



Correctional Medicine Elective  
Revised August 2009

**NAME OF ROTATION:** Correctional Medicine Elective

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**TRAINING LEVEL:** PGY 2 and 3

**LENGTH OF ROTATION:** 1 month

**COURSE DESCRIPTION:** The correctional facility rotation is designed to provide the resident with a better understanding of the correctional facility medical services. The resident will become well versed in the clinical presenting signs and symptoms, management options, and treatment of commonly encountered conditions in correctional facilities. The resident will participate as a member of the medical staff and will be able to provide medical and mental health services and in addition, be able to provide prevention messages to the adolescents. The residents will work with the health care team at DJJ. They will work with the mid-levels, physicians, psychologists, nutritionists, and therapists etc. to get a well rounded view of the workings of DJJ in the health center. The residents will also visit the school system and prepare a presentation for the students at the end of the rotation. The resident will visit with the head of the facility to obtain information on agency statistics at that particular site. This rotation is meant to be a well rounded view of correctional medicine for the resident.

**GOALS, OBJECTIVES AND CORE COMPETENCIES:**

**Goal 1:** Understand the types of medical problems adolescents experience in a correctional facility.

**Objective 1.1:** Recognize and describe the pathophysiology and management of commonly encountered conditions including but not limited to:

1. Allergic rhinitis
2. Asthma
3. Atopic dermatitis
4. Urticaria
5. Diabetes
6. STD's
7. HIV
8. Acne
9. Obesity

**Goal 2:** Understand how to identify and manage mental health conditions which are commonly encountered.

**Objective 2.1:** Recognize and describe the pathophysiology and management of commonly encountered mental health conditions including but not limited to:

1. Bipolar Disorder
2. Depression
3. Anxiety Disorder
4. Conduct Disorder
5. Oppositional Defiant Disorder
6. ADHD

**Goal 3:** Understand how immunization programs are an important part of correctional facility medicine.

**Objective 3.1:** The resident will recognize and describe how to deliver immunizations to adolescents that are incarcerated

**Objective 3.2:** The resident will know the process for obtaining consent for immunizations in this setting

**Objective 3.3:** The resident will know how to send immunization records to primary care providers upon the adolescents discharge from the facility

**Goal 4:** Understand how to work as a multi-disciplinary team in the correctional facility setting.

**Objective 4.1:** The resident will be able to describe the process by which providers communicate about a patient in the facility

**Goal 5:** Understand some of the reasons adolescents come into the correctional facility

**Objective 5.1:** The resident will describe and discuss some of the reasons adolescents were placed in a correctional facility

**Objective 5.2:** The resident will describe some prevention methods that may prevent adolescents from being incarcerated.

**Goal 6:** Understand the family dynamics when an adolescent is incarcerated

**Objective 6.1:** The resident will describe the process of family involvement while incarcerated.

**Goal 7:** Understand the resources in the community for adolescents upon their release from a correctional facility.

**Objective 7.1:** The resident will describe community services available to adolescents who have been incarcerated prior.

**Goal 8:** Understand how the correctional facility functions

**Objective 8.1** The resident will meet with the warden and other key members of the correctional facility staff to obtain a better understanding of the system.

**COMPETENCIES:** Pediatric Competencies in Brief: Continuity/Outpatient Pediatrics

**Competency 1: Patient Care.** Provide family-centered patient care that is development- and age-appropriate, compassionate, and effective for the treatment of health problems and the promotion of health.

- 1.1 Use a logical and appropriate clinical approach to the care of outpatients, applying principles of evidence-based decision-making and problem-solving.
- 1.2 Provide sensitive support to patients and their families in the outpatient setting.
- 1.3 Provide effective preventive health care and anticipatory guidance to patients and families in continuity and outpatient settings.

**Competency 2: Medical Knowledge.** Understand the scope of established and evolving biomedical, clinical, epidemiological and social-behavioral knowledge needed by a pediatrician; demonstrate the ability to acquire, critically interpret and apply this knowledge in patient care.

- 2.1 Demonstrate a commitment to acquiring the knowledge needed for care of children in the continuity and general ambulatory setting.
- 2.2 Know and/or access medical information efficiently, evaluate it critically, and apply it appropriately to outpatient care.

**Competency 3: Interpersonal Skills and Communication.** Demonstrate interpersonal and communication skills that result in information exchange and partnering with patients, their families and professional associates.

- 3.1 Provide effective patient education, including reassurance, for conditions common to the outpatient setting.
- 3.2 Communicate effectively with physicians, other health professionals, and health-related agencies to create and sustain information exchange and teamwork for patient care.
- 3.3 Develop effective strategies for teaching students, colleagues and other professionals.
- 3.4 Maintain accurate, legible, timely, and legally appropriate medical records in this clinical setting.

**Competency 4: Practice-based Learning and Improvement.** Demonstrate knowledge, skills and attitudes needed for continuous self-assessment, using scientific methods and evidence to investigate, evaluate, and improve one's patient care practice.

- 4.1 Identify standardized guidelines for diagnosis and treatment of conditions common to outpatient care, and adapt them to the individual needs of specific patients.
- 4.2 Work with health care team members to assess, coordinate, and improve patient care in the outpatient setting.
- 4.3 Establish an individual learning plan, systematically organize relevant information resources for future reference, and plan for continuing acquisition of knowledge and skills.

**Competency 5: Professionalism.** Demonstrate a commitment to carrying out professional responsibilities, adherence to ethical principles and sensitivity to diversity.

- 5.1 Demonstrate personal accountability to the well being of patients (e.g., following-up lab results, writing comprehensive notes and seeking answers to patient care questions).
- 5.2 Demonstrate a commitment to professional behavior in interactions with staff and professional colleagues.
- 5.3 Adhere to ethical and legal principles and be sensitive to diversity.

**Competency 6: Systems-Based Practice.** Understand how to practice high quality health care and advocate for patients within the context of the health care system.

- 6.1 Identify key aspects of health care systems (e.g., public and private insurance) as they apply to the primary care provider, such as the role of the PCP in decision-making, referral, and coordination of care.
- 6.2 Demonstrate sensitivity to the costs of clinical care in the outpatient setting, and take steps to minimize costs without compromising quality.
- 6.3 Recognize and advocate for families who need assistance to deal with system complexities, such as lack of insurance, multiple medication refills, multiple appointments with long transport times, or inconvenient hours of service.
- 6.4 Recognize one's limits and those of the system; take steps to avoid medical errors.

**Source**

Kittredge, D., Baldwin, C. D., Bar-on, M. E., Beach, P. S., Trimm, R. F. (Eds.). (2004). APA Educational Guidelines for Pediatric Residency. Ambulatory Pediatric Association Website. Available online: [www.ambpeds.org/egweb](http://www.ambpeds.org/egweb). [Accessed 07/21/2009]. Project to develop this website was funded by the Josiah Macy, Jr. Foundation 2002-2005.

**PROCEDURES:**

**Technical and therapeutic procedures.** Describe the following procedures, including how they work and when they should be used; competently perform those commonly used by the pediatrician in practice.

- Abscess: I & D of superficial abscesses
- Abscess: aspiration
- Bladder: catheterization
- Conjunctival swab
- Ear: cerumen removal
- Eye: eyelid eversion
- Foreign body removal (simple): nose, ear, subcutaneous
- Inguinal hernia: simple reduction
- Intravenous line placement
- Liquid nitrogen treatment for molluscum/warts
- Lumbar puncture
- Medication delivery: inhaled, IV
- PPD: placement
- Pulmonary function tests: peak flow meter
- Pulse oximeter: placement
- Rectal swab
- Reduction of nursemaid elbow
- Skin scraping
- Subungual hematoma: drainage
- Suctioning: nares , oropharynx
- Throat swab
- Tooth: temporary reinsertion
- Urethral swab
- Venipuncture
- Wood's lamp examination of skin

**Diagnostic and screening procedures.** Describe the following tests or procedures, including how they work and when they should be used; competently perform those commonly used by the pediatrician in practice.

- ECG: emergency interpretation
- PPD: interpretation
- ECG: perform
- Monitoring interpretation: pulse oximetry
- Radiologic interpretation: abdominal X-ray
- Radiologic interpretation: chest X-ray, extremity X-ray, sinus films
- Tympanometry evaluation: interpretation
- Vision screening

**Source**

Kittredge, D., Baldwin, C. D., Bar-on, M. E., Beach, P. S., Trimm, R. F. (Eds.). (2004). APA Educational Guidelines for Pediatric Residency. Ambulatory Pediatric Association Website. Available online: [www.ambpeds.org/egweb](http://www.ambpeds.org/egweb). [Accessed 07/21/2009]. Project to develop this website was funded by the Josiah Macy, Jr. Foundation 2002-2005.

**SCHEDULE:**

Residents will attend weekly assigned continuity clinic. Residents are required to attend all Grand Rounds, weekly didactic lectures, resident meetings, and participate in the regularly scheduled calls. Residents are scheduled to take one-week vacation during this rotation.

	Monday	Tuesday	Wednesday	Thursday	Friday
AM	Dekalb	Dekalb	Dekalb	Dekalb	Dekalb
PM	Lectures	Dekalb	Dekalb	CC	Dekalb

	Monday	Tuesday	Wednesday	Thursday	Friday
AM	Dekalb	Dekalb	DeKalb	Dekalb	DeKalb
PM	Lectures	Dekalb	DeKalb	CC	DeKalb

	Monday	Tuesday	Wednesday	Thursday	Friday
AM	Marietta	Marietta	Marietta	Marietta	Marietta
PM	Lectures	Marietta	Marietta	CC	Marietta

	Monday	Tuesday	Wednesday	Thursday	Friday
AM	Marietta	Marietta	Marietta	Marietta	Marietta
PM	Lectures	Marietta	Marietta	CC	Marietta

**DIDACTIC SESSIONS**

- Careers in Correctional Medicine
- HIV/AIDS in the correctional facility
- STD testing in correctional facility
- Delivering chronic care in correctional facility
- Mental health delivery in the correctional facility
- Standards of health care in the correctional facility

**EVALUATION:** The preceptor and resident will complete evaluation forms on the six core competencies via electronic evaluation form.

**REFERENCES**

1. **Braithwaite. R. L.**, Hammett, T., & Mayberry, R. (1996). Prisons and AIDS: A public health challenge. San Francisco: Jossey-Bass.

2. **Braithwaite, R.L.**, Arriola, K.J. & Newkirk, C. (eds). (2006). Health Issues among Incarcerated Women. Rutgers University Press
3. **APHA Task Force on Correctional Health (2003)**. Standards for Health Services in Correctional Institutions. 3<sup>rd</sup> edition. [WWW.MEDIA.RELATIONS@APHA.ORG](mailto:WWW.MEDIA.RELATIONS@APHA.ORG)

**National Commission on Correctional Health Care**

Journal of Correctional Health Care

Standards for Correctional Health Services  
New Editions for Jails and Prisons

Standards for Health Services in Jail (2008)

Standards for Health Services in Prisons (2008)

Standards for Health Services in Juvenile Detention and Confinement Facilities (2004)

Clinical Practices in Correctional Medicine, 2<sup>nd</sup> Ed. Edited by Michael Puisis, Do/Mosby/Elsevier (2006). Hardcover, 608 pages

Treating Adult and Juvenile Offenders with Special Needs. Edited by Ashford, Bruce Sales and William Reid. American Psychological Association (2001). Hard cover