

# 4<sup>th</sup> Year Neurology Clerkship Syllabus

# Academic Year 2018-2019

Approved by the Curriculum Committee 3-23-18

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# **General Clerkship Information**

Course Code: 844 Credit Hours: 4 Prerequisites: All students must successfully pass all clerkship curricular elements in order to progress to the fourth year Clerkship Length: 4 Weeks Clerkship Website: https://sites.google.com/a/email.arizona.edu/clerkship-resources/neurology

# **Clerkship Contacts**

Clerkship Director Name: Kamala Saha, MD



Office phone: 602-406-8371 Email: kamala.saha@dignityhealth.org Office location: 240 W. Thomas Road, Suite 301

# **Course Description**

The Neurology Clerkship utilizes a variety of well-supervised clinical settings exposing students to a broad array of patients as well as organized interactive learning experiences and directed readings allowing motivated students to establish a solid foundation of skills and knowledge for their future career choices.

#### Length: Four-week rotation

- Two weeks in the in-patient setting
- Two weeks in an out-patient setting in one or more of the following specialties, the student's individual experiences may vary, assignments will be made by the Neurology Clerkship Office:
  - o Cognitive Disorders
  - o Epilepsy
  - o General Neurology
  - o Headache
  - o Movement Disorder
  - o Neuroimmunology
  - o Neuromuscular
  - o Neuro-Oncology
  - o Stroke
  - o Traumatic Brain Injury



# **Clinical Sites**

Banner University Medical Center-Phoenix Campus St. Joseph's Hospital and Medical Center/ Barrow Neurological Institute

### **Clinical Site Requirements**

Rounds - Site-Specific Grand Rounds/Case Conferences

**On-Call requirement** - Students are required to complete 2 weekday short calls. **Short Call:** 

- The student will page the resident on-call to arrange a meeting time and location once their regular duties are complete.
- The call assignment is to be completed by 8:00PM.
- Page the on call resident or attending.

# **Educational Program Objectives**

The Educational Program Objectives are comprised of competencies and the measurable objectives by which attainment of each competency can be assessed. The full text of the University of Arizona, College of Medicine – Phoenix Educational Program Objectives (EPO) can be accessed at Educational Program Objectives and require dissemination as noted in the Orientation to EPOs and Course Objectives Policy.

# **Clerkship Specific Learning Objectives**

Each Neurology Clerkship objective listed below has been mapped with relevant Competencies, i.e., Patient Care, Medical Knowledge, Clinical Appraisal and Quality Improvement, Interpersonal and Communication Skills, Professionalism and Societal Awareness and Responsiveness and is available within One45.

- 1. Obtain a complete and reliable neurologic history and examination.
- 2. Perform a focused neurologic examination.
- 3. Assess a patient's level of consciousness and then perform a neurologic examination appropriate to the patient's level of consciousness.
- 4. Distinguish normal from abnormal findings on a neurologic examination.
- 5. Demonstrate an awareness of the use and interpretation of common tests used in diagnosing neurologic disease.
- 6. Formulate a differential diagnosis based on lesion localization, time course, and relevant history and demographic features.
- 7. Recognize and manage potential neurologic emergencies.
- 8. Recognize symptoms that may signify neurologic disease (including disturbances of consciousness, cognition, language, vision, hearing, equilibrium, motor function, somatic sensation, and autonomic function).
- 9. Demonstrate management strategies for patients with common neurologic diseases.
- 10. Localize the likely site or sites in the nervous system where a lesion could produce a patient's symptoms and signs.



11. Deliver and prepare a clear, concise and thorough oral and written presentation of a patient's history and examination.

#### **Attendance Requirements**

All clerkship experiences are mandatory and any absence must be recorded. Excused absences will be remediated as deemed appropriate by the clerkship director, and are not to exceed 0.5 days per week on average. Exceptions to this may be considered in consultation with the Clerkship Director and the Associate Dean for Student Affairs. Please see the <u>Attendance and Absence Years 3 and 4 Policy, the Leave of Absence Policy and the Attendance Expectations and Absence Reporting Requirements Policy.</u>

#### **Required/Suggested Reading**

Students will receive the listed books from the site coordinator on the first day of the rotation and are required to return the book to the site coordinator by the end of the rotation.

#### **Required:**

 Introduction to Clinical Neurology, 4th Edition, 2011, Douglas J. Gelb, MD, PhD. (ISBN: 9780199734849)

#### Suggested:

- 1. Neurology For The Non-Neurologist, 5th Ed., 2004, Weiner, Goetz, Lippincott Williams and Wilkins (ISBN: 0781746310 / 978-0781746311)
- Neurology Survival Guide: The Washington Manual Survival Guide Series, 2004, Rengachary, Lin (ISBN: 0781743621 / 978-0781743624)

#### Websites:

- 1. American Academy of Neurology Curriculum:
- 2. https://www.aan.com/residents-and-fellows/fellowship-resources/core-curricula/
- 3. New England Journal of Medicine Lumbar Puncture Procedure Video: http://www.nejm.org/doi/full/10.1056/NEJMvcm054952

#### **Required Clinical Experience Logs**

A system has been established at the UA COM-P to specify the types of patients or clinical conditions that medical students must encounter, and to monitor and verify the medical students' experiences with patients so as to remedy any identified gaps as detailed in the <u>Core Clinical Skills Observation Policy</u>. For this clerkship, medical students must encounter the following types of patients and clinical conditions and indicate the level of student responsibility.



The standardized levels of student responsibility include the following:

- 1. Observe and Discuss: This may include observing another member of the team interview a patient, perform a procedure or physical exam, etc.; and discussion of the case, condition, or other relevant components.
- 2. Actively Participate in Care: This category indicates more active responsibility for the patient, such as performing a physical exam and workup, entering progress notes or history and physicals (H&Ps), presenting the patient on rounds, scrubbing into a case, and/or counseling or discussing prevention with the patient.
- 3. Perform Procedure: This is defined as the student performing the procedure with supervision.

Please review the <u>Faculty Supervision of Medical Students in Clinical Learning Situations Policy</u> and the <u>Faculty Supervision of Sensitive Physical Examination Policy</u>. The procedures and clinical conditions will be recorded in the student's "Procedure Logs" and reviewed with the site or Clerkship Director at the mid-clerkship review.

Required Procedures	Clinical Setting (Inpatient, Outpatient, or Both)
Lumbar Puncture (Must watch video)	View video - New England Journal of Medicine / Lumbar Puncture Procedure Video: http://www.nejm.org/doi/full/10.1056/NEJMvcm054952
Medical History & Neurological Exam	Complete Passport Card

Required Diagnoses	Clinical Setting	Patient Numbers	Level of Student Responsibility	Alternative Experience/Requirement			
Diagnostic Category							
Abnormal cognition, dementia, delirium, encephalopathy	Both	1	Actively Participate in Care	Case 24 and 31 Video (Early AD)			
Stroke/ TIA 1. Ischemic Stroke or TIA Intracranial Hemorrhage	Both	1 – IS/TIA 1 - ICH	Actively Participate in Care	Case 35, 47, & 48 Video of Vertebrobasilar TIA Video of Lacunar Infarct			
Neuroinfectious Disease (meningitis, encephalitis, CJD, cerebral abscess, herpes zoster)	Inpatient	1	Actively Participate in Care	Case 89 Video of Recurrent Aseptic Meningitis			
Focal or generalized pain syndrome (headache, back or neck pain, painful neuropathy)	Both	1	Actively Participate in Care	Case 98 & 99 Video of Cluster Headache			
Movement disorder (Parkinson's disease, essential tremor, Dystonia, Huntington Disease)	Both	1	Actively Participate in Care	Cases 55 and 58 Video of Parkinson Disease			
Seizure	Both	1	Actively Participate in Care	Cases 104 &10 Video of Complex Partial Seizure			
Weakness or a sensory disturbance stemming from CNS or PNS. (MS, or peripheral neuropathies, MG, etc.)	Both	2	Actively Participate in Care	Cases 76 &12 Video of MG Patient			

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#### **Alternative Experiences**

Students are expected to meet the required clinical experiences and procedures listed in the tables above. If the student does not encounter all the required clinical experiences as listed within the procedures and diagnoses tables, the student will remedy the gap by completing the alternative experience utilizing the process below:

- 1. The student will notify the Clerkship Director or designee that an alternative experience is needed for a procedure or diagnoses seven days prior to the end of the clerkship.
- 2. An approved alternative experience/requirement is completed.
- 3. When logging procedures and diagnoses in one45, the alternative experiences should be identified by selecting the appropriate radio button under Setting and Patient Encounter.

#### **Didactic/Interactive Learning/Simulations Sessions**

The student will participate in weekly interactive lectures or learning modules for the following topics or conditions:

- A. Neuro Exam: Conscious & Unconscious
- B. Neuromuscular Disorders
- C. Multiple Sclerosis
- D. Movement Disorders
- E. Headache/Migraine
- F. Epilepsy
- G. TIA/Stroke

# **Urgent/Emergent Health Care Services**

For a list of emergency contact numbers please visit the College of Medicine's website at the following link: <u>http://phoenixmed.arizona.edu/security-emergency-numbers</u>.

Students may also contact the Associate Dean of Student Affairs at 602-827-9997.

All sites are assessed for student safety. Details of this assessment are included in the <u>Training Site</u> <u>Safety Policy</u>. Faculty and Staff shall not provide medical care for students. Please see the <u>Faculty</u> <u>Providing Medical Care for Students Policy</u> and the <u>Faculty Providing Counseling for Students Policy for</u> <u>details and rationale</u>.

COM-P requires that all students have an updated immunization record. Please see the <u>Immunization</u> and <u>Health Screening Policy</u> for details regarding the contents of the record.

In the event of any exposure to blood/bodily fluids through mucous membranes or the skin, see the following <u>Student Occupational Exposure Policy</u>.



#### **Expectations for Mobile Communication**

The student must be reachable at all times during usual extended work hours and on-call hours, and if in clinical setting, the student should respond within 15 minutes. The students may choose not to provide their cell phone numbers. In that case, the students will be provided a COM-P pager. The student also has the option to give their mobile number for texts; however, the pager and/or voice capability of the cell phone must be functional and available i.e., on the student's person for calls/pages daily. Not responding to calls or pages will be viewed as a deficit in Interpersonal Skills and Communication, as well as Professionalism.

#### Accessibility and Accommodations

Disability Resources (DRC) provides support to faculty in creating access for disabled students, both through course design and reasonable accommodations. Please contact them at 520-621-3268 with questions or visit DRC's website at <u>http://drc.arizona.edu/instructors</u> for information and resources. It is the University's goal that learning experiences be as accessible as possible.

To establish reasonable accommodations, the student must contact the DRC at <u>DRC-</u> <u>Info@email.arizona.edu</u> or 520-621-3268. Please review the Disability Resource Policy for additional detail. The student is welcome to contact the Associate Dean of Student Affairs at 602-827-9997 to discuss options.

#### **Assessment Process**

A mid-clerkship assessment for each student is required as per the Mid-Clerkship Formative Assessment policy <u>http://phoenixmed.arizona.edu/policy/mid-clerkship-formative-assessment-policy</u>. The mid-clerkship assessment will be completed by the Clerkship Director, site director or a designated faculty member at the student's primary clinical site using criteria included in the College of Medicine mid-clerkship assessment form. This form includes performance criteria as well as a portion for narrative comments.

The student's mid-clerkship performance must be reviewed in a face-to-face meeting with a Clinical Director or designee, and the student and Clinical Director or designee must sign the mid-clerkship assessment form as an acknowledgement of the assessment. The timing of the mid-clerkship assessment is during a specific window of dates as specified by policy and LCME. Students are required to pro-actively plan on timely completion of the meeting in discussion with the faculty member who will be completing the review. If there are identified challenges to meeting during the specified window of time, the clerkship director must be notified as soon as possible.

Additionally, throughout the clerkship, faculty and residents engaged in student teaching and supervision will provide formative feedback in a variety of formats (e.g. review of progress notes, H&P, direct observation forms, informal verbal feedback and written narratives, etc.) that may be communicated in writing or verbally. The purpose of this feedback is to identify strengths and opportunities for improvement. Any significant deficiencies or concern should be communicated to the

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clerkship and/or site director with written documentation that the feedback has been provided to the student. In the event that deficiencies are noted late in the clerkship, timely feedback will be given.

A minimum of one clinical end-of-rotation assessment per clerkship or rotation within a clerkship, will be submitted for the student's clinical score by the site director or their appointee. It should be noted that faculty at COM-P who are family members of the student or have a personal relationship with the student may not be involved in the academic assessment or promotion of the medical student as described in the <u>Conflict of Interest-Assessment and Evaluation Policy</u>.

Where applicable, multiple end-of-rotation assessments will be considered in the clinical score calculation (see below under "grading") providing each assessor has had significant interaction with the student. In the instance that only one end-of-rotation assessment is submitted, it will be a collaborative assessment from the preceptors who had significant interaction (as defined by the Clerkship Director) with the student. Where only a single faculty member has been assigned to work with a student, this faculty member will provide an assessment for the student.

All end-of-rotation assessment forms and the clerkship final grade form will be available to be viewed by students by six (6) weeks after the end of the clerkship according to the Reporting Timeline for Final Grades policy in One45.

# **Clerkship Mid Assessment Form**

Posted in One45

Clerkship End of Rotation Assessment Form Posted in One45

#### **Standardized Grading Process**

The final clerkship grade will be determined by the clerkship director using the composite score (comprised of clinical score, exam score, "other" score, and additional criteria for grading approved by the Curriculum Committee (explained further in the "calculating the final grade" section below. The final clerkship grade will be divided into four categories: Honors, High Pass, Pass, or Fail (H, HP, P, F). Details regarding grading in the clerkships are included in the <u>Grading and Progression for Clerkships Policy</u>. Below is a listing of the components of the composite score:

- I. <u>Clinical Score</u>: The clinical score accounts for 50% of the composite score. The clinical score is calculated through assessment of student performance within each individual (Educational Program Objective) EPO. The final EPO score is determined by averaging scores on the end of rotation assessment for each EPO. The clinical score is the average of all final EPOScores.
- II. <u>Exam Score</u>: The NBME shelf exam score accounts for 30% of the composite score. A student, who fails the shelf examination and is successful in the retake of the examination, cannot be awarded any grade higher than a "Pass" for the clerkship. (See <u>Clerkship Grading after</u> <u>Examination Failure Policy</u> for additional details)



III. <u>"Other"</u>: The "OTHER" score accounts for 20% of the composite score. It is the point total for the other observable learning activities specific to the clerkship. Students must attain 60% of these points in order to pass the clerkship.

The Clerkship Director, prior to calculating the clinical score, will ensure that the minimum number of required assessments are available to calculate the clinical score. Once grades are submitted by the 6 week LCME deadline, no further information will be sought nor will additional assessments be accepted.

Who does the Mid-clerkship assessment? The mid-clerkship assessment is done by Dr. Saha for students at St. Joseph's/Barrow Neurological Institute and it is done by Dr. Franz for students at Banner University Medical Center.

Who can fill out an end of rotation assessment? Attendings and residents may fill out end of rotation assessments.

How much time should a student be supervised by an attending to be able to select them as an assessor? There is not a specific time length for a student to be supervised by an attending to be able to select them as an assessor. Students should have worked either in the outpatient clinic or in the inpatient setting with an attending to select them as an assessor.

#### What to do if the attending is not listed in One45

Contact UA coordinator, (PBC-Evaluation@email.arizona.edu). The coordinator will confirm the faculty attending information with the site and then have them added to the UA database

How is the attending notified of the need to do an assessment for a student? See below for responsibilities for communication.

#### Number of Assessments Needed to Calculate Clinical Score

Directors will gather feedback from clinical faculty the student has worked with to compile written comments and scores. A minimum of two assessment forms completed by attendings will be used to calculate the clinical score. Students may request additional forms. Note that there is no limit to the number of forms from attendings; however, a maximum of one end-of-rotation assessment form will be accepted from a resident.



#### **Observable Learning Activities**

	Potential Value			
Case Presentation	History and Exam	4		
	Differential Diagnosis	3	10 Points	
	Treatment-Evidence Based	3		
Simulation	5 Points			
Passport	3 Points			
Mid-Clerkship Evalu	2 Points			

#### **Calculating the Final Grade**

The Clerkship Director is responsible for determination of each student's final grade based on the clerkship specific thresholds included in the table below. The final grade is determined by the composite score and the additional requirements listed below the table.

CLINICAL (50	%)	OTHER (20%)	EXAMINATIO	ON (30%)	COMPOSITI	1	FINAL GRADE
Score	Qualifies for		Score	Qualifies for	Score	Qualifies for	
2.6 - 3.0	Honors		≥81-100	Honors	<u>&gt;</u> 90-100	Honors	Honors IF meets all criteria below
n/a	High Pass	Pass>60%	≥78 – 80	High Pass	≥86-89	High Pass	High Pass IF meets all criteria below
2.0 - 2.59	Pass		≥63 – 77	Pass	≥62-85	Pass	Pass IF meets all criteria below
< 2.00	Fail	Fail <60%	<63	Fail	<62	Fail	See criteria below

The student fails the clerkship if any of the following occur:

- 1. The clinical score is <2.0, OR
- 2. Achievement of a level 1 for two or more EPOs, OR
- 3. Failure of the shelf exam as well as the retake, OR
- 4. Achievement of a score of less than 60 % from the "OTHER" requirements, OR
- 5. Achievement of a total composite score of Fail

The Clerkship Grading Calculator is posted in One45 for assistance calculating the Final Clerkship grade.

The following requirements must be completed by 8am Tuesday after the end of the rotation. :

- 1. Duty hour logging: See the <u>Duty Hours Policy</u> for specifics regarding documentation of hours and a description of a violation.
- 2. Logging of required clinical encounters ("Procedure logging"- PX/DX)
- 3. Completion of the Mid-clerkship Feedback form (see the <u>Mid-Clerkship Formative Assessment</u> <u>Policy for additional detail</u>)
- 4. Completion of assigned site, faculty and end of the clerkship evaluations (see the <u>Course and</u> <u>Faculty Evaluation by Student Policy</u> for additional detail).



If the requirements are not completed by the deadline, the medical student will receive a grade of Incomplete until these assignments are complete. Once completed late, a student will receive a grade no higher than Pass. Compliance with these deadlines will be determined by the Office of Assessment and Evaluation and reported to the Clerkship Director.

# **Additional Grading Criteria**

- 1. The student can only receive a final grade of Honors if they achieve Honors on the clinical score and if the exam score meets the minimum threshold for Honors.
- 2. The student can only receive a final grade of High Pass if the exam score meets the minimum threshold for High Pass and the composite is greater than 85%.
- 3. The student, who fails the shelf examination and is successful in a retake of the shelf examination, cannot be awarded any grade higher than a Pass for the clerkship. See the <u>Clerkship Grading after Examination Policy</u> for more detail.
- 4. Receiving a Level 1 on one EPO will make the student ineligible for a grade higher than pass

A level 1, 2, or, 3 is generated for each EPO based on the scale below as described in detail in the <u>Competency Assessment Policy</u>.

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Level 1 = 1.00-1.99
Level 2 = 2.00–2.59
Level 3 = 2.60-3.00
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A level 1 can be generated for an EPO based on the following ways:

- a) Final EPO score <2.0
- b) Two or more separate faculty raters assign a rating of <2.0 on the same individual EPO, this will result in a Level 1 even if the final EPO score is >2.0.
- c) Assigned by clerkship director based on prolonged demonstration of performance not meeting expectations, a substantial incident, extreme behavior or other events that warrant the level 1 as determined by the clerkship director.

EPO	End of rotation #1	End of rotation #2	End of rotation #3	End of rotation #4	Final EPO Score	Level
Demonstrate H&P	2	2.5	2.5	3	2.5	Level 2
Explain and interpret diagnostic tests	1.5	2	2.5	3	2.25	Level 2
Create a management plan	1.5	1.5	1.5	1.5	1.5	Level 1
Collaborate with team members	1.5	1.5	3	2.5	2.1	Level 1

Feedback to the student by an assessor (site director, attending, Clerkship Director or resident) regarding any problematic behavior in order to offer the student the opportunity to improve should have occurred prior to assigning a score of <2.0 on an EPO. In the event that a critical incident occurs late in the clerkship, timely feedback will be provided.



#### **Narrative Feedback**

The Clerkship Final Grade Form will be completed by the Clerkship Director. The Clerkship final grade form includes two separate areas which include narrative feedback. The first area includes formative comments from the End of Rotation forms, the second includes formalized summative comments which will be included in the Dean's Letter (MSPE). The summative final comments are generally not a direct cut and paste but rather a sample summary determined by the Clerkship Director. The Clerkship Director has the right to include or not include comments based on their interpretation of which comments best summarize the student's performance over the entirety of the clerkship. Students are not permitted to pick specific comments to be included or excluded in their narrative grade form. Students do not grade or summarize their own performance. Any concerns regarding narrative comments may be addressed to the Clerkship Director or Associate Dean of Student Affairs.

# **Required Student Evaluation**

Student evaluation of the clerkship, sites, and assigned didactics is required. The student must complete the evaluations online in the required time frame. All comments will be expected to model constructive feedback using the W3 model, and must contain references and comments to specific behaviors and/or events (positive or negative).

If the student does not complete the required evaluations within one week after the end of the clerkship, the student will be required to submit the missing evaluation data in narrative form within the second week after the clerkship.

- Once the student has successfully submitted their evaluation in narrative form within the second week after the clerkship the student will have successfully demonstrated meeting expectations in Professionalism.
- If the student has not successfully submitted their evaluation in narrative form within the second week after the clerkship the student will be considered as having not met expectations and the Level 1 rating for the EPO targeting giving and receiving constructive feedback, will be automatically assigned resulting in a final grade of no higher than Pass.

For more information, see the <u>Course and Faculty Evaluation by Student Policy</u>.

# Student Feedback

We appreciate your feedback as it is an important and vital part in our efforts to continue improving the Neurology Clerkship. We maintain an open door policy at all times and we welcome any constructive criticism or praise.

Students assigned to rotate at SJHMC will receive a link to complete an online evaluation through "Survey Monkey" from SJHMC Academic Affairs student coordinator upon the completion of the rotation.



#### **Tips and Advice from Previous Students or Residents**

- 1. Always be on time. At the end of each day, ask your resident or attending what time they would like you to arrive the following morning.
- 2. Be enthusiastic, show you are interested and display a positive attitude; be a TEAM player.
  - a. Remember, residents and attendings are much more likely to spend time teaching a student who shows he/she wants to learn.
- 3. Be respectful of patient care areas. Keep noise level down and cell phones on vibrate.
- 4. Treat EVERYONE with respect.
- 5. Seek out learning opportunities, ask to volunteer for procedures or tasks, don't sit passively by and miss out.
- 6. You should be actively reading at every free opportunity, especially about your patients.
- 7. DO NOT LIE, GUESS or ASSUME. You are not expected to know everything, use this rotation as a learning tool and ask appropriate questions.
- 8. Designate one of your pockets as a "clean pocket" to carry small snacks in, but do not eat in front of the patients.
- 9. Don't sit down in the patient's room if the rest of your team is standing.
- 10. Studying:
  - a. You may have time throughout the day, utilize online resources.
  - b. Disciplined study: a few minutes/hours each day may go a long way.

# **One45: Curriculum Management System**

One45 is the curricular management system used to manage assessments about students, and to access learning materials and schedules. General information about the clerkship rotations, such as syllabi, site information, maps, links, etc. will be attached as handouts to each clerkship "course" under Handouts and Links within one45. You can access one45 at the web address: <u>comphx.one45.com</u>

For Faculty and Site Coordinators: If your role requires you to review clerkship rotation schedules, you can view these schedules, as organized by the Clerkships Office, within one45. These schedules include rosters of students scheduled to rotate to your site for specific dates. Unless special arrangements have been made for your particular site, hourly *clinical* schedules are not stored in one45, and should be communicated directly to students.

Assessments are collected via one45, and automatic emails are sent to assessing attendings with instructions and reminders to complete. A list of pending and completed assessments can be reviewed in one45, if applicable.

Students will also use one45 to log observed procedures and diagnoses at clinical sites. Please note that students are able to use their smartphones to make log entries on-the-go, if allowed by site policy.

For Students: one45 will continue as your curricular clerkship management system and will still be used to complete evaluations and access learning materials. It will also house the schedule, objectives, and materials for your clerkship didactic sessions, similar to how your blocks were organized in the MS2 year.

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Clerkship rotation scheduling will look different in one45, as you will all be on separate clerkship rotations. This rotation schedule will appear to you as a week-by-week lineup of clerkship rotations, rather than "hour by hour", because the actual hours you spend at your clerkship site will be determined and managed by the clinical site coordinators. Those hourly schedules will not appear ahead of time in one45, so you should keep track your daily schedule on your own. However, you will be asked to record your "duty hours" (hours spent on rotation at the sites) after-the-fact in one45, to maintain compliance with ACGME standards.

# **Professionalism Resource**

The Professional Resource Office (PRO) provides guidance, support and information to students on professionalism issues. The PRO supports students in the development of strong, positive professional practices with peers, faculty, patients and the broader community through effective communication and conflict management.

- Professionalism concerns may be reported directly to the Clerkship Director or included in the student evaluation of the clerkship.
- The <u>Professionalism Conduct Comment Form</u> is an additional mechanism for students to report any concerns, including those about supervision, and it exists across the four-year curriculum. This mechanism ensures anonymity and is collected directly by the Professional Resource Office. This form may be submitted either online or in hard copy to the comment box located on the main floor of the Health Sciences Education Building.

COM-P is committed to creating and maintaining an environment free of discrimination, harassment and retaliation that is unlawful or prohibited by university policy. Please see the <u>Mistreatment of Medical</u> <u>Students Policy</u>, the <u>Anti-Harassment and Nondiscrimination Policy</u> and the <u>Professionalism Policy</u> for additional information. In addition, professional attributes are expected of all students. These attributes are within the <u>Teacher Learner Compact</u>.

Beth Schermer and Rosemarie Christofolo are the liaisons for the Professional Resource Office. Their office is in HSEB A451. They can reach them by telephone, text or email.

Beth Schermer 602-549-9847 schermer@email.arizona.edu Rosemarie Christofolo 480-862-4963 rchristofolo@email.arizona.edu