

Program Must See Clinical Presentations<sup>1</sup>

Clinical Presentation <sup>2</sup>	Course 8 Format
Abdominal mass	SP
Abdominal pain	SP
Abuse (domestic violence)	SP
<b>Attention deficit</b>	<b>VP</b>
Blood from GI tract	VP
Blood in urine	VP
BP abnormal	SP
Breast disorders	SP
Calcium abnormal	VP
Chest pain	Sim
Coagulation abnormalities	VP
Constipation	VP
Contraception	SP
Cough	VP
Cyanosis/hypoxia	VP
Developmental Delay	VP
Diarrhea	VP
Dizziness/vertigo	VP
<b>Dying patient</b>	<b>SP</b>
Dysphagia	VP
Dyspnea	Sim
Ear pain	VP
Edema	VP
Eye redness	VP
<b>Falls</b>	<b>SP</b>
Fatigue	VP
Fractures/dislocations	VP
Glucose abnormal / Diabetes Melitus	Chronic disease mgmt
Headache	SP
<b>Hearing loss/ deafness</b>	<b>VP</b>

<sup>1</sup> These clinical presentations were originally determined by a consultative process when Course 8 was developed. They were chosen based on judgment of importance and prevalence. A few additional ones were added over time to address identified “gaps” in the curriculum.

<sup>2</sup> **Bold Type** if NOT also on mandatory list for clerkship rotation (not in logbook)

Hemoglobin abnormal	VP
Hydrogen ion conc abnormal <sup>34</sup>	VP and Sim
Infertility	VP
Jaundice	VP
Joint pain	SP
Lipids abnormal	Chronic dis mgmt.
Menstrual cycle abnormal	VP
Mental status altered	Sim
Mood disorder	VP
Neck mass/goiter	SP
New born, depressed <sup>5</sup>	VP
Non reassuring fetal status	VP
Pain	SP
Palpitations	VP
Panic/anxiety	VP
Pap smear/screen	VP
<b>Peds emergency, acutely ill</b>	<b>VP</b>
Pelvic mass	VP
Pelvic pain	VP
Periodic health exam <sup>6</sup>	SP
Personality disorders	VP
Potassium abnormal (3 categories)	VP
Pregnancy <sup>7</sup>	SP
Pregnancy loss	VP
Prolapse/pelvic relaxation	VP

<sup>3</sup> Suspect coding problem. For classes of 2013 and 2014, CP was “hydrogen ion abnormal”. For class of 2015 was “acid-base abnormality”. However, one of our simulation sessions (altered LOC) is a patient with ASA ingestion in which the patient has a high anion gap metabolic acidosis. The students are required to analyze the ABGs and identify the acid-base disorder during the session.

<sup>4</sup> Highlighted if <80% of students logged the presentation.

<sup>5</sup> Logbook does not specify “depressed”

<sup>6</sup> Suspect coding problem. For Classes of 2013 and 2014, CP was “periodic health exam”. For Class of 2015 was “check up”.

<sup>7</sup> Data taken from rotation clerkship director as several logbook categories relate to “pregnancy”. All clerks must complete all mandatory CPs (as defined on page ...) to pass rotation.

<b>Proteinuria</b>	<b>VP</b>
Psychotic patient <sup>8</sup>	SP
Renal failure	VP
Seizures	Diagnostics and Therapeutics
Skin rash macules	VP
<b>Skin rash papules/blisters</b>	<b>VP</b>
Skin ulcers/tumors	VP
Sodium abnormal (2 categories)	VP
Sore throat	VP
Substance abuse	VP
Suicidal behavior/prevention	SP
Temperature abnormal	Diagnostics and therapeutics
Trauma	VP
Urinary frequency	VP
Urinary obstruction/prostate	VP
Vaginal bleeding	VP
Vaginal discharge	VP
Violence, family	VP
<b>Vision loss</b>	<b>SP</b>
Vomiting, nausea	VP
<b>Weakness</b>	<b>SP</b>
Weight abnormal	SP
Wheezing	SP

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<sup>8</sup> Overlap of presentations in logbook.

Pediatrics must see list<sup>9</sup>

Rotation Must See Clinical Presentations	Action taken based on review and discussion in November 2014
Pediatric Health Supervision	Changed title of CP to “check up”, added “well child care to virtual patient cases.
<i>Newborn (newborn, depressed)</i>	
Neonatal Jaundice	Added to virtual patient cases (cards) Included in resident teaching cases (2015)
<i>Temperature Abnormal/Fever/Chills</i>	
Dehydration	Planned card case (2015)
<i>Dyspnea/Resp Distress</i>	
<i>Developmental Delay</i>	
Stature abnormal	OSCE station
<i>Inadequately explained injury (child abuse) (abuse; violence, family)</i>	
Abdominal pain	
Vomiting/nausea	
Diarrhea	
Mental status, altered, confusion/delirium	
Seizures (epilepsy)	
Headache	

Murmur/extra heart sounds	Canuc-paeds online resources
<i>Skin rash macules, dermatitis/fever</i>	
<i>Coagulation abnormal, bleeding, bruising</i>	
<i>Hemoglobin abnormal, anemia/pallor</i>	
Lymphadenopathy	Planned card case
Deformity/limp	Planned card case
<i>Extremity pain</i>	
<i>Urinary complaints, hematuria</i>	

<sup>9</sup> Green indicates also included in Course 8, thus logbook numbers are on pages 1-3

Urinary complaints, polyuria, frequency	
Urinary complaints, obstruct/hesitancy	
Edema, anasarca, ascites	
Ear pain	
Sore throat, rhinorrhea	
Mouth, oral disorders	Added to virtual patient cases. Oral cases (spring 2016)
Eye redness/injuries	

Psychiatry must see list<sup>10</sup>

Rotation Must See Diagnoses	Course 8 Clinical Presentations
Adjustment disorder <sup>11</sup>	--
Bipolar 1 disorder/ manic episode	Psychotic patient
Major depression	Mood disorder
Panic and anxiety	Panic/anxiety
Personality disorder	Personality disorder
Schizophrenia Spectrum disorder	Psychotic patient
Substance use disorder	Substance abuse
Suicidal behavior	Suicidal behavior/ prevention

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<sup>10</sup> Green indicates also included in Course 8, thus logbook numbers are on pages 1-3

<sup>11</sup> Adjustment disorder removed for Class of 2016 as it is a diagnosis of exclusion and not a clinical presentation.

Surgery must see list<sup>12</sup>

Rotation Must See Clinical Presentations	Action taken based on review and discussion in November 2014
Abdominal distention	
Abdominal mass (adrenal mass, hernia)	
Abdominal pain	
Blood from GI tract	
Blood in urine	
Breast disorders	
Burns	Confirmed included in formal academic teaching sessions
Constipation	
Deformity/limp	
Dysphagia/difficulty swallowing	Confirmed included in formal academic teaching sessions
Fractures/dislocations/joint injuries	
Jaundice	
Joint pain	
Liver function tests abnormal	
Neck mass, goiter	
Pain – back	
Scrotal mass	Confirmed included in formal academic teaching sessions
Scrotal pain	Confirmed included in formal academic teaching sessions
Skin ulcers/skin tumors	
Trauma/accidents/bone joint injury	
Urinary frequency	
Vomiting/nausea	

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<sup>12</sup> Green indicates also included in Course 8, thus logbook numbers are on pages 1-3

Emergency Medicine must see list<sup>13</sup>

Rotation Must See Clinical Presentations	Corresponding Course 8 presentations
Chest discomfort	Chest pain
Respiratory distress	Dyspnea, cyanosis/hypoxia, wheezing
Altered LOC	Mental status, altered
Trauma	Trauma
Abdominal pain	Abdominal pain
Sepsis/infected patient	BP abnormal, temperature abnormal

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Obstetrics and Gynecology must see list<sup>14</sup>

1 <sup>st</sup> trimester complications/intrauterine fetal demise/pregnancy loss
Antepartum care (pregnancy) <sup>15</sup>
Antepartum hemorrhage (pregnancy)
Contraception
Emergent obstetrical complication (pregnancy)
Gestational diabetes (pregnancy)
Gestational hypertension (pregnancy)
Infertility
Intrapartum Care (pregnancy)
Menopause
Menstrual cycle abnormal
Multiple gestation (pregnancy)
Non reassuring fetal status
Pap smear/screening/colposcopy
Pelvic mass
Pelvic pain/dysmenorrhea
Postpartum care (pregnancy)
Postpartum hemorrhage (pregnancy)
Prenatal screening and diagnosis
Preterm labor/PPROM (pregnancy)
Prolapse/urinary incontinence
Vaginal bleeding, excessive/irregular/abnormal
Vaginal discharge/STI
Vulvar lesion

<sup>14</sup> Green indicates also included in Course 8, thus logbook numbers are on pages 1-3

<sup>15</sup> Coding issue identified in November 2014 as several CP's map to "pregnancy". Thus logbook data difficult to tally. Dr. Kelly Albrecht (Clerkship Director) has confirmed that all students in the Classes of 2014 and 2015 were required to complete all 24 clinical presentations to pass the rotation. These were documented in student clinical encounter books. Specific discussion regarding UCLIC students has ensued to ensure consistent logging for all students.

Anesthesia must see list<sup>16</sup>

Rotation Must See (or Discuss) Clinical Presentations	Action taken based on review and discussion in November 2014
Allergic reactions	Rare presentation – confirm students understand this is “must discuss”. Also include content in electronic cases/podcasts.
BP abnormal	
Chest discomfort	
Cyanosis/hypoxia	
GI reflux	Confirm this is “must discuss”
Glucose abnormal	Remove from list as not most appropriate rotation to emphasize this presentation.
Malignant hyperthermia	Rare presentation – confirm students understand this is “must discuss”. Also include content in electronic cases/podcasts.
Obesity	
Pseudocholinesterase deficiency	Rare presentation – confirm students understand this is “must discuss”. Also include content in electronic cases/podcasts.
Wheezing/respiratory distress/asthma	

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<sup>16</sup> Green indicates also included in Course 8, thus logbook numbers are on pages 1-3

Internal Medicine must see list<sup>1718</sup>

Abdominal pain
BP abnormal
Bleeding, GI tract
Calcium abnormal, phosphate, hypercalcemia
Chest discomfort
Coagulation abnormal, bleeding, bruising
Dizziness/vertigo
Dyspnea/resp distress
Headache
Hemoglobin abnormal, anemia/pallor
Acid/base abnormality
Jaundice
Joint pain
Lipids abnormal
Liver function tests abnormal
Mental status altered, confusion/delirium
Pain
Palpitations/abnormal ECG, arrhythmia
Potassium concentration abnormal
Renal failure
Skin rash macules, dermatitis/fever
Sodium concentration abnormal
Temperature abnormal/fever/chills
Weight abnormal, loss/eating disorder/anorexia

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<sup>17</sup> All included in Course 8, thus logbook numbers are on pages 1-3

<sup>18</sup> Seizures added in 2015 as new presentation. Glucose abnormal/diabetes mellitus moved from Anesthesia to IM in 2015

Family Medicine must see list<sup>19</sup>

Rotation Must See Clinical Presentations	Action taken based on review and discussion in November 2014
Abdominal pain	
BP abnormal	
Chest discomfort	
Contraception	
Cough and/or abnormal chest x-ray	
Diabetes type II	
Diarrhea	
Dizziness/vertigo	
Ear pain	
Elderly patient – potentially compromised	Suspect coding issues <sup>20</sup>
Fatigue	
Headache	
Ischemic heart disease	
Joint pain	
Mood disorders, major depression, adjust, bipolar	
Obesity	
Pain – back	
Panic and anxiety	
Periodic health exam/growth and development	Renamed to “check up”
Prenatal care	
Respiratory upper – URTI	
Skin disorders	
Temperature abnormal, fever/chills	
Urinary frequency	
Vaginal discharge, STD	
Well baby care	

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<sup>20</sup> CP has been renamed over last 3 years: Class of 2013 – “elderly patient risk assessment – falls”, Class of 2014 – “elderly patient – potentially compromised”, Class of 2015 – “elderly patient – risk assessment”

Wheezing/respiratory difficulty/asthma	
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