

675E CONSULT AND LIAISON PSYCHIATRY

Consultation-Liaison and Emergency Psychiatry

Course Description: Specialized clinical experiences in the evaluation and treatment of inpatients at UC Irvine Medical Center who have a mixture of psychiatric and medical problems. Assignment to a housestaff preceptor for weekly discussion sessions. Included in the discussions will be: psychiatric consultation procedures; interview techniques; issues of differential diagnosis, pathogenesis, and etiology; how to write consultation notes; diagnostic considerations in the medical setting; and other pertinent topics. Attendance at all consultation rounds and conferences.

Department: Psychiatry & Human Behavior

Prerequisites: UC Irvine students must have successfully completed the basic science curriculum. Extramural students must be in the final year of undergraduate medical education.

Restrictions: None

Elective Director: Aaron Kheriaty, M.D., UC Irvine Medical Center, Department of Psychiatry and Human Behavior, 101 The City Drive South, Neuropsychiatric Center Route 88, Building 3 Orange, CA 92868 (714) 456-5770 akheriat@uci.edu

Instructing Faculty: Tina Allee, MD

Course Website: None

Who to Report to First Day: Contact Site Coordinator

Location to Report on First Day: 8 a.m.

Time to Report on First Day: Contact Site Coordinator

Site Coordinator: Kelly Fulford, UC Irvine Medical Center, Office of Educational Affairs, 101 The City Drive, South, Building 22A, Room 2108, Orange, CA 92868, (714) 456-6882, kfulfor@uci.edu

Site: UC Irvine Medical Center

Periods Available: Throughout the year.

Duration: 2-6 weeks

Number of Students: 1-2

Scheduling Coordinator: UC Irvine students please email comsched@uci.edu or call (714) 456-8462 to make a scheduling appointment. Please read the following information carefully. Any student enrolled at a U.S. LCME medical school will use VSAS to apply. To apply please refer to this website <http://www.aamc.org/programs/vsas/> International and osteopathic students will not use VSAS. To apply please refer to the application link towards the top-left of this page.

Course Objectives: To provide broad exposure to understanding the relationship between patient medical problems and their psychiatric symptoms. This is designed to be of great value and interest to students who are planning careers in any of the primary care specialties, psychiatry, neurology, or psychosomatic medicine.

During the rotation, the student should be able to demonstrate through oral or written communication with attending physicians and staff and through documentation in patient records, and in a manner judged by the attending physicians and staff as satisfactory, an understanding of:

- The purpose of the psychiatric interview; A3
- The purpose and form of the psychiatric work-up; A3
- The major manifestations and differential diagnosis of the following psychiatric disorder: Cognitive, Substance-Related, Schizophrenia, Mood, Anxiety, Somatoform, Sexual,

Sleep, Personality, Factitious, Dissociate and Amnestic, Geriatrics, and Childhood Disorders; A2, A4

- The major groups of psychopharmacologic agents used in psychiatric care, including their indications, effects, side effects and contraindications, with particular reference to antipsychotics, anti depressants, mood stabilizers, anti anxiety agents, sedatives, and stimulants. A2
- An understanding of the major psychosocial interventions and their indications, including the use of psychotherapy, family and social case work; a2, a3
- The legal and psychological principles of treating the violent, the suicidal, the incompetent, and the uncooperative patient; a3, a4
- Familiarity with the major services available to the mentally ill and methods of referral to such services. A4, A5

In the course of the rotation or at its conclusion, the student should demonstrate through behavior and communication with attending physicians and staff and in a manner judged satisfactory by them.

- Respect, empathy, responsiveness, and concern regardless of the patient's problems or personal characteristics; C3
- Compassion for the burden carried by psychiatric patients and their families; C2,C3,C4
- Curiosity about biological, psychological, and social aspects of mental disorders; D1, C4
Sensitivity to student-patient similarities and differences in gender, ethnic background, sexual orientation, socioeconomic status, educational level, political views, and personality traits; C2,C3
- Self scrutiny and willingness to acknowledge one's own responses and limitations; B7, C1,D4
- Professionalism at all times, regardless of one's own feelings, and awareness of boundaries in professional settings and ways to avoid violating them; B7, C1, C5, D2
- Cooperation with others involved in the care of patients; C1,C5
- Accountability and reliability in dealing with patients, families , and other professionals;C1, C5, D2
- Capacity to maintain confidentiality at all times. C2

In the course of the rotation or at its conclusion, the student should demonstrate through behavior observed by attending physicians and staff, and in a manner judged satisfactory by them, the capacity to:

- Conduct interviews with psychiatric patients with due recognition of and response to verbal and non verbal cues of comfort and discomfort; B1, B2
- Collect and document information from patients, relatives, other informants, and records, leading to diagnosis and management; B1
- Formulate a differential diagnosis and treatment plan for each patient studied, incorporating biological, psychological and social influences; B1, B3
- Assess and begin emergency management and referral of a person with neuropsychiatric symptoms; B3, B6
- Recognize of a wide range of disturbed behavior (not just one "mental illness"); B2,B5
Suggest and initiate consultations from other experts with the approval of attending physicians; B3, B6, C5
- Communicate concerns about patients to attending physicians and others involved in the care of the patient; B6, C1
- Review scientific information bearing on the care of the patient and share such information with attending physicians, staff, and fellow students, in the form of oral or written reports; B4, C4
- Manage strong emotional displays from patients and their families, including feelings of grief, shame, anger, anxiety, and mistrust; B1, C1, C3

- Communicate with the incoherent, the disoriented, the over talkative and the silent patient; B1, B2
- Take steps, when appropriate, to safeguard the safety and well being of patients and others by communicating promptly such concerns to others involved in the care of patients; B3, B6, C2

Key Topics:

- Psychiatric disorders and their symptoms
- Treatment of psychiatric disorders through multiple modalities including pharmacology, psychotherapy, and social interventions
- Psychosocial impacts of psychiatric disorders
- Contribution of medical illnesses to psychiatric disorders and vice-versa
- The role of a psychiatry consultant in the medical setting

Clinical Responsibilities of the Student: Students are responsible for doing the consultations in conjunction with the appropriate supervisors. They conduct daily therapy sessions, monitor all ongoing lab work, diagnostic tests, medical problems and medication needs and response to medications in their patients

Patient Care Responsibilities: The student will evaluate patients, retrieve historical data, participate in assessment and treatment planning, and communicate with family members regarding the care of the patient

Call Schedule of the Student: None

Procedures to be Learned by the Student: Interviewing

Percentage of Time Student will Participate in Ambulatory Setting: none

What Students Should do to Prepare for the Rotation:

- Be familiar with the major diagnostic categories in DSM-IV
- Be familiar with the different classes of medications that are used in psychiatry

Conference/Lecture/Small Group Sessions: There are no standardized lectures for this rotation.

Course Hours Weekly Summary:

40	Inpatient
40	Total

Content Theme Integration: Not Stated

Recommended Reading: Readings in journals and/or textbooks will be assigned to each medical student, and these will be discussed with the preceptor.

Official Grading Policy: The student will receive a grade of Honors, Pass or Fail. The student's final grade will be submitted on the standard UC Irvine elective form. The student will be evaluated by attendings and residents in the areas of interest, participation, completion of work undertaken, and quality of understanding, knowledgebase, professionalism. If the student fails the elective a grade of "F" will be permanently recorded on his/her transcript. The student can repeat the course for a second grade, however, the "F" will not be removed from the transcript.