

Mercer University School of Medicine
Medical Student Competencies of the Educational Program for the M.D. Degree

Executive Committee Approval August 9, 2005

The following list of competencies serve as the institutional learning objectives for the M.D. degree program at Mercer University School of Medicine. These competencies are organized around the competency domain framework of the Accreditation Council for Graduate Medical Education, and reflect the knowledge, skills, behaviors, and attitudes expected of MUSM graduates.

The student graduating with a Doctor of Medicine degree from MUSM will be prepared for entry into the profession of medicine. Demonstration of the following competencies will provide evidence of readiness to enter residency training:

I. PATIENT CARE

Students must be able to participate in the provision of family-centered patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health. Students are expected to:

1. demonstrate caring and respectful behaviors when interacting with patients and their families.
2. demonstrate consideration of patients' privacy, dignity and psychological needs.
3. obtain an appropriate medical history accurately and efficiently.
4. perform an appropriate physical examination accurately, efficiently and respectfully.
5. identify the extent of evaluation needed, appropriate to the patient presentation.
6. perform bedside clinical and laboratory diagnostic procedures from a core skills list defined by the faculty.
7. interpret results of common laboratory studies.
8. use information technology to support patient care decisions and patient education.
9. recognize personal limitations and biases and seek consultation/help when appropriate.
10. develop patient management plans for common medical problems.
11. recognize the importance of relieving pain and suffering in patients and demonstrate knowledge of appropriate means to relieve pain and suffering.
12. recognize life-threatening emergencies and know appropriate initial intervention.
13. demonstrate effective patient education/counseling skills.
14. provide health care services aimed at disease prevention and health promotion.
15. collaborate with health care professionals, including those from other disciplines, to provide patient-focused care.

II. MEDICAL KNOWLEDGE

Students must demonstrate knowledge about established and evolving biomedical, clinical, and cognate (epidemiological and social-behavioral) sciences and the application of this knowledge to patient care. Students are expected to:

1. demonstrate an investigatory and analytic thinking method that approaches clinical problems in a logical, efficient, and evidence-based manner.
2. know the normal structure and function of the body (as an intact organism) and of each of its major organ systems, across the life span.
3. know the mechanisms important in maintaining homeostasis.
4. know the various causes (e.g. genetic, developmental, microbiologic, autoimmune, neoplastic, degenerative, traumatic, behavioral) of illnesses and the ways in which they affect the body (pathogenesis).
5. know the altered structure and function (pathology and pathophysiology) of the body and its major organ systems as observed in various diseases and conditions.
6. utilize the scientific method in diagnosing diseases or conditions and in determining the efficacy of traditional and nontraditional therapies.
7. know the bio-psychosocial determinants of health and illness.
8. know the epidemiology of common diseases within a defined population, and the approaches useful in reducing the incidence and prevalence of those diseases.
9. know the principles of pharmacology, therapeutics, and therapeutic decision-making.
10. know the principles of bioethics.
11. know the natural history, clinical presentation, diagnostic findings, treatment, management strategies and prognosis for common medical problems.
12. know the scientific principles underlying laboratory tests, radiological and other investigative studies.
13. know the principles of health promotion and disease prevention.

III. PRACTICE-BASED LEARNING AND IMPROVEMENT

Students must be able to investigate and evaluate their patient care practices, appraise and assimilate scientific evidence, and improve their patient care practices. These relate to the areas of lifelong learning, self-directed learning, critical thinking, evidence-based practice, quality improvement and informatics. Students are expected to:

1. analyze clinical experiences and systematically improve care.

2. understand and apply the concept that problems are opportunities for change and for the advancement of knowledge.
3. locate, appraise, assimilate, and apply evidence from scientific studies related to patients' health problems.
4. demonstrate knowledge of study designs and statistical methods and the application of this knowledge to the appraisal of clinical studies.
5. use information technology to manage information, access on-line medical information, and support their own educational endeavors.
6. demonstrate a commitment to the teaching and learning of students and other health care professionals.
7. utilize clinical and scientific information in the continuous process of determining priorities and care decisions for patients.
8. demonstrate consistently the skills of self-directed learning and progressive professional development .

IV. INTERPERSONAL AND COMMUNICATION SKILLS

Students must be able to demonstrate interpersonal and communication skills with patients, their patients' families, and professional associates. Students are expected to:

1. create and sustain therapeutic and ethical relationships with patients based on mutual respect and trust.
2. demonstrate (or use) effective listening skills.
3. provide information using effective nonverbal, oral and writing skills with patients, families, colleagues and other members of the health care team.
4. work effectively with others as a member or leader of a health care team or other professional group.
5. incorporate patient preference and patient autonomy into patient care plans.
6. teach and present effectively.

V. PROFESSIONALISM

Students must demonstrate professional behavior, adherence to ethical principles, and sensitivity to a diverse patient population. Students are expected to:

1. demonstrate respect, compassion, integrity and altruism when responding to the needs of patients and society.

2. demonstrate accountability to patients, society, and the profession.
3. demonstrate a commitment to excellence and on-going professional development.
4. demonstrate personal integrity, reliability, honesty, and self-discipline.
5. demonstrate the capacity to take responsibility for their own actions, including errors, recognition and acceptance of limitations of one's knowledge and clinical skills, and recognition of the need for supervision and self-assessment.
6. project a professional image in manner, dress, grooming, and interpersonal relationships consistent with the medical profession's contemporary standards in the community.
7. demonstrate respectful, appropriate social interaction and interpersonal behaviors with peers, staff, faculty, patients, and all members of society at all times.
8. be a good citizen of the community and society.
9. demonstrate comportment consistent with the role of physicians in society, including those behaviors required to obtain and maintain medical licensure.
10. mentor others in professional behavior (i.e. serve as a role model and teacher).
11. recognize personal limitations that may affect patient care and professional behavior, including but not limited to medical conditions and substance abuse.
12. demonstrate a commitment to ethical principles related to provision or withholding of clinical care, confidentiality of patient information, informed consent, and business practices.
13. recognize ethical dilemmas and identify sources of appropriate consultation (e.g. hospital ethics committee).
14. describe the threats to medical professionalism posed by the conflicts of interest inherent in various financial and organizational arrangements for the practice of medicine.
15. accept that the patient is a person with important values, goals, and concerns, who lives in a family/community context; and that these factors have a significant effect on the disease process and treatment.
16. demonstrate tolerance and consideration for the concerns and opinions of others.
17. recognize the effect characteristics such as culture, age, gender, and disability have on patient care, preferences/perceptions and outcomes.

VI. SYSTEMS-BASED PRACTICE

Students must demonstrate an awareness of and responsiveness to the larger context and system of health care and the ability to effectively call on system resources to provide care that is of optimal value. Students are expected to:

1. operate effectively within health care delivery systems by understanding such issues as financing, quality of care, access and information management systems.
2. demonstrate an understanding of how their patient care and other professional practices affect other health care professionals, the health care organization, and the larger society and how these elements of the system affect their own practice.
3. differentiate among types of medical practice and delivery systems, including methods of controlling health care costs and allocating resources.
4. identify cost-effective health care and resource allocation that do not compromise quality of care.
5. advocate for quality patient care.
6. provide assistance to patients as they navigate through available community resources including physician, other medical and non-medical community resources.
7. demonstrate the ability to help the patient and family navigate through end- of- life issues such as appropriate use of palliative care, hospice, durable power of attorney for health care, and living will.
8. identify community health care needs, identify community resources, and develop community-based strategies that decrease risks for disease or injury and promote wellness.
9. work in interdisciplinary teams with other medical and non-medical service providers.
10. analyze health care outcomes and barriers to intended outcomes in the context of health care delivery systems.
11. demonstrate understanding of physicians' responsibilities in reporting events such as notifiable diseases, deaths, births, child abuse, and adverse drug reactions.
12. identify physicians' roles and responsibilities in the identification and management of events related to bioterrorism and emergency preparedness.