

**Psychiatry Subinternship  
PSI 827**

**Course Department, & Number AND TITLE: PSI 827 – Psychiatry Subinternship**

**Course credit or length: 4 Weeks**

**Course director and contact information:**

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**Course coordinator and contact information (office phone and e-mail):**

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**Course location: Mildred Mitchell Bateman Hospital, St. Mary's Medical Center**

**Grading Mode- This is a graded course – A, B, C or F**

**Brief Course Description:** The course will prepare students to provide comprehensive and evidence-based care for hospitalized adult psychiatric patients. Duties will include: performing intake and follow-up assessments, documenting completed history and physical examinations (H&Ps) and daily progress notes, assisting in the development of comprehensive treatment plans, actively participating in treatment team discussions, coordinating patient follow-up care case management, coordinating care with therapists, psychologists, and nursing staff, and performing daily evaluations of patient safety.

#### **PSYCHIATRY SUBINTERNSHIP**

**By completion of the clerkship the student will:**

- I. Demonstrate behavior consistent with professional clinical practice to include honesty, responsibility, dedication to the best interest of patients, and sensitivity to the diversity of patients and their disabilities. (P, PB)**

Student will:

- a. Attend required events in a punctual manner and complete clinical and academic assignments in a timely and legible fashion
- b. Demonstrate sensitivity to medical student-patient similarities and differences with regard to gender, cultural background, sexual orientation, socioeconomic status, level of disability, educational level, political views, and personality traits
- c. Discuss the concept of boundaries in the doctor-patient relationship and boundary violations
- d. Identify and account for personal emotional responses to patients
- e. Demonstrate respect, empathy, responsiveness, and concern regarding patient's problems, personal characteristics, or cultural background
- f. Show courtesy to patients, patient family members, staff, colleagues and other health professionals
- g. Discuss the physician's role in advocacy for services for the mentally ill
- h. Demonstrate scholarship in the form of contributing to a positive learning environment, collaborating with colleagues, and performing self-assessment and self-directed learning

**II. Demonstrate knowledge of typical signs and symptoms of psychiatric disorders at each phase of the life cycle and this knowledge will be based on an established understanding of neurobiology and psychopathology derived from the pre-clerkship curriculum. (MK)**

Student will:

- a. Discuss the epidemiology, etiology, clinical features, differential diagnosis, and evidence-based management strategies for
  - i. Neurodevelopmental Disorders
  - ii. Schizophrenia spectrum and other Psychotic Disorders
  - iii. Bipolar and other related disorders
  - iv. Depressive Disorders
  - v. Anxiety Disorders
  - vi. Trauma and Stressor-related Disorders
  - vii. Feeding and Eating Disorders
  - viii. Somatic Symptom and related disorders
  - ix. Substance-related and Addictive Disorders
  - x. Neurocognitive Disorders
  - xi. Personality Disorders

**III. Demonstrate effective evaluation of patients utilizing developmentally and culturally competent interviewing methods and skillful use of the physical examination to include the mental status exam. (PC, IC)**

Student will:

- a. Elicit and accurately document a complete psychiatric history and physical
- b. Perform an appropriate physical examination on patients with presumed psychiatric impairment
- c. Recognize the importance of obtaining historical data from multiple sources to include family members, medical records, educational sources, other healthcare providers, etc.
- d. Perform and accurately describe all elements of a comprehensive mental status examination
- e. Perform common screening exams for psychiatric disorders (e.g., CAGE, MMSE, etc.)
- f. Demonstrate an effective repertoire of interviewing skills to include appropriate initiation of the interview, establish therapeutic rapport, appropriate use of open and close-ended questions, clarification, silence, soliciting questions, and communicating information to patients in a clear fashion
- g. Discuss common pitfalls in interviewing technique

**IV. Demonstrate recognition of the impact of psychosocial variables on health and the complexity of the healthcare system and recognize the need to create effective collaborations to ensure positive patient outcomes. (SB)**

Student will:

- a. Discuss the roles of non-physician healthcare disciplines (e.g., case managers, LPCs, social workers, psychologists, recreation therapists, etc.)
- b. Discuss the importance of working successfully with patient's families and other support systems (schools, DHHR, legal team, etc.)
- c. Discuss psychiatric consultation to include proper utilization and how to request and respond to request for consultation
- d. Discuss and propose appropriate community resources as part of a comprehensive treatment plan for patients

**Schedule:**

Weekdays: Monday - Friday. Weekends: See section on Call below.

**Other Duties:**

In addition to direct patient care duties, students may be asked to research pertinent topics for presentation to the treatment team. Additionally, students will be expected to observe group therapy sessions and, if appropriate, assist with running groups under the direction of the attending and group facilitator. Students will be expected to observe family therapy sessions, psychological testing assessments, and individual therapy sessions as appropriate or when directed by the attending. Students may participate in the preparation and delivery of electroconvulsive therapy (ECT). This can include evaluation of appropriateness, pre- and post-procedural assessment, and treatment administration.

**Call:**

Students may be expected to participate in hospital call a maximum of two week days until 10pm and/or two weekend days (Sat and Sun of same weekend). They will evaluate referrals for admission to the hospital including the performance of suicide assessments. Referrals will be staffed with the on-call attending. When rounding on the weekend students will perform new admission evaluations as well as follow-up assessments on existing patients. These patients will be discussed on rounds with the corresponding on-call attending. Students will be assigned to a resident while on call.

**ASSESSMENT METHODS****Mid-Point Evaluation**

In accordance with LCME standard ED-30, the Course Director will evaluate student performance at mid-point to review the student's professional and clinical performance up to that point. The formative evaluation must be reviewed with the student and the student will have an opportunity to discuss with the Course Director.

**Final Grade: Calculated by an average of the subjective preceptor evaluation and the written examination.**

**Clinical Performance – 50%**

Students will be evaluated by all faculty and residents with whom they work clinically. The preceptors' evaluation will be based upon, but not limited to, the following factors:

- Participation in patient care
- Demonstration of medical knowledge and clinical skills
- Professionalism
- Oral Case presentation/patient workup
- Informal case discussions
- Evidence of self-directed learning

**Written Examination - 50%**

The student will be provided with reading and other study material as deemed appropriate by the course director. A Written Examination will be administered on the last day of the course. Examination questions will be taken from assigned readings that can include book chapters, journal articles, or lecture handouts. Students scoring less than 75% on the final examination will receive a drop of one letter grade and then may retake the examination. A second failure will result in failure of the course and the student will automatically be referred to Academic Standards for action, including the possibility of repeating all or part of the course.

**Grading Honors = 90-100%, Pass = 80-79%, Fail = below 70%**

**Each component mentioned above must be passed in order to successfully complete the course.**

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MUJCESOM Policies: All medical students taking this course will comply with School of Medicine policies given at <https://jcesom.marshall.edu/students/ms-4-student-resources/>

Individual policies can be found at the following websites:

Student Infectious Material Exposure:

<http://musom.marshall.edu/ups/postexposure.asp>

MS-IV Attendance:

<https://musom.marshall.edu/students/documents/policies/Yr4attendance.pdf>

Academic Dishonesty Policy:

<https://musom.marshall.edu/students/documents/policies/Standards-of-Professionalism-and-Honor-Code.pdf>

Academic Standards Policy:

<https://musom.marshall.edu/students/documents/Policies/ASC-FINAL-POLICY.pdf>

Policy for Students with Disabilities:

<https://musom.marshall.edu/students/documents/Guidelines.pdf>

University Computing Services' Acceptable Use Policy:

<http://www.marshall.edu/ucs/CS/acptuse.asp>

Affirmative Action Policy:

pp. 16-17

[http://www.marshall.edu/catalog/Graduate/S2008/gr\\_sp08.pdf](http://www.marshall.edu/catalog/Graduate/S2008/gr_sp08.pdf)

Inclement Weather Policy:

<https://musom.marshall.edu/students/documents/policies/MUSOM-Inclement-Weather-Policy.pdf>

Notification of delays and cancellations of classes are posted on the Medical Education Home Page when Marshall University Main Campus is not in session

<https://musom.marshall.edu/weather>