LEARNING OBJECTIVES: INTERVENTIONAL PSYCHIATRY ELECTIVE/SUBINTERNSHIP

Overarching Goals		earning Objectives: By the end of the rotation, adents will be expected to:	Where/how taught (location or learning activity)	Taught by (attending, fellows, etc.)	How student's achievement of objective is assessed (assessment method)	How feedback is given (feedback method)	Quantity target (target number of patients/ events during rotation)
1, 2, 3, 4, 5, 6	1.	Understand the criteria for treatment resistant depression (TRD) in MDD and bipolar disorders, the most common indications for interventional modalities of treatment.	IPS Service	Attending	Direct observation	During weekly meeting with director	Should see at least 20 patients meeting this objective
1, 2, 3, 4, 5	2.	Understand the identification, assessment and severity assessment for catatonia, including by physical examination and by utilizing the Bush- Francis Catatonia Rating Scale	ECT suite / Bedside during consult	Attending	Direct observation & comparison of assessment, scores	During weekly meeting with director	Should see at least 2 patients meeting this objective
1, 2, 3, 4, 5, 6, 7, 8	3.	Identify if interventional treatment modalities would be appropriate based on patients' history and presentation, and be able to identify the most appropriate first-line interventional modality if more than one modality is appropriate	IPS Service	Attending	Direct observation	During weekly meeting with director	NA
1, 2, 3, 4, 6, 7, 8	4.	Understand the fundamentals of TMS, ECT, ketamine and esketamine treatments, including their mechanism of action, indications, contraindications, course of treatment, side effects	IPS Service	Attending	Direct observation	During weekly meeting with director	Participate in 100 treatments, with at least 2 from each category
2, 4, 5, 6	5.	Administer ECT treatment (under direct observation) and assure a safe and effective treatment is administered	ECT suite	Attending	Direct observation	During weekly meeting with director	Administer at least 10 treatments
4, 5, 6	6.	Demonstrate professional responsibility in working as a team member with other members of the interventional psychiatry care team, patients and families.	IPS Service	Attending	Direct observation	During weekly meeting with director	NA

LEARNING OBJECTIVES: INTERVENTIONAL PSYCHIATRY ELECTIVE/SUBINTERNSHIP

Overarching Goals	Learning Objectives: By the end of the rotation, students will be expected to:	Where/how taught (location or learning activity)	Taught by (attending, fellows, etc.)	How student's achievement of objective is assessed (assessment method)	How feedback is given (feedback method)	Quantity target (target number of patients/ events during rotation)
	 a. The student should exhibit sensitivity to the psychosocial issues faced by interventional psychiatry patients and their families. b. The student should exhibit honesty, accuracy and integrity in all interactions with patients, families, colleagues and others. 					
5, 6, 8	 7. Know the training/career pathway for interventional psychiatry). a. Know key roles that interventional psychiatry plays in the health care system. 	IPS Service	Attending	Direct observation	During weekly meeting with director	NA

LEARNING OBJECTIVES: <u>INTERVENTIONAL PSYCHIATRY</u> ELECTIVE/SUBINTERNSHIP

Overarching Goals and Definitions of Elective/Subinternship

Overarching Goals

See Webpage: https://medicine.yale.edu/education/curriculum/Goals%20and%20Principles_268834_284_26474.pdf

The Overarching Goals of the curriculum serve as the foundation for our curriculum and define its content. Emphasis is placed on goals that meet the growing needs of a changing society and medical practice. A strong foundation in science provides special opportunities for students to participate in creative endeavors that foster the life-long pursuit of scholarship.

1. Health Promotion and Disease Prevention: Students apply scientific knowledge and use clinical skills to promote health and prevent disease in individuals and communities.

2. Mechanisms and Treatment of Disease: Students acquire knowledge at the molecular, cellular, organ-system, whole body, and societal levels, and integrate this knowledge with clinical science and skills to diagnose and treat disease.

3. Clinical Reasoning: Students exercise clinical judgment based on a thorough understanding of the patient, application of sound scientific principles, and knowledge of the health care systems. Clinical reasoning is learned through practice, self-reflection, and feedback

4. Patient Care: Students achieve competency in the care of patients at a level required to excel in residency.

5. Professionalism and Communication: Students demonstrate respectful and ethical behavior in all of their professional interactions and provide compassionate, empathic care to patients and families. Professionalism and communication skills are acquired through practice, self-reflection, and feedback.

6. Responsibility to Society: Students learn to practice medicine with cultural competence and fiscal responsibility in preparation for work in a society characterized by diverse populations and economic constraints.

7. Creation and Dissemination of Knowledge: Students manifest independent and creative thinking fostered by a collaborative graduate school environment. They perform mentored scholarly research culminating in a formal written thesis to promote critical thinking, understand the scientific method, and contribute to medical knowledge.

8. Physician as Scientist: Students learn to approach medicine from a scientifically minded perspective and are educated and mentored by leading scientists. This prepares them for careers in biomedical science and as medical practitioners, and to become the next generation of medical scientists and leaders in academic medicine.

Each goal has been thoroughly reviewed by a task force comprised of content experts, interested parties, and students. These task forces made recommendations for content and pedagogy across the four years that are being used to guide the curriculum rebuild process.

Subinternship and Clinical Elective Definitions

A <u>Subinternship</u> is an opportunity for a medical student to engage in a clinical rotation meeting the following criteria:

1) With appropriate supervision, assume patient care responsibility at the highest appropriate level possible within the specialty area, interfacing with the patient, the medical team, the nursing staff, and any other services.

2) Total immersion in day to day activities, tasks, and responsibilities of patient care.

3) A broadened patient case-mix and patient load with case assignment and schedule similar to 1st year resident.

4) An opportunity to solidify advanced clinical knowledge, skills and professionalism.

5) A level of independence appropriate to a 4th year medical student.

A <u>Clinical Elective</u> is an opportunity for a medical student to engage in a clinical rotation with the following characteristics: 1) With appropriate supervision, participate in the care of patients as an adjunct to a primary clinician (usually a fellow

or resident) on a service. The student may interface with the patient, medical team, nursing staff, and other services. 2) Exposure to and participation in day to day activities, tasks, and responsibilities of patient care on the service.

3) A patient case-mix chosen for interesting learning opportunities.

4) An opportunity for exposure to sub-specialty areas of medicine which will enhance student's knowledge base and experience.

LEARNING OBJECTIVES: <u>INTERVENTIONAL PSYCHIATRY</u> ELECTIVE/SUBINTERNSHIP

5) A level of independence appropriate to a 4th year medical student.