

Ways to be a Great Medical Student

Chief Residents for Pediatrics, Psychiatry, Surgery, Internal Medicine, and Obstetrics/Gynecology share their top ten ways to be a great medical student. This information was first presented at the 2007-08 Third Year Orientation.

Pediatrics

- 1) Remember that even if you don't specialize in Pediatrics you need to know how to treat children.
- 2) Children are NOT small adults (diseases are different, physiology is different, med dosing is different, etc.).
- 3) Get experience with children of all ages.
- 4) Useful references: Nelson Textbook of Pediatrics, Oski's Textbook of Pediatrics, The Harriet Lane Handbook, Red Book (Infectious Disease reference), Zitelli Atlas of Physical Diagnosis, Smith's Recognizable Patterns of Human Malformation.
- 5) Never underestimate Anticipatory Guidance (remember the saying "you can't teach an old dog new tricks?" it applies to people too) teach them while they are young!
- 6) Learn how to use a growth chart (and do it for EVERY CHILD)
- 7) Learn developmental milestones
- 8) Don't be afraid to examine the children!
- 9) Be patient (a sick child is one of the most difficult situations families will ever go through, forgive them if they make it a little difficult on you)
- 10) Have fun!!!

Psychiatry

- 1) Be enthusiastic! Your smiling face and willingness to help will get you far!
- 2) Spend time each day with your patients. You will have more time than the residents and attendings to spend getting to know your patients. That means they may tell you things they don't tell us!
- 3) Learn about your patients. Be very familiar with their charts and their histories.
- 4) Be organized. Keep your own note card/paper full of the details of your patients. This should include their name, MRN, psychiatric and medical diagnosis (Axis I-V), a sentence or two about what brought them in, their outpatient psychiatrist, past medications tried, current meds, committed or voluntary status, any tests/labs, and any pending treatments/tests.
- 5) Every morning, you should read the nursing notes on your patient, write down their vital signs/eats/sleep, print out any labs/tests done on your patients overnight (including FSBS), and have some idea about the plan for the day. You do not need to pre-round on patients on *most* floors. You will have time to see them in the afternoon.
- 6) Write or type legible, concise, but informative notes. Most people use the SOAP format. Be sure to include vitals, labs, current meds, and some type of assessment/plan.
- 7) Make your assessment/plan informative. It will be a useful note and you will learn more if you are able to say WHY we are making the med changes documented in the plan.
- 8) Be around and available on call so that no one has to track you down to have you join them on a consult. You can page the SAR at 5pm or go directly to the call rooms above the CHM ER. (No need to page the SAR before 5pm.) On weekends, we will assume you are rounding and will join us for call when you are finished rounding.
- 9) Be inquisitive. Ask questions of your residents and attendings. They want to teach you but sometimes need a little prompting.

- 10) Take the initiative to practice interviewing patients when on call or on rounds. This will be a big help for your OSCEs (oskies).

Surgery

- 1) Show your enthusiasm.
- 2) Remember it is not about getting your checklist finished, it's about saving lives.
- 3) Every minor detail and mundane procedure will someday be important.
- 4) Come everyday with the attitude of wanting to learn as much as possible, not just one thing. Again, it is not just a checklist.
- 5) Repetition is not redundant; no two cases are the same.
- 6) Take ownership of your patients, follow their progress, present them, and manage them.
- 7) Study – be prepared for the next day especially if you know what you are doing.
- 8) Be a part of the team. Help out whenever possible; every little bit helps.
- 9) Remember you are paying for your education, so make the best of your time. Ask questions Look up things you have seen.
- 10) Focus, be attentive to all that is said and don't drift off once you are done presenting your patient.

Internal Medicine

- 1) Be on time, be available, be professional, and be excited.
- 2) Know more details about your patients than anyone else.
- 3) Everyday read in Harrison's or Cecil's about the diseases your patients have. Understand the disease well enough that you could teach it to another medical student.
- 4) Practice your presentations. Mastering patient presentations is your primary goal.
- 5) Practical physical exam skills and have a resident or attending observe you in action.
- 6) Bring in relevant journal articles related to questions posed on rounds.
- 7) Read, read, read.
- 8) Have your progress notes completed and signed by a resident prior to rounds. This facilitates discussion of the assessment and plan with your resident.
- 9) Ask your team, "Is there anything I can do to help?" at least once a day. Try to problem solve on your own before asking for help.
- 10) Take ownership of your patients.

Obstetrics/ Gynecology

- 1) Treat patients as if they are your own...because they are.
- 2) Be conscientious and kind to even the most difficult patients...they are typically ill and under a great deal of stress.
- 3) Learn from your nurses and treat them with respect.
- 4) Carry a notebook for clinical pearls.
- 5) Do not try to make your fellow students or residents look bad...in fact you will get farther by helping to make them look good.
- 6) Do not give medical advice you are not sure about. Remember, you are thought of as an expert until proven otherwise.
- 7) Read on your patient's disease process.
- 8) Do not just focus on the present clinical presentation; instead try to figure out the timeline of the clinical presentation.
- 9) Introduce yourself in any clinical setting to the patient and to staff nurses, techs, etc. For example, "Hi, I'm Joe Smith, a 3rd year Med Student on the Neurology service."
- 10) Be enthusiastic and enjoy 3rd year...it's a blast!