

**Curriculum Content Report**  
**Schizophrenia, Schizoaffective Disorder, Psychotic disorder, psychosis**  
**BH B1, BH B1d**  
**Prepared 10/31/19 by Ken Olive, MD**

Year 2	
Pathology	
Clinical Neuroscience	Schizophrenia Learning Objectives: <ul style="list-style-type: none"> <li>• Define Schizophrenia</li> <li>• Have familiarity with positive and negative symptoms</li> <li>• The role of dopamine in schizophrenia</li> <li>• The role of glutamate in schizophrenia and the brain areas involved</li> <li>• The role of serotonin in schizophrenia</li> <li>• Identify the difference between typical and atypical antipsychotics, and the pluses and minuses of each class.</li> <li>• The pharmacological mechanisms of haloperidol, clozapine, and olanzapine and why they are effective (and not effective) in the treatment of schizophrenia.</li> <li>• Identify the side effects of antipsychotics</li> </ul>
Medical Pharmacology	<ul style="list-style-type: none"> <li>• Clinical case – delusions as manifestations of schizophrenia</li> <li>• Antipsychotics               <ul style="list-style-type: none"> <li>-pathophysiology and role of neurotransmitters</li> <li>-pharmacologic management of schizophrenia</li> <li>  Receptor actions of drugs</li> <li>  Classification of drugs</li> <li>  Actions of antipsychotic</li> <li>  Adverse effects of antipsychotics</li> </ul> </li> </ul>
Introduction to Clinical Psychiatry	<ul style="list-style-type: none"> <li>• Schizotypal personality disorder</li> <li>• Schizophrenia Spectrum &amp; Other Psychotic Disorders               <ul style="list-style-type: none"> <li>Psychotic Disorders:                   <ul style="list-style-type: none"> <li>-Risk Factors, Risk Assessment, Time Factors, Diagnosis, Prevention and Control;</li> <li>-Schizophrenia;</li> <li>-Brief psychotic disorder;</li> <li>-Schizophreniform disorder;</li> <li>-Schizoaffective disorder;</li> <li>-Delusional disorder;</li> <li>-Positive, negative and cognitive symptoms of schizophrenia;</li> </ul> </li> </ul> </li> </ul>

	<p>-Therapies of psychotic disorders; Conventional (first generation/typical) antipsychotics; Second generation (atypical) antipsychotics; Acute dystonia; Akathisia; Tardive dyskinesia; Parkinsonian side effects; Neuroleptic malignant syndrome; Metabolic syndrome;</p> <p>-AIMES scale, Disease Screening Tests</p>
<b>Year 3</b>	
<p>Psychiatry Clerkship</p>	<ul style="list-style-type: none"> <li>•Psychotic Disorders as a required patient type</li> <li>•Learning Objectives encompassing schizophrenia <ol style="list-style-type: none"> <li>1. Engage with a patient and establish and maintain rapport including demonstrating the use of cognitive empathy, respect, sensitivity to the developmental level of the patient, cultural awareness, recognition of the social determinants of health, and seeking to understand the conceptual context of the illness.</li> <li>2. Conduct a psychiatric diagnostic workup in an organized prioritized manner. This should include: acquiring and organizing the psychiatric history; performing the Mental Status Examination; assessing pertinent features of the physical exam; developing a differential diagnosis; determining need for further diagnostic studies; developing an initial plan of care (including discharge planning from the time of admission); and, documenting this in a written report.</li> <li>3. Describe and employ DSM-5 criteria for the diagnosis of patients in the context of complex clinical presentations while taking into account the clinical history, life stressors, challenging psychosocial situations, and patient personality variables.</li> <li>4. Explain the range of psychiatric interventional therapeutics for various treatment options: psychopharmacologic agents, electroconvulsive therapies, psychotherapies (including fundamentals of psychodynamic, behavioral, and cognitive approaches) and psychosocial interventions.</li> <li>5. Identify psychiatric emergencies in the clinical setting and describe appropriate interventions for it.</li> </ol> </li> </ul>

