<tr>
<td>Nursery (newborn exam)</td>
<td>10%</td>
</tr>
</tbody>
</table>

**Final online exam**  
35%

Includes info from Preventive Medicine online curriculum.

(You must pass exam - score of $\geq 60$ - to get higher than a Pass for the clerkship.)
Evaluations

- YOU are responsible for giving forms to the attendings.
- Schedule time with attending at end of stint to discuss evaluation.
  - Ambulatory - One form to evaluating attending. In most clinics, you’ll work with multiple physicians, but typically one will collect feedback from their colleagues and complete the evaluation.
  - If you can’t meet with your preceptor or see your evaluation during the clerkship, check in with Ana periodically to see if it’s in.
  - *** I will not change any evaluations completed by other physicians. If you disagree with your evaluation, speak directly with your evaluator.
Evaluations (cont.)

- You have up to 3 weeks after the clerkship ends to speak to your evaluators about potential revisions. No further revisions will be accepted after this time.

- Grades are finalized to the Registrar’s Office no later than 4 weeks after the end of clerkship.
  - Once grades are finalized, they will not be changed!

- Grade Inventory Sheet
  - Turn in at end of clerkship so we can help you track down missing evaluations.
Absences

- Notify your preceptor and Dr. Martin/Aña Juarez if you miss time due to illness.
- Requirements for making up lost time depend on how many days & what part of the rotation was missed. Will be decided by Dr. Martin on case-by-case basis.
  - Less likely to need to make up OP time.
- Excuses to miss exam due to illness require written note from Student Health and notification of Dean Wronski’s office.
Procedures
Student Feedback

End of Clerkship On-Line System

• Must be completed within 2 weeks of clerkship completion, or the registrar’s office will not release your grade.

Real Time Feedback