



Psychiatry Core Clerkship

OM7194

Rotation Syllabus

CLASS OF	2027
DATES	2025-2026
CREDIT HOURS	4.0
CONTACT HOURS	160
ASSESSMENT TOOLS	Clinical Performance - Preceptor Evaluation(s) Professionalism Cognitive Performance - COMAT
TRANSCRIPT CATEGORIES	Honors/Pass/Fail
LOCATION	Rotation Site
CLERKSHIP DIRECTOR	Harry Silsby, MD
COURSE COORDINATOR	Whitney Cano

Course Description

The Psychiatry core clerkship is a four (4) week experience served in inpatient and ambulatory settings with concentrations varying by RAC assignment. The clerkship affords students the opportunity to gain experience in the practice of behavioral medicine. Performing a comprehensive patient behavioral health interview leading to a diagnosis and management plan is a core competency of this clerkship. Students will work with patients presenting with symptoms of depression, bipolar disorder, psychoses, and other behavioral disorders. Management of patients dealing with substance abuse and dependency is a frequent challenge in the clinical practice of psychiatry. Each practice may have a unique profile of patients that will offer greater insight into a particular entity.

Course Goals

The overall goal is to offer students a common set of learning experiences that will include:

- An orientation to psychiatry and its value to the care of patients.
- Repeated opportunities to both witness and conduct a competent basic psychiatric evaluation including a mental status examination.
- The opportunity to successfully complete a risk assessment for suicide and homicidal ideation/plan by learning to ask patients about these issues and then formulating a plan to reduce risk.
- The ability to construct a reasonable differential diagnosis for common psychiatric problems such as psychosis, mood disorders, and anxiety disorders.
- Construction of a reasonable psychiatric treatment plan which demonstrates the basic psychopharmacologic skills including the indications for use and mechanism of action of psychotropic medications.
- An opportunity to learn about effective treatments such as supportive therapy and cognitive-behavioral therapy.
- Exposure to somatic therapies including ECT would be desirable during the rotation if feasible.

Course Objectives

Objective	AOA Core Competencies	Programmatic Level Educational Objectives
1. Formulate a prioritized list of the 8-10 most common differential diagnoses for each of the problems/diseases specified by combining clinical information and outside resources effectively (literature search, readings, etc.).	3	1, 4, 5
2. Formulate a cost-effective diagnostic approach consistent with the prioritized differential diagnoses.	3	1, 4, 7
3. Define therapies for common disease processes encountered in Psychiatry.	2	1
4. List common risks vs. benefits to be considered when selecting treatments and management therapies	3	1
5. Perform a thorough history and physical exam.	3	1, 3, 4
6. Present cases concisely, emphasizing the pertinent elements of the historical and physical findings, labs, treatments, and the biopsychosocial explanations for each problem	3	1, 4
7. Recognize urgent/emergent situations and alert appropriate health care providers	3	1, 4, 6
8. Demonstrate professionalism, compassion, and empathy when communicating with patients and	5	3, 4

healthcare team members		
9. Demonstrate effective communication in the patient's chart by creating a comprehensive and pertinent legal document	3	1, 3, 4
10. Demonstrate a desire to learn by asking questions to faculty, fellow students, and team members	3	1, 4, 6
11. Exhibit a capable and professional demeanor by concern for patients and in interactions with team members.	5	1, 4
12. Be able to use the biopsychosocial model of illness which is applicable to the care of patients.	2	1
13. Describe the major psychiatric diagnoses as defined in the DSM-IV-TR and DSM-V in the context of epidemiology, pathophysiology, risk factors, substance-related contributions, clinical presentation and prognosis	2	1
14. Be able to conduct a basic psychiatric interview, including skills in recognizing and categorizing psychological and behavioral phenomena as described in the mental status exam for common psychiatric disorder.	2	1, 4

Required Resources and Equipment

Textbooks:

- Introductory Textbook of Psychiatry, Seventh Edition by Andreasen, N. C. and Black D. W.
- Kaplan and Sadock's Pocket Handbook of Clinical Psychiatry, 8th Ed. by Virginia A. Sadock

Readings:

Required reading will be assigned during the clerkship.

Your required text is *Introductory Textbook of Psychiatry, Seventh Edition*, by Andreasen, N. C. and Black D. W., 2021, Washington, DC: American Psychiatric Publishing

Reading this textbook will better prepare you for the Psychiatry Clerkship Shelf Examination.

Student Responsibilities Regarding Patient Supervision:

All medical activities involving medical students must be supervised by a licensed physician responsible for the care of the patient. The supervising physician has the responsibility of determining the level of supervision needed by the student.

Equipment:

Equipment will be recommended at the discretion of your site attending. You may wear scrubs during the rotation if this is approved by the Psychiatry Department, but you must also wear your white coat and Burrell College of Osteopathic Medicine identification badge.

Psychiatry SOAP Note:

Subjective

- a) Chief Complaint – The primary reason the patient is seeking psychiatric care
- b) HPI – Details about the onset, duration, and progression of the current mental health condition
- c) Symptoms – Description of the patient’s symptoms, including their intensity, frequency, and impact on daily life
- d) Psychiatric Hx – Information on any previous psychiatric diagnoses, treatments, and hospitalizations
- e) Medical Hx – Relevant medical conditions, surgeries, or injuries that may impact the patient’s mental health
- f) Meds – Current medications the patient is taking, including dosage and frequency
- g) Substance Use – Information on the patient’s use of alcohol, tobacco, and other substances
- h) Social Hx – Information on the patient’s living situation, employment, relationships, and support system
- i) Patient Goals – The patient’s goals and expectations from psychiatric treatment
- j) Other Relevant Info – Any other information provided by the patient that may be relevant to their treatment

Objective

- a) MSE – Document the patient’s appearance, behavior, speech, mood, affect, thought process, thought content, cognition, insight, and judgement
- b) Vitals – Record the patient’s vital signs if relevant to the session
- c) PE Findings – Document any relevant physical examination findings
- d) Behavioral Observations – Note any specific behaviors observed during the session
- e) Diagnostic Tests – Include results of any diagnostic tests relevant to the psychiatric evaluation, such as lab results or imaging reports

Assessment

- a) Dx – Provide a clinical diagnosis based on the subjective and objective findings
- b) Clinical Impression – Include your clinical interpretation of the patient’s condition
- c) Functional Limitations – Document the impact of the patient’s condition on their daily activities and functional abilities
- d) Patient Progress – Comment on the patient’s progress since the last visit, if applicable
- e) Prognosis – Provide an outlook on the patient’s recovery based on their condition and response to treatment
- f) Goals – Set specific, measurable, achievable, relevant, and time-bound (SMART) goals for the patient’s treatment

Plan

- a) Treatment Plan – Specific interventions that will be implemented to address the patient’s condition
- b) Meds – Prescribe or adjust medications as needed, including dosage and frequency
- c) Therapeutic Interventions – Include any therapeutic interventions such as psychotherapy, counseling, or group therapy
- d) Patient Education – Information and instructions provided to the patient to help them manage their condition and understand their treatment plan
- e) Lifestyle Modifications – Recommendations for the lifestyle changes that may benefit the patient’s mental health
- f) Follow-Up – The plan for subsequent visits, including the frequency and duration of follow-up appointments

Academic Participation

Student responsibilities:

- **NEJM Healer:** The medical student will utilize the New England Journal Of Medicine Healer platform to complete the required modules during the clerkship. **Completion of 4 case modules, as assigned, is required to be completed by 11:59 pm on the last Wednesday of the clerkship.**
- **Reading:** Your required text is *Introductory Textbook of Psychiatry* by Andreasen, N. C. and Black D. W. Read about the diseases and procedures you see each day. In addition to this text, you may have suggested reading given to you by your attending. You should discuss these topics with the attending at your site.
- **Patient Encounter and Procedure Logs:** The Patient Encounter and Procedure Log for the Psychiatry Rotation is found in the New Innovations Software System. On a daily basis, the student should enter data from their clinical shift into the log. All logged patient encounters should include the following basic information: the date the patient was seen, the patient's age, and patient type if applicable. Students must submit their completed Patient Encounter and Procedure Log electronically through New Innovations. **This case log must be entered into the New Innovations no later than 11:59 pm on the last Wednesday of each rotation.**
 - Medical students complete their logs to assess the expected scope and variety of patients and/or conditions and to assess their exposure to specialty diagnoses and procedures.
- **Lecturio Quiz:** The medical student is required to take and pass, **with a 70% or higher**, the Lecturio Quiz associated with the rotation **by 11:59 pm the last Wednesday of the clerkship.**
- **Mid-Rotation Evaluation by Preceptor:** The medical student is required to meet with their preceptor and have them complete a mid-point evaluation of their performance, for each rotation. This evaluation must be uploaded into Leo for Clerkship Directors to review **by 11:59 pm the second Sunday of each rotation.**
- **Clerkship Evaluations:** The students must complete clerkship evaluation(s) in New Innovations regarding their rotation experience. Student feedback received from the evaluations will assist the Office of Clinical Education in the overall assessment and improvement of clinical rotations and the implementation of faculty development programs. The evaluations must be completed **by 11:59 pm the last Wednesday of each rotation.**
- **History and Physical Exam Review:** A major portion of your time will be devoted to conducting patient histories and physical exams. This is a tremendous opportunity to learn how to interact, gather information, diagnose the disease, and treat patients.

Failure to complete any of the pre-requisites for COMAT eligibility, in a timely manner, will result in disqualification from Honors and may result in a finding of non-professional conduct and may lead to a Corrective Action.

Assessment and Grading

Elements of Core Clerkship Grading

Each core clerkship will have three elements contributing to the final grade and each element must be individually passed to Pass the clerkship:

- Clinical Performance-Preceptor Evaluation(s)
- Professionalism
- Cognitive Performance-COMAT

Clinical Performance-Preceptor Evaluation(s) will be graded by the supervising preceptor. This assessment (see Student Assessment Forms in the Clerkship Manual) includes eight (8) questions designed to assess academic skills and core competency acquisition. Students are expected to achieve a score of 3, 4, or 5 for each domain. An average score of at least 2.85 on all observed skills and competencies must be obtained to pass this element.

Professionalism is a graded component in every clerkship evaluation. Students must receive a minimum score of three (3) on the preceptor's assessment of Professionalism (Question 5) to pass this element.

Cognitive (COMAT) Performance will be measured by the end-of-rotation COMAT exam. The NBOME provides a conversion table to obtain a percentile rank from the student's raw score. A minimum raw score of 85 is needed to pass this element.

Eligibility to sit for COMAT

The students must complete the following pre-requisites to be eligible to sit for COMAT:

- a) The students must pass, with at least 70%, the associated specialty Quiz in Lecturio. This test is timed. In case of failure the student will have a chance to retake the quiz. The student will not be penalized for failing the quiz for the first time. The passing grade for the quiz must be received **by 11:59 PM the last Wednesday of the clerkship**. If a student fails the first attempt, one additional attempt will be granted before the deadline.
- b) Completion of all case modules is required to sit for COMAT. The deadline to complete the cases is **11:59 PM the last Wednesday of the clerkship**.
- c) Students must submit their completed Patient Encounter and Procedure Log electronically through New Innovations **by 11:59 PM, the last Wednesday of each rotation**.
- d) Students must submit the completed mid-point evaluation into the learning management system by **11:59 PM the second Sunday of each rotation**. This assessment includes eight (8) questions from the Clinical Performance evaluation, designed to assess academic skills and core competency acquisition. The purpose of this evaluation is for the student to receive feedback from the preceptor at the mid-point of the rotation, so they may improve over the course of the second half of the rotation. The student is responsible for obtaining this evaluation from their preceptor at the end of week two of all clinical rotations, and it must be uploaded into the learning management system (LEO) for the Clerkship Directors to review.

A sample form is located at the end of the Student Clerkship Manual.

- e) The students must complete clerkship evaluation(s) in New Innovations. Students are required to complete evaluations in New Innovations regarding their rotation experience. Student feedback received from the evaluations will assist the Office of Clinical Education in the overall assessment and improvement of clinical rotations and the implementation of faculty development programs. An annual summary of student comments will be reported **anonymously** to preceptors and training sites to assist them in making improvements to the rotations that they provide. **The evaluations must be completed by 11:59 PM on the last Wednesday of each rotation.**

Failure to complete any of the pre-requisites for COMAT eligibility in a timely manner will result in disqualification from Honors and may result in a finding of non-professional conduct and may lead to a Corrective Action.

Failure of a Core Clerkship:

Failure of two or more elements of rotation grading (Evaluation, COMAT, Professionalism), including two failures of the same element, above will result in a failure of a clerkship and the student will be referred to Student Performance Committee (SPC) with recommendations from Clerkship Director.

Failure of the Professionalism element may result in a Professionalism Corrective Action, or Failure of a Clerkship, as determined by the Clerkship Director.

Students who fail a clerkship are ineligible for an Honors (H) designation in that specialty.

Corrective Action

Failure of one element of rotation grading generally does not constitute a failure of the entire clerkship. When a student does not meet expectations for a clerkship/course as defined in clerkship syllabi, the College may require a student to engage in corrective action to remedy the deficient academic grading requirements. The opportunity to engage in corrective action for the one element failed is at the discretion of the clerkship director of the specialty. This may occur at the end of a clerkship or in the middle of a clerkship/course.

If a student successfully completes the corrective action process, as determined by the Clerkship Director, the student will receive credit for the deficient academic grading requirement(s) and be eligible for a change in rotation grade [from I (Incomplete) to P]. If all assignments within the corrective action process are not completed successfully by the deadline the student will receive a failed grade (F) for the clerkship and will be referred to SPC for Failure of a Clerkship. Students who are provided a corrective action opportunity are ineligible for an Honors (H) designation in that specialty.

Attainment of Honors

Attainment of Honors (H) for each core rotation will be limited to the highest performing 10% of the class based on cumulative points earned for the rotation. Honors for all core rotations will be determined at the end of the academic year when all final assessments have been recorded. The Clerkship Directors will identify the top 10 % of students who will receive the honors designation.

All Year 3 requirements must be successfully completed to advance to Year 4. The need to repeat any failed clinical rotation(s) may result in a delay in graduation.

Course Communication

Students are expected to monitor their Burrell College of Osteopathic Medicine email and are responsible for all communications sent to their official email address. **Students are also expected to monitor E-mail, Leo, New Innovations, and other applicable platforms.**

Clerkship Director
Harry Silsby, MD
harry.silsby@burrell.edu

Course Coordinator
Whitney Cano
wcano@burrell.edu
(575)674-2348

Sathish Ramalingam, DO	Albuquerque Regional Assistant Dean	sathish.ramalingam@bcomnm.org
Thomas Wulf, MD	Eastern NM Regional Assistant Dean	thomas.wulf@burrell.edu
	El Paso Regional Assistant Dean	
Bradley Scoggins, DO	Four Corners Regional Assistant Dean	bradley.scoggins@burrell.edu
William Baker, DO	Las Cruces Regional Assistant Dean	wbaker@burrell.edu
	Palm Beach, FL Regional Assistant Dean	
	Southwest, FL Regional Assistant Dean	
Amit Sharma, MD	Space Coast, FL RAC Regional Assistant Dean	amit.sharma@bcomnm.org
Jerald Moser, MD	Tucson Regional Assistant Dean	jmoser@burrell.edu

Policies and Procedures

Information regarding course grades, attendance (including excused absences), exam procedures, remediation, appeals, acceptable use of technology, honor code, professional attire, and related policies are stated in the current Student Handbook. Policies regarding non-discrimination, accommodations for disabilities, and Title IX are also referenced within the Student Handbook. All policies and procedures stated therein will apply during this course.

The [Student Handbook](#) may be accessed through the Burrell College of Osteopathic Medicine website.

For information regarding emergency or inclement weather, refer to the [Campus Safety and Security page](#) on the Burrell College of Osteopathic Medicine website.

For information regarding Clerkship Rotations, refer back to the [Student Clerkship Manual](#) on the Burrell College of Osteopathic Medicine Website.

Statement Regarding Reservation of Power

The curriculum, assignments, schedule, syllabus, and any information contained within the course can be altered or changed at any time. In the event of any alterations during the course, students will be informed officially through their Burrell College of Osteopathic Medicine email. It is the student's responsibility to obtain the changes or notices even if absent from class.

Appendix

A. Programmatic Level Educational Objectives

Graduates of the Burrell College of Osteopathic Medicine Doctor of Osteopathic Medicine degree program will be able to:

1. Integrate knowledge and skills acquired from the biomedical, clinical, social, and behavioral sciences to provide patient care in a supervised setting.
2. Demonstrate competence in the skills of osteopathic manipulative treatment and the application of osteopathic philosophy in patient care.
3. Demonstrate professionalism, characterized by honesty, integrity, ethical behavior, empathy, and responsibility.
4. Communicate effectively with patients, families, faculty, peers, and other members of the healthcare team.
5. Critically appraise, evaluate, and apply scientific evidence to inform patient care and research.
6. Demonstrate awareness of the roles and interactions of professionals within the healthcare system and identify resources to optimize patient care at the individual and community levels.
7. Identify the specific healthcare needs of diverse populations and the ways in which the medical community responds.

B. AOA Osteopathic Core Competencies

1. Osteopathic Philosophy and Osteopathic Manipulative Medicine
2. Medical Knowledge
3. Patient Care
4. Interpersonal and Communication Skills
5. Professionalism
6. Practice-Based Learning and Improvement
7. Systems-Based Practice

