



## **International Medical Rotation Curriculum – India 2018**

### **Goals:**

1. Provide exposure to diseases not generally encountered during US medical training
2. Develop medical skills with less reliance on modern technology
3. Provide a cross-cultural medical experience beyond what is possible in the US
4. Allow students and residents to develop and nourish their sense of altruism
5. Expose physicians, early in their career to the possibilities of working in the developing world and/or underserved populations
6. Understand the interaction between health, social, cultural, and environmental issues

### **Objectives Based on Competencies**

Consistent with the overriding framework of the ACGME (6) competencies, the educational objectives are followed, in bold italics, by the specific competencies they promote. Competencies are abbreviated as follows: Patient Care (*PC*), Medical Knowledge (*MK*), Practice Based Learning and Improvement (*PLBI*), Interpersonal and Communication Skills (*IPCS*), Professionalism (*P*), Systems Based Practice (*SBP*)

### **By the end of the rotation with student or resident will:**

- Demonstrate the ability to learn local customs and cultural mores (*IPCS, P*)
- Behave in a culturally appropriate manner as a visiting foreigner (*IPCS, P*)
- Provide culturally sensitive medical care (*PLBI, IPCS, P, SBP*)
- Function as a team member in a large mobile medical team in a challenging environment (*PLBI, IPCS, P, SBP*)
- Work with healthcare providers from different cultures and perspectives (*PLBI, IPCS, P, SBP*)
- Develop and improve clinical diagnosis based on history and physical (*PC, MK*)
- Develop and expand the differential diagnosis of outpatient complaints (*PC, MK*)
- Improved understanding of the effect of socioeconomic conditions on health and disease (*PC, MK, SBP*)
- Modify treatment plans to available resources (*PC, MK, SBP*)

### **Instructional Strategy:**

1. A team of 20 to 30 people from US medical schools and residencies from the US will travel to rural India. They will travel together and will be overseen by The Himalayan Health Exchange. The team will consist of 3rd and 4th year medical students, residents, non-medical support personnel, and physician instructors.
2. The team will help bring medical/dental care to several villages located in the lower and outer Himalayas. Campsites are located in the north Indian state of Himachal Pradesh. During the one month expedition our team will provide care to approximately 2400 patients. This camp is being organized at the request of the department of health, Himachal Pradesh Government. Local nurses and ancillary staff will also participate in providing patient care. In addition, the team will work with local physicians who will also provide oversight and instruction.
3. Medical students will see patients together with residents and attendings and independently based on each student's level of education, experience, and scope of practice. Oversight is provided by an appointed US trained physician(s) in conjunction with local physicians.
4. At the end of every clinical day the group will meet for a formal 1 hour teaching time. Each student and resident will be required to teach one of the sessions. Some topics are specific to Himachal Pradesh, Himalayan Mountain region, or India and other topics are more general. Topics include:

1. Travelers' Diarrhea
2. Wilderness Medicine Overview & Altitude Sickness
3. Rheumatic Heart Disease Overview
4. Pulmonary & Extrapulmonary TB in India
5. The Diabetes Epidemic in Northern India
6. HIV and STDs in Northern India
7. Gastroenteritis & Peptic Ulcer Disease Overviews
8. Arthritis & the Evaluation and Treatment of Back & Hip Pain
9. Principal Threats to the Health of Children in Northern India
10. Programs for Children's Health & Handicapped Children in HP [or Ladakh]
11. The Cultural Context of Depression, Anxiety, and Pain in the Himalayas
12. Basics of Local Diet & the Nutritional Status of Northern India
13. Basics of Ayurvedic Medicine
14. The Conquest of Leprosy in India
15. Public Health Consequences of Untreated Ear Disease
16. Environmental Eye Conditions in Northern India

**Evaluation Method:**

1. Students and residents will be evaluated based on the following:
  - Ability to adapt to a foreign environment
  - Ability to work as a team member
  - Medical abilities, knowledge, and judgment
2. Each student and resident will be expected to provide any necessary evaluation forms to the lead attending physician for completion.