

Advanced Clinical Experience (ACE) Rounds Standard Template

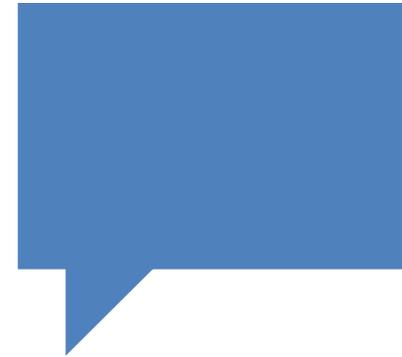


DONALD AND BARBARA
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AT HOFSTRA/NORTHWELL



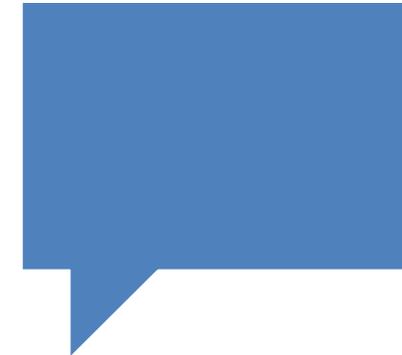
Goals

Through participating in ACE rounds, students will be able to use a clinical case to lead and participate in an interactive (Socratic) dialogue with their peers.



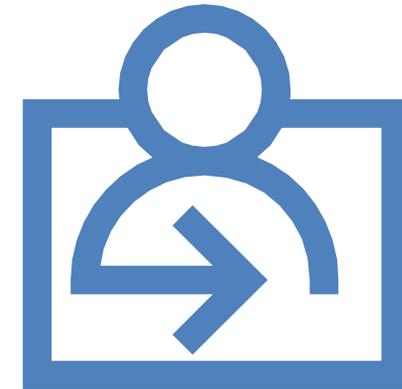
Learning Objectives

- Develop the students' clinical reasoning and critical thinking skills i.e. how to think like a doctor.
- Review common disease presentations specific to the specialty, their diagnosis, and treatment.
- Practice the students' oral presentation skills within a group setting (Socratic style).
- Review the pathophysiology and scientific mechanisms underlying the disease presentation or treatment as required by the medical discipline.
- In some disciplines, develop the skills to facilitate an interactive presentation of a clinical case orally from beginning to end.



Sections

- A. Expectations of Students**
- B. Expectations of Facilitators**
- C. Suggested Format (Mixed Model)**
- D. Feedback to the students**
- E. Logistics**
- F. Appendix: Individual Clerkships**



A. Expectations of Students



Pick an appropriate patient case

Ideally a new admission

Student should have conducted a full history and physical on the patient



Gather primary data

Vital signs (in Pediatrics should know norms for age)

Height, Weight, and BMI (in Pediatrics should know percentile for age)

initial labs, relevant subsequent labs

Imaging

other testing (EKG, EMG, etc.)



A. Expectations of Students continued

- 3. Read about the primary/ alternative diagnosis**
- 4. Present from memory with aiding notes** (labs, imaging, and testing).
- 5. Prepare for conducting an active learning discussion**
(Consider visuals – handout, PPT/White board, ...)
- 6. Provide anything assigned by the ACE rounds facilitator**
(e.g. primary literature/article, basic science background etc.)



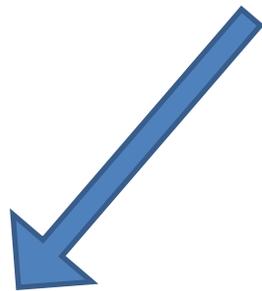
B. Expectations of Facilitators

1. Let the students facilitate themselves, but don't be "silent." Listen *attentively* (*put your cell phone away*).
2. Intervene to:
 - a) Clarify confusion among students
 - b) Use your content expertise to fill in the students' knowledge gaps to move their clinical reasoning skills forward
 - c) Help the presenter facilitate when stuck
 - d) Summarize/emphasize learning points for the students
3. Assess individual students on case presentations
4. Assess individual students on group participation when they are not presenting
5. Provide feedback on case presentations (ideally immediate after, but at a minimum during mid-cycle feedback and on the final evaluation form)



C. Suggested Format (Mixed Model)

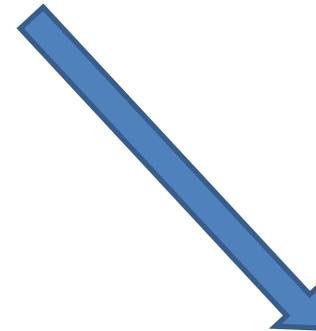
- Guided by facilitator OR presenting student: Chief Complaint through HPI
- Facilitator/presenting student encourages group to generate a problem representation (*short statement describing the patient, the context, and the problem*) & differential diagnosis according to one of the formats below



Body Systems



**Mechanisms of Disease
(VINDICATES)**



Approach to:



C. Suggested Format (Mixed Model)^{-ct'd}

- Presenting student:
 - (1) Remainder of history,
 - (2) Physical exam,
 - (3) Actual lab results,
 - (4) Summary statement,
 - (5) Diagnosis,
 - (6) Treatment,
 - (7) Patient course,
 - (8) Take home points
- Facilitator/presenting student requests predictions/considerations from students and relates back to the differential diagnosis prior to each step
- Review of underlying pathophysiology

D. Feedback to Students



Ideally immediately after each session for ACE rounds feedback (but at a minimum during mid-cycle). ACE rounds facilitators may also be responsible for mid-cycle feedback for students' performance on the hospital wards (often included as part of ACE rounds but varies by specialty).



Use Assessment Form as basis for feedback.

Review in advance

Take notes during the presentation- make columns for observations of the presenter AND observations of the participants

Categories for the presenter: knowledge of the case, use of notes, organization

Categories for the presenter AND the participants: ability to interpret findings, ability to generate a differential diagnosis, medical knowledge

Categories for the participants: engagement, participation, quality of questions/comments, respect



Make sure you give specific feedback, especially what they need to do to get to the next level.

E. Logistics



ACE Rounds Facilitator is responsible for:

setting the time/day for rounds

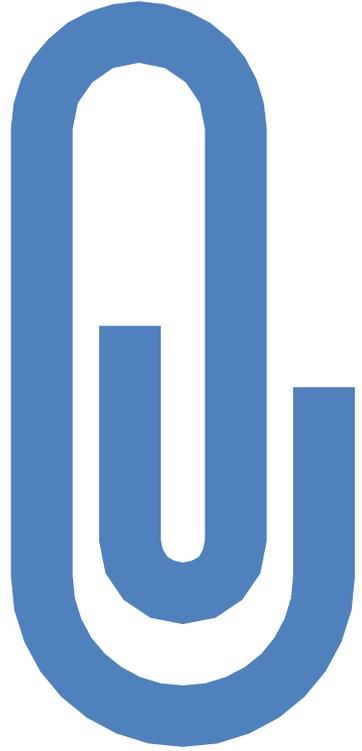
making sure that all rounds are covered by faculty- in general better to reschedule than to have a substitute.

providing students with face to face ACE rounds feedback

completing evaluations on one45 & participating in grading call.

Curriculum Support is responsible for:

making presentation assignments, booking rooms with adequate resources, ensuring assessment forms are sent through one45, and arranging grading conference call.



Appendix: Individual Clerkships



OB/GYN

- The goal in optimal faculty facilitation is to ensure that students are given the opportunity to lead their group in a robust, interactive, and inclusive DISCUSSION of a case which they have prepared in advance.
- The faculty facilitator may serve as a content expert in cases of more advanced students or may help guide the student who is presenting to help shape the conversation in a focused manner.
- Given the two-hour block of time and the fact that up to 3 students may be presenting each week, from 45 minutes to an hour maximum should be allotted for each student.
- Feedback should be given immediately following ACE Rounds; this should take from 5-10 minutes maximum per student.



Medicine

- The Medicine ACE Facilitator Will:
 - Listen as the presenting student presents a chief complaint and history
 - Provide structure for a student-led discussion of the differential diagnosis
 - Encourage students to explain their reasoning with critical thinking
 - Provide clinical context and relevance for any basic-science material presented by the leading student



Neurology

Additional Requirements for Neurology Presentation

- Group discussion should additionally focus in neuroanatomical localization of the signs and symptoms
- Presenting student concludes the case with discussion of one of the Human Condition Basic Science Learning Objectives

Basic Science Learning Objective Presentation

- The format of this presentation should be a group discussion
- The presenting student should have mastery of the learning objective and leads the group discussion.
- The facilitator will add any additional information which was not covered and/or correct any incorrect information after all students have had the opportunity to discuss their thoughts.



Psychiatry

Facilitators will assist with facilitation as needed, will clarify any sources of confusion, and will insert any additional learning pearls germane to the discussion.

- Each student will be expected to present:
- One 15 min “deep dive” presentation, using primary sources to answer a clinical question that was inspired by a patient case.
- Two 45min case presentations (with write-ups).
- Student should give a 15 min comprehensive oral presentation, after which he/she should be prepared to help lead and facilitate group discussion about:
 - differential diagnoses, biopsychosocial formulation, risk assessment, biopsychosocial treatment plan (acute and longer term)

When not presenting, students are expected to:

- Actively participate (while being mindful of peers’ attempts to participate as well).
- Demonstrate clinical reasoning (i.e. Justify suggestions and questions).



Pediatrics

- Get to know your students, Exchange cell phone numbers, Discover where your students are from, where they went to school, what field they are interested in, etc
- Review a sample case via standardized powerpoint case (provided by Dr. Roya Samuels)
- Have students chose one member of the group to serve as a scribe at the white board
- Encourage the group to decide how they wish to approach organizing their differential. As they are brainstorming, you are there to guide them only if they get stuck or are veering off the path or seem confused about something. Otherwise, let them do the thinking and talking!
- Try to take notes while they are discussing as to how engaged each participant is (Continue to do this at each session)
- At the end of the first session, ask the group to make a schedule for themselves as to who will present each week. Each session there should be two presenters.
- Those who are on inpatient or ED will likely be presenting the first couple of weeks since those that are on nursery or 410 will not necessarily have cases that lend themselves to presentation.
- As students begin to present, try to meet with them individually, directly after ACE rounds, to give them feedback on their performance and how they could do better.



Surgery

- Prominent role of faculty facilitator in guiding group discussion
- Students memorize oral presentation, and prepare to review relevant subject matter
- Focus on generating and refining differential diagnosis throughout case presentation
- Focus on clinical reasoning to determine initial and definitive care of patient, including risk/benefit assessment of surgical vs. nonsurgical management

ACE Contacts

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