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- x Livingston Hospital and Healthcare Services, Salem, Kentucky
- x Lourdes Hospital, Paducah, Kentucky
- x Marshall County Hospital, Benton, Kentucky
- x Murray-Calloway County Hospital, Murray, Kentucky
- x Trigg County Hospital, Cadiz, Kentucky
- x Baptist Health, Paducah, Kentucky

**Uq o gtugv"Eqtg"Ukvg"**

- x Lake Cumberland Regional Hospital, Somerset, Kentucky

**Uqvwj"Egpvtn"Mgpvwem{"Ctgc"Jgcnvj"Gfwecvkqpu"Egpvgt"Eqtg"Ukvg"**

- x Graves Gilbert Clinic, Bowling Green, Kentucky
- x TriStar Greenview Regional Hospital, Bowling Green, Kentucky

**Uqvwjgtp"Mgpvwem{"Ctgc"Jgcnvj"Gfwecvkqp"Egpvgt"Eqtg"Ukvg"**

- x Russell County Hospital, Russell Springs, Kentucky
- x Baptist Health, Corbin, Kentucky
- x Baptist Health, Richmond, Kentucky

**Y jkvgudwti"Eqtg"Ukvg"**

- x Harlan ARH, Harlan, Kentucky
- x Whitesburg ARH, Whitesburg, Kentucky

**Ovjgt"Tkikqpcn"Eqtg"Ukvgu"**

**Kpfkpc"Eqtg"Ukvg"**

- x King's Daughters Health, Madison, Indiana

**Okejki cp"Eqtg"Ukvg"**

- x McLaren Bay Region Medical Center, Bay City Michigan

**Okukuukrrk"Eqtg"Ukvg"**

- x Rush Foundation Hospital, Meridian, Mississippi
- x Regency Hospital Company, Meridian, Mississippi

**Qjkq"Eqtg"Ukvgu"**

- x Adena Medical Center, Chillicothe, Ohio
- x Mercy Health – St. Rita's Medical Center, Lima, Ohio
- x TriHealth, Cincinnati, Ohio

**Xtkipkc"Eqtg"Ukvgu"**

- x Norton Community Hospital, Norton, Virginia
- x Lonesome Pine Hospital, Big Stone Gap, Virginia

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## M [ EQO"CDUQNWVGU"

- x This manual is required reading for all third and fourth-year students. Submittal of the attestation form, located in the Request Forms, Case Logs and Evaluation Forms section of this manual, is required before entry to clinical rotations. All items under Student Eligibility for Clinical Rotations must be completed before entry to clinical rotations.
- x KYCOM requires all students to use and check the UPIKE email FCKN[ for communication with the school and to maintain the UPIKE inbox at a level whereas it can accept correspondence.
- x All students are expected, unless excused by their attending physician, to attend morning reports, M&M rounds, and all site scheduled didactics and workshops. These didactic programs are part of your rotation and do not meet your requirement for Clinical Competency #4. Attendance at Educational Programs.
- x The Comprehensive Osteopathic Medical Self-Assessment Examination (COMSAE) must be taken, and approval received, before any student may sit for either Level 1 or Level 2 CE of the Comprehensive Osteopathic Medical Licensing Examination (COMLEX-USA). See COMLEX-USA Policy
- x The COMLEX-USA Level 2 PE may not be taken before completion of the clinical capstone course. See The Clinical Competency Program
- x The COMLEX-USA Level 2 CE may not be taken before successful completion of all third-year core rotations. See The Clinical Competency Program
- x All log items must be completed and submitted electronically within nine (9) calendar days from the last day of the rotation, or will be incomplete. If the completed logs are received within fourteen (14) days, the grade may be raised to a maximum of 70% at the discretion of the Associate Dean for Clinical Affairs. After fourteen (14) days, if the completed logs have not been received, a grade of 69% will be entered on the transcript, resulting in a failing grade for this rotation. V j g " n c u v " f c v g " v j c v " c e v k x k v { " k u n q i i g f " k p v q " G , X c n w g " y k m " d g " e q p u k f g t g f " v j g " n c u v " f c v g " q h " v j g " t q v c v k q p " c p f " n c v g " n q i u y k m " d g " e c n e w n c v g f " w u k p i " v j c v " f c v g . " t g i c t f n g u u " q h " c p { " õ u e j g f w n g f " f c v g ø " n k u v g f " q p X U N Q " q t " v j g " T q v c v k q p " T g s w g u v " H q t o 0

- x Viewing of two educational videos, is required per fourth year selective clinical rotation a maximum of two video receipts will be accepted (for credit) per rotation month, and submitted as part of rotation log items. (See **THE CLINICAL COMPETENCY PROGRAM** for further explanation.) Attendance at one Journal Club meeting is required per academic year. Journal Club dates are assigned. Substitution of assigned dates is the responsibility of the student. Changes to the schedule must be reported to the Associate Dean for Clinical Affairs at least 24 hours before the Journal Club meeting. See **Clinical Journal Club**.
- x KYCOM maintains a “No Tolerance Policy” for violations of the dress code. See, **Student Responsibilities Dress**.
- x Denial for Conference and Rotation requests will be issued for submittals beyond the required timeline. See, **Attendance at Professional Conferences, Scheduling of Elective/Selective Clinical Rotations**
- x Students on rotation during the “Make-up” block in April of 4<sup>th</sup> year will not receive a diploma at the graduation ceremony. The diploma will be awarded to the student once all rotation log documents are submitted and reviewed and all graduation requirements listed, in **Graduation Requirements** have been satisfied.

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 All times indicated are Eastern Time.  
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**KPVTQFWEVKQP"**

The mission of University of Pikeville Kentucky College of Osteopathic Medicine (KYCOM) includes preparation of our graduates for competency in the world of primary care medicine. A successful KYCOM graduate will, after completion of the program, demonstrate sufficient knowledge, skill sets, experience, values, and behaviors that meet established professional

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reports are reviewed by the P & M Committee. Failure of more than one clinical rotation is grounds for dismissal.

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Commission on Osteopathic College Accreditation (COCA), requires that students, during third year, must have one in-patient rotation, one out-patient rotation, and one rotation having interaction with residents. R

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Graduation requirements from KYCOM include successful completion of COMLEX-USA Level 1, Level 2 CE, and Level 2 PE. KYCOM requires Level 1 to be taken upon successful completion of years one and two of osteopathic medical education. KYCOM requires Level 2 CE to be taken after successful completion of Level 1 and years one, two, and three of osteopathic medical education, which includes successful completion of all core rotations. The Capstone course must be completed before taking COMLEX Level 2 PE.

KYCOM will require students to complete COMLEX-USA Level 1, Level 2 CE, and Level 2 PE. KYCOM requires Level 1 to be taken upon successful completion of years one and two of osteopathic medical education. KYCOM requires Level 2 CE to be taken after successful completion of Level 1 and years one, two, and three of osteopathic medical education, which includes successful completion of all core rotations. The Capstone course must be completed before taking COMLEX Level 2 PE.



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**UCORNG"ECNGPFCT"**



expenses involved with this evaluation. The mechanism for evaluation will be determined by the

- x Immunizations must be administered within the CDC recommended time frame, or you could be required to repeat the series.

Documentation of an updated tetanus vaccination is required prior to matriculation to KYCOM. This must be on file in E\*Value.

**6"CECFGOKEU"**

- a. All pre-clinical courses will have been completed before entry into the 3<sup>rd</sup> clinical year rotation schedule.
- b. COMLEX Level 1 must be taken before entry into the 3<sup>rd</sup> clinical year rotation schedule.

**7"CVVGUVCVKQP"HQTO"**

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Submittal of the signed and dated form which attests that the clinical rotations manual has both been completely read and understood is a mandatory requirement before entry into the third year of osteopathic medical study.

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KYCOM maintains a ðPQ"VQNGTCPEGö policy for diversions from the ons m





**c) FTGUU™**

KYCOM students are expected to dress professionally at all times and to be attentive to personal hygiene and cleanliness. It is the right of patients, peers and healthcare staff to expect a safe, non-offensive, non-infective, and non-allergenic environment. Personal appearance and hygiene reflect concern and respect for both staff and patient safety. It contributes to the delivery of quality health care, and sends a message to the public that the healthcare facility maintains a positive, respectful and safe environment. Unclean and unkempt individuals provoke discomfort, and create a barrier to healthcare access. KYCOM maintains a **öPQ'VQNGTCPEGö** policy for diversions from the mandatory guidelines below:

1. At all times a student must be clearly identified as a KYCOM student.
2. Short white lab coats with KYCOM identification are expected to be worn unless specifically instructed otherwise by the healthcare facility or preceptor physician.
3. Scrub suits are to be worn in the operating room, procedure rooms, during call

**d0 UGZWCN"JCTCUUOGPV"**

**B**

Any incident of suspected sexual harassment must be reported immediately to the Supervising Physician, Associate Dean for Clinical Affairs and the Assistant Dean of Student Affairs. Contact AD for assistance at [ad@bvfursyn.tn](mailto:ad@bvfursyn.tn) or Dny Coe at [anf\\_c@bvfursyn.tn](mailto:anf_c@bvfursyn.tn).



**Cflwpev"Enkpkecn"Hcewnv{"cpf"Enkpkecn"Tqvcvkqp"Ukvgu"**

Pharmaceutical and industry representatives (PI reps) are not received on the KYCOM campus, and maintain no direct exposure to the osteopathic medical students educated there. PI rep exposure to students, is limited to “off-campus” health care facilities which include physicians’ offices, hospital clinics and hospitals, and “pre-approved” attendance at graduate medical education programs. KYCOM students are professionally bound by the applicable sections of the AOA Code of Ethics.

**Uwo o ct{"**

The pharmaceutical and pharmaceutical research industry is a recognized member of the healthcare team that is voluntarily bound by a set of guidelines. KYCOM supports the guidelines, and will follow them within the definitions of the school’s mission, and those professional duties as outlined within publications of the American Osteopathic Association and all published school catalogues and/or manuals.

**g) KUUWGU"FGGOGF"TGRQTVCDNG"**

1. It is the student’s responsibility to notify the preceptor and/or supervisory house staff of any critical issue(s) that affect the student doctor and/or his/her patient(s) during the rotation.
2. If necessary, it is the student’s responsibility to notify the regional coordinator and/or KYCOM of any critical issue(s) that affect him/her during the rotation.

**h) HKPCPEKCN"EQORGPUCVKQP"**

A KYCOM osteopathic medical student engaged in a clinical rotation within the hospital, office or. \$ hical stt o

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5. Handheld devices may be used on patient rounds, and within patient rooms ONLY if permission is obtained from the preceptor physician and the patient.
6. Handheld devices may be used at nurses' stations, the intensive care unit(s), and within the emergency department, with preceptor physician and nursing approval ONLY.
7. Handheld devices may be used within the confines of on-call rooms and hospital cafeterias.

The student is not permitted to leave the designates gntt th

meetings outside of normal KYCOM curriculum is considered a privilege and honor. Students must document attendance to these meetings.

**f0 KPVGTXKGY "RQNK E [ "**

The following policy has been adopted regarding residency/internship interviews:

1. Students will be required to submit an



2. Student will be prepared to present their patients on rounds.
3. Students will have all patient charts on rounds and have prepared a maintained **wr"vq"fcvg"**  
**mqy"ejctv**

8. The Associate Dean for Clinical Affairs will refer a failing grade to the Promotions and Matriculation Committee for further action or remediation. Failure of more than one clinical rotation is grounds for dismissal.
9. Clinical grades may be reported as numeric scores or Pass/Fail.

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A student who seeks to appeal a particular rotation grade must file a written request for grade review within one month of the rotation grade being recorded. The Associate Dean for Clinical Affairs will inform the student in writing of their decision to either uphold or change the rotation grade. If the Associate Dean for Clinical Affairs denies the grade appeal, the student may appeal to the P&M Committee for a final appeal of the grade. The recommendation of the Committee will be forwarded to the Dean for a final decision on the student's grade. The decision of the Dean will be sent in writing to the student, P&M Committee, Associate Dean for Clinical Affairs, and the Office of Academic Affairs.

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All clinical rotations must be successfully completed with a passing grade prior to graduation. Failure of any required or elective clinical rotation will be referred to the Promotions and Matriculation Committee for consideration. Appeal of any rotation failure will follow the same guidelines of any failure as stated in the Student Handbook. In cases where a passing grade is not achieved, if deemed appropriate by the Promotions & Matriculation Committee, the student will be given the opportunity to repeat the rotation. Upon successful completion of the repeated rotation, a maximum grade of 70% will be recorded on the student transcript.

**GOAw! ! \$**

be provided. All costs above what is paid by the student's health insurance are borne by KYCOM. The Blood Borne Pathogen (BBP) policy includes three (3) components;

- a. Education.
  - b. Immediate post-mishap evaluation of exposure risk, as outlined by current Center for Disease Control and Prevention (CDC&P) guidance and recommendations.
  - c. Appropriate follow-up.
2. EDUCATION: All KYCOM 2nd year students will attend a 2-hour block of instruction on HIV and a 1-hour block on Universal Precautions annually which will address CDC&P current relevant universal exposure precautions, the post-exposure reporting process, prophylactic treatment of BBP and other transmitted disease as indicated.
3. BBP/HIV EXPOSURE  
All students with medical education related BBP/HIV exposure through another person's blood or body fluids – by sharps injury or exposure to mucous membranes/skin – will  
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Aa V k M

- i. Insuring HIV antibody testing is done at 12 weeks and 6 months and results checked.
- ii. Writing prescriptions for the four-week drug regimen if needed.
- iii. Repeating complete blood count and renal and hepatic chemistry profiles at two weeks.
- iv. Monitoring potential pancreatic toxicity by ordering weekly complete blood counts and chemistry profiles.

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- b) Failures of courses, etc.
- b. Submit a list of **Rgtuqpci"Uvtgpi vju:**
  - i. Academic
  - ii. Interpersonal skills such as communication with patients, staff, etc.
  - iii. Perhaps you struggled in the classroom but have excelled in the clinic setting
  - iv. Perhaps comments from preceptors aboss



**VJG"ENKPKECN"EQORGVGPE [ "RTQITCO**

### **I t c f k p i "**

The grade will be based on adequate time spent on and the completion of the assigned cases. Participation is Pass/Fail.

### **3D0""ENKPKECN"LQWTPCN"ENWD""**

Articles will be chosen by KYCOM faculty. The 4th year osteopathic medical student is partnered with peers and 4th year colleagues to review current topics in the medical literature.

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### **Qdlgev kxgu"**

- a. To promote professional reading habits.
- b. To encourage critical evaluation of published medical information.
- c. To broaden medical knowledge.
- d. To support collegiality among professionals

### **Hqt o cv"**

All 4<sup>th</sup> year students are required to attend one journal club. All meetings will be scheduled on a Tuesday evening at 6:30 pm eastern time. Students will connect to the program from their personal computers. Meeting assignments will be issued by the Associate Dean for Clinical Affairs as follows:

- a. Journal Club date assignments will be sent by University of Pikeville (Upike) e-mail to all class members no later than the first day of rotations.





OPC VI Post-Exam (5 points)	50 Points
<u>Total Possible Points for the Course:</u>	<u>50 Points</u>
Course Passage = 70% or 35 of the total points available	

**Tg o gfkcvkqp"Rqke{:** Students who do not achieve 70% or better in the course have failed the OPC course. According to the KYCOM Student Handbook, all failures are reviewed by the Promotion & Matriculation Committee and a decision is made whether or not a student is allowed to remediate failed courses. If the Promotion & Matriculation Committee decides a student is allowed remediate OPC, the student will revisit and pass the modules failed. Remediation will be required during winter break for OPC V and during the clinical capstone course for OPC VI.

**60 GFWEKVKQPCN"XKFGQU"CPF"RTQITCOU**

Each student is required to view or attend a minimum of ten (10) clinical programs (your choice) during fourth year. The program(s), viewed and/or attended, must have the capacity to issue a certificate of successful completion. A limit of ~~two~~ ~~comm~~ ~~MM~~ ~~nimim-~~ ~~rof~~ ~~qt~~

Performance Evaluation. Housing is provided. The student is responsible for their own bedding, towels, toiletry items and meals. Program segments include:

- a. WELCOME
  - i. Update contact information
  - ii. Complete order forms for graduation regalia
  - iii. Update financial aid information
  - iv. Introduction to the Clinical Skills Testing Performance Evaluation
- b. PREPARATION FOR RESIDENCY - An on-line recorded program will be available for off-campus viewing, for each of the following topics.
  - a) Electronic Residency Application Service (ERAS)
  - b) Medical Student Performance Evaluation – refer to General Rotations Information: “Preparation for Residency” for submittal information deadlines and content.
- c. OSHA SEMINAR - An on-line recorded program will be available for off-campus viewing. The Course Review Test must be submitted to the Clinical Affairs Department for proper credentialing and assigned credit. Topics to be discussed include:
  - i. Steps to take in case of blood borne diseases exposure.
  - ii. Evaluation of exposure risk
  - iii. CDC recommendations for the management of health care professionals exposed to HBV, HCV and HIV.
  - iv. Risk prevention recommendations
- d. CLINICAL SKILLS TESTING PERFORMANCE EVALUATION
- e. DRUG SCREEN

#### **Qdlgevkxgu"**

- a. To strengthen the level of competency in clinical skills possessed by the osteopathic medical student-in-training.
- b. To determine necessary areas of concentration to achieve successful professional competency.
- c. To evaluate the osteopathic medical student’s readiness toward professional competency.
- d. To evaluate the osteopathic medical student’s readiness for graduation from medical school.
- e. To aim for success in the COMLEX Level 2 Performance Evaluation

#### **Fguetkrvkqp"**

Modules have been developed to portray clinical encounters commonly seen by the osteopathic physician in either the outpatient, primary care or emergency department settings. Standardized patients have been trained to portray clinical scenarios in a standardized fashion, appropriate to the clinical setting, and should be interviewed, examined and treated as you would care for a “real patient”.



year honors is based solely on performance in the nine 700 level core rotations and fourth year Honors is calculated solely from grades earned with 800 level clinical rotations.

The award of Honors recognizes student achievement for that specific term or year and will be reported on the student transcript. In order to be eligible for Honors, students must be in good academic standing with no course or COMLEX board exam failures earned during the term or year under consideration. Further, students cannot be on a partial or decelerated schedule or repeating a course previously taken.

## **I WKFGNKPGU"HQT"RTGEGRVQTU"**

### **RTGEGRVQT"GFWEKVKQPCN"TGURQPUKDKNKVKGU"**

Preceptors will provide instruction, supervision, and evaluation of the performance of students. If for any reason the preceptor decides a student's performance is unsatisfactory, he/she should contact the rotations office before the rotation's completion. If a problem arises with a student's performance, the KYCOM Associate Dean for Clinical Affairs will decide on the appropriate action to be taken. The preceptor is encouraged to conduct a mid-rotation meeting with the student to provide specific feedback on the student's performance. This is especially important if the student is not meeting expectations. The preceptor will evaluate the performance of the students in writing immediately following completion of the rotation. Preceptors are encouraged to discuss the evaluation with the student before returning it to KYCOM. The student will evaluate his/her own performance, the educational services, and faculty participation at the rotation site. This evaluation will also be submitted to the rotations office during the week following rotation. Copies of KYCOM evaluation instruments are included at the end of this manual.









# COURSE SYLLABI



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**EQO"9;;"**

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**Hcewnv{<**

**Gz o kpcvkqp"Rqnk{<"**There are no examinations in this course other than the assigned assessment tests.

**E j cmgpi g"qh"Gz o kpcvkqp" S wguvkqpu<**

**EQO":;:"**

**KPFGRGPFPGPV"UVWF [ "KK"**

**Hcewnv{<** Dr. Joshua Crum (Course Director)  
Office: Coal Building 611  
Hours: Anytime or by appointment  
E-mail: joshuacrum@upike.edu

**Vgzvu<" "" PIC" " "**

**Uwrrng o gpvcn"Vgzvu< N/A**

**Jqwtu<"602"etgflv"jqt"**

**"**

Every four-

**Tg o gfkvq p'Rqke{<'"** According to the KYCOM Student Handbook, all failures are reviewed by the Promotion & Matriculation Committee and a decision is made whether or not a student is allowed to remediate failed c







**QUVGQRCVJKE"RCVKGPV"ECTG"\*QRE+"XK"**

**Hcewnv{<** """"Joshua Crum, D.O., Course Director  
(606) 218-5428  
Laura Griffin, D.O., et al.

**Eqwtug"Jqwtu<** OPC VI is designated for (1) one credit hour(s). Training modules are scheduled to be recorded and made available via Panopto Video System and/or the AOPTIC website. Please refer to the lecture schedule on CANVAS for instructions on how to access videos and the days and times as to when these training modules will be made available. The course extends from the first day of the sixth clinical rotation, 3<sup>rd</sup> year, through the last day of the eleventh clinical rotation, 3<sup>rd</sup> year.

**Eqwtug"Fguetkrvkqp<** This third-year course is a continuation of the OPC I-V course(s) and will serve to further expand and develop the world of osteopathic patient care through a multifaceted approach. The course will be a standard didactic program for third year students. This course will consist of recorded modules and online exercises (via Panopto Video Center and/or the AOPTIC website with post-video exams on CANVAS). Essential components of the course will include reinforcement of principles of medical issues incurred after graduation including but not limited to, osteopathic manipulative treatment, physicians' relationship with patients and social dilemmas in medicine, pain management, physician pa! i p i

Students will be required to complete 2 videos per 4-week block. All modules will be presented on the Panopto Video Center and/or AOPTIC websites.

## EQTG" TQVCVKQP" EWTTKEWNWO"

The following applies to all core rotations:

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### Uwfgpv" Jqwtu"

Daily hours are to parallel the hours of the attending physician, however, the following guidelines are suggested:

1. A work day may be considered 12 hours in duration.
2. A work week may be considered typically 72 hours, j q y g x g t . " u j q w n f " p q v " g z e g g f " : 2 " j q w t u " k p " duration.
3. Maximum continuous f w v { u j q w n f " p q v " g z e g g f " 46 " hours and should be followed by a minimum of 12 hours off duty.
4. Two days out of every 14 days u j q w n f " be provided as a weekend b

be sent with the student log reports to KYCOM. It is expected that the student will attend a minimum of 70% of each kind of event.

### **I tcfkpi"**

The KYCOM Student Assessment Form for CORE (and EM) rotations, which is completed by the attending physician, comprises 50% of the rotation grade. The COMAT examination score comprises the balance of the grade. Upon receipt and review of all information, the associate dean for Clinical Affairs evaluates the material, and assigns a numerical grade, as per the Clinical Rotations Manual, Student Evaluation (Grade). The evaluation is intended to measure the student in comparison to others at the same level of education."

The KYCOM Student Assessment Form measures:

1. Mastery of Osteopathic Philosophy and Application of Manipulative Medicine
2. Medical Knowledge
3. Patient Care
4. Interpersonal and Communication Skills
5. Professionalism
6. Application of Practice Based Learning Skills
7. Application of Systems Approach to Medicine

### **Ejcmgpi"qh" I tcfgu"**

Any challenges or questions are to be directed to the associate dean for Clinical Affairs. The student has the right for review of the challenge by the Promotions and Matriculation Committee, if the associate dean's response requires further clarification.

### **Tgogfkcvkqp"**

In cases where a passing grade is not achieved, if deemed appropriate by the Promotions & Matriculation Committee, the student will be given the opportunity to repeat the rotation. Upon successful completion of the repeated rotation, a maximum grade of 70% will be recorded on the student transcript. Failure of more than one clinical rotation is grounds for dismissal.

## **EQO"922<Enkpkecn"Quvgqrcvjk"Ogfkekpg"Ugngevkxg"**

### **Eqwtug"Fguetkrvkqp"**

Clinical Osteopathic Medicine is a mandatory selective rotation. The program attempts to answer the questions of “WHEN”, “WHY”, “HOW”, “WHERE”, and “IF” to utilize osteopathic manipulative techniques as part of the treatment plan for the medical/surgical patient. The appreciation of the intercommunication of the body systems, and the interpretation of T A R T findings is incorporated into the diagnosis and treatment of neural, muscular, joint, and visceral dysfunction. The osteopathic medical student is introduced to the evaluation and management of medical/surgical patients in both the out-patient and in-hospital setting.

## **Rtg/Tgswkukvg"Eqwtugu< I gpgtcn"Kpvgtpcn"Ogfkekpg"K"cpf"Hc o kn{ "Ogfkekpg"K0"**

### **Eqwtug"Qdlgevkgu"**

1. To master examination skills of both the axial and appendicular skeleton for disorders, and/or somatic dysfunction.
  - a. Displays knowledge of neurologic and muscular diagnostic tools.
  - b. Displays knowledge of the osteopathic structural examination.
2. To recognize physical changes of soft tissue structures for somato-somatic, somato-visceral, viscero-visceral and viscero-somatic reflex dysfunction.
3. To display clinical competency in the use of direct treatment approaches:
  - a. High Velocity, Low Amplitude treatment of articular somatic dysfunction.
  - b. Application of Muscle Energy to treatment of articular somatic dysfunction.
  - c. Application of myofascial release to restricted soft tissue structures.
4. To display clinical competency in the use of indirect treatment approaches:
  - a. Application of Counterstrain to restricted soft tissue structures.
  - b. Application of Myofascial Release to restricted soft tissue structures.
  - c. Application of “Balance and Hold” techniques to treatment of articular and fascial somatic dysfunction.
  - d. Application of “Osteopathic Cranial Manipulative Medicine” to treatment of cranial and sacral somatic dysfunction.
  - e. Application of “Progressive Inhibition of Neuromusculoskeletal Structures” to restricted soft tissue structures.
5. To display clinical competency with the “decision making” process for proper utilization/application of osteopathic manipulative procedures to clinical problems.
  - a. Osteopathic approaches as diagnostic tools.
  - b. Osteopathic techniques as primary and/or secondary treatment tools.
  - c. Osteopathic approaches as palliative tools.

### **Uvwfgpv"Fwvkgu"**

1. The student participates in the out-patient setting. Responsibilities include:
  - a. Performance of physical examinations to include performance of Osteopathic Structural Examination.
  - b. Performance of Osteopathic Manipulative Treatment under supervision.
  - c. Production of progress, SOAP notes on each assigned patient.
  - d. Participation in “after-s

- e. Attendance at hospital conferences.
2. Completion of an “End of Service” examination (COMAT) administered by the National Board of Osteopathic Medical Examiners, during the fourth week of the rotation.

**Tgncvfg" Tgc fkp i"**

See CANVAS on the University of Pikeville website.

<https://www.nbome.org/exams-assessments/comat/clinical-subjects/comat-principles/>

"







## **EQO"92;<"Hc o kn{ "Ogfkekpg"KK"**

### **Eqwtug"Fguetkrvkqp"**

Family Medicine II is a mandatory, third year, upper level, four-week core rotation, that may be served in either the in-patient or out-patient setting. The osteopathic medical student is, under preceptor supervision, actively engaged in both the care and the medical decision-making for both the in-patient and out-patient population. During the four weeks, the osteopathic medical student will evaluate patients, develop comprehensive care plans and experience the responsibilities associated with physician actions.

## **Rtgtgswkukvg<"Hc o kn{ "Ogfkekpg"K"**

### **Eqwtug"Qdlgevkgxu"**

1. To develop efficient and complete evaluative and management skills for the care of the general medical patient.
  - a. To conduct an age, gender and problem associated patient interview and physical examination, while including preventive medical care for all age groups.
  - b. To formulate and test preliminary differential diagnosis during the physical examination.
  - c. To deve iens r\_e an! e n\$ ie! u on.



## **EQO 942: Internal Medicine Clerkship**

### **General Internal Medicine I**

General Internal Medicine I is a mandatory, four-week third year core rotation that may be served in either the in-patient or out-patient setting. The third year osteopathic medical student is progressed from Course No. 607, second year Introductory Internal Medicine, and Course No. 604, Clinical Applications of Osteopathic Medicine.

### Uvwfgpv" Fwvkgu"

The student participates as a member of the hospital house staff.

1. Performance of admission histories and physicals for the patients of “teaching” attending physicians
2. Completion of rounds on all in-patients of “teaching” attending physicians.
3. Performance of afterhours call.
4. Attendance at hospital conferences.
5. Performance, under supervision, of minor bedside procedures.
6. Completion of an “End of Service” examination (COMAT) administered by the National Board of Osteopathic Medical Examiners, during the fourth week of the rotation.

### Tgncvfg" Tgcfkpi"

- x Gomella, Leonard and Steven Haist, Clinicians Pocket Reference, Latest Edition
  - o Ch. 2: Chartwork
  - o Ch. 15: Imaging Studies
  - o Ch. 19: Basic ECG Reading
- x Thaler, Malcolm, The Only EKG Book You’ll Ever Need, Latest Edition
  - o Ch. 8: Putting It All Together – 11Step Method for EKG Reading
- x Simon, Roger P., Greenberg, David A., and Michael Aminoff, Lange Clinical Neurology, Latest Edition
  - o Appendix A: The Neurology Examination
- x <https://www.nbome.org/exams-assessments/comat/clinical-subjects/comat-internal-medicine/>

"

Ugg" cnuq" vjg" EQTG" TQVCVKQP" EWTTKEWNWO" eqxgt" rcig" kp" vjku" o cpwcn0"



- o Ch. 86: Antibacterial Therapy
  - o Ch. 128: ST-Segment Elevation Myocardial Infarction (STEMI)
  - o Ch. 129: Unstable Angina and Non-ST-Elevation Myocardial Infarction
  - o Ch. 140: Chronic Obstructive Pulmonary Disease
- x <https://www.nbome.org/exams-assessments/comat/clinical-subjects/comat-internal-medicine/>

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Ugg"cnuq"vjg"EQTG"QVCKQP"EWTKEWNWO"eqxgt"rcig"kp"vjku" o cpwcn0"





"

**Tgncvgt" Tgcfkpi"**

Lawrence, Peter F., Essentials of General Surgery, Latest Edition

x Ch. 1: Perioperative Evaluation and Management of Surgical Patients

x Ch. 2: Fluids, Electrolytes and Acid Base Balance 5C G \$8

x

/ D





## **EQO"93:<"Ru{ejkcv{**

### **Eqwtug"Fguetkrvkqp"**

Psychiatry is a mandatory, third year, four-week core rotation, that may be served in either the in-patient or out-patient setting. The osteopathic medical student is, under preceptor supervision, actively engaged in the evaluation and care for the psychiatric patient. During the four weeks, the osteopathic medical student will interview and evaluate patients, perform an admission history and physical on all admitted patients, and develop multi-axial assessments on all patients seen.

### **Eqwtug"Qdlgevkgxu"**

1. To develop evaluative and management skills for the care of the psychiatric patient.
  - a. To conduct an age, gender and problem associated patient interview and physical examination.
  - b. To perform a mental status examination
  - c. To become acquainted with a psychiatric diagnostic and treatment plan.
    - x Includes understanding of the DSM Multi-Axial Classification System
  - d. To establish a working diagnosis with reference to The Diagnostic and Statistical Manual IV.
    - x Includes the medical work-up for the psychiatric patient
  - e. To apply core osteopathic principles and practices to the care of the psychiatric patient.
  - f. To participate with available social and medical resources as part of the comprehensive treatment plan.
  - g. To view the role of evidence based medicine to treatment decision-making.
  - h. To view the availability of services and its impact on patient care.
  - i. To view the effect of outside influences, e.g. third party insurance, on medical decision-making.
  - j. To view the efficacy of psychotherapeutic treatment modalities, which include:
    - i. The mechanism of action for psychotherapeutic agents.
    - ii. The role of psychopharmacology, and side-effect profiles
    - iii. The treatment of Axis III comorbid states
    - iv. Awareness of procedural alternatives to chemical therapies, e.g. cognitive treatment.
2. To gain an understanding for the operation of an in-patient psychiatric unit.
  - a. Examine the roles of staff and physician(s) in the delivery of healthcare. This includes with the consent of the preceptor, attendance at group and individual treatment sessions.
  - b. Know the HIPAA and OSHA regulations in regard to the operation of a psychiatric unit.
    - i. Confidentiality
    - ii. Emergency procedures
  - c. The need for security measures required for the safe operation of a psychiatry unit.
3. To develop written and oral communication skills.
  - a. The production of a written and/or dictated history and physical.
  - b. The production of a written and/or dictated encounter progress note.

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**Uvwfgpv" Fwvkgu"**

The student participates as a member of the unit staff. Responsibilities include:

1. Performance of admission histories and physicals. To include:
  - a. A complete mental status examination
  - b. A global assessment of functioning
2. Completion of rounds on all in-patients including:
  - a. Production of a "problem-based" progress SOAP note ipppp

## **EQO"927<" Y q o gpøu" J gcnvj"**

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### **Eqwtug"Fguetkrvkqp"**

Women's Health is a mandatory third year core rotation. The third year osteopathic medical student is introduced to the evaluation and management of the pregnant patient, preventive care regimens, family planning, malignancy, diagnosis and treatment of infectious diseases, urinary, ovarian and uterine disorders, and endocrine disorders. The experience serves primarily the in-patient woman at her time of confinement, however, may include out-patient gynecologic care. The experience may be served within a multi-practitioner service, or on the service of one obstetrician/gynecologist.

### **Eqwtug"Qdlgevkgu"**

1. To provide a framework for care of the obstetrical patient.
2. To provide a framework for preventive medical care of the gynecologic patient.
3. To identify and apply core osteopathic concepts to the care of the female patient.
4. To experience the pathophysiology relevant to diseases of the breast, ovaries, urinary bladder, and uterus, and their medical/surgical management.
5. To

- d. Assist with all gynecologic surgical procedures.
- 4. Essential study and preparation for each planned procedure on the attending physician's schedule.
- 5. Completion of an "End of Service" examination (COMAT) administered by the National Board of Osteopathic Medical Examiners, during the fourth week of the rotation.

**Tgncvgf"Tgc fki"**

Beckmann, Charles et al, Obstetrics and Gynecology, Latest Edition

- o Ch. 1
- o Ch. 6
- o Ch. 8 [Latest Edition] Ch. 8

**UGNGEVKXG"**



Conference. Absence from any of these events requires the signature of the preceptor, and should be sent with the student log reports to KYCOM. It is expected that the student will attend a minimum of 70% of each kind of event.

**I t c f k p i "**

The KYCOM Student Assessment Form for CORE (and OPP) rotations, which is completed by the attending physician, comprises 50% of the rotation grade. The COMAT examination score comprises the balance of the grade. Upon receipt and review of all information, the associate dean for Clinical Affairs evaluates the material, and assigns a numerical grade, as per the Clinical Rotations Manual, Student Evaluation (Grade). The evaluation is intended to measure the student in comparison to others at the same level of education."

The KYCOM Student Assessment Form measures:

**EQO":2:<"Cf fkevq" Og fkepg"**  
"  
**Eqwtug" Fguetkrvkq"**

**Tgncvfgf"Tgcfkpi"**

Black, Donald and Andreasen, Nancy: Introductory Textbook of Psychiatry, Latest Edition

- x Ch. 2 – Interviewing and Assessment
- x Ch. 9 – Alcohol and Drug – Related Disorders
- x Ch. 20 – Psychopharmacology and Electroconvulsive Therapy

Latt, Noeline and Katherine Conegrave, John B. Saunders, and E. Jane Marshall, Addiction Medicine (e-books) <http://0-ehis.ebscohost.com.library.acaweb.org/ehost/detail?sid=c4a9f7e7-0106-4a17-b863->

[aed482d3c42b%40sessionmgr4&vid=1&hid=8&bdata=JnNpdGU9ZWhvc3QtbGl2ZQ%3d%3d#db=nlebk&AN=467530](http://0-ehis.ebscohost.com.library.acaweb.org/ehost/detail?sid=c4a9f7e7-0106-4a17-b863-aed482d3c42b%40sessionmgr4&vid=1&hid=8&bdata=JnNpdGU9ZWhvc3QtbGl2ZQ%3d%3d#db=nlebk&AN=467530)

- x Ch. 1 – The Scope of Addiction Medicine
- x Ch. 2 – Assessment and Diagnosis: General Principles
- x Ch. 3 – Approaches to Management

**Uvwfgpv"Fwvkgu"**

The student participates as a member of the unit staff. Responsibilities include:

1. Performance of admission histories and physicals. To include:
  - a. A complete mental status examination
  - b. A global assessment of functioning
2. Completion of rounds on all in-patients including:
  - a. Production of a “problem-based” progress SOAP note in each assigned patient chart.
  - b. Investigation and interpretation of all diagnostic studies ordered for the patient, and be prepared to discuss findings for purposes of comprehensive care planning.
  - c. Production of any case summaries and/or discharge summaries for the admitted patient.
  - d. Performance of Osteopathic Manipulative Treatment under the direction of the attending physician.
3. Attendance at all treatment sessions for assigned patients.
4. Attend and observe, with preceptor permission, family care plan meetings.

**Ugg"cnuq"vjg"UGNGEVKXG"TVQVCVKQP"EWTTKEWNWO"eqxgt"rcig"kp"vjku"o cpwcn0"**

**EQO":26"G o g t i g p e { " O g f k e k p g " U g n g e v k x g "**

**Eqwtug" Fguetkrvkqp"**

2. Performance of bedside procedures.
  - a. Placement of catheters
  - b. Electrocardiography
  - c. Suturing and simple wound care
  - d. Assist with cardiopulmonary resuscitation under supervision.
  - e. Phlebotomy
  - f. Performance of OMT as deemed appropriate by supervising physician
  - g. Casting of simple fractures under supervision.
3. Performance of after-hours call.
4. Attendance at hospital conferences.
5. Completion of an "End of Service" examination (COMAT) administered by the National Board of Osteopathic Medical Examiners, during the fourth week of the rotation.

**Tgncvfg"Tgcfkpi"**

- x Case Files Emergency Medicine, Lange case files
  - o ISBN-13: 978-0071768542
  - o ISBN-10: 0071768548
- x <https://www.nbome.org/exams-assessments/comat/clinical-subjects/comat-emergency-medicine/>

**Uwi iguvf"Vqrkeu"vq"Txkgy"**

Chest Pain - UA, NSTEMI, STEMI, Thoracic Aortic Aneurysm, Pulmonary Embolism, Acute Exacerbation Of COPD, Asthma, CHF, AFIB, HTN Urgency And Emergency, Pneumonia - HCAP, CAP, Stroke, Dizziness, Bell's Palsy, Headache, Seizure, Musculoskeletal Pain - Neck Pain, Back Pain, Acute Injuries Like Ankle/Knee Sprain, Shoulder Pain, Fracture Evaluation And Management, Hip Fracture, Abdominal Pain - Appendicitis, Cholecystitis, Pancreatitis, Diverticulitis, Pyelonephritis, Gastroenteritis, UTI, Kidney Stone, Gastric/Duodenal Ulcers, Small Bowel Obstruction, Ileus, Mesenteric Ischemia, GI Bleed, AAA, OB/Gyn - Vaginal Bleeding, Vaginal Discharge, Miscarriage, Pregnancy Management, Ovarian Cyst/Torsion Prostatitis, Orchitis, Testicular Torsion, Epididymitis, ACLS, ATLS - Trauma Evaluation - Primary Survey and Secondary Survey, Burns, DKA, Laceration Care, SIRS/Sepsis, Meningitis, Alcohol and Other Drug Intoxication/Withdrawal/Overdose

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Ugg"cmuq"vjg"UGNGEVKXG"TGVCVKQP"EWTTKEWNWO"eqxgt"rcig"kp"vjku"o cpwcn0"

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Ugg"enuq"vjg"UGNGEVKXG"QVVCVKQP"EWTTKENWO"eqxgt"rcig"kp"vjk"o cpwcn0'

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**EQO":87<"Tcfkqni{"**  
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**EQO":2;<"Twtcn"Ogfkekpg"**

**Eqwtug"Fguetkrvkqp"**

Rural Medicine is a mandatory primary care

- c. The production of electronic medical records, where appropriate.
- d. Telephone and in-person communication with other medical and health professionals involved in common, with the care of the general medical patient.

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**Uvw fgpv" Fwvkgu"**

Student responsibilities include:

1. Performance of histories and physicals
2. Develop treatment plans on each assigned patient for purposes of comprehensive care planning.
3. Perform proposed care plans, and develop self-evaluative tools to assess efficacy of regimen.
  - a. Interpretation of all diagnostic studies ordered for treated patients.
  - b. Follow-up with all consultants on assigned patients.
  - c. Production of any case summaries and/or discharge summaries for assigned patients.
  - d. Performance of Osteopathic Manipulative Treatment under the direction of the attending physician.
4. Assist and/or perform duties and procedures under supervision.
  - a. Office set-up and performance of procedures:
    - i. Osteopathic Manipulative Treatment
    - ii. Preventive health screens
    - iii. Minor surgery
  - b. Attend and observe family meetings when appropriate
  - c. Evaluate patients in the emergency department
    - i. Write admit orders
    - ii. Develop a care plan
    - iii. Request consultation(s)
  - d. Assistance or Performance of Procedures within local hospital procedure room.
    - i. Surgery
    - ii. Wound Repair
    - iii. Liuera





# GNGEVKXG" TQVCVKQP" EWTTKEWNWO "

The following applies to all elective rotations:

## Uvwfgpv" Jqwtu"

Daily hours are to parallel the hours of the attending physician, however, the following guidelines are suggested:

- 1.

information, the associate dean for clinical affairs evaluates the material, and assigns a numerical grade. A grade of 70% is considered passing, as per the Clinical Rotations Manual. The evaluation is intended to measure the student in comparison to others at the same level of education.

The KYCOM Student Assessment Form measures:

1. Mastery of Osteopathic Philosophy and Application of Manipulative Medicine
2. Medical Knowledge
3. Patient Care
4. Interpersonal and Communication Skills
5. Professionalism





d.

- m. Case Discussion – include unique aspects of the case relevant to presentation in this international context.

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## ONLINE COURSE SYLLABI





- b. The production of a written and/or dictated encounter progress note.

**Uvw fgpv" Fwvkgu"**

- x 2 iHuman cases per day; estimated to take 4 hours
  - o Assigned by the website. Choose 38 cases from those provided.
- x Assigned reading; 3 chapters / 3 hours per day
  - o Each reading assignment (chapter) requires 3 questions, with answers, be submitted. Questions are to be unique/original board type questions with documentation as to why your chosen answer is correct.
- x COMAT / COMLEX Study; 1 hour per day
  - o <https://www.nbome.org/exams-assessments/comat/clinical-subjects/comat-family-medner> C j essmwer iq samil

## **EQO"92;<"Hc o kn{" Ogfkekpg"KK"Qpnkpg"**

### **Eqwtug" Fguetkrvkqp"**

Family Medicine II is a third year four-week core clinical experience. During the four weeks, the osteopathic medical student will evaluate patients, develop comprehensive care plans and experience the responsibilities associated with physician actions.

## **Rtgtgswkukvg<"Hc o kn{" Ogfkekpg"K"**

### **Eqwtug" Qdlgev kxgu"**

1. To develop efficient and complete evaluative and management skills for the care of the general medical patient.
  - a. To conduct an age, gender and problem associated patient interview and physical examination, while including preventive medical care for all age groups.
  - b. To formulate and test preliminary differential diagnosis during the physical examination.
  - c. To develop a diagnostic and treatment plan.
  - d. To establish a working diagnosis and the challenges associated with the implementation of the treatment plan.
  - e. To apply core osteopathic principles and practices to the care of the general medical patient.
  - f. To coordinate available social and medical resources as part of the comprehensive treatment plan.
  - g. To, under preceptor supervision, take the family physician's role in referral decision-making.
    - iv. To view the role of experience based medicine to medical decision-making.
    - v. To view the availability of services and its impact on patient care.
    - vi. To view the effect of outside influences, e.g. third party insurance, on medical decision-making.
2. To develop a model for the operation of a professional office:
  - a. Examine the roles of staff and physician(s) in the delivery of healthcare. This may include, with the consent of the preceptor, attendance at office staff meetings.
  - b. Develop an understanding of the influences that third party insurances have on medical decision-making.
  - c. Understand the laws that govern the care and recording of medical records.
  - d. Gain a working knowledge of the "International Classification of Diseases" and "Current Procedural Terminology" and their impact on physician reimbursement.
  - e. Examine the telephone system, and other electronic communication tools in relation to the delivery of healthcare.
  - f. Know the HIPAA and OSHA regulations in regard to the operation of a professional medical practice.
    - iv. Confidentiality
    - v. Hazardous waste removal
    - vi. Emergency procedures
  - g. To develop an inventory of necessary property and supplies for the daily operation of a general medical practice.



3. To continue development of written and oral communication skills.
  - a. The production of a written and/or dictated history and physical.
  - b. The production of a written and/or dictated encounter progress note.

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**Uvwfgpv" Fwvkgu"**

- x 2 Aquifer cases per day; estimated to take 4 hours
  - o Assigned by the website. Choose 38 cases from those provided.
- x Assigned reading; 3 chapters / 3 hours per day
  - o Each reading assignment (chapter) requires 3 questions, with answers, be

Clinician's Pocket Reference."38Gfkvqp"

<https://libguides.library.upike.edu/c.php?g=970657&p=7014938>

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<b>Yggm"6</b>	<b>Tgcfkpi"3</b>	<b>Tgcfkpi"4</b>	<b>Tgcfkpi"5</b>
Day 16	Chapter 1	Chapter 2	Chapter 3

|









**EQO"962< I gpgtcn"Uwtigt{"Qpnkpg"**

**Eqwtug" Fguetkrvkqp"**

<b>Y ggm"4</b>			
Day 6	Chapter 20	Chapter 21	Chapter 22
Day 7	Chapter 23 & 24	continue 23 & 24	continue 23 & 24
Day 8	Chapter 25	Chapter 26	Chapter 27
Day 9	Chapter 28 & 29	continue 28 & 29	continue 28 & 29
Day 10	Chapter 30	continue 30	Review/ COMAT Practice Exam

Essentials of General Surgery<sup>7</sup>"G flkkqp

<https://bookshelf.vitalsource.com/#/books/9781469819181/cfi/6/2!/4/2@0:0>

<b>Y ggm"5</b>			
Day 11	Preface & Introduction	Chapter 1	Chapter 2



## **EQO"928<"Rgfkcvtku"Qpnkpg"**

### **Eqwtug"Fguetkrvkqp"**

Pediatrics is a four-week, third year core clinical experience. The third year osteopathic medical student is progressed from the second year introductory pediatrics course, to experience the care of infants, children and adolescents. Common childhood diseases, genetic and developmental disorders, preventive health care, and diagnosis and management strategies are among the rotation's experiences.

### **Eqwtug"Qdlgevixgu"**

1. To provide a framework for care of the general pediatric patient.
  - a. The patient (parent) interview.
  - b. The phhi

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D

x COMAT Exam











			thought blocking and of a thought-withdrawal delusion, Part 11	
Dependent Personality Disorder	PTSD Brief Screening Assessment A-3	Conversion Disorder (Functional Neurological Symptom Disorder) with weakness or paralysis	Mrs. Warren, Schizophrenia demonstrating the delusional symptom that someone else controls her behaviors / movements, Part 12	
Histrionic Personality Disorder Version 1	Substance Use Assessment A-2	Delusional Disorder-Erotomaniac	Mrs. Warren, Delusional Disorder Persecutory Type, Part 13	
Histrionic Personality Disorder	Substance Use Assessment A-7	Delusional Disorder-Somatic	Mrs. Warren, Delusional Disorder Persecutory Type, Part 14 ss	







<b>Y ggm'4"</b>				
<b>Fc{"3"Xkfgqu."</b>	<b>Fc{"4"Xkfgqu."</b>			
<b>U{ o òvq o "</b>	<b>U{ o rvq o "</b>			
<b>Ogfk{*4"jqwtu+"</b>	<b>Ogfk{*6"jqwtu+"</b>			



F60.3 Borderline Personality Disorder	Mrs. Warren, Schizophrenia demonstrating the symptom of a somatic delusion, Part 6	Choose 3 topics listed in the textbook, chapters 14 and/or 15, and research the topics. Submit a summary of your research on E*value.		
	Mrs. Warren, Delusional Disorder Somatic Type, Part 16			
	Delusional Disorder-Somatic F44.0			
	Disso/	so/ us		



Disorder due to Traumatic Brain Injury				
Arnie, Core Video: Opioid Use Disorder, Mild				
Ali, Alcohol Use Disorder, Alcohol Assessment				
Shannon, Opioid Use Disorder				
<b>Y ggm"6"</b>				





## **EQO"927<" Y q o gpou" J gcnv j" Qpnkpg"**

### **Eqwtug" Fguetkrvkqp"**

Women's Health is a mandatory third year core clinical experience. The third year osteopathic medical student is introduced to the evaluation and management of the pregnant patient, preventive care regimens, family planning, malignancy, diagnosis and treatment of infectious diseases, urinary, ovarian and uterine disorders, and endocrine disorders.

### **Eqwtug" Qdlgev kxgu"**

1. To provide a framework for care of the obstetrical patient.
2. To provide a framework for preventive medical care of the gynecologic patient.
3. To identify and apply core osteopathic concepts to the care of the female patient.
4. To experience the pathophysiology relevant to diseases of the breast, ovaries, urinary bladder, and uterus, and their medical/surgical management.
5. To expose students to an evaluative approach to diagnosis and management of the adult female patient by use of:
  - a. Physical examination
  - b. The gynecologic and medical/surgical history
  - c. Laboratory and Diagnostic Testing
  - d. Experience based medicine
6. To provide knowledge of gynecologic and obstetrical office and operative procedures, and their associated equipment.

### **Uvw fgpv" Fwvkgu"**

- x 2 iHuman cases per day; estimated to take 4 hours
    - o Assigned by the website. Choose 38 cases from those provided.
  - x Assigned reading; 3 chapters / 3 hours per day
    - o Each reading assignment (chapter) requires 3 questions, with answers, be submitted. Questions are to be unique/original board type questions with doc ng; ! rea fr m if sdoea
- € QÒ F








**Y q o gpou" J gcnv j "Ugngevkxg" Qpnkpg"**

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**Eqwtug" Fguetkrvkqp"**

Women's Health is a mandatory third year core clinical experience. The third year osteopathic medical student should

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Day 4	Ch. 9, 21 & 31
Day 5	Ch. 2, 24, & 26
<b>Yggm"4"</b>	"
Day 6	Ch. 28, 43, & 36
Day 7	Ch. 19, 16, & 32
Day 8	Ch. 42, 46, & 34
Day 9	Ch. 7, 33, & 44
Day 10	Ch. 29, 50, & 3
<b>Yggm"5"</b>	"
Day 11	Ch. 4 & 5
Day 12	Ch. 10, 11, & 35
Day 13	Ch. 15, 17, & 18
Day 14	Ch. 20, 22, & 45
Day 15	Ch. 30, 14, & 25
<b>Yggm"6"</b>	"
Day 16	Ch. 37, 38, & 39
	<b>Harrison's</b>

**EQO":87<"Tcfkqni {"\*Qpnkpg+"**

**Eqwtug"Fguetkrvkqp"**

Diagnostic Radiology is a four-week course to be completed online through Canvas. The Radiology course can fulfill the medical selective requirement or can serve as elective time. This online course will cover: general diagnostic radiology, pediatric radiology, vascular and interventional radiology, nuclear radiology, neurological radiology, and breast imaging. This course will serve to further expand and develop the world of radiology to the osteopathic medical student. Suggested areas of study may include:

- Computed Tomography of the Head, Neck, Abdomen & Axial Skeleton
- Magnetic Resonance Imaging of Neural and Vascular Structures
- Diagnostic Ultrasound of vascular structures, abdomen and pelvis
- Screening or Diagnostic Mammography
- Nuclear Radiology for Endocrine, Vascular and Skeletal Diagnosis

**Eqwtug"Qdlgevkgu"**

1. To recognize the role of the radiologist in the general management of the adult or pediatric patient.
2. To develop an understanding of the influences that third party insurances have on decision-making, and the choice and/or necessity for medical/surgical imaging.
3. To experience the criteria to be considered, when radiology consultation is contemplated.
4. To experience the information needed from the ordering physician for the optimal interpretation of diagnostic studies ordered for medical/surgical

patients. i S sr g









## **EQO":26"G o gt igpe{" Ogfkekpg"Ugngevkxg"Qpnkpg"**

### **Eqwtug"Fguetkrvkqp"**

Emergency Medicine is a mandatory, four-week, third or fourth year selective clinical experience. Integration of clinical skills and evidence-based medicine is achieved with emphasis on didactic discussions, and development of clinical skills.

**Rtg/tgswkukvgu<" I gpgtcn"Kpvgtpcn" Ogfkekpg"K." I gpgtcn"Kpvgtpcn" Ogfkekpg"KK."Hc o kn{" Ogfkekpg"K." I gpgtcn"Uwtigt{"Rgfkevtkeu."cpf" Y q o cpøu" J gcnvj"**

### **Eqwtug"Qdlgevkxgu"**

1. To integrate osteopathic principles and practice concepts into the conventional care of emergency patients
2. To experience case management and the coordination of systems based medical care.
  - a. The use of subspecialists and other medical/surgical disciplines.
  - b. The use of social services and outpatient programs
  - c. The use of in-house care services.
  - d. To recognize the social and economic factors that affect patient care.
3. To employ the knowledge, am k oyzee, ame, ammoe e







Day 3	SAEM Video	SAEM Video	Chapter 69 Dysrhythmias	Chapter 70 Implantable Cardiac Devices	Chapter 71 Heart Failure	Chapter 72 Pericardial and Myocardial Disease
Day 4	SAEM Video	SAEM Video	Chapter 73 Infective Endocarditis	Chapter 74 Hypertension	Chapter 75 Aortic Dissection	Chapter 76 Abdominal

Day 16

SAEM  
Video

SAEM  
Video

Chapter 121  
Bacteria

Chapter 122  
Viruses

Chapter 123  
Rabies

Chapter 124 HIV





# REQUEST FORMS AND EVALUATION FORMS







WPKXGTUKV [ "QH"RKMGXKNNG"  
MGPVWEM [ "EQNNG I G"QH"QUVGQRCV JKE" OGFKEKPG"  
"  
GNGEVKXG"TG SWGUV"HQTO"

**Wpkxgtukv{"qh"Rkmgxknng"  
Mgpvwem{"Eqmngig"qh"Quvgqrcvjk"Ogfkekpg"**

"

**Kpvgtxkgy "Tgswguv"Hqt o "**

Name \_\_\_\_\_ Class of 2022

Rotation \_\_\_\_\_ Preceptor's Name \_\_\_\_\_

**Hktuv"Kpvgtxkgy"**

Residency Program \_\_\_\_\_

Departure Date \_\_\_\_\_ Return Date \_\_\_\_\_  
(First date absent from rotation) (First date back to rotation)

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

Preceptor's Signature \_\_\_\_\_ Date \_\_\_\_\_

KYCOM Approval \_\_\_\_\_ Date \_\_\_\_\_  
Associate Dean for Clinical Affairs

**Ugeqpf"Kpvgtxkgy"**

Residency Program \_\_\_\_\_

Departure Date \_\_\_\_\_ Return Date \_\_\_\_\_  
(First date absent from rotation) (First date back to rotation)

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

Preceptor's Signature \_\_\_\_\_ Date \_\_\_\_\_

KYCOM Approval \_\_\_\_\_ Date \_\_\_\_\_  
Associate Dean for Clinical Affairs

**Vjktf"Kpvgtxkgy"**

Residency Program \_\_\_\_\_

Departure Date \_\_\_\_\_ Return Date \_\_\_\_\_  
(First date absent from rotation) (First date back to rotation)

De \_\_\_\_\_ a MDvre \_\_\_\_\_











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(To be completed by PRECEPTOR)









