INTRODUCTION

This clinical study aid was designed in the tradition of the First Aid series of books. You will find that rather than simply preparing you for success on the clerkship exam, this resource will also help guide you in the clinical diagnosis and treatment of many of the problems seen by pediatricians. The content of the book is based on the objectives for medical students laid out by the Council on Medical Student Education in Pediatrics (COMSEP). Each of the chapters contains the major topics central to the practice of pediatrics and has been specifically designed for the third-year medical student learning level.

The content of the text is organized in the format similar to other texts in the First Aid series. Topics are listed by bold headings, and the “meat” of the topic provides essential information. The outside margins contain mnemonics, diagrams, summary or warning statements, and tips. Tips are categorized into typical scenarios Typical Scenario, exam tips , and ward tips .

The pediatric clerkship is unique among all the medical school rotations. Even if you are sure you do not want to be a pediatrician, it can be a very fun and rewarding experience. There are three key components to the rotation: (1) what to do on the wards, (2) what to do on outpatient, and (3) how to study for the exam.

ON THE WARDS . . .

Be on time. Most ward teams begin rounding around 8 A.M. If you are expected to “pre-round,” you should give yourself at least 15 minutes per patient that you are following to see the patient, look up any tests, and learn about the events that occurred overnight. Like all working professionals, you will face occasional obstacles to punctuality, but make sure this is occasional. When you first start a rotation, try to show up at least an extra 15 minutes early until you get the routine figured out. There will often be “table rounds” followed by walking rounds.

Find a way to keep your patient information organized and handy. By this rotation, you may have figured out the best way for you to track your patients, a miniature physical, medications, labs, test results, and daily progress. If not, ask around—other medical students or your interns can show you what works for them and may even make a copy for you of the template they use. We suggest index cards, a notebook, or a page-long template for each patient kept on a clipboard.

Dress in a professional manner. Even if the resident wears scrubs and the attending wears stiletto heels, you must dress in a professional, conservative manner. It would be appropriate to ask your resident what would be suitable for you to wear (it may not need to be a full suit and tie or the female equivalent). Wear a short white coat over your clothes unless discouraged.

Men should wear long pants, with cuffs covering the ankle, a long-sleeved, collared shirt, and a tie—no jeans, no sneakers, no short-sleeved shirts.
Women should wear long pants or a knee-length skirt and blouse or dressy sweater—no jeans, sneakers, heels greater than 1½ inches, or open-toed shoes.
Both men and women may wear scrubs during overnight call. Do not make this your uniform.