



CDEM 560: Clinical Decision Making Worksheets for Third Year Medical Students

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Brief Course Description

- 1. Third year medical students (M3) in the Emergency Department (ED) present a number of educational challenges:
 - M3s have variable capabilities and experiences throughout this year of training.
 - Skills in the beginning of the first clinical year incrementally improve as this cohort matriculates into the fourth year.
 - M3 learners do not all have an interest in pursuing Emergency Medicine (EM) as a career and have different levels of engagement in the ED.
 - For faculty, novice learners in the ED can be difficult to teach for the above reasons as well as the time investment devoted to oral presentations.
 - EM clerkships should provide contexts for clinical decision making skills that apply to all future potential careers.
 - M3s enter their clinical years with the ability to gather bedside information, though struggle to synthesize the data or create a diagnostic strategy.
 - Electronic Health Records (EHR) are difficult to access and utilize for both faculty and students.
- 2. Implementation of a Clinical Decision Making Worksheet (CDMW) specifically for M3s can help address these unique factors.

The CDMW approach helps **students**:

- Filter clinical data into elements pertinent to a unique presentation in the ED.
- Juxtapose a differential diagnosis based on history and physical and then stratify likelihood based on information they have gathered.
- Develop a diagnostic and treatment plan specific to the patient interaction.
- Script an approach to the oral presentation.
- Practice focused clinical documentation without variable issues pertaining to the EHR.





The CDMW approach helps faculty:

- Conduct an efficient exchange with the M3 learner.
- Quickly identify the learner's level of understanding.
- Effectively deliver teaching points appropriate to the individual student.
- Evaluate the M3 via Entrustable Professional Activities at the patient-specific level.

Course Objectives

- 1. Describe the unique characteristics of third year medical students and the challenges this type of learner poses for Emergency Medicine faculty.
- 2. Explain the necessity of tools that focus on clinical decision making capacity rather than purely fund of knowledge.
- 3. Illustrate variable approaches to designing a Clinical Decision Making Worksheet via examples from 2 academic institutions with large, mandatory M3 clerkships in EM.

Inspirational References

- Tews MC, Ditz Wyte CM, Coltman M, et al. Implementing a third-year emergency medicine medical student curriculum. J Emerg Med. 2015;48(6):732–743.e738.
 [Pubmed]
- Jung J, Franzen D, Lawson L, Manthey D, et al. The National Clinical Assessment Tool for Medical Students in the Emergency Department (NCAT-EM). West J Emerg Med. 2018 Jan;19(1):66-74. [Pubmed]

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MD 831 Clinical Decision Making Worksheet

CHIEF COMPLAINT:						
HISTORY OF PRESENTING ILLN	ESS:					
PERTINENT PMH, PSH, FAM, SOC HISTORY	PERTINENT MEDICATIONS/ALLERGIES	PERTINENT REVIEW OF SYSTEMS:				
PHYSICAL EXAM AND VITAL SIGNS: Provide pertinent physical exam findings below. Consider the chief complaint and your differential diagnosis.						

DIFFERENTIAL DIAGNOSIS AND RATIONALE:

Provide 3 diagnoses that apply to the patient's presentation. On the back of this sheet, select studies and interventions to workup the patient. Keep your differential diagnosis in mind and explain how results of the studies affect your plan.

REASSESSMENT/DISPOSITION

List pertinent results and patient reassessment. Discuss admission or discharge and basis for this plan.



CONSULTS:



DIAGNOSTIC STUDIES AND INTERVENTIONS:

СВС	FS Gluc	CXR	ECG	EFAST	O2	NSAID
ВМР	Blood Cx	Pelvis XR	CT Head	RUQ US	BiPAP	APAP
СМР	Lactate	UA	CT C-Spine	Renal US	Albuterol	Opioid
Lipase	APAP/ASA Lvi	UCx	CT PE	DVT US	IVF	ASA
Troponin	EtOH	UPT	CTA-Aorta	TVUS	Zofran	NTG
D-Dimer	T&S	UDS	CT Abd/Pelv	Scrotal US	Reglan	Heparin/LVX
BNP	ESR/CRP	CSF	CTA Head/Neck	XR UE/LE	BZD	ABX

FREE TEXT ORDERS:

For Attending Physicians Only:								
Develop prioritized differential diagnosis & select working diagnosis following a patient encounter (PC1, PC2, PC3, MK1)								
Cannot perform Cannot complete even with close supervision; restricted to shadowing experiences	Requires close supervision Requires advance preparation and/or physician guidance to successfully complete	Requires minimal supervision Successfully completes with feedback and/or clarification by a supervising physician	Performs independently Competent at an intern level, rarely needs feedback or clarification afterwards					
Develop a diagnostic plan for a common clinical presentation (PC3, PC4, PC5, MK1, MK2, SBP2)								
Cannot perform Cannot complete even with close supervision; restricted to shadowing experiences	Requires close supervision Requires advance preparation and/or physician guidance to successfully complete	Requires minimal supervision Successfully completes with feedback and/or clarification by a supervising physician	Performs independently Competent at an intern level, rarely needs feedback or clarification afterwards					
Provide an oral presentation of a patient encounter in the ambulatory or inpatient settings (PC1, PC2, PC3, PC4, PC5, MK1, MK2, ICS2, P2, P3, SBP2)								
Cannot perform Cannot complete even with close supervision; restricted to shadowing experiences	Requires close supervision Requires advance preparation and/or physician guidance to successfully complete	Requires minimal supervision Successfully completes with feedback and/or clarification by a supervising physician	Performs independently Competent at an intern level, rarely needs feedback or clarification afterwards					

ATTENDING COMMENTS ON STUDENT PERFORMANCE (use white space below):