

2024-2025 Catalog

Pediatric Physical Medicine and Rehabilitation - Jacksonville

PED E 39J | 4th Year Elective | Pediatrics | Clinical Science | Jacksonville

MDT 7400

Course Description

This rotation exposes the medical student to the interdisciplinary approach of caring for pediatric patients with chronic medical conditions. Pediatric PM&R specialists or physiatrists treat a wide variety of medical conditions. As an advocate for family-centered care, the PM&R physician promotes active participation of the child and family through evaluation and management of their disability. This active engagement increases their functional capacity and encourages self-advocacy. PM&R involvement early in the life of the child, establishes family and care team relationships leading to the best care plan through adulthood. We champion the transdisciplinary approach, providing evidence-based and goal-directed care across all environments. PM&R physicians extend beyond the medical system to partner with education, social, and community services. Our team-based approach allows children with physical disabilities to reach their highest potential and functional level. This course is available as a 2-week or 4-week elective.

Course Faculty and Staff

- [Lauren Schmidt MD](#) (Director)
- [Louise Spierre MD](#) (Co-Director)
- [Jennifer R. Hamilton BA](#) (Course Staff)
- [Dani Brown](#) (Course Staff)
- [Frank J Genuardi MD, MPH](#) (Other Faculty)
- [Orlyn Claire Y Lavilla MD](#) (Other Faculty)
- [Ashley Volz](#) (Course Manager)

Meeting Place and Time

Location: One Call Building, Pediatric Multispecialty Clinic, 841 Prudential Drive, 19th floor, Jacksonville, FL 32207

Hours: 8:00am – 4:30pm

Course Materials

Readings:

1. Liptak GS, Nurphy NA, and the Council on Children With Disabilities. Providing a Primary Care Medical Home for Children and Youth With Cerebral Palsy. *Pediatrics* 2011;128:e1321. DOI: <https://pediatrics.aappublications.org/content/145/5/e20192126>. Accessed June 17, 2020.
2. Novak I, Morgan C, Adde L, et al. Early, Accurate Diagnosis and Early Intervention in Cerebral Palsy: Advances in Diagnosis and Treatment [published correction appears in *JAMA Pediatr.* 2017 Sep 1;171(9):919]. *JAMA Pediatr.* 2017;171(9):897-907. doi:10.1001/jamapediatrics.2017.1689. <https://pubmed.ncbi.nlm.nih.gov/28715518/>. Accessed June 9, 2020.
3. Harb A, Kishner S. Modified Ashworth Scale. [Updated 2020 May 31]. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2020 Jan-. Available from: 10.1542/peds.2011-1468 originally published online October 31, 2011; <https://pediatrics.aappublications.org/content/128/5/e1321>. Accessed June 17, 2020.
4. Maitre NL, Burton VJ, Duncan AF, et al. Network Implementation of Guideline for Early Detection

Decreases Age at Cerebral Palsy Diagnosis. Pediatrics. 2020;145(5):e20192126.

Optional Readings/Web Resources:

- Brooks J, Day S, Shavelle R and Strauss D. Low Weight, Morbidity, and Mortality in Children With Cerebral Palsy: New Clinical Growth Charts. Pediatrics 2011;128:e299. DOI: 10.1542/peds.2010-2801 originally published online July 18, 2011. <https://pubmed.ncbi.nlm.nih.gov/21768315/>. Accessed June 17, 2020.
- Eng GD, Binder H, Getson P, O'Donnell R. Obstetrical brachial plexus palsy (OBPP) outcome with conservative management. Muscle Nerve. 1996;19(7):884-891. doi:10.1002/(SICI)1097-4598(199607)19:7<884::AID-MUS11>3.0.CO;2-J. <https://pubmed.ncbi.nlm.nih.gov/8965843/>. Accessed June 9, 2020. <https://www.ncbi.nlm.nih.gov/books/NBK554572/>. Accessed June 9, 2020.
- Mohammed I, Hussain A. Intrathecal baclofen withdrawal syndrome- a life-threatening complication of baclofen pump: a case report. BMC Clin Pharmacol. 2004;4:6. Published 2004 Aug 9. doi:10.1186/1472-6904-4-6. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC514562/>. Accessed June 9, 2020.
- Enslin JMN, Rohlwink UK, Figaji A. Management of Spasticity After Traumatic Brain Injury in Children. Front Neurol. 2020;11:126. Published 2020 Feb 21. doi:10.3389/fneur.2020.00126. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7047214/>. Accessed June 9, 2020.

Additional Information

Grading scale: Satisfactory/Unsatisfactory

Access to computer: Variable

Laptop required: Yes

Access to kitchen: Yes

Storage of personal items: yes, while on site / depends on location

Classes Offered

Period	Length	Credits	(Avail / Max) Slots
Period 1	4 Weeks (May 13 - Jun 9)	4	(1 / 1)
Period 1	First 2 Weeks (May 13 - May 26)	2	(1 / 1)
Period 1	Second 2 Weeks (May 27 - Jun 9)	2	(1 / 1)
Period 4	Second 2 Weeks (Aug 19 - Sep 1)	2	(1 / 1)
Period 5	4 Weeks (Sep 2 - Sep 29)	4	(1 / 1)
Period 5	First 2 Weeks (Sep 2 - Sep 15)	2	(1 / 1)
Period 5	Second 2 Weeks (Sep 16 - Sep 29)	2	(1 / 1)
Period 6	4 Weeks (Sep 30 - Oct 27)	4	(1 / 1)
Period 6	First 2 Weeks (Sep 30 - Oct 13)	2	(1 / 1)
Period 6	Second 2 Weeks (Oct 14 - Oct 27)	2	(1 / 1)

Period	Length	Credits	(Avail / Max) Slots
Period 7	4 Weeks (Oct 28 - Nov 24)	4	(1 / 1)
Period 7	First 2 Weeks (Oct 28 - Nov 10)	2	(1 / 1)
Period 7	Second 2 Weeks (Nov 11 - Nov 24)	2	(1 / 1)
Period 8	Second 2 Weeks (Dec 9 - Dec 22)	2	(1 / 1)
Period 9	4 Weeks (Jan 6 - Feb 2)	4	(1 / 1)
Period 9	First 2 Weeks (Jan 6 - Jan 19)	2	(1 / 1)
Period 9	Second 2 Weeks (Jan 20 - Feb 2)	2	(1 / 1)
Period 10	4 Weeks (Feb 3 - Mar 2)	4	(1 / 1)
Period 10	First 2 Weeks (Feb 3 - Feb 16)	2	(1 / 1)
Period 10	Second 2 Weeks (Feb 17 - Mar 2)	2	(1 / 1)
Period 11	First 2 Weeks (Mar 3 - Mar 16)	2	(1 / 1)
Period 12	4 Weeks (Mar 31 - Apr 27)	4	(1 / 1)
Period 12	First 2 Weeks (Mar 31 - Apr 13)	2	(1 / 1)
Period 12	Second 2 Weeks (Apr 14 - Apr 27)	2	(1 / 1)
Period 13	First 2 Weeks (Apr 28 - May 11)	2	(1 / 1)

Evaluated Competencies

#1 Professionalism

Educational Objectives: Student will be expected to show respect for colleagues and patients; and compassion for patients and families. Student will follow the highest ethical standards; and follow all the rules, regulations, and HIPAA standards.

Method of Evaluation: Preceptor observation.

#2 Patient Care

Educational Objectives: Student will demonstrate ability to gather appropriate patient management data and to present this in oral and written form.

Method of Evaluation: Preceptor observation. As applicable.

#3 Medical Knowledge

Educational Objectives: Student will be expected to demonstrate an understanding of Pediatric Rehabilitation topics including cerebral palsy, spasticity, traumatic brain injury and spinal cord injury, and the unique health care needs of special populations and apply these principles to pediatric practice.

Method of Evaluation: Student will be evaluated by faculty during the rotation during one-on-one teaching sessions.

#4 Practice-Based Learning

Educational Objectives: Student will demonstrate ability to perform self-directed activities to increase knowledge.

Method of Evaluation: Student will be asked to give at least one oral presentation about a topic selected by the student in consultation with the faculty. Student will be asked to do literature searches for topics associated with the patients they are following.

#5 Interpersonal and Communication Skills

Educational Objectives: Student will be expected to communicate patient care issues to faculty. Students will be expected to communicate effectively with patients and families across a broad range of socioeconomic and cultural backgrounds.

Method of Evaluation: Preceptor observation.

#6 Systems-Based Practice

Educational Objectives: Student will be able to describe the multidisciplinary approaches to patient care.

Method of Evaluation: Attendance and participation in diverse clinics and with different community partners and resources.