DEPARTMENT OF MEDICINE

Elective Clerkships

Department website: http://depts.washington.edu/medweb/

MED 600 P-Independent Study or Research (* max 12)

Offered:	AWSpS; Variable credit, full-time.
Prerequisite:	MEDRCK 601-691 or completion of 12 weeks of an Internal Medicine clerkship. Fourth-year medical students. Permission of instructor.
Total Enrollment:	1 by permission only
Faculty Contact:	Dr. Douglas Paauw (UWMC)dpaauw@u.washington.edu
Administrative Contact:	Kellie Engle, 206-543-3237, kaengle@u.washington.edu
Clerkship Sites:	Seattle

Objective:

Conduct a thorough, independent scholarly investigation of a specific issue or question related to medicine, health care delivery, preventive medicine, public health, or other medical inquiry with an emphasis on process rather than outcome.

Description of learning activities:

The purpose of this course is to facilitate and permit independent study and/or research by a medical student as part of their medical education. Acceptable projects should be related to the study of medicine, health care delivery, illness and injury prevention or other medical inquiry not available elsewhere in the medical school curriculum. The project should address a specific issue or question. The project should promote individual, self directed and creative scholarly activity with appropriate supervision and oversight.

Students are responsible for recruiting a faculty sponsor. A research proposal is required to be completed and approved by the faculty sponsor and Director of Medical Student Programs, prior to registration through MyUW. Completion of the project must be completed within quarter registered unless personal or medical emergency. Projects left incomplete twelve weeks after registration end-date will result in a final grade of failure unless arrangements have been made with the Department.

Evaluation:

Project is graded Pass/Fail.

Conjoint 677 P-Clinical Allergy and Immunology (*, max 12)

Offered:	AWSpS; 4 weeks full-time Seattle. Conjoint between Departments of Medicine and Pediatrics.
Prerequisite:	MEDRCK 601-691, Peds 665 or FAMED basic clerkship.
Total Enrollment:	1 student per rotation - Seattle.1 student per rotation -Boise. Boise VA by special arrangement through department
Location:	Seattle, WA; Boise, ID
Facility:	UW and clinical faculty clinics across the Seattle area. WWAMI site: Boise ID
Faculty Contact:	Dr. Henderson (UW) joangb@u.washington.edu Drs. Callanan, Ganier, Jeppson (Boise)
Administrative Contact:	Kellie Engle, 206-543-3237, kaengle@u.washington.edu
Transportation:	Student must provide transportation to multiple clinical faculty sites from Everett to Tacoma, and Seattle to Issaquah.

Objectives

At the end of the clerkship, the student will be able to:

- Diagnose the following disease states
 - o Asthma,
 - Upper airway disorders rhinitis, sinusitis, nasal polyps,
 - o Anaphylaxis/anaphylactoid reactions,
 - Adverse drug reactions,
 - Adverse reactions to food/food additives,
 - Stinging insect reactions,
 - Urticaria/angioedema,
 - o Atopic dermatitis,
 - o Contact dermatitis,
 - o Primary & secondary immunodeficiencies,
 - Other hypersensitivity disorders allergic bronchopulmonary asperfillosis, hypersensitivity pneumonitis, disorders of occupational exposure, autoimmune disorders, ocular allergic diseases, mastocytosis, and eosinophilic disorders.
- Discuss the disease state, its epidemiology and pathophysiology based on current scientific knowledge of asthma and other allergic diseases,
- Differentiate other diagnoses,
- Identify appropriate elements of the history and physical examination and laboratory testing in patient evaluation,
- Formulate a program of management and revise as patients are seen in continued care,
- Identify complications either caused by the disease state or its management,
- Discuss appropriate procedural skills including immediate and delayed hypersensitivity skin testing, allergen immunotherapy, drug desensitization, pulmonary function testing, and intravenous immunoglobulin therapy.

Schedule:

There is time available for elective assignments in the research laboratories of the Allergy Section or in private offices of the clinical faculty.

Conferences:

Allergy & Immunology Journal Club, conferences and hospital consultations on clinical immunology and allergy. Students may elect a flexible program emphasizing adult or pediatric allergy in the outpatient clinics (UW, Seattle Children's Hospital, or Madigan Army Medical Center).

Presentations:

Clinical conference presentations at Allergy and Immunology clinics.

Readings/texts:

http://www.jacionline.org/article/PIIS0091674906000248/fulltext *Middleton's Allergy: Principles and Practice*, 2003.

Evaluation:

Evaluation of student performance in the clinical curriculum.

MEDECK 601 P-Ward Medicine Subinternship Seattle (8)
MEDECK 630 P-Ward Medicine Subinternship Tacoma (8)
MEDECK 651 P-Ward Medicine Subinternship Alaska (8)
MEDECK 671 P-Ward Medicine Subinternship Idaho (8)

Offered:	AWSpS; 4 weeks full-time.		
Prerequisite:	MEDRCK 601-691 or completion of 12 weeks of an Internal Medicine clerkship.		
	2 students per rotation-UW	1 student per rotation- Madigan- no summer	
	2 students per rotation -HMC	1 student per rotation - Boise (by special arrangement through departmental office)	
Total Enrollment:	2 students per rotation -VA	1 - Anchorage (by application through Alaska Native Medical Center)	
	1 student per rotation - VA Hospitalist. Occasional possibility of 2 students on VA Hospitalist track. Please contact Kellie Engle (kaengle@u.washington.edu)		
Location:	Seattle, WA; Tacoma, WA; W\	WAMI Sites Boise ID, Anchorage AK	
	Seattle sites: UW, HMC and VA		
Facility:	Madigan – Tacoma, WA		
	WWAMI sites: Boise ID, Ancho	orage AK – Alaska Native Medical Center	
	Dr. Douglas Paauw (UWMC)dpaauw@u.washington.edu		
	Dr. McGee (Seattle VA), steven.mcgee@ va.gov		
	Dr. Khalighi (Seattle VA Hospitalist), mehraneh.khalighi@va.gov		
Faculty Contact:	Dr. Sheffield (HMC) jvls@u.washington.edu		
radaily domact.	Dr. R. Jones (Madigan), 253-968-0208; Jolene.meng@nw.amedd.army.mil		
	Dr. Branahl (Boise VA)		
	Linda 208-422-1000 x7642 Linda.Clark4.@med.va.gov		
		lative Medical Center, mkartalija@anmc.org	
Administrative Contact:	Kellie Engle, 206-543-3237, ka	aengle@u.washington.edu	

Goals:

Students will be able to serve as interns on the medical wards under the supervision of senior residents and attending physicians.

Objectives

At the end of the clerkship, the student will be able to:

- Perform an initial history,
- · Perform complete and accurate physical examinations,
- · Deliver succinct, organized oral presentations,
- Write thorough, complete, organized admission and daily progress notes,
- Formulate diagnostic and treatment plans;
- Interact with ward administrators, nurses, social workers, therapists, and consultants to achieve good patient outcomes;
- Documentation to support degree of care provided including complete HPI, PMH, PS/FH, and ROS.

Description of learning activities:

VA Hospitalist

The Medicine Subintern student on the VA hospitalist service works with a team consisting of one senior resident, 3rd year medical students, one faculty physician, and one medical team assistant (who provides administrative and secretarial help). The subintern works up three to five patients per week and cares for these patients until they are discharged. Additionally, he/she takes overnight call once a week with the

night float resident and assists with over cap admissions which are transferred to the hospitalist service the next morning. The subintern will also have the unique opportunity to get exposed to and help with cross-cover of floor and ICU patients. He/she is expected to work two weekends out of four. The senior resident and attending physician teach clinical diagnosis and management at the bedside and review the student's written and oral presentations. Additionally, the subintern is expected to attend daily morning report and regular conferences held at the VAMC. Opportunity to perform technical procedures—including venipuncture, arterial puncture, nasogastric tube placement, and some advanced procedures (such as thoracentesis, paracentesis, central line placements, and lumbar puncture)—is also available to the student.

Schedule: See department. Overnight hospital call every fourth – fifth night is required on this rotation. VA Hospitalist track student will take overnight call once a week with the night float resident and assist with over cap admissions which are transferred to the hospitalist service the next morning.

Conferences:

Attend all regular medicine rounds and conferences as their schedules permit.

Evaluation:

University of Washington Student Performance in the Clinical Curriculum.

MEDECK 602 P-Primary Care Seattle (8/12)

MEDECK OUZ 1 -1 TIIIIa	ry Care Seattle (0/12)
Offered:	AWSpS; 6 weeks full-time.
Prerequisite:	Permission to add or drop. MEDRCK 601-691. <i>Note:</i> This clerkship can only be dropped if the student finds a replacement. No adds or drops within six weeks. Only offered as a 6 week rotation.
Total Enrollment:	1 student per rotation.
Location:	Seattle, WA
Facility:	UW – Roosevelt, General Internal Medicine Clinic and UWMC subspecialty clinics
Faculty Contact :	Dr. Paauw, dpaauw@u.washington.edu
Administrative Contact:	Kellie Engle, 206-543-3237, kaengle@u.washington.edu

Objectives:

- Perform excellent history and physical examinations in the outpatient setting.
- Describe the goals and tools of aggressive control of Type 1 Diabetes Mellitus.
- Demonstrate standard shoulder/knee exams.

Schedule:

A full-time ambulatory care block in primary care internal medicine. Attend ½ day clinics in UW-Roosevelt general internal medicine clinic, virology, rheumatology, diabetes and chest clinics. Full-time for six weeks. No call on this rotation. Time off to attend non-Internal Medicine related conferences will not be permitted.

Conferences:

Student required to attend Medicine Grand Rounds, Resident Teaching Conference and Primary Care Conference on Thursday mornings.

Presentations:

Research an evidence based medicine topic of student's choice.

Readings/texts:

Clerkship Guide to Internal Medicine; Paauw, Burkholder, Migeon, Mosby, 2003.

Evaluation:

University of Washington Student Performance in the Clinical Curriculum.

MEDECK 603 P- Cardiology and Electrocardiography Seattle (8)
MEDECK 626 P- Cardiology and Electrocardiography Tacoma (8)
MEDECK 633 P- Cardiology and Electrocardiography Washington (8)
MEDECK 673 P- Cardiology and Electrocardiography Idaho (8)

Offered:	AWSpS; 4 weeks full-time.		
Prerequisite:	MEDRCK 601-691. Third- and fourth-year medical students.		
	3 students per rotation - UWMC	1 student per rotation–Madigan (not offered in summer)	
Total Enrollment:	2 students per rotation - HMC	1 student per rotation—Spokane, WA by permission	
	2 students per rotation - VA	1 student per rotation–Boise, ID by permission	
Location:	Seattle, WA; Tacoma, WA; WWAMI sites Spokane, WA; Boise, ID		
Facility:	Seattle sites: UWMC, HMC and VA Tacoma, WA: Madigan WWAMI sites: Spokane, WA:Sacred Heart Medical Center and Deaconess Medical Center Boise, ID: Idaho Cardiology.		
	Dr. Page (UW) rpage@u.	washington.edu;	
Faculty Contact :	Dr. Mascette (Madigan) Jolene, 253-968-0208, meng@nw.amedd.army.mil Dr. Writer (Boise) Denece, (208) 322-1680, dfisher@idahocardiology.com Dr. Novan (Spokane) novang@intmedspokane.org		
Hospital Coordinators:	Dr. Page (UWMC), Dr. Corson (HMC), Dr. Stratton (Seattle VA)		
Administrative Contact:	Kellie Engle, 206-543-3237, kaengle@u.washington.edu		

Objectives

At the end of the clerkship, the student will be able to:

- Conduct a focused cardiovascular history,
- Perform a complete cardiovascular examination,
- Determine the relative value of cardiovascular testing (such as stress testing, echocardiography, heart catheterization, and electrophysiology study),
- Read and interpret electrocardiograms
- Discuss the utility and limitations of the surface ECG.

Description of learning activities:

Third- and fourth-year students at UWMC work closely with the cardiology fellow and attending with daily teaching rounds as well as didactic teaching sessions. The students see new and follow up consultations and follow their patients throughout their active cardiac issue. A focus is placed on ECG interpretation. There is opportunity to observe cardiac echo, catheterization and coronary intervention and electrophysiology procedures. There is also opportunity to examine patients scheduled for catheterization or echocardiography, thereby increasing their knowledge of cardiovascular examination.

Third- and fourth-year students. At HMC, the clerkship is intended to orient the student to the basics of cardiology. The students see consultations and present the cases to the residents and the attending physician. Rounds are didactic in nature but also cover practical care in cardiology problems. Students attend work rounds in the coronary care unit and participate in attending teaching rounds 3 times weekly with the cardiology house staff team. Students are expected to gain insight into the utility of several noninvasive and invasive diagnostic methods, with opportunities to observe echo and cath lab procedures. Each student reads a number of electrocardiograms per day with a daily ECG review session. Cardiology teaching conferences are held weekly.

Third- and fourth-year medical students at the Seattle VA see cardiology consults and participate in the evaluation of hospitalized patients with active cardiovascular problems, follow patients on the medical

wards and CCU, participate in electrical cardioversions and exercise tolerance tests and read ECG's nightly. Opportunity to review cardiac catheterization data and coronary arteriograms and echocardiograms is also available. Ward and CCU rounds are held daily at the bedside. There are numerous teaching conferences and involvement in both invasive and non-invasive diagnostic procedures.

At Madigan, students assist in primary patient management and participate in daily rounds, teaching conferences, ECG interpretation, and orientation in both invasive and non-invasive diagnostic procedures. Students are expected to be on-call while on this rotation. Idaho students will work at one of 3 Idaho Cardiology clinic sites in Boise, Meridian or Caldwell doing consults, seeing outpatients and working directly with the attendings. Students read EKG's daily, supervise ECG's and become familiar with echocardiograms. Time is spent at the clinic, in the hospital

Schedule:

and the cath lab.

UWMC	Monday-Friday	8:00 am - 5:00 pm	The daily schedule is determined by the attending faculty cardiologist, but includes rounds with the cardiology fellow, rounds with the cardiology attending, and review of ECGs. Didactic sessions are also provided
НМС	Daily	7:30 am - 5:00 daily	The daily schedule includes rounds with the Cardiology team (residents, fellow and attending) in the coronary care unit, teaching sessions, patient evaluations and consult rounds in the afternoons. No call.
VA	Monday-Friday	8:00 am - 5:00 pm	No call.
Madigan	Daily	The daily schedule consists of pre-rounds on assigned patients followed by team rounds with the cardiology inpatient service from 7:00 - 8:30 am. Students will then participate in or observe a mixture of diagnostic procedures (i.e. GXT, cardiac catheterization, echocardiography). The inpatient service will consist of two residents, two interns, and 1-2 cardiology staff physicians. Students will be responsible for daily notes and discharge summaries on their assigned patients. Didactic teaching sessions will also be provided.	

UWMC: 8:00 am - 5:00 pm, Monday – Friday. The daily schedule is determined by the attending faculty cardiologist, but includes rounds with the cardiology fellow, rounds with the cardiology attending, and review of ECGs. Didactic sessions are also provided.

HMC: 7:30 am -5:00 daily. The daily schedule includes rounds with the Cardiology team (residents, fellow and attending) in the coronary care unit, teaching sessions, patient evaluations and consult rounds in the afternoons. No call.

VA: 8:00 am - 5:00 pm, Monday – Friday. No call.

Madigan: The daily schedule consists of pre-rounds on assigned patients followed by team rounds with the cardiology inpatient service from 7:00 - 8:30 am. Students will then participate in or observe a mixture of diagnostic procedures (i.e. GXT, cardiac catheterization, echocardiography). The inpatient service will consist of two residents, two interns, and 1-2 cardiology staff physicians. Students will be responsible for daily notes and discharge summaries on their assigned patients. Didactic teaching sessions will also be provided.

Conferences:

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UWMC:	Wednesday	7:30 - 8:30 am	Cardiology/Cardiothoracic Cath Conference
	Friday	7:30 - 8:30 am	Cardiology Grand Rounds
HMC	Friday	7:30 - 8:30 am	Cardiology Grand Rounds held at UWMC
	Friday	12:30 - 1:30 pm	Harborview Cardiology Noon Conference

VA:	Tuesday	11:15 am -12:30 pm	Chief of Medicine Rounds
	Friday	11:15 am -12:30 pm	Cardiology Case Conference
Madigan:	Tuesday	12:00 - 1:00 pm	Teaching conference
	Daily	8:00 - 9:00 am	Morning lecture

Presentations: None scheduled.

Readings/texts:

Hurst's The Heart, 11^h Edition, Fuster et al. Heart Disease, 8^h Edition, Braunwald et al.

Manual of Clinical Problems in Cardiology, Hillis et al.

ECG Syllabus by Gary Martin and Eric Feigle (HuBio 540), UW Bookstore.

The Complete Guide to ECGs: A Comprehensive Guide to Improve ECG Interpretation Skills, 2nd Edition, O'Keefe, Jr., et al.

Evaluation:

University of Washington Student Performance in the Clinical Curriculum.

MEDECK 604 P-Dermatology Seattle (8)

MEDECK 634 P-Dermatology Washington(8)

MEDECK 644 P-Dermatology Wyoming (8)

MEDECK 664 P-Dermatology Montana (8)

MECECK 674 P-Dermatology Idaho (8)

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Objectives

At the end of the clerkship, the student will be able to:

- Use the language of dermatology to effectively and accurately describe skin conditions or lesions.
- Demonstrate focused history-taking, physical examination, and oral and written presentations suitable for the skin.
- Outline a basic approach to the diagnosis and management of common skin conditions including atopic dermatitis, psoriasis, and seborrheic dermatitis.
- Apply the basic principles and practice of oral and topical dermatologic therapy including the appropriate use of emollients, topical steroids, antipruritic therapies, and systemic immunosuppressants.
- Correctly identify common skin tumors such as basal cell carcinoma, squamous cell carcinoma, and melanoma; outline basic management plans including the method of biopsy, appropriate surgical management, and patient follow up intervals.
- Recognize potentially life-threatening skin diseases such as serious drug eruptions, toxic epidermal necrolysis, and autoimmune blistering disorders.

• Successfully demonstrate essential dermatologic diagnostic procedures including KOH examination, scabies prep, shave biopsy, and punch biopsy of the skin.

Schedule:

Seattle area: Participation in dermatology clinics and inpatient consultations at UW Medical Center, Harborview Medical Center, Children's Hospital and Regional Medical Center, and the VA Puget Sound Health Care System-Seattle. For a more detailed description of each site rotation, see the division website at www.uwdermatology.org.

Away Sites: Meridian, ID – Busy clinic with two days per week devoted to office surgical procedures, extensive experience with skin cancer surveillance. Schedule is 8 am - 5 pm, no conferences or presentations. City-wide dermatology conference every month which students can attend.

Conferences:

In Seattle area, students attend Dermatology Grand Rounds on Wednesday mornings as well as Journal Club and the Medical Student Lecture on Thursday mornings. They also participate in "Chief's Rounds" with the Dermatology Chief Resident on a weekly basis.

Presentations:

No presentations are required, however Journal Club presentation opportunities are available.

Readings/Texts:

Required: Wolff and Johnson "*Fitzpatrick's Color Atlas & Synopsis of Clinical Dermatology*" Suggested: Habif TP: *Clinical Dermatology – A Color Guide to Diagnosis and Therapy*, Fourth Edition, Mosby, 2004. Textbooks available to check out from the Dermatology Division Office BB1353.

Evaluation:

University of Washington on-line clerkship evaluations of faculty and program.

MEDECK 605 P-Endocrinology and Metabolism Seattle (* to 12) MEDECK 627 P-Endrocrinology and Metabolism Tacoma (4/8)

Offered:	AWSpS.
Prerequisite:	MEDRCK 601-691.
	1student per rotation – UWMC and clinical faculty clinics
Total Enrollment:	1 student per rotation – HMC and clinical faculty clinics
	1 student per rotation – Madigan, 2 or 4 weeks
Location:	Seattle, WA; Tacoma, WA
Facility:	UWMC, VA, clinical faculty offices and Madigan
Faculty Contact :	Dr. Weigle (Seattle), weigle@u.washington.edu
	Dr Jones (Madigan), 253-968-0208, Jolene.meng@nw,amedd,army.mil
Administrative Contact :	Kellie Engle, 206-543-3237, kaengle@u.washington.edu
Transportation:	Note: Transportation between teaching sites is required

Objectives:

- Perform and interpret a history and physical exam appropriate to patients with endocrine diagnosis,
- Utilize basic endocrine pathophysiology to interpret and describe disease states,
- Discuss the relationship between endocrine pathophysiology and the practical treatment of patients.

Description of learning activities:

This clerkship makes use of a number of teaching sites in Seattle, including the University of Washington Medical Center, Harborview Medical Center, and clinical faculty offices. Students will see inpatient consults with an Endocrine Attending and Fellow, and attend a variety of outpatient clinics. The outpatient experience includes subspecialty clinics in metabolic bone disease, intensive diabetes management, and atherosclerosis prevention. Students will also spend several half days per week in the offices of endocrinologists in private practice.

Schedule:

To be provided after enrollment. Note that transportation between teaching sites is required. Conferences: Weekly teaching conference, Tuesdays at 4:00 pm (Seattle site).

Presentations:

Students will be required to present their patient clinical evaluations to the attending staff both at outpatient clinics and for inpatient consults.

Readings/texts:

Each student will select a topic for a reading project in endocrinology. The results of the student's literature review will be discussed at a post-clinic conference at some point during the month.

Madigan Army Medical Center: The Endocrine Clinic sees approximately 700 patients per month in both outpatient clinic and inpatient consultation. One student at a time may participate fully on the outpatient clinic experience. In addition to seven endocrinology clinics a week, students are encouraged to participate in the Department of Medicine morning report, Wednesday afternoon Foot at Risk Clinic and spend one afternoon with the hospital's certified diabetic educator.

Evaluation: University of Washington Student Performance in the Clinical Curriculum.

MEDECK 606 P- Gastroenterology Seattle (8)

MEDECK 636 P- Gastroenterology Washington (8)

Offered:	AWSpS; 4 weeks full-time.		
Prerequisite:	MEDRCK 601-691; third- and fourth-year medical students.		
Total Enrollment:	6 students per rotation - Seattle. 1 student per rotation available at Sacred Heart (Spokane) by special arrangement.		
Location:	Seattle, WA; Spokane, WA		
Facility:	Seattle site: UWMC, HMC, VA WWAMI site: Spokane		
Faculty Contact :	Dr. Lee, splee@u.washington.edu Dr. Novan (Spokane), novang@intmedspokane.org		
Administrative Contact:	Kellie Engle, 206-543-3237, kaengle@u.washington.edu		

Goals:

Students acquire in depth experience in clinical gastroenterology, with close mentoring by members of the Gastroenterology faculty and are exposed to a broad range of state-of-the-art diagnostic and therapeutic endoscopic procedures.

Objectives

At the end of the clerkship, the student will be able to:

- Evaluate patients seen in consultation with a member of the Gastroenterology Inpatient Consulting team,
- Discuss and identify underlying pathophysiologic mechanisms of GI diseases with GI illness and complaints,
- Discuss the capabilities as well as limitations of endoscopy in clinical practice,
- Discuss appropriate indications and contraindications for endoscopic procedures,
- Discuss key elements for providing excellent consultative service in Inpatient medical care.

Description:

Students join and become responsible members of the Gastroenterology Inpatient Consulting team at one of the three teaching hospitals of the University of Washington (UWMC, HMC, VA).

Schedule:

Weekdays, work hours to be determined by Attending Physician. No night or weekend responsibilities.

Conferences:

Teaching rounds with the Attending and Senior Fellow are held 5 days per week. Assigned cases are presented to the full team, and thereafter followed regularly by the student.

Students are strongly encouraged to attend regularly scheduled GI educational conference (Fridays, 7:30 -10 am).

Presentations:

At the discretion of the Attending physician.

Readings/texts:

A syllabus containing reading material reprints is available for purchase.

Evaluation:

University of Washington Student Performance in the Clinical Curriculum

MEDECK 607 P- Hematology/Oncology Seattle (8) MEDECK 677 P- Hematology/Oncology Idaho (8)

Offered:	AWSpS; 4 weeks full-time.	
Prerequisite:	Completion of HuBio series; MEDRCK 601-691.	
Total Enrollment:	1 student per rotation.	
Location:	Seattle, WA; Boise, ID	
Facility:	Seattle sites: UW, HMC and VA WWAMI site: Boise ID: Saint Lukes	
Faculty Contact :	Dr. Abkowitz (UW) janabk@u.washington.edu	
	Dr. Broudy (HMC) vcbroudy@u.washington.edu	
	Dr. Richard (VA) rrichard@u.washington.edu	
	Drs. Collins, Zuckerman (Boise), danae@u.washington.edu	
Administrative Contact :	Kellie Engle, 206-543-3237, kaengle@u.washington.edu	

Objectives

At the end of the clerkship, the student will be able to:

- Describe the pathophysiology of anemia, thrombocytopenia, neutropenia, myeloproliferative disorders and coagulation problems;
- Conduct appropriate workup for anemia, thrombocytopenia, neutropenia, myeloproliferative disorders and coagulation problems;
- Outline management and therapy for anemia, thrombocytopenia, neutropenia, myeloproliferative disorders and coagulation problems:
- Outline the work-up and treatment of malignancies,
- Discuss how one weighs risks and benefits in cancer care decisions,
- Evaluate patients with common solid tumors, bleeding, or thrombosis.

Description of learning activities:

The consultative evaluation of general hematology and oncology problems is available at UWMC, Harborview Medical Center, and the Seattle VA Medical Center. The Seattle VA Medical Center rotation can include marrow transplantation experience. The Harborview rotation elective will provide experience

with the evaluation and management of common solid tumors, patients with bleeding or thrombosis and HIV-positive patients. The University of Washington Medical Center rotation includes a focus on marrow morphology and students can opt to round with an inpatient cancer medicine team. At all sites there is an active outpatient clinic. The UWMC outpatient clinic is located at the Seattle Cancer Care Alliance building.

At Boise, this fourth-year elective will provide clinic experience regarding the epidemiology, etiology, and staging of common malignancies, cancer treatment modalities, cancer screening, and issues regarding death and dying. In addition to the malignant disorders, there will also be exposure to a variety of hematologic problems including basic coagulation.

Schedule:

This clerkship is taught at University of Washington Medical Center, Harborview Medical Center, and the Seattle VA Medical Center. At each hospital the hematology-oncology elective consists of one month of training during which students work up patients in the inpatient and outpatient services under supervision of a clinical Fellow and the faculty of the Divisions of Hematology and Oncology.

Conferences:

Depends on site. Harborview and University – Post-clinic conference, Thursday, 4:30 - 5:30 pm. Hematology/Oncology Fellows Conference and Hematology Grand Rounds, Friday, 7:00 - 9:00 am. University – Leukemia and lymphoma conference, 2 Fridays/ m 12:00 – 1:00 pm.

Readings/texts:

Depends on site and specific patient issues encountered. At Haborview and the University, papers relevant to the patients seen on the rotation will be provided.

Evaluation:

University of Washington Student Performance in the Clinical Curriculum.

MEDECK 608 P-Infectious Diseases Seattle (8)

MEDECK 628 P-Infectious Diseases Tacoma (8)
MEDECK 638 P-Infectious Diseases Washington (8)

MEDECK 689 P-Infectious Diseases Idaho (8)

Offered:	AWSpS; 4 weeks full-time.
	Prerequisite: MEDRCK 601-691. Third- and fourth-year medical students.
	2 students per rotation - UW 1 students per rotation - FHCRC
	3 students per rotation - HMC
Total Enrollment:	2 students per rotation - VA
Total Ellionnient.	1 students per rotation - Madigan
	1 students per rotation - Spokane, WA by permission
	1 students per rotation - Boise, ID by permission
Location:	Seattle sites: Seattle, WA; Tacoma, WA WWAMI sites: Spokane, WA Boise, ID
	Seattle sites: UWMC, HMC, VA, Fred Hutchinson Cancer Research Center (FHCRC)
Facility:	Madigan – Tacoma, WA
	WWAMI sites: Spokane, WA: Sacred Heart Medical Center
	Boise, ID: Boise VA Medical Center
Faculty Contact :	Dr. Van Voorhis (UWMC), Wesley@u.washington.edu
	Dr. Holmes (HMC), worthy@u.washington.edu
	Dr. Miller (Seattle VA), Richard.a.miller@va.gov
	Dr. Corey (FHCRC), bminnich@fhcrc.org
	Dr. Morris (Madigan), 253-968-0208, Jolene.meng@nw.amedd.army.mil
	Dr. Stevens (Boise VAMC), Linda 208-422-1000 x7642,

Linda.Clark4@ va.gov
Dr. Novan (Spokane), novang@intmedspokane.org

Administrative Contact:
Kellie Engle, 206-543-3237, kaengle@u.washington.edu

Objectives:

- Evaluate patients seen in consultation with a member of the Infectious Diseases Inpatient Consulting team,
- Discuss the use and misuse of antimicrobials, including antivirals and antifungal agents,
- Demonstrate diagnostic approaches used to evaluate and initially manage hospitalized patients with infectious disease.
- Apply mechanisms of antimicrobial resistance in developing treatment plans for patients with resistant organisms and reducing the prevalence of resistant organisms,
- Discuss basics of hospital epidemiology and the control of disease transmission in the hospital.

Description of learning activities:

Inpatient consultation services at the four Seattle hospitals (UWMC, HMC, Seattle VA, and FHCRC) are staffed by members of a large faculty and fellowship program. Students see 3 – 5 new patients per week and make daily rounds with an infectious disease fellow and/or medicine resident. Formal attending rounds are held 5 days per week with additional sessions for urgent patient problems and teaching. Medical microbiology conferences are held regularly at all sites, and there is a weekly city-wide clinical conference. Emphasis of the clerkship is on the varied diagnostic and therapeutic challenges prevalent in general hospitals.

The ID rotation at UWMC offers the opportunity to see patients with a wide variety of both common and unusual ID problems. Infections in solid organ transplant patients constitute an important part of the service. Students will work with a team that includes a medical resident, a fellow in ID and an attending physician. Students will play an integral role on the service, evaluating several patients per week and following these patients until discharge. Students may elect to work in an outpatient tropical medicine clinic as part of the elective as well.

The ID rotation at HMC involves inpatient infectious diseases consultations involving a wide variety of infections under the supervision of faculty, ID fellows, and residents. Students will work with critically ill patients in the intensive care units. Arrangements can also be made to involve opportunity to work with faculty and staff in one of our specialty clinics: the STD Clinic, Hansen's Disease Clinic, Hepatitis and Liver Clinic, TB Clinic, ID Clinic, and HIV Clinic. Arrangements to participate at the Hepatitis and Liver clinic would allow students to learn about the evaluation and treatment of chronic hepatitis B and C. Students interested in the ID or HIV Clinic can arrange to shadow one of the core providers in the Madison Clinic to gain experience in the outpatient management of HIV and infectious diseases.

The Seattle Puget Sound Veterans Health Care Center also offers a wide range of ID consultations on the inpatient service. Students will also have the opportunity to work in an ID Outpatient Clinic. As with the other hospitals described above, the main part of the rotation will be based on seeing ID cases in the hospital setting as part of a consultative team.

The Infectious Disease rotation at the FHCRC is dedicated to specialized infectious complications of the stem cell transplant and non-transplant patients with hematologic malignancies. The service receives 2-3 consults per day, mostly in severely immunocompromised hosts, and is divided 70% inpatients and 30% outpatients. Activities include daily teaching rounds and teaching conferences dedicated to care of the patient with cancer. The consult team consists of a faculty attending; an infectious disease fellow; and a full-time physician's assistant. The student will be expected to work up approximately 1 consult daily, follow patients during the course of the rotation, and present daily to the attending staff. The rotation offers good patient material and complicated cases.

The Infectious Disease Service at Madigan Army Medical Center provides an inpatient consultation service and oversees an active outpatient clinic. A medical student rotating on the service will have the opportunity to be involved in both areas by working closely with residents and staff. The goal of the rotation is to provide the student with a firm foundation in basic infectious disease knowledge and practice. Lectures on various topics in infectious diseases are given 3 to 5 times per week. The student will be required to do a short presentation on an infectious disease topic.

The Boise VAMC offers an Infectious Disease elective by special arrangement. Students will learn how to perform and interpret gram stains, use antibiotics appropriately, and will evaluate inpatients and outpatients with a variety of infectious diseases. Students will participate in activities in the Hepatitis C Clinic and HIV Clinic as well. In addition, normal teaching rounds are conducted twice per week and additional times as deemed necessary. With advance notice, may also be able to arrange time with local ID physicians in the community during the rotation

Schedule:

8:00 am - 6:00 pm daily, occasional weekend call.

Conferences:

Wednesday afternoon City Wide ID Conference, 4:30 pm; other conferences per individual hospitals.

Presentations:

Most students are asked to make a formal presentation to their team on a topic related to a patient they have seen.

Readings/texts:

Harrison's Internal Medicine (ID sections).

Principles and Practice of Infectious Diseases; Gerald L. Mandell, et al.

Evaluation:

University of Washington Student Performance in the Clinical Curriculum.

MEDECK 609 P-Nephrology and Fluid Balance Seattle (8)

MEDECK 639 P-Nephrology and Fluid Balance Washington (8)

MEDECK 679 P-Nephrology and Fluid Balance Idaho (8)

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Offered:	AWSpS; 4 weeks full-time.	
Prerequisite:	MEDRCK 601-691; Third- and fourth-year medical students. Permission required to drop with replacement for Spring Quarter.	
Total Enrollment:	4 students per rotation	
Location:	Seattle, WA; Boise, ID	
Facility:	Seattle sites: UWMC, HMC and VA WWAMI site: Boise ID: Idaho Nephrology Associates, Spokane, WA: Sacred Heart Medical Center	
	Dr. Ahmad (UWMC) 206-543-3792, sahmad@u.washington.edu	
Faculty Contact :	Dr. Ryan (HMC), mjryan@u.washington.edu	
	Dr. Andress (VA) 206-764-2002, dandress@u.washington.edu	
Administrative Contact :	Kellie Engle, 206-543-3237, kaengle@u.washington.edu	
	Suzanne Patterson, 206-543-3792, spatters@u.washington.edu	

Please visit links for detailed information about the teaching program at UWMC, HMC and VA

http://depts.washington.edu/nephron/residents.htm

Objectives

At the end of the clerkship, the student will be able to:

- Calculate and estimate renal function given appropriate data,
- Evaluate patients with hematuria,
- Describe the causes of oliguria/anuria,
- Distinguish the various glomerular lesions,
- Discuss indications for renal biopsy,
- Distinguish pre-renal, renal, and post-renal causes of oliguria,
- Treat patients with salt and water disorders,
- Treat patients with common pH imbalances disorders,
- Evaluate and treat patients with hypertension,
- Discuss the evaluation and treatment of patients with renal stones.
- Discuss the indications for instituting chronic dialysis and the major complications of such treatment,
- Recognize urinary sediments under the microscope and learn about casts, cells and crystals.

Description of learning activities:

The nephrology/fluid balance clerkship at University of Washington Medical Center, Harborview Medical Center, and Seattle VA Medical Center is a one-month elective for Third- and fourth-year medical students who will see clinical nephrologic problems under close supervision. They participate in nephrology rounds, see consults with renal fellow and Attending and work up patients in renal clinics.

Schedule:

Work Rounds and Attending Rounds will take place daily at each hospital.

Clinics are generally held on Tuesday morning, but specialty clinics (e.g. renal stones, hypertension) may occur at other times as well, depending on the hospital. Check with the attending physician or renal fellow as to these events.

Conferences:

Renal Grand Rounds are held at 8:00 – 10:00 am, Friday mornings at Northwest Kidney Centers, 600 Broadway.

Presentations:

Students will present new patients at Attending Rounds and be responsible for monitoring the progress of patients they evaluate.

Reading/Texts:

Schrier: Diseases of the Kidney, 2002.

Henrich: Dialysis, 2003.

MEDECK 610 P- Respiratory Disease and Critical Care Seattle (8)
MEDECK 629 P- Respiratory Disease and Critical Care Tacoma (8)
MEDECK 680 P- Respiratory Disease and Critical Care Idaho (8)

Offered:	AWSpS; 4 weeks full-time.	
Prerequisite:	MEDRCK 601-691. Third- and fourth-year medical students.	
	1 student per rotation -UWMC	1 student per rotation - Boise by permission
Total Enrollment:	2 students per rotation - HMC	1 student per rotation - Madigan (not offered summer)
	2 students per rotation - VA	
Location:	Seattle and Tacoma WA; Boise, ID	
Facility:	Seattle sites: UWMC, HMC and VA Medical Center Madigan in Tacoma, WA WWAMI sites: Boise ID: Boise VA Medical Center	
	Dr. Tonelli (UW), tonelli@u.was	shington.edu
Faculty Contact :	Dr. Roth (Madigan) Jolene,meng@nw.amedd.army.mil	
	Dr. Thompson (Boise VA), Lind	a 208-422-1000x7642 Linda.Clark4@va.gov
Hospital Coordinators:	Dr. Pierson (HMC)	

Dr. Lakshminarayan (Seattle VA)

Administrative Contact: Kellie Engle, 206-543-3237, kaengle@u.washington.edu

Objectives

At the end of the clerkship, the student will be able to:

- Take a history, perform a physical examination and initiate a diagnostic work-up on patients with pulmonary problems including asthma, chronic obstructive pulmonary disease, interstitial lung disease, pulmonary hypertension, and a variety of infectious processes,
- State the indications for various diagnostic modalities including pulmonary function testing, arterial blood gases, thoracentesis, CT imaging of the chest, and bronchoscopy,
- Interpret pulmonary function tests including spirometry, lung volumes and diffusing capacity for carbon monoxide,
- · Interpret arterial blood gases,
- Interpret plain radiographs of the chest and formulate differential diagnoses for the relevant findings,
- Interpret the results of pleural fluid analysis,
- Explain the basic modes of mechanical ventilation, choose appropriate initial ventilator settings for a patient and make appropriate adjustments in these settings based on changes in the patient's condition,
- Discuss general principles of management of critically ill patients.

Description of learning activities:

Students are assigned to the consultation service in Pulmonary and Critical Care Medicine at one of three teaching hospitals. They will gain training and experience in respiratory disease diagnosis and management with emphasis on X-ray diagnosis, pulmonary function testing and interpretation, and use of fiberoptic bronchoscopy. Patients are seen by the students under supervision of a Fellow and presented to the Attending. Students will participate in pulmonary function testing and, at some sites, one half-day outpatient clinic. The specific details of the students work on the rotation vary from site to site and are described more fully on the clerkship website:

https://courses.washington.edu/med683/rotations/index.html

Schedule:

Students will participate in all aspects of the Pulmonary Consultation Service. Hours are generally between 8:00 am to 6:00 pm. Students will not take any night call and have all weekends and holidays off.

Conferences:

Students from all Seattle hospitals will attend a weekly Chest Grand Rounds, a Respiratory/Critical Care teaching conference, and a series of four student seminars covering basic topics in clinical respiratory medicine that take place on Thursday afternoons following the conferences listed above. Attendance at these sessions is mandatory.

Presentations:

Students will present new and follow-up consult and clinic patients to the Attending physician and team. At the Attending's discretion, the student may be asked to prepare brief reports on selected topics to the team.

Readings/texts:

A library of useful review articles on a variety of topics in pulmonary medicine is available through the clerkship website: https://courses.washington.edu/med683/secure/library.html

At Madigan Army Medical Center, the pulmonary clerkship is a combination inpatient/outpatient experience in association with the Pulmonary Fellowship at Madigan. Students will have an opportunity to attend on the wards, attend the daily morning report, have a morning clinic, and perform afternoon

inpatient consults. The clerk will be directly supervised by a staff member and by a pulmonary fellow. Students will be assigned approximately two to four inpatients to follow and one new consult, and two to three follow-up patients per clinic. Students will be performing a consultative service with opportunities to do occasional thoracentesis, exercise studies, and arterial blood gas and pulmonary function interpretation. Teaching is considered one of the highest priorities on this rotation.

At the Boise VA Medical Center, under the supervision of the pulmonary fellow and attending, students consult on the ICU patients as well as the non-ICU inpatients. They also have the opportunity to see new outpatient consults in clinic and to assist with bronchoscopies. Students are given a reading list and pulmonary/critical care topics are discussed with the fellows and attending on a daily basis. Additional emphasis is also placed on CXR and PFT interpretation. Students participate in CXR and critical care conferences, daily ICU rounds, and attend the daily general medicine conferences. The service is most busy during the late fall, winter, and early spring months.

Evaluation:

University of Washington Student Performance in the Clinical Curriculum.

MEDECK 612 P- HIV Care Seattle (8)

MIDDEGIT THE	CHI C COCKETTO (C)
Offered:	AWSpS; 4 weeks full-time.
Prerequisite:	MEDRCK 601-691. Third- and fourth-year students.
Total Enrollment:	1 student per rotation.
Location:	Seattle, WA
Facility:	HMC
Faculty Contact :	Dr. Harrington, rdh@u.washington.edu
Administrative Contact:	Kellie Engle, 206-543-3237, kaengle@u.washington.edu

Goals:

The purpose of this elective is to provide students with an intensive one month experience caring for HIV infected patients. Students will become familiar with the outpatient management of HIV infected patients including the administration of anti-retroviral therapy, medications to prevent opportunistic infections and the primary care issues unique to HIV+ patients. Students will learn to manage the acute medical problems of hospitalized HIV patients by working with the infectious diseases service and providing consultations to the primary teams responsible for HIV infected inpatients.

Objectives:

- Discuss key elements of providing primary care to HIV infected patients,
- Describe anti-retroviral therapy and treatments to prevent opportunistic infections,
- Identify and treat the opportunistic infections and cancers suffered by HIV+ patients,
- Recognize and treat the metabolic complications of HIV and HIV therapy (e,g,, lipodystrophy, hyperlipidemia, diabetes mellitus),
- Identify and help manage psychosocial problems such as depression, homelessness and substance abuse that many HIV+ patients face;
- Recognize and help manage the acute medical problems of hospitalized HIV+ patients,
- Help coordinate the transition of patients from the inpatient to the outpatient setting.

Schedule:

Students will split their time between the Madison Clinic (Harborview HIV Clinic) and the inpatient HIV consult service. Students will usually see patients and interact with providers and the attending physician in the Madison Clinic at the beginning (8:30 - 11:00 am) and end (2:30 - 5:00 pm) of each day. Mid-day (11:00 am - 2:30 pm) students will round on HIV+ inpatients and interact with the ID/HIV consult service. Daily schedules vary considerably depending on the activity of the inpatient consult service, the clinic and the particular interests of the student.

Students will have the opportunity to visit a Washington State prison 1-2 days during the month to learn about the care of incarcerated HIV+ patients and their transition back into the community. This activity is

coordinated by Dr. Lara Strick who provides care for all HIV+ inmates in the Washington State Department of Corrections. Dr. Strick is a member of the UW clinical faculty and a regular provider at the Madison Clinic.

Conferences:

Students are invited to attend the HIV noon conference series (presentations given once or twice per month, September through June), the HIV journal club (twice per month, September through June), the city-wide AIDS Clinical Conference (monthly) and the city-wide infectious diseases conference. (Wednesday afternoons).

Presentations:

No formal presentations are scheduled.

Readings/texts:

Students will be provided an HIV manual constructed by the clinic. The manual contains reprints covering anti-retroviral therapy, treatment and prophylaxis of opportunistic infections and standard-of-care guidelines for HIV infected patients.

By the end of the rotation students are encouraged to have completed the online HIV case studies posted on the website: "HIV webstudy" http://depts.washington.edu/hivaids/

Evaluation:

University of Washington Student Performance in the Clinical Curriculum.

MEDECK 613 P-Nutrition Seattle (8)

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Offered:	WSp; 4 weeks full-time.	
Prerequisite:	Hubio 568 and MEDRCK 601-691. Third- and fourth-year medical students who are interested in incorporating high quality nutritional assessment and care into the practice of medicine.	
Total Enrollment:	2 students per rotation.	
Location:	Seattle, WA	
Facility:	UWMC and HMC	
Faculty Contact :	Dr. Bob Knopp, rhknopp@u.washington.edu	
Administrative Contact :	Kellie Engle, 206-543-3237, kaengle@u.washington.edu	

Goals:

- Students will develop nutritional interviewing and assessment skills.
- Students will be able to assess nutrition/caloric requirements in patients seeking improved diabetes control, weight loss or improved health.
- Students will be able to assess nutrition/caloric requirements in critically ill patients.
- Students will be able to understand the interdisciplinary approach to nutrition in working with both out-patient and in-patient dieticians.

Objectives:

At the end of the clerkship, the student will be able to:

- Perform nutritional assessments and educate out-patients with hypercholesterolemia, chronic renal failure, diabetes mellitus, and those who are seeking weight loss and who are acute critically ill in an inpatient setting,
- Initiate and manage patients requiring total parenteral nutrition (TPN) and tube feeding,
- Recognize patients that should be referred to nutritional counseling,
- Educate patients about nutrition.

Schedule:

Four-week period involves rotation through several half-day out-patient clinics and in-patient shadowing

experiences. Three half-days will be spent with the Harborview In-patient Nutrition Support Service managing trauma, burn and ICU patients. Students will also spend one half-day in the NW Lipid Clinic, in the Diabetes Care Center, at the Puget Sound Kidney Center, and in the Weight Disorders Clinic. Two half days a week will be spent in classes, either Nutrition and Chronic Disease, (Winter Quarter) or Nutrition in Acute Care (Spring Quarter)

Conferences:

Students will attend didactic lectures on a variety of topics in nutrition as well as exposure to both inpatient and outpatient nutrition problems at clinical teaching sites affiliated with the University of Washington

Readings/texts:

Medical Nutrition and Disease edited by Morrison and Hark, 2nd Edition. A course syllabus will also serve as an up-to-date reference for major nutritional problems encountered in clinical practice

Evaluation: University of Washington Student Performance in the Clinical Curriculum Student performance will be assessed by teaching site preceptors and by means of a written examination.

MEDECK 614 P- Oncology Seattle (8)

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Offered:	AWSpS; 4 weeks full-time.
Prerequisite:	MEDRCK 601-691. Third- and fourth-year medical students.
Total Enrollment:	1student per rotation, by permission only.
Location:	Seattle, WA
Facility:	UWMC
Faculty Contact :	Dr. Stewart (FHC) fstewart@seattlecca.org
Administrative Contact :	Kellie Engle, 206-543-3237, kaengle@u.washington.edu

Objectives

At the end of the clerkship, the student will be able to:

- Discuss the biology of stem cell transplantation,
- Describe the management of complications from stem cell transplant,
- Describe the basic characteristics of high dose pharmacology,
- Discuss the use of tissue typing relevant to stem cell transplantation,
- Describe the family and patient psychosocial dynamics with stem cell transplantation,
- Conduct appropriate history and physical examinations for patients needing these services.

Description of learning experiences: Students are responsible for participating in the workups and daily care of patients receiving marrow transplants, high dose chemotherapy or immunotherapy on and intensive care research ward. Emphasis is on the management and supportive care of patients with pancytopenia and immunosuppression, transplantation biology, cancer chemotherapy and infectious disease problems.

Students will function under supervision of a Fellow or Resident.

Schedule: Daily.

Conferences:

Patient Care Conference, Weds 11:00 am, SCCA 3100 or UWMC 8124. Grand Rounds, Tues., 8:00 am, FHCRC Sze Conference Room, SCCA 3100, UWMC 8124.

Presentations:

One lecture on topic of choice by student.

Readings/texts:

Thomas ED, et al Bone Marrow Transplantation.

Evaluation: School of Medicine Student Performance in the Clinical Curriculum.

MEDECK 615 P-Rheumatology Seattle (8)

Offered:	AWSp; 4 weeks full-time.
Prerequisite:	MEDRCK 601-691. Third- and fourth-year medical students.
Total Enrollment:	1student per rotation.
Location:	Seattle, WA
Facility:	UWMC, HMC and VA
Faculty Contact :	Dr. Elkon (UW), elkon@u.washington.edu
Administrative Contact:	Kellie Engle, 206-543-3237, kaengle@u.washington.edu

Goals:

Provides students experience in the diagnosis and management of patients with rheumatic diseases.

Objectives:

At the conclusion of this clerkship, students should be able to:

- Demonstrate musculoskeletal exam skills,
- Differentiate the common forms of arthritis.
- Recognize potential serious rheumatologic illness such as vasculitis or lupus,
- Distinguish inflammatory from mechanical joint pain,
- Discuss the choice and use of rheumatology laboratory tests,
- Demonstrate a structured approach to the diagnosis and treatment of common rheumatologic conditions,
- Describe basic understanding of mechanisms of rheumatologic disease.

Schedule:

Students attend outpatient clinics at the UW (including Bone and Joint Center), Harborview or Seattle VA and will participate in inpatient consultation. Students will meet with Dr. Gardner or designated faculty member before and after the rotation to outline the month and expectations, and offer feedback on the experience and evaluate the faculty and fellows.

Conferences:

Students will participate in Divisional conferences on Tuesday and Friday AM that includes Fellow lectures, Rheumatology Grand rounds, and radiology conference.

Readings/texts: Reading list from Primer of Rheumatic Diseases

147 1 4		
Week 1:	1.	Evaluation of the patient with symptoms of rheumatic disease (Handouts).
	2.	Arthrocentesis and synovial fluid analysis.
	3.	Radiology of the rheumatic diseases.
Week 2:	4.	Rheumatoid arthrititis.
	5.	Systemic lupus erythematosus.
	6.	Spondyloarthropathies (ankylosing spondylitis, psoriatic arthritis, Reiter's
		syndrome).
Week 3:	7.	Crystalline arthritis (gout, pseudogout).
	8.	Osteoarthritis.
	9.	Vasculitis.
Week 4:	10.	Fibromyalgia.
	11	Osteoporosis

Additional reading based on individual patients encountered. Senior fellows will go through case workbook with the students to reinforce and insure basic issues are covered.

12. Regional rheumatic pain syndromes.

Paper:

All students will be expected to do a 3-5-page paper on a topic approved by the rheumatology consult attending. In addition, students will be expected to present a weekly topic during inpatient rounds for 5 minutes that is literature based and pertains to a patient issue approved by the consult fellow.

Evaluation:

The grade of Honors will require an honors level paper and presentations and agreement of faculty and fellows. University of Washington Student Performance in the Clinical Curriculum form.

MEDECK 616 P-Dermatology Clinic Seattle (*, max 5)

Offered:	AWSpS; Two half-days per week for 12 weeks.	
Prerequisite:	MEDRCK 601-691; Third- and fourth-year medical students. Permission required to drop with replacement only in Spring quarter.	
Total Enrollment:	2 students per rotation.	
Location:	Seattle, WA	
Facility:	UWMC	
Faculty Contact:	Dr. John Olerud, olerudje@u.washington.edu	
Administrative Contact:	Kellie Engle, 206-543-3237, kaengle@u.washington.edu	

Offered:	AWSpS; One or two half-days per w	veek for 4-6 weeks.
Prerequisite:	MEDRCK 601-691; Third- and fourth-year medical students. Permission	
	required to drop with replacement or	nly in Spring quarter.
Total Enrollment:	1 student per rotation.	
Location:	Seattle, WA	
Facility	UWMC, HMC, Seattle Children's Hospital and private clinician offices.	
Faculty Contact:	Dr. Bauer (Olympia, WA)	Dr. Valentine (Everett, WA)
	Dr. Caldwell (Bellevue, WA)	Dr. Wang (Kirkland, WA)
	Dr. Headley (Edmonds, WA)	Dr. Whaley (Tacoma, WA)
	Dr. Schwab (Federal Way, WA)	
	Dr. Thompson (Seattle, WA)	
Administrative Contact:	Kellie Engle, 206-543-3237, kaengle@u.washington.edu	

Objectives

At the end of the clerkship, the student will be able to:

- Demonstrate basic approach to the diagnosis and management of the most common skin problems.
- Discuss basic principles and practice of oral and topical dermatologic therapy with wet dressings, steroids, emollients and antipruritic therapy,
- Recognize major life-threatening skin diseases and markers of systemic disease,
- Utilize dermatologic vocabulary in order to generate clinical differential diagnoses and accurately describe a rash or a lesion when requesting consultative services,
- Recognize common skin tumors and understand appropriate diagnostics tests used in dermatology,
- Demonstrate appropriate history-taking and general physical examination with special attention to examination and description of the skin.
- Construct write-ups and oral presentations to be as precise and efficient as possible in communication about patients,
- Perform special diagnostic procedures (KOH, Tzanck test, patch test, skin biopsy) to assist in delineating patients' problems.

Schedule:

UWMC: Students will attend Dermatology clinic, two half-days per week at the UW Medical Center for 3 months.

UW Affililated Hospitals: Specially arranged schedules may be available at Harborview Medical Center, Seattle Children's Hospital, or the VA Puget Sound Health Care System-Seattle.

Away Sites: Students will attend Dermatology clinic as specified by clinical faculty member.

Conferences:

In Seattle area, students have the option to attend Dermatology Grand Rounds on Wednesday mornings, as well as Journal Club and the Medical Student Lecture on Thursday mornings.

Presentations:

No presentations are required; however Journal Club presentation opportunities are available.

Readings/Texts:

Suggested: Habif TP: *Clinical Dermatology – A Color Guide to Diagnosis and Therapy*, Fourth Edition, Mosby, 2004. Textbooks available to rent from the Dermatology Division Office BB1353.

Evaluation:

University of Washington on-line clerkship evaluation of faculty and program.

MEDECK 617 – P-Harborview Evening Clinic Seattle (2)

Offered:	AWSpS.
Prerequisite:	Permission of department. Fourth-year medical student.
Total Enrollment:	6 satudents per rotation.
Location:	Seattle, WA
Facility:	HMC
Faculty Contact:	Dr. Terasaki, terasaki@u.washington.edu
Administrative Contact:	Kellie Engle, 206-543-3237, kaengle@u.washington.edu

Goals:

In this elective, students will act as the primary health providers in the ambulatory care of adult patients in a busy urban clinic.

Objectives:

- Follow patient and modify their treatment plan over time,
- Perform excellent history and physical examinations in the outpatient setting,
- Utilize medical evidence to develop rational diagnostic plans, and initiate appropriate therapies,
- Demonstrate excellent communication skills, particularly with psychosocially needy patients,
- Demonstrate excellent documentation of care and patient tracking,
- Refer patients to appropriate community services,
- Demonstrate excellent communication with other health care providers.

Schedule:

The clinic is held on Tuesday evenings in the Adult Medicine Clinic at Harborview Medical Center. Students are strongly encouraged to participate for four quarters beginning in July.

Conferences:

Weekly pre-clinic conferences between 5:00 -5:30 pm cover a wide range of primary care topics.

Presentations:

Students will be expected to give 2 pre-clinic conferences during the course of the year.

Readings/texts:

Syllabus given at orientation.

Evaluation:

University of Washington Student Performance in the Clinical Curriculum.

MEDECK 618 P-Medical Consultation Seattle (8)

Offered:	AWSpS; 4 weeks full-time.
Prerequisite:	MEDRCK 601-691. Third- and fourth-year medical students.
Total Enrollment:	1 student per 4 week rotation per each site. By permission at UWMC.
Location:	Seattle, WA
Facility:	UWMC, HMC and VA
Faculty Contact :	UWMC: Dr. Nason Hamlin, nhamlin@u.washington.edu
	HMC: Dr. Rachel Thompson, rethomps@u.washington.edu
Administrative Contact:	Kellie Engle, 206-543-3237, kaengle@u.washington.edu

Objectives:

- Describe principles of management of multisystem disease,
- Describe special considerations of peri-operative risk assessment and management,
- Act as a member of a peri-operative consultative internal medicine team,
- Evaluate surgical and psychiatric patients on a consultative basis in the emergency room, as outpatients and as inpatients,
- Provide consultative services that meet the need of both patients and consulting practitioners.

Schedule:

UWMC: M-F, 8:00am to 5:00pm, Clinic 2-3 half days per week (will evaluate one patient each session) and inpatient follow-ups and discussion the remainder of the time.

HMC: M-F, 8:00 am to 5:00 pm, mixture of mostly inpatient and occasional outpatient experiences daily.

Conferences: Hospital conferences as time allows.

Readings/texts: Kammerer and Gross "Medical Consultation" (copy available to borrow) "Up-to-Date" sections on peri-operative medicine and medical consultation

Evaluation: School of Medicine Evaluation of Student Performance in the Clinical Curriculum Form.

MEDECK 619 P-Management of Sexually Transmitted Diseases Seattle (2)

Offered:	AWSpS; 2 weeks part-time.
Prerequisite:	MEDRCK 601-691, Surg 665, and Ob/Gyn. Students must review packet of didactic materials prior to elective.
Total Enrollment:	1. One rotation offered during the months of July, August, September, January, April and, May.
Location:	Seattle, WA
Facility:	HMC
Faculty Contact :	Dr. Golden, golden@u.washington.edu
Administrative Contact :	Kellie Engle, 206-543-3237, kaengle@u.washington.edu

Objectives

At the end of the clerkship, the student will be able to:

- Elicit a comprehensive sexual history from men and women, including men who have sex with men,
- Discuss the differential diagnosis, work-up, and treatment of common STD syndromes included urethral discharge, vaginal discharge, and genital ulcer disease,
- Conduct physical examinations needed to evaluate patients for STD.

 Perform basic microscopic tests on patients being evaluated for STD including: Gram stain of urethral and cervical specimens, and wet mounts of vaginal specimens.

Schedule: 9:00 am – 12:00 pm.

Conferences: STD Research Conference (optional).

Presentations: None.

Readings/texts:

Sexually Transmitted Diseases, Editor KK Holmes as needed.

Evaluation:

School of Medicine Student Performance in the Clinical Curriculum.

MEDECK 620 P-Clinical Medical Intensive Care Unit (8)

Offered:	AWSpS
Prerequisite:	By permission. No adds or drops within six weeks . MEDRCK 601-691. Fourth year students.
Total Enrollment:	 One rotation offered during the months, September – May.
Faculty Contact :	Dr. Luks, aluks@u.washington.edu
Administrative Contact :	Kellie Engle, 206-543-3237, kaengle@u.washington.edu
Clerkship Sites:	HMC

MEDECK 621 P-Clinical Medical Intensive Care Unit (8)

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Offered:	AWSp	
Prerequisite:	By permission. No adds or drops within six weeks . MEDRCK 601-691. Fourth year students.	
Total Enrollment:	 One rotation offered during the months, October – May. 	
Faculty Contact:	Dr. Luks, aluks@u.washington.edu	
Administrative Contact:	Kellie Engle, 206-543-3237, kaengle@u.washington.edu	
Clerkship Sites:	UWMC	

Goals:

- To learn how to evaluate and manage patients with different forms of critical illness including respiratory failure, hypotension, sepsis, organ failure and gastrointestinal hemorrhage
- To learn how to initiate and manage invasive and non-invasive modes of mechanical ventilation
- To learn how to interpret and apply the results of arterial blood gas analysis
- To learn how to protect patients from complications associated with stays in the intensive care unit
- To learn about the application of palliative care medicine principles in the intensive care unit setting.
- · To learn to work as part of a multidisciplinary care team

Objectives:

At the end of the clerkship, the student will be able to:

- Evaluate and manage patients with various forms of respiratory failure including COPD and asthma exacerbations, pneumonia, acute respiratory distress syndrome and pulmonary edema
- Evaluate and manage patients with sepsis and severe life-threatening infections
- Evaluate and manage patients with severe organ failure including renal, hepatic and coagulation failure
- Evaluate and manage patients with gastrointestinal hemorrhage
- Evaluate and manage patients with severe hypotension
- Evaluate and manage patients with severe metabolic and endocrinologic disturbances
- Initiate appropriate empiric antibiotic coverage for patients with severe infections
- Initiate and titrate vaso-active medications

- Initiate and manage both invasive and non-invasive modes of mechanical ventilation.
- Interpret arterial blood gases and apply this information in the care of patients
- Initiate appropriate measures to prevent complications associated with ICU care
- Apply the principles of palliative care medicine to patients in the intensive care unit

Schedule: 7:30 am – 5:00PM Sign out rounds. Overnight call every fourth night.

Presentations:

Students are expected to write all admission and daily progress on their patients and to communicate with consultants and other providers that are part of the multidisciplinary MICU team

Readings/texts:

There is no required reading for the clerkship. Sub-interns are, however, expected to read materials relevant to the care of their patients and other patients on the service as time permits during their rotation. Available sources of reading materials include:

- The MICU team has a small library maintained by the Section of Pulmonary and Critical Care Medicine located in the MICU team room. There is also a hospital library available 24 hours a day. The Division syllabus containing selected articles relevant to the rotation is maintained there.
- Electronic Syllabi: Two electronic syllabi are available for use by the sub-intern. Each syllabus contains a variety of primary research and review articles pertinent to pulmonary and critical care medicine
 - MICU Syllabus: https://eres.lib.washington.edu/eres/coursepass.aspx?cid=2157
 - Medicine 683 Pulmonary Clerkship Syllabus: https://eres.lib.washington.edu/eres/coursepass.aspx?cid=6459&page=docs
- Students may also access the website that has been created for Medicine 683, the 4th year student clerkship in Pulmonary Medicine which contains a large volume of teaching materials relevant to critical care medicine. The URL for this website is: https://courses.washington.edu/med683/index.html
- Suggested Textbooks:
 - Principles of Critical Care, 3rd Edition: Hall JB, Schmidt GA and Wood LDH eds. New York: McGraw-Hill. 2005. This is a large comprehensive textbook that is good for looking up specific topics. It is too expensive to consider purchasing for this rotation but is available in the MICU team room.
 - The Intensive Care Unit Manual. Lanken PN, Hanson W, Manaker eds. Philadelphia: W.B. Saunders. 2001. This is a much smaller textbook and something that is worth considering for purchase. It is an excellent source of condensed information about a wide range of critical care medicine topics. A copy is also available in the MICU team room.

Evaluation:

School of Medicine Student Performance in the Clinical Curriculum.

HARBORVIEW MEDICAL CENTER (MEDECK 620)

Description of learning experiences

Fourth year medical students will function at the sub-intern level on the Medical Intensive Care Unit (MICU) service at Harborview Medical Center. During the rotation, they will have direct patient care responsibilities through which they will learn about various forms of critical illness and how to apply different therapeutic and diagnostic modalities commonly used in critical care medicine.

The MICU service at Harborview Medical Center consists of an attending physician, pulmonary and critical care fellow, 4 senior residents and 4 interns. The sub-intern will be paired up with one of the senior residents and will take call with that resident and their corresponding intern on an every 4th night basis. The sub-intern will work an average of less than 80 hours per week during the rotation and will have a total of 4 days off per month. The specific days off will be determined at the start of the rotation. On workdays, the sub-intern will be expected to arrive at a time that will allow them to adequately pre-round on all of their patients before the morning didactic sessions. The workday will conclude when they have completed their work on all of their patients and have signed out with the pulmonary fellow and/or attending physician. Sub-interns may be asked to assist with the care of other patients as part of the team's work covering for residents and interns who have the day off or as part of an effort to get the post-call team out of the hospital but all such requests are at the discretion of the attending or fellow on the service. On call nights, the sub-intern will adhere to the same work-hour requirements as the resident and intern and will not work more than 30 consecutive hours at a time.

A Cautionary Word About Work in the ICU

The patients on the medical ICU service are some of the sickest patients in the hospital and likely some of the most complex and severely ill patients you will encounter at any stage of your medical school training. Caring for patients on this service is very demanding and requires a high level of attention to detail, the ability to think on one's feet and the ability to organize, synthesize and present a complex array of data in a concise manner. You will have adequate support from your residents and fellows on this rotation and our goal is to help you improve your skills in these areas. Nevertheless this can be a stressful and demanding rotation.

Conferences:

- Case discussion and review: The sub-intern will review all admissions with their senior resident and will review the care of all of their patients with the fellow and attending physician on a daily basis.
- Work rounds: Bedside teaching occurs daily on work rounds with the volume of teaching varying based on the current workload on the service.
- Didactics: Attending rounds take place 3 days per week (Monday, Tuesday, Thursday) from 8:00 to 8:30AM. Palliative care / Death rounds generally occur on Fridays at 8:00AM. If rounds have finished by 10:00 AM, sub-interns may also attend Morning Report on Mondays, Tuesdays, Wednesdays and Fridays from 10:00 to 11:00AM. Finally, the sub-intern is expected to attend noon conferences that occur on a daily basis

UNIVERSITY OF WASHINGTON MEDICAL CENTER (MEDECK 621) Description of learning experiences

Fourth year medical students will function at the sub-intern level on the Medical Intensive Care Unit (MICU) service at the University of Washington Medical Center. During the rotation, they will have direct patient care responsibilities through which they will learn about various forms of critical illness and how to apply different therapeutic and diagnostic modalities commonly used in critical care medicine.

The UWMC ICU is one of the highest acuity intensive care units in the entire WWAMI region. The patient population not only includes patients from the surrounding community but also a large number of complex patients cared for by specialty providers at the University of Washington as well as a large number of very sick patients transferred in from institutions throughout the WWAMI region due to the severity and/or uniqueness of their illness. In addition to treating patients with severe illnesses common to many medical intensive care units, providers in the UWMC ICU also take care of various types of solid organ transplant patients as well as very ill obstetrics patients, two patient populations that are not seen in most community hospital intensive care units.

The MICU service at the University of Washington Medical Center consists of an attending physician, pulmonary and critical care fellow, 4 senior residents and 4 interns. The sub-intern will be paired up with one of the senior residents and will take call with that resident and their corresponding intern on an every

4th night basis. The sub-intern will work an average of less than 80 hours per week during the rotation and will have a total of 4 days off per month. The specific days off will be determined at the start of the rotation. On workdays, the sub-intern will be expected to arrive at a time that will allow them to adequately pre-round on all of their patients before the morning didactic sessions. The workday will conclude when they have completed their work on all of their patients and have signed out with the pulmonary fellow and/or attending physician. Sub-interns may be asked to assist with the care of other patients as part of the team's work covering for residents and interns who have the day off or as part of an effort to get the post-call team out of the hospital but all such requests are at the discretion of the attending or fellow on the service. On call nights, the sub-intern will adhere to the same work-hour requirements as the resident and intern and will not work more than 30 consecutive hours at a time.

A Cautionary Word About Work in the ICU

The patients on the medical ICU service are some of the sickest patients in the hospital and likely some of the most complex and severely ill patients you will encounter at any stage of your medical school training. Caring for patients on this service is very demanding and requires a high level of attention to detail, the ability to think on one's feet and the ability to organize, synthesize and present a complex array of data in a concise manner. You will have adequate support from your residents and fellows on this rotation and our goal is to help you improve your skills in these areas. Nevertheless this can be a stressful and demanding rotation.

Conferences:

- Case discussion and review: The sub-intern will review all admissions with their senior resident and will review the care of all of their patients with the fellow and attending physician on a daily basis.
- Work rounds: Bedside teaching occurs daily on work rounds with the volume of teaching varying based on the current workload on the service.
- Didactics: Students will receive bedside teaching during morning rounds. Didactic sessions are also held 4 days per week provided the patient census and workload allow time for such teaching. Students are also able to attend the noontime lectures for the Department of Medicine and the Internal Medicine Residency Program.

MED 660 P- Emergency Medicine Elective (max 20)

See Emergency Medicine section under Required Clerkships.

MED 661 P- Emergency Medicine Elective (max 8)

See Emergency Medicine section under Elective Clerkships.

MEDRCK 601 - 691 P-Clinical Clerkships (*, max 24)

See Required Clerkships.

P – Genetics (8) (See PEDS 681 for course registration)

Full-time clinical clerkship in medical genetics. Provides extensive exposure to variety of genetic diseases and genetic counseling. Students work in three clinics (Monday, Tuesday, Thursday), response to inhouse consultation requests, attend rounds at Children's Hospital and Medical Center and University of Washington Medical Center and seminars at University of Washington Medical Center (Wednesday, Friday).

MEDECK 691 P-Medicine Special Electives Seattle (*, max 24)
MEDECK 692 P-Medicine Special Electives Washington (*, max 24)
MEDECK 693 P-Medicine Special Electives Wyoming (*, max 24)
MEDECK 694 P-Medicine Special Electives Alaska (*, max 24)
MEDECK 695 P-Medicine Special Electives Montana (*, max 24)
MEDECK 696 P-Medicine Special Electives Idaho (*, max 24)

Offered: AWSpS; 2, 4, 6, weeks full-time.

Total Enrollment: 10 students per rotation.

Prerequisite: MEDRCK 601-691 (this may be waived).

Faculty Contact: Dr. Paauw, dpaauw@u.washington.edu

Administrative Contact: Kellie Engle, 206-543-3237, kaengle@u.washington.edu

By specific arrangement for qualified students, special clerkships or externships may be available at institutions other than the University of Washington located within the WWAMI region. Interested students should submit a "Credit for Clerkship in WWAMI" form (available from the Dean's Office) for departmental approval at least two months before advance registration.

MEDECK 697 P-Medicine Special Electives Away (*, max 24)

Offered:	AWSpS; 2,4,6, weeks full-time.
Total Enrollment:	Various
Prerequisite:	Permission of department. + 2 month application process
Faculty Contact:	Dr. Paauw, dpaauw@u.washington.edu
Administrative Contact:	Kellie Engle, 206-543-3237, kaengle@u.washington.edu

By specific arrangement for qualified students, special clerkships or 'away clerkships' may be available at institutions other than the University of Washington. Interested students should submit a "Credit for Away Clerkship" form available from the UWSOM Dean's Office Registrar and complete for departmental approval at least two months before advance registration.

Evaluations:

Departmental evaluations are required to be completed by faculty and student prior to receiving a grade.

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