Neurological Disorders

Welcome to Longitudinal Practice in the first block of Year 2 in the LSI curriculum. We are happy to have you back in clinic.

Couple items to note:

- No LP students should be exposed to any confirmed or suspected COVID-19 patients.
- Universal masking and eye protection <u>is required in all clinical environments</u>. We encourage
 you to wear the goggles provided by the College of Medicine, but any of the approved forms of
 eye protection are acceptable.

It is important to understand the roles and *value* of each member of the team as you develop your skills. You will continue to collaborate and work with the practice team expanding upon the skills you have learned in longitudinal group and foundational sciences, including interviewing skills and physical exam techniques.

In this block you will attend 3 sessions at the practice. All students will complete 11 total sessions in Year 2.(exception MSTP and PCT students) Each time you appear in the office for a session, you should arrive on time, professionally attired, and interact as a medical professional with everyone in the office. At the beginning of each session you should briefly meet with your preceptor and set 1-2 objectives for the session and select patients from the schedule or staff to assist with meeting objectives.

We encourage you to continue practicing your history skills from Year 1. During Neurological Disorders, we would like you to practice the review of systems and neuro history. These interview skills take practice! Please discuss with your preceptor which scheduled patients would be good candidates for your practice of a neurological physical exam. A normal examination is fine. This may be done in full on one patient, time permitting, or may be broken into portions so that you are able to practice the entire examination using several patients over the block. Refer to the VITALS resources to be sure your techniques are complete and accurate. ALL OF THESE CLINICAL EXPOSURES SHOULD BE LOGGED BY YOU INTO THE PXDX SYSTEM in VITALS.

In addition, we would like your PRECEPTOR TO DIRECTLY OBSERVE YOU (DOC) obtaining the Neuro Physical Exam. Your preceptor should complete the DOC form in VITALS. These skills can be spread out over more than one patient. You should seek feedback from your preceptor about your performance including areas of excellence and areas for improvement.

We would also like you to practice gathering information on the self- management needs of a patient with a chronic illness (examples, asthma, diabetes, etc.), as well as behavioral and mental issues.

Objectives for Neurologic Disorders August- September: By September 26, 2022 3 sessions

- Practice neurologic PE
- Practice taking a focused neurologic history
- Practice the musculoskeletal, cardiopulmonary or neurologic focused ROS as appropriate for chief complaint
- Practice documenting a patient encounter (does not need to be in the EHR)

- Practice collecting information on behavioral and mental issues for patients
- Practice collecting information on the self-management needs of patients with chronic illness
- Practice giving patient presentation to preceptor
- Have 1 direct observation (DOC in VITALS) of a neurologic focused physical exam, WITH feedback

The practice items are recorded in PxDx and do not need to be directly observed by your preceptor. The direct observations (DOCs) are completed in VITALS and you must be observed by your preceptor. More details on the process for logging completion can be found in the LP Student Manual in the Links section of VITALS.

By September 19, 2022, students need to identify a patient from their practice with <u>one</u> of the following for the empaneling discussion in LG. This can be any patient you have seen to date.

Complaints of:

- Dizziness
- Eye complaints (e.g., pain, visual changes)
- Headache
- Memory loss
- Syncope
- Weakness
- Epilepsy
- Neuropathy
- Sleep disorder

- Stroke
- Anxiety
- Depression
- Child and adolescent behavior concerns
- Disability
- Use of Integrative Medicine
- Health literacy-related misunderstanding or error