



**WUSOM Surgery Log** 

Make-up opportunities for missed experiences

If students do not meet requirements at the time of midclerkship Feedback, they are either encouraged to seek out certain conditions (I.e. ask for a cardiology admission if on inpatient service) or they are assigned a SIMPLE virtual case to satisfy the deficiency.

- Bimonthly OSCE meetings and Biweekly webinars are organized for Supplementing their Clinical Skills and Clinical Knowledge.
- Student should present their printed electronic logs and case reports during mid and final review by the preceptor.

## **IMPORTANT:**

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FM04: 19-year-old woman with sports injury

FM15: 42-year-old man with right upper quadrant pain

FM16: 68-year-old man with skin lesion

FM18: 24-year-old woman with headaches

FM19: 39-year-old man with epigastric pain

FM26: 55-year-old man with fatigue

FM27: 17-year-old male with groin pain

IM 01: 49-year-old man with chest pain

IM 08: 55-year-old man with chronic disease management

IM 09: 55-year-old woman with upper abdominal pain and vomiting

IM 12: 55-year-old man with lower abdominal pain

IM 17: 28-year-old man with a pigmented lesion

IM 21: 78-year-old man with fever, lethargy, and anorexia

IM 27: 65-year-old man with hypercalcemia IM 30: 55-year-old woman with leg pain

IM 31: 40-year-old man with knee pain

IM 36: 49-year-old man with ascites

Pediatrics 15: Two siblings: 4-year-old male and

8-week-old male with vomiting

#### Additional resources;

http://www.cetl.org.uk/learning/tutorials.html

DOCCOM communication Skills Complete modules

Communication Skills Modules 17 "Informed Decision-Making"

& 35 "Discussing Medical Error"

### https://websurg.com/

Free access to various resources, registration is free

STUDENT:	
Clinical faculty review (mid-rotation):	
Clinical faculty review (end of rotation):	(Clinical faculty signature / Date)
eg rounding.	(Clinical faculty signature / Date)

Students are required to complete the Student Log to receive credit for the rotation. The log's purpose is to ensure that each student is exposed to the depth and breadth of Internal Medicine. The log is divided into three areas: patient disease presentations, procedures that the student should perform, and procedures students should assist with. (Assisting may mean being present during the procedure.) Please document the number of procedures in which you participated or observed.

For each clinical presentation / procedure listed below, record:

- a) The number seen. \*Remember, a patient may have more than one diagnosis or procedure. When inadequate experience is identified at the time of mid clerkship feedback, they are either encouraged to seek out certain conditions or student will be assigned one day in a clinical setting in which that patient requirement can be met in addition to referring to relevant MedU based virtual case assignment.
- a) If not seen, please check appropriate column.

Clinical Presentation	No. requir ed	Student role	Supplemental and Make up opportunities for missed opportunities
Breast cancer	3		111-121-1-12
Peptic Ulcer Disease	3	Student conducts	SIMPLE Internal Medicine 09
Gastro Esophageal Reflux	3	a history and	SIMPLE Internal Medicine 19
Gastric Cancer	1	performs a	SIMPLE Internal Medicine 09
Diverticular Disease	3	physical	SIMPLE Internal Medicine 12
Colon Cancer	1	examination of	min to have a proper
Appendicitis	3	patient with	SIMPLE Internal Medicine 12
Bowel Obstruction	3	diagnosis or	
Breast (benign and malignant)	3	observes faculty	
Cholecystitis	3	exam and discusses patient	SIMPLE Internal Medicine 12
Acute Pancreatitis	1	with diagnosis.	
Peripheral Vascular Disease	3	with diagnosis.	
Venous Disease (deep vein thrombosis, pulmonary	3	S	SIMPLE Internal Medicine 30
Hemias	3	1	Family Medicine 27
Diabetic Foot	3		Family Medicine 06
Endocrine cancer(Thyroid	1	1	
Pneumothorax/Hemothorax	3	]	
Renal Colic	1	1	
Benign Prostatic	3	1	
Hematuria/Renal Cancer	1	1	
Ortho/Trauma: Head Injury, Spinal Cor Injury, Pelvic Fracture, Thoracic Injury,	3		SIMPLE Internal Medicine 31 FM 11
Abdominal Injury & Burns, Abdominal Aortic Aneurysm	1	-	
Bariatric Surgery	1	1	
Skin Cancer	1	1	
Venous Stasis Ulceration	3	+	



For each procedure listed below, record either:

- a) The number of procedures performed. (The target minimum is for your reference, but please record the total number of procedures performed.)
- b) If procedure was <u>not</u> performed; state the reason not performed.

Clinical Skill	Target minimum	Number Performed
Example:	5	2
History and Physical Exam skills: Admission H&P	10	
Volume status exam Examination skills- especially lumps	5	
and bumps Peripheral pulse examination	5	
Digital Rectal examination	5	
Develop differential diagnosis	3	
Develop management plan	5	
<b>Laboratory Interpretation Skills:</b>		
Interpretation of BMP	10	
Interpretation of ABG	10	
Interpretation of x-ray(abdominal and orthopedic)	10	
Interpretation of UA	5	
Interpretation of CBC	10	
Perioperative Skills:	10	
Post-op checks Pre-op checks	10	
Knot Tying	5	
Gowning and Gloving	10	
Laparoscopic surgery(if available)	10	
Others		

D	Rotation Site / Preceptor:	
HERE	Date:	

Procedure-	Student role: O - Student observes, P- performed with assistance.	Number Performed/Observed
Assisting in theatre	P	
Suturing and knot tying	P	
Suture removal	P	
Wound care( wound dressing)	P	
Scrubbing up(surgical hand washing and gloving)	P	
Foley catheterization	P	
Handling basic surgical instruments(scalpel,scissors,forcepts,he mostats)	P	
Peripheral IV insertion	P	
Nasogastric tube insertion	O/P	
Joint aspiration/injection(O/A)	O/P	
Paracentesis(O/A)	O/P	
Thoracentesis(O/A)	O/P	
Intravenous and intramuscular injection	P	
Thoracostomy placement and removal	O/P	

Commen	ts:		





**WUSOM Internal Medicine Log** 

#### Make-up opportunities for missed experiences

If students do not meet requirements at the time of midclerkship Feedback, they are either encouraged to seek out certain conditions (I.e. ask for a cardiology admission if on inpatient service) or they are assigned a SIMPLE virtual case to satisfy the deficiency.

- Bimonthly OSCE meetings and Biweekly webinars are organized for Supplementing their Clinical Skills and Clinical Knowledge.
- Student should present their printed electronic logs and case reports during mid and final review by the preceptor.

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#### Complete list of MedU SIMPLE cases:

T . 116 F : 01 (0 11 11 11 11 11
Internal Medicine 01: 49-year-old man with chest pain
Internal Medicine 02: 60-year-old woman with chest pain
Internal Medicine 03: 54-year-old woman with syncope
Internal Medicine 04: 67-year-old woman with shortness
of breath and lower-leg swelling
Internal Medicine 05: 55-year-old man with fatigue
Internal Medicine 06: 45-year-old man with hypertension
Internal Medicine 07: 28-year-old woman with lightheadedness
Internal Medicine 08: 55-year-old man with chronic disease management
Internal Medicine 09: 55-year-old woman with upper abdominal
pain and vomiting
Internal Medicine 10: 48-year-old woman with diarrhea and dizziness
Internal Medicine 11: 45-year-old man with abnormal LFTs
Internal Medicine 12: 55-year-old man with lower abdominal pain
Internal Medicine 13: 65-year-old woman for annual physical
Internal Medicine 14: 18-year-old woman for pre-college physical
Internal Medicine 15: 50-year-old man with cough and nasal congestion
Internal Medicine 16: 45-year-old man who is overweight
Internal Medicine 17: 28-year-old man with a pigmented lesion
Internal Medicine 18: 75-year-old man with memory problems
Internal Medicine 19: 42-year-old woman with anemia
Internal Medicine 20: 48-year-old woman with HIV
Internal Medicine 21: 78-year-old man with fever, lethargy, and anorexia
Internal Medicine 22: 71-year-old man with cough and fatigue
Internal Medicine 23: 54-year-old woman with fatigue
Internal Medicine 24: 52-year-old woman with headache, vomiting, and fever
Internal Medicine 25: 75-year-old woman with altered mental status
Internal Medicine 26: 58-year-old man with altered mental status
and experiencing homelessness
Internal Medicine 27: 65-year-old man with hypercalcemia
Internal Medicine 28: 70-year-old man with shortness of breath and leg swelli
Internal Medicine 29: 55-year-old woman with fever and chills
Internal Medicine 30: 55-year-old woman with leg pain
Internal Medicine 31: 40-year-old man with knee pain
Internal Medicine 32: 39-year-old woman with joint pain
Internal Medicine 33: 49-year-old woman with confusion
Internal Medicine 34: 55-year-old man with low back pain
Internal Medicine 35: 35-year-old woman with three weeks of fever
Total IM-dising 26, 40 man all man aids

STUDENT:	
Clinical faculty review (mid-rotation):	
	(Clinical faculty signature / Date)
Clinical faculty review (end_of rotation):	
	(Clinical faculty signature / Date)

Students are required to complete the Student Log to receive credit for the rotation. The log's purpose is to ensure that each student is exposed to the depth and breadth of Internal Medicine. The log is divided into three areas: patient disease presentations, procedures that the student should perform, and procedures students should assist with. (Assisting may mean being present during the procedure.) Please document the number of procedures in which you participated or observed.

For each clinical presentation / procedure listed below, record:

- a) The number seen. \*Remember, a patient may have more than one diagnosis or procedure. When inadequate experience is identified at the time of mid clerkship feedback, they are either encouraged to seek out certain conditions or student will be assigned one day in a clinical setting in which that patient requirement can be met in addition to referring to relevant SIMPLE virtual case assignment.
- b) If not seen, please check appropriate column.

Clinical Presentation- Inpatient or Outpatient	No. requi red	Student role	Supplemental and Make up opportunities for missed opportunities
Acute myocardial infarction	3	Student	
Acute coronary syndrome	3	conducts a	SIMPLE #1:
Congestive heart failure	3	history and	SIMPLE #4
Chest pain	3	performs a	SIMPLE #1:
Cardiac arrhythmias	3	physical	SIMPLE # 3
Diabetes mellitus	3	examination	SIMPLE #8
Decompensated diabetes (e.g. DKA)	1	of patient with	
GI bleed	1	diagnosis or	
Cirrhosis	3	observes	SIMPLE # 36,11
Pancreatitis	3	faculty exam	
Substance abuse	1	and discusses	SIMPLE # 26
Acute renal failure	3	patient with	
Chronic kidney disease	3	diagnosis.	
Metabolic acidosis	3	1	
Electrolyte disturbance	3	1	
Pneumonia	3	1	SIMPLE # 29
Chronic obstructive pulmonary disease	3	†	SIMPLE # 28
Pleural effusion	1	1	SIMPLE # 29
Anemia	3	†	Internal Medicine 19
HIV	1	†	Internal Medicine 20
Hospital acquired infections	1	†	
Joint pain	1	†	Internal Medicine 20
Annual physical	1	†	SIMPLE # 13
Hypertension	1	†	SIMPLE # 6
Skin lesions	1	†	SIMPLE # 17, Pediatrics 32
Delirium	1	1	SIMPLE # 25
Stroke	3	=	Family Medicine 22
Other:			



## **WUSOM Internal Medicine Log**

For each procedure listed below, record either:

- a) The number of procedures performed. (The target minimum is for your reference, but please record the total number of proceduresperformed.)
- b) If procedure was <u>not</u> performed; state the reason not performed.

Clinical Skill	Target minimum	Number Performed
Example:	5	2
Interpretation of vital signs	10	
Interpretation of chest x-ray	5	
Interpretation of EKG	5	
Interpretation of ABG	3	
Interpretation of UA	5	
Interpretation of CBC	10	
Interpretation of BMP	10	
Develop differential diagnosis	10	
Develop management plan	10	
Admission H&P	5	
Hospital follow-up note	10	
NIH stroke scale exam	2	
Mini-mental status exam	2	
Cranial nerve exam	5	
Volume status exam	2	
Auscultate heart sounds	10	
Auscultate lung sounds	10	
Skin examination	10	
Peripheral pulse examination	10	
Lymph node examination	10	
Abdominal examination	10	
Percussion of liver size	10	

Date:		

Procedure	Student role: O - Student observes, P- performed with assistance.	Number Observed/Perform ed
Arterial blood gas	P	
Nasogastric tube insertion	P	
Foley catheterization	P	
Peripheral IV insertion	P	
Venipuncture	P	
Perform vital signs	P	
Code attendance	P	
CPR	P	
Joint aspiration/injection	O/P	
Paracentesis	O/P	
Thoracentesis	O/P	
Airway management	O/P	
Intubation	O/P	
Other		

Comments			
-			





WUSOM OBG Log

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Non Submission of Log Set will result in ineligibility to register for Exit OSCE as Clinical Rotations will be considered as not completed.

#### **Resources:**

#### **Cases/Question Banks:**

Association of Professors of Obstetrics and Gynecology (APGO) (ww.apgo.org) has a number of useful resources and information for medical students during both their clerkships and for those interested in a career in obstetrics and gynecology.

Resources include:

**uWISE:** The APGO Undergraduate Web-Based Interactive Self-Evaluation

(uWISE) exam was developed to help medical students acquire the necessary basic knowledge in obstetrics and gynecology. The quizzes and comprehensive exam are excellent tools to help prepare for the NBME ob-gyn exam and national licensure examinations.

To access: https://apgo.mycrowdwisdom.com/diweb/signin? f=https\*3A\*2F\*2Fapgo.mycrowdwisdom.com\*2Fdiweb\*2Finstitution\*3Fguid\*3 D20d874eb-166c-4da6-a7f9-a1d2255c5b4b\*26sso\*3D1530807774402

Use username - appouwise@appo.org and password - appouwise Once logged in select institute to access the resource.

#### **APGO cases:**

APGO has developed learning cases for students to go through in a small group setting or with a preceptor. We recommend reviewing these cases throughout the clerkship and prior to your clinical skills testing and shelf exam to solidify your knowledge.

To access: https://www.apgo.org/students/apgo-medical-student-educational-objectives/

Scroll down on the webpage to access videos and resources.

STUDENT:	
Clinical faculty review (mid-rotation):	
	(Clinical faculty signature / Date)
Clinical faculty review (end of rotation	ı):

(Clinical faculty signature / Date)

Students are required to complete the OB/GYN Student Log to receive credit for the rotation. The log's purpose is to ensure that each student is exposed to the depth and breadth of ob-gyn. The log is divided into three areas: patient disease presentations, procedures that the student should perform, and procedures students should assist with. (Assisting may mean holding a retractor or present during the procedure.) Please document the number of procedures in which you participated or observed.

For each clinical presentation / procedure listed below, record:

- a) The number seen. \*Remember, a patient may have more than one diagnosis or procedure.
- b) If not seen, please check appropriate column.

Clinical Presentation- Inpatient or Outpatient	No require d	Student role	Alternative Experience
Abnormal vaginal bleeding(PCOS,	3	1.	FM Case 12
Fibroids Endometriosis)		Student conducts	Additional Clinical Sessions
Sexually transmitted infection	3	a history and	Additional Clinical Sessions
Salpingitis	2	performs a	Additional Clinical Sessions
Infertility	2	physical	Additional Clinical Sessions
Cervical dysplasia and cervical	3	examination of	Additional Clinical Sessions
cancer		patient with	
Adolescent health	1	diagnosis or	Additional Clinical Sessions
Perimenopause/Menopause	2	observes faculty	FM Case 17
Breast Health	3	exam and	FM Case 1
Pelvic Pain	3	discusses patient	Additional Clinical Sessions
Ovarian tumor and other Pelvic	2	with diagnosis.	Additional Clinical Sessions
Mass			
Contraceptive counseling	3	2.	FM Case 1
Domestic Violence / Sexual Assault	1	Student observes	Additional Clinical Sessions
Urinary incontinence / pelvic	3	or participates	Additional Clinical Sessions
prolapse		with faculty	
Antepartum Visit	3	participation.	FM Case 14
Diabetes in Pregnancy	3	]	Additional Clinical Sessions
First Trimester bleeding: Abortion,	3		Additional Clinical Sessions
Ectopic	1	1	Additional Clinical Sessions
Term Labor	3	1	Additional Clinical Sessions
Abnormal Labor	1		Additional Clinical Sessions
Pre-term and Post term Labor	1		FM Case 30
Premature rupture of membranes	1	1	Additional Clinical Sessions
Hypertension in Pregnancy	1	1	Additional Clinical Sessions
Postpartum Care	1		Additional Clinical Sessions
Hyperemesis Gravidarum	1	1	Additional Clinical Sessions
UTI in Pregnancy	1	1	Additional Clinical Sessions
Multiple Gestation	1	1	

# **OB-GYN STUDENT LOG**

For each procedure listed below, record either:

- a) The number of procedures performed. (The target minimum is for your reference, but please record the total number of procedures performed.)
- b) If procedure was <u>not</u> performed; state the reason not performed.

Procedure	Target minimum	#(Numeric) Performed
Example: Pap smear	10	5
Well Woman History		
(Reproductive Age)	5	
Well Woman History		
(Perimenopausal/Menopausal)	5	
Speculum exam	5	
Bimanual pelvic exam	5	
Pap smear (If done)	5	
Cervicovaginal cultures	3	
Wet Prep (if done)	3	
Breast Exam	5	
Smoking Cessation	5	
Nutrition/Exercise Counseling	5	
Prenatal Exam and Counseling	10	
Intrapartum Fetal Assessment	5	
Prenatal Ultrasound	3	
Pelvic Ultrasound	3	
Other:		

Rotation Site / Preceptor:	
-	

Date:

Target minimum	Student role: O - Student observes, P- performed with assistance.
5	Р
3	O/P
1	O/P
2	O/P
1	O/P
3	O/P
1	O/P
1	O/P
2	O/P
1	O/P
1	O/P
5	O/P
	minimum  5 3 1 2 1 3 1 1 2 1 1 1

Venipuncture		
Comments:		





**WUSOM Pediatrics Log Set** 

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STUDENT:	
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	(Clinical faculty signature / Date)
Clinical faculty review (end_of rotation):	
	(Clinical faculty signature / Date)

Students are required to complete the Student Log to receive credit for the rotation. The log's purpose is to ensure that each student is exposed to the depth and breadth of Pediatrics. The log is divided into three areas: patient disease presentations, procedures that the student should perform, and procedures students should assist with. (Assisting may mean being present during the procedure.)

Clinical Presentation( <mark>number count</mark> ) Diagnosis – Outpatient/Inpatient	Relevant Clinical Skill : O-observe, .P- perform	Relevant Clinical Procedures: O- observe, ,P- perform	Supplemental and Make up opportunities for missed opportunities
HEENE			
HEENT Cough(5) Conjunctivitis (1) Upper respiratory infection (3) pharyngitis (3) Otitis Media/ Otitis Externa (5) Thrush(3)	Rapid strept test interpretation	Throat swab -P Mist Tent set up-O Pneumatic Otoscopy-P	
Wheezing			
Foreign body(1) Bronchiolitis (3) Asthma (3) Pneumonia(3)	Use of spacer and MDI Asthma care plan Peak flow meter use Chest PT technique		(Clipp Case 13)
DERM			
Acne (3) Eczema(3) Viral Exanthema(3) Jaundice(3)			(Clipp Case 32) (Clipp Case 8)
Neurology			
Febrile seizures (1) Epilepsy (1) Cerebral Palsy(1) Urology			(Clipp Case 19)
Urinary tract infection	Urine clean catch	Catheterize urine-P	(Clipp Case 10)
Other			
Fever of unknown origin (1) Dehydration(3)	Fever management	-Obtain temp in child and newborn-P -Blood draws-O/P -Calculation of IVF bolus and maintenance-O/P	



# **WUSOM Pediatrics Log Set**

For each procedure listed below, record either:

- a) The number of procedures performed. (The target minimum is for your reference, but please record the total number of proceduresperformed.)
- b) If procedure was <u>not</u> performed; state the reason not performed.

Clinical Presentation( <mark>numbe r count</mark> ) Diagnosis – Outpatient/Inpatient		Relevant procedures: O-observe, ,P- perform	Supplemental and Make up
Physical exam(10 EACH) 0 - 12 mo 13 - 36 mo 4 - 12 yrs Adolescents		-B.P. from a neonate and child-P -Scoliosis screening-O/P	(Clipp case 1-5)
Nutrition(1 EACH) Failure to Thrive Poor weight gain Obesity Anemia including iron deficiency. Lead poisoning SSHgb Acute Clust Syndrome Splenic Sequestration	-Diet counseling -BMI calculation CBC interpretation -Screening questionnaire -Hgb Electrophiresis interpretation		
Well Child visits:  Developmental delay Vision-Strabismus Hearing-Cerumen Growth Pediatric history Constipation Gastroenteritis Diarrhea	-TB Risk Assecssment - Immunization Schedule -subjective hearing test -Growth chart interpretation CROFFT -Adolescents HEADS Adolescents IV fluid bolus calculation Rehydration	-PPD-O/P -Injections-IM, Sub Q-O/P -Snellens eye chart-P -Eye Cover test-P -Ear irrigation to remove cerumen-O/P	

Date:			
Daic			
omments			





**WUSOM Psychiatry Log Set** 

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Table 1:

Patient Types or Clinical Conditions	Supplemental and Make up opportunities for missed
	opportunities
Psychiatric Interview	http://www.admsep.org/csi-
1 Sychiatric Interview	emodules.php?c=psych-interview&v=y
CognitiveDisorder(e.g.,	CSI Neurocognitive Disorders module-
Delirium and/ or	Access here- http://www.admsep.org/csi-
Dementia)	emodules.php?c=neurocognitive&v=y
Substance-Use	CSI modules on: Alcohol Use Disorders;
Disorder(e.g.	Opioid Use Disorders.
Alcohol or other	Access here- http://www.admsep.org/csi-
substance)	emodules.php?c=opiates&v=y
Schizophreniaor	CSI module on Psychosis
Other	Access here- http://www.admsep.org/csi-
Psychotic	emodules.php?c=psychotic&v=y
Disorder	
Mood Disorder (e.g.,	CSI modules on: Bipolar Disorders;
Depressive and/ or	Adolescent Depression
BipolarDisorders)	Access here- http://www.admsep.org/csi-
	emodules.php?c=adolescent-
	depression&v=y
	&
	http://www.admsep.org/csi-
	emodules.php?c=bipolar&v=y
Anxiety Disorder	CSI module on Anxiety Disorders
	Access here- http://www.admsep.org/csi-
	emodules.php?c=anxiety&v=y
Personality Disorder	CSI Module on Personality Disorders.
	Access here- http://www.admsep.org/csi-
E di Di 1	emodules.php?c=personality&v=y
Eating Disorders	http://www.admsep.org/csi-
	emodules.php?c=bed&v=y

Movies Which Demonstrate Specific Pathologies or Symptoms

http://www.admsep.org/film.php?c=specific

Student:	
Rotation Period:	
Clinical faculty review (mid-rotation):	
(Clinical faculty signature / Date)	
Clinical faculty review (end of rotation):	
(Clinical faculty signature / Date)	

Students are required to complete this Clinical Skills Checklist and have their preceptor initial their student evaluation at the end of the rotation to acknowledge that each clinical skill had been completed during the rotation

	acknowledge that each clinical skill had been completed during the rotation				
Clinical	Clinical	No.	Student	Alternative	
Presentatio	Setting	actually	Role	Experience	
n(number	(Inpatient,	seen			
count)	Outpatient,	Scen			
	or Both)				
Cognitive	Both		Student	C 1.1 1	
Disorder(Deli	Бош		conducts a	See table 1	
rium and/or			history and/or		
dementia)- (			observes a		
2)			faculty member		
Substance	Both		or resident	See table 1	
related	Dom		conduct a	See table 1	
Disorder(Alc			history and		
ohol and			actively		
other			participates in		
substance			learning to		
absue)-(2)			listen to patient		
Schizophrenia	Both		issues and	See table 1	
or Other			descriptions and		
Psychotic			reason through		
Disorder-(5)			differential		
Mood	Both		diagnostic	See table 1	
Disorder(Dep			options.		
ressive and/or					
Biploar					
disorder)-(5)					
Anxiety	Both			See table 1	
Disorder-5					
Adjustment	Both			See table 1	
Disorder-2					
Personatility	Both				
Disorder-2					

# **WUSOM Psychiatry Log Set**

Students: For each clinical skill listed below, please indicate either Y for Yes or N for NO in the Skill Demonstrated column and have the preceptor who witnessed it place their initials in the Witnessed By column.

Clinical Skill	Student Role: O-observe ,P- perform	Witnessed By (Preceptor's Initials)
Mental Status Examination	P	
Assess for Dangerousness to Self and Others	O/P	
Assess for risk (suicidal/homicidal ideation)	O/P	
Obtain relevant past medical history, including psychiatric history	P	
Obtain relevant family and social history	P	
Obtain appropriate substance abuse	P	
Develop appropriate patient rapport	P	
Maintain appropriate organization of the interview	Р	
Generate appropriate differential diagnosis	P	
Identify appropriate level of care (inpatient/outpatient) based on risk and treatment needs	Р	
Assess relative capacity to consent to treatment, including voluntary hospitalization	O/P	
Present orally a case in an organized fashion, including history, examination, impressions, and plan	P	

Procedure	Count (Numeric)	Not Seen
Psychopharmacologic interventions		
Psychotherapy		
Participate in a Group therapy		
EEG set up		
Overdose Management		
Other:		

Comments: