



UNIVERSITY | MEDICAL
of NICOSIA | SCHOOL

MED-508
Paediatrics
Course/ Clinical Rotation Handbook
2023-2024

Year 5
Doctor of Medicine (MD) Programme

University of Nicosia Medical School Academic and Administrative Contacts:

Chair of Clinical Education:

Professor Joseph Joseph

E-mail: joseph.j@unic.ac.cy

Year 5 Lead:

Dr Aris Tourvas

E-mail: tourvas.a@unic.ac.cy

Paediatrics Curriculum Lead:

Professor Paola Nicolaides

E-mail: nicolaides.p@unic.ac.cy

Course Lead of MED-508 Paediatrics:

Dr Nicolas Nicolaou

E-mail: nic.nicolaou@googlemail.com

Senior Clinical Placements Administrator:

Ms Katerina Tsiamenzi

E-mail: tsiamenzi.k@unic.ac.cy

Limassol General Hospital Academic and Administrative Contacts:

Academic Lead at Limassol General Hospital:

Dr Christos Nicolaou

E-mail: c.nikolaou@shso.org.cy

Clinical Lead at Limassol General Hospital:

Dr Maria Agathocleous

E-mail: m.c.agathcleous@gmail.com

Deputy Clinical Lead at Limassol General Hospital

Dr Eleftheria Konstantoulaki

E-mail: eleftheria.konstantoulaki@gmail.com

Administrative Contact:

Ms Helen Sophroniou - LGH Senior Site Administrator

E-mail: sophroniou.h@unic.ac.cy

Ms Aristeia Bati - LGH Site Administrator

E-mail: bati.a@unic.ac.cy

Paphos General Hospital Academic and Administrative Contacts:

Academic Lead at Paphos General Hospital:

Dr Joseph Moutiris

E-mail: moutiris.j@unic.ac.cy

Clinical Lead at Paphos General Hospital:

Dr Artemis Polikarpou

E-mail: artemis-pol@hotmail.com

Administrative Contact:

Ms Stella Naziri - PGH Senior Site Administrator

E-mail: naziri.s@unic.ac.cy

Hirslanden Hospital Group Academic and Administrative Contacts:

Academic Leads at Klinik Hirslanden:

Prof. Dr. med. Stefan Russmann

E-mail: stefan.russmann@hirslanden.ch

KD Dr. med. Tanja Volm

E-mail: t.volm@himed.ch

Clinical Lead at Klinik Hirslanden:

Dr. med. Katrin Fasnacht

E-mail: katrin.fasnacht@hin.ch

Administrative Contact:

Ms Barbara Etzensberger

E-mail: barbara.etzensberger@hirslanden.ch

Ms Isabelle Heer

E-mail: isabelle.heer@hirslanden.ch

Lewisham & Greenwich NHS Trust Academic and Administrative Contacts:

Academic Lead at Lewisham & Greenwich NHS Trust:

Dr George Dervenoulas

E-mail: georgios.dervenoulas@nhs.net

Clinical Lead at Lewisham & Greenwich NHS Trust:

Name: Dr Sophie Keers

E-mail: Sophie.keers@nhs.net

Site Administrator: Nikola Hewitt

E-mail: nikola.hewitt@nhs.net

Site Administrator: Carly Raven

E-mail: carly.raven@nhs.net

Site Administrator: Suzanne Faulkner

E-mail: suzanne.faulkner@nhs.net

Hellenic Healthcare Group Academic and Administrative Contacts:

Academic Lead at Hellenic Healthcare Group:

Name: Prof Panagiotis Skandalakis

E-mail: tskandalakis@hhg.gr

Deputy Academic Leads at Hellenic Healthcare Group:

Dr Dimitrios Karatzas

E-mail: dimitriskaratzas@hotmail.com

Dr Stergios Douvetzemis

E-mail: stergiosdouvetzemis@yahoo.gr

Clinical Lead at Hellenic Healthcare Group:

Dr. Nikolaos Spyridis

E-mail: nspyridis@hotmail.co.uk

Administrative Contact:

Ms Vickie Mastrogianni

E-mail: vicmast@yahoo.gr

Ms Angeliki Petrou

E-mail: agpetrou@mitera.gr

Course Handbook introduction by the Chair of Clinical Education

Dear Student,

Your course handbook is an invaluable resource. Reading it before starting your placement will make a huge difference to your learning experience. You will find outlines of the course, the objectives of your learning, the assessment requirements, learning resource suggestions, contact numbers and reporting structures.

You can use the learning outcomes and objective list to guide you through your learning of the subject and even to discuss with your tutors. The requirements, whether these are workplace - based assessments or tutorials, will allow smooth running of your clinical block and avoid unnecessary last-minute hardship.

The medical school has a course lead in place, with knowledge of the specific block, including its learning, revision, and assessment. And the department of clinical education ensures smooth running and delivery of the clinical training, through a number of Curriculum Leads (one for each main specialty) who work with the course leads and the local teams at the placement, to ensure the curriculum is delivered as planned.

The nature of clinical learning is such that, whilst your experiences will be comparable, it is not possible to have identical clinical exposure across all students; a case of disease X may be available today, whereas when the next student comes along it may be disease Y. It is desirable that we see all cases as far as possible but your handbook with its checklist of conditions and objectives will allow you to not fall behind and fill any gaps that may appear during your clinical exposure, and help guide your preparation for assessments.

If there are academic or administrative problems, if you need help and if you need to report anything back to your medical school, the reporting structures ensure that you should not feel even for one minute that you do not have someone to go to when needed. Please contact the team if you need any help, we are all here with our contact details available if you need us.

Please ensure that you are present and available for learning, opportunities will come when you least expect them, the amount we can learn from patients is huge and endless and therefore sitting with, talking to and examining patients is one of your strongest tools.

I hope you gain a lot of knowledge and clinical experience.

Enjoy the next few weeks!

Professor Joseph Joseph
Chair of Clinical Education

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1. Welcome

The MED-508 Paediatrics course/ clinical rotation offers students the opportunity to develop an understanding of the presentation, signs and symptoms, physical examination findings, investigations, diagnosis, treatment (medical and/or surgical as appropriate) and management plan for common paediatric diseases.

Every effort has been made to provide a structured and well organised learning experience that will ensure adequate exposure to the diagnostic and therapeutic approaches that take place in a large Academic Hospital.

On behalf of all the clinicians, nurses and administrative staff of the Paediatric department, I would like to warmly welcome you as an integral part of our team and wish you an effective and pleasant learning experience. Our education team stands ready to assist you with any questions you may have.

Kind Regards,

Dr Nicolas Nicolaou
Course Lead for MED-508 Paediatrics

2. MED-508 Paediatrics course/ Clinical rotation Course Outline

Course Code MED-508	Course Title Paediatrics	ECTS Credits 6
School Medical School	Semester Spring (Semester 10)	Prerequisites None
Type of Course Required	Field Medicine	Language of Instruction English
Level of Course Undergraduate	Year of Study 5 th	Course Lead: Dr Nicolas Nicolaou
Mode of Delivery Face-to-face	Clinical Placement in Hospitals	Co-requisites None

Objectives of the Course:

The main objectives of the last two years of the six-year medical programme are to provide students with extensive experience in the clinical environment, mainly in hospitals but also in the community, so that they can utilise their learning over the previous four years to practise their clinical, communication, diagnostic and reasoning skills on real patients, and to learn about the management of patients, from a medical, therapeutic, surgical, psychosocial and caring perspective.

In this course, students will spend five weeks working primarily with children of all ages, and their families. They will develop an understanding of the presentation, signs and symptoms, physical examination findings, investigations, diagnosis, treatment (medical, pharmacological and surgical) and management plan for common paediatric illnesses.

They will learn to recognize and manage the well and ill infant, child and adolescent, to elicit and interpret findings from history taken from a child or accompanying adult, to acquire sufficient skill to carry out a full physical examination of a child of any age, to interpret laboratory and imaging data, form a differential diagnosis and treatment plan and communicate information appropriately with the child or accompanying adult.

Learning Outcomes:

After the completion of the course the students should be able to:

1. Demonstrate active participation and effective learning.
2. Demonstrate effective history taking and information giving and perform relevant clinical examinations.
3. Formulate appropriate differential diagnoses.
4. Create a diagnostic plan (including the interpretation of the ordered tests).
5. Define the most probably diagnosis and form a management plan.
6. Recognise a patient requiring emergency care and initiate evaluation and management.
7. Directly observe/ perform clinical procedures appropriate to the stage of training/
8. Create a patient centered management plan.
9. Prescribe drugs and initiate medications (under direct supervision- prescription to be signed by the attending physician).

Detailed description of clinical learning objectives:

Clinical learning objective 1: Demonstrate active participation and effective learning.

Students should:

- Clerk as many patients as possible.
- Participate in all relevant activities (morning rounds, organized lectures and multidisciplinary meetings).
- Augment their knowledge and skills by utilizing self-directed learning and covering at a minimum the conditions indicated as A and B in the focused list of conditions as well as all the procedures/skills indicated with two asterisks (**see Focused list of conditions and procedures/skills in the Course Contents section**).

Clinical learning objective 2: Demonstrate effective history taking and information giving, and perform the relevant clinical examinations

Students should be able to perform a complete paediatric assessment including:

- Full medical history with the assistance of the parents.
- Observe the child's behavior and level of awareness
- Note the shape of the head, ears, position of eyes, body proportions, posture.
- Examine for skin lesions and identify their distribution
- Examine the cardiovascular, gastrointestinal, respiratory and neurological systems
- Examine growth and development and compare with expected values
- Calculate Apgar score
- Provide information regarding immunizations
- Provide relevant information to the parents

Clinical learning objective 3: Formulate appropriate differential diagnoses

Students should be able to form a differential diagnosis for the corresponding clinical presentations:

Paediatrics

- Acute abdominal pain in children and adolescents
- Acute respiratory distress in children
- Acute vision loss in children
- Approach to the child with a limp
- Child with acute ataxia
- Child with occult toxic exposure
- Child with palpitations
- Cough
- Cyanosis in children
- Fever
- Hypertensive emergencies and urgencies in children
- Ill-appearing infant (younger than 90 days of age)
- Infant or child with nausea and vomiting
- Neck stiffness in children
- Upper gastrointestinal bleeding in children

Clinical learning objective 4: Create a diagnostic plan (including the interpretation of the ordered tests).

Students should be able to create a diagnostic plan by choosing the investigations needed to narrow the differential diagnosis:

Radiology	Commonly ordered blood tests
Chest X ray	Full blood count Diagnosis of: anaemia, leucocytosis, leukopenia, thrombocytopenia, thrombocytosis
Abdominal X ray	INR/PT/activated partial thromboplastin Time
Abdominal ultrasound	ESR
MRI scans	Blood film
CT scans (only when the benefits outweigh the risks of radiation exposure)	CRP
Other tests	Urea, creatinine, electrolytes
Blood/Stool/Urine cultures	Blood glucose
Evoked potentials	liver biochemistry (AST,ALT, γ -GT)
Sweat test (Cystic Fibrosis)	CSF gram stain
Otoscopy	CSF count and biochemistry

Clinical learning objective 5: Define the most probable diagnosis and form a management plan.

Relevant conditions that may be encountered include:

- Child abuse
- Child psychiatry and aspects of social medicine affecting children
- Common childhood infections
- Cot deaths
- Gastro-Intestinal disease in children and adolescents
- Haematology and Oncology conditions affecting children and adolescents
- Handicapping conditions of childhood
- Heart and cardiovascular disease in children and adolescents
- Immunological, allergic and skin conditions affecting children and adolescents
- Metabolic, endocrine and growth in children and adolescents
- Musculoskeletal and joint problems affecting children and adolescents
- Neurology and development in children of all ages
- Paediatric surgery
- Respiratory conditions in children and adolescents
- Urinary tract and nephrology conditions in children and adolescents

Clinical learning objective 6: Identify a patient requiring emergency care.

Examples of such conditions include:

Paediatrics

- Acute airway obstruction
- Anaphylaxis
- Cardiopulmonary resuscitation in children
- Diabetic ketoacidosis
- Epiglottitis (acute)
- Hypoglycaemia
- Hyponatraemia
- Meningitis
- Raised intracranial pressure
- Status asthmaticus
- Status epilepticus

Clinical learning objective 7: Directly observe/perform clinical procedures appropriate to the stage of training.

Examples of procedures to be observed:

- Giving Immunizations
- Incision and Drainage of Abscess
- Lumbar Puncture
- Peripheral Intravenous Catheter Placement
- Reduction of Dislocation
- Removal of a Foreign Body

Examples of procedures to be performed (under supervision):

- BP measurement
- Drug administration/dilution
- Oxygen administration
- Wound Care (in case of lacerations)

Clinical learning objective 8: Create a patient centred management plan.

Key competencies:

- Propose a diagnostic and therapeutic management plan.
- Describe an evidence-based clinical management for all the components of the focused list of conditions **see Focused list of conditions and procedures/skills in the Course Contents section**
- Develop prescribing skills (prescription to be signed by the attending physician).

Clinical learning objective 9: Prescribe drugs and initiate medications (under direct supervision-prescription to be signed by the attending physician).

The prescription of medications is a key competency for junior doctors. In this context students should pursue all relevant learning opportunities including:

1. Direct observation during ward rounds.
2. Interaction with clinical pharmacists.
3. Observation of drug preparation by the nurses/physicians.
4. Administration of (under supervision) IM/SC medications.

5. Familiarization with the most commonly prescribed medication and study their indications, contraindications, side effects.
6. Use of the corresponding national formulary to learn about the dosing schemes and the adjustments needed for pediatric patients.

Course Contents:

Focused list of conditions and procedures/skills			
1 = Good knowledge of these conditions and corresponding therapeutic options is expected			
2 = Some knowledge of these conditions as well as appropriate clinical judgement to seek help is expected			
3 = Be aware of the existence of these conditions and know where to refer			
* Emergency and/or life-threatening conditions. Initiation of management and/or appropriate referral is expected			
**Procedures which the students must be able to perform			
***Procedures/tests which the students should know when to request			
	Paediatrics		Relevant procedure/skill
1	Acute airway obstruction	1*	**ABCD approach **Recognize the need for pediatric anesthesiologist to be notified
2	Anaphylaxis	1*	**Detect promptly **ABCD approach
3	Appendicitis	1*	**Perform abdominal examination
4	Cardiopulmonary resuscitation in children	1*	**Pediatric Basic Life Support (BLS)
5	Diabetic ketoacidosis	1*	**Detect relevant clinical findings **Perform urine dipstick test for ketone detection
6	Epiglottitis (acute)	1*	**ABCD approach **Antibiotic prescription (to be signed by the attending physician) **Recognize the need for pediatric anesthesiologist to be notified
7	Hypoglycaemia	1*	**Recognize the need for glucose administration
8	Hyponatraemia	1*	N/A
9	Meningitis	1*	**Detect nuchal rigidity and other clinical findings **Prescribe antibiotics (to be signed by the attending physician) ***Request Lumbar Puncture
10	Raised intracranial pressure	1*	**Perform fundoscopy to detect papillary edema

			** Recognize the need for emergency CT brain/MRI brain
11	Respiratory distress in the newborn	1*	**ABCD approach
12	Status asthmaticus	1*	**Administration of bronchodilators via nebulizer
13	Status epilepticus	1*	**Detect relevant clinical findings
14	Acute pharyngitis	1	**Inspect mouth cavity **Antibiotic prescription(to be signed by the attending physician)
15	Gastroenteritis in children	1	**Apply the basic principles of oral and intravenous rehydration
16	Pneumonia in children	1	**Perform respiratory examination **Antibiotic prescription(to be signed by the attending physician) **Measure oxygen saturation by using pulse oximetry
17	Sinusitis	1	N/A
18	Necrotising enterocolitis	2*	**Detect relevant clinical findings
19	Acute bronchitis	2	**Detect clinical findings
20	Bronchiolitis	2	**Detect relevant clinical findings
21	Coeliac disease	2	**Detect relevant clinical findings(Diarrhea, Flatulence, Weakness and fatigue, abdominal pain, extraintestinal symptoms) ***Request diagnostic auto antibodies
22	Croup	2	**ABCD approach
23	Congenital gastrointestinal tract abnormalities	3	N/A
24	Congenital heart conditions	3	N/A
25	Cystic fibrosis	3	N/A

Lecture list:

Genetics (Recording)
Neonatology (Recording)
Growth & Development (Recording)
Infectious Diseases (Recording)
Paediatric Neurology (Recording)
Paediatric Haematology & Oncology (Recording)
Paediatric Gastroenterology (Recording)
Paediatrics Endocrinology (Recording)

Paediatric Allergy (Recording)

The Acutely Ill Child (Recording)

Pharmacology learning objectives:

General pharmacology learning objectives for year 5:

- 1) Define prescribing.
- 2) Describe how to use hospital charts.
- 3) Define national formularies and describe how to use them (emphasise on BNF).
- 4) Describe students' formulary and its use.
- 5) Describe principles of safe and effective prescribing.
- 6) Define therapeutic drug monitoring and describe drugs whose levels are monitored.
- 7) Describe principles of prescribing at hospital admission.
- 8) Describe principles of prescribing on call in the hospital.
- 9) Describe principles of prescribing at hospital discharge.
- 10) Describe principles of IV fluids prescribing.

Learning objective for MED-508 Paediatrics course/ clinical rotation

- 1) Describe how to prescribe drugs/medications for children.

Learning Activities and Teaching Methods:

The course is delivered by clinical placements, lectures, tutorials, case studies and group discussions.

Assessment Methods:

End of Year Exams (EYEs) and OSCE.

Recommended Textbooks/Reading:

Authors	Title	Publisher	Year	ISBN
Lissauer, Tom (ed.)	Illustrated textbook of paediatrics, 5 th ed.	Mosby	2018	9780723438717
Gill, Denis	Paediatric clinical examination made easy, 6 th ed.	Elsevier	2018	9780702072888
Kliegman, Robert (ed.)	Nelson textbook of paediatrics, 21 st ed.	Elsevier Saunders	2019	9780323529501

E-book resources for MD YR 5 Clinical Placements:

<https://libguides.unic.ac.cy/mdplacementresources>

3. MED-508 Paediatrics course/ Clinical rotation Requirements

Please take note of the following assessments that students will need to complete and submit via **'MyProgress Health'**, **no later than one week** after the completion of the MED-508 Paediatrics course/ clinical rotation. You must also cross-reference the above with the Year 5 DAP assessment domain handbook, which takes precedence to any other handbook.

Required DAP Assessments

1 x Clinical Placement and Professionalism Certificate (CPPC)
2 x Mini Clinical Education Exercise (Mini-Cex)
2 x Case Based Discussion (CBD)
Daily Attendance Logbook (submitted via 'MyProgress Health' by uploading the attendance weekly sheets)
1 x Learning Outcomes Record (LOR)
Evidence of completing online student feedback survey

Floating WPBA and On-line Feedback Survey

Submit the above forms together with any Floating WPBAs completed during the MED-508 Paediatrics course/ clinical rotation. You also need to ensure that you have completed the online feedback survey and submit evidence of this via E-mail to the DAP Administrator.

Logbook

The logbook should be completed on a daily basis and submitted at the end of your course/ clinical rotation by uploaded on **'MyProgress Health'**.

Attachment sign-off process

PLEASE NOTE: It is your responsibility to ensure that your tutor completes your Clinical Practice Portfolio Certificate (CPPC) as well as WPBA forms for you.

You should follow these steps:

- You should contact your Clinical Lead in advance to agree a mutually convenient date to conduct the completion and sign-off of the **CLINICAL PLACEMENT & PROFESSIONALISM CERTIFICATE (CPPC)** using the final week of your attachment. It may take around 15-20 minutes so please bear that in mind when arranging a suitable


time slot. You should check in advance if the Clinical Lead will be absent at any time towards the end of the attachment.

- Your CPPC must be completed by the relevant tutor/lead clinician no later than one week after the completion of the attachment (recommended to be completed by the last day of the clinical attachment). Your tutor will be able to access all the WPBAs you have completed on your device during the attachment, as well as your logbooks and other evidence of your attendance.
- If you have not been told who will be signing you off you should contact your local administrator for guidance.
- Attend the meeting with your clinical tutor and bring your device to present all required WPBA forms and logbooks, as well as any other evidence of your attendance.
- It is your responsibility to ensure that the CPPC certificate and all WPBA forms are properly completed prior to their submission. If any of the assessments on the form have been changed, the assessor must sign where the correction has been made. Absence of a signature will result in the form being returned to the assessor for validation. In addition, you are required to use your logbooks to record activities and attendance and ask for a signature from your supervisor prior to submitting these.


DON'T FORGET:

- You should use the diaries to record activities and attendance and ask for a signature from supervising Consultant or Registrar each week. If you are using your tablet for daily electronic sign-off please make sure the signature of the Assessor is clear as it would have been on paper.
- You need to achieve submission of all assessment forms and attendance logbook/diaries via 'MyProgress Health' within one week of completing an attachment. If you are using the 'E-mail to Assessor to complete later' function it is your responsibility to chase up the clinician and have your WPBAs completed and submitted by the deadline. **If you anticipate any delays please always inform the DAP administrator. No communication and late submissions are considered serious and recorded under Professional Behaviour of the DAP domain.**

- ☑ You must check that all section of WPBA forms have been completed appropriately and fully before you submit. Otherwise, your forms will not be accepted by the system.
- ☑ If you are marked with a 'Fail' on the CPPC form for any of the elements, the assessor must give specific detailed feedback explaining reasons for the grade. Feedback should be focused and specific. In such cases or in cases where you fail to complete the required number of WPBAs, you will normally be required to redo part or the whole of the course/clinical rotation (after discussion with your local DAP Domain Lead). **Once remediation is complete a new CPPC form needs to be completed and signed off by the Clinical Lead or the remediation supervisor along with a new Logbook that shows remediation dates.**
- ☑ Check that your course/clinical rotation specific and floating WPBAs have been supervised and signed off by the correct assessor level. If you are unsure, please check before you undertake the WPBA to avoid your forms being rejected and having to return to your placement to repeat the WPBA with the correct assessor.
- ☑ Ensure you have completed the online feedback survey and submit evidence of this via E-mail to the DAP Administrator.

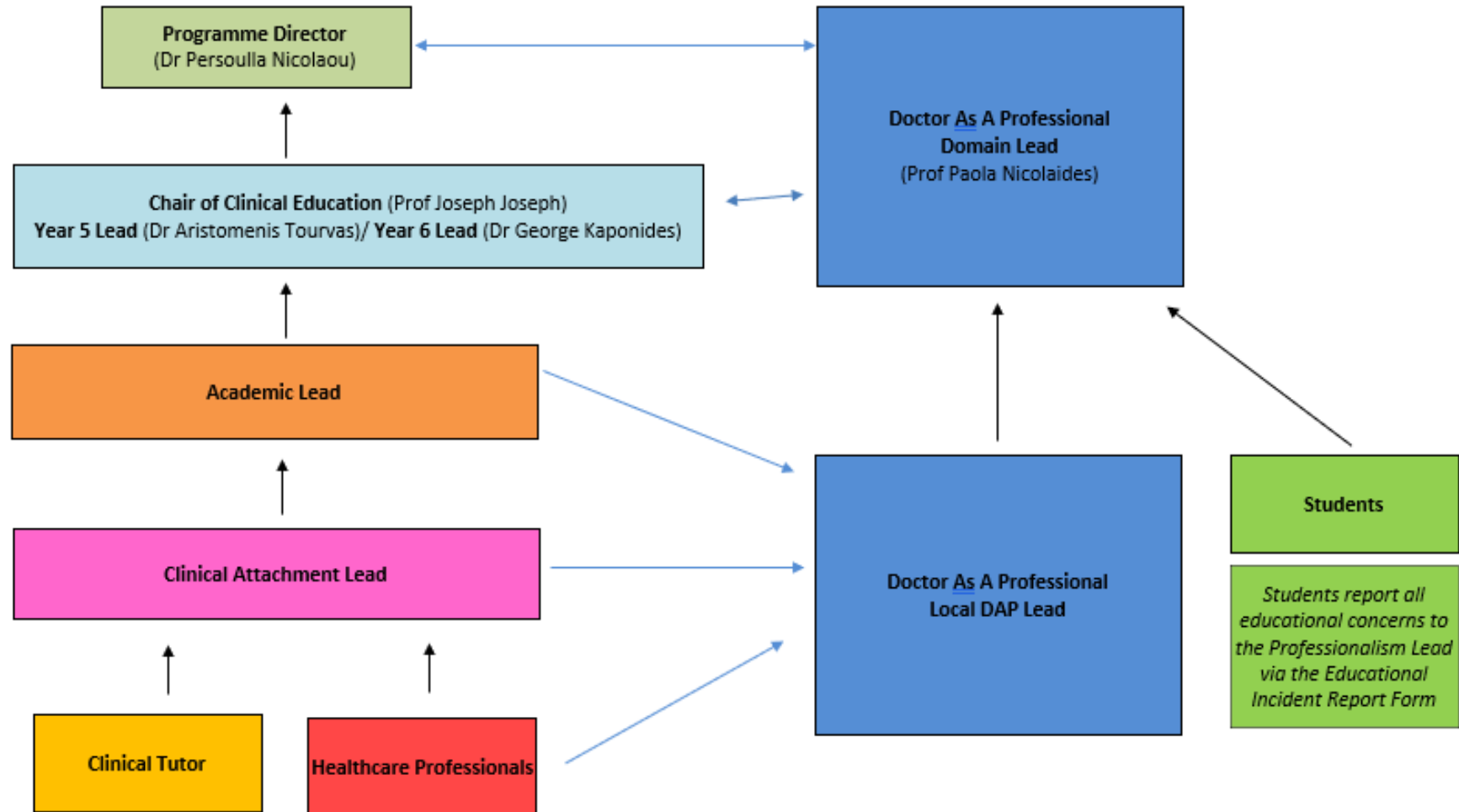
 **Note that late submissions will be recorded under DAP Professional Behaviour Element.**

Your clinical site administrator is here to help!
If you are unclear or unsure about any aspect of the
DAP Domain please ask your clinical site administrator

 **In case of illness or absence**
Students must notify their clinical site administrators via E-mail, and their Clinical Tutor prior or on the day of absence.

4. Reporting Structures

Reporting Structure: Clinical Placements Educational & Professionalism Issues



Reporting Structure: Clinical Attachments Patient and Student Safety Issues

