Pediatric Clerkship Syllabus

Academic Year 2017-2018

THE UNIVERSITY OF ARIZONA
COLLEGE OF MEDICINE-PHOENIX
435 North Fifth Street
Phoenix, Arizona 85004
Phone 602-827-2001 • Fax 602-827-2074

Approved by Curriculum Committee 03/03/2017
# Table of Contents

Welcome .................................................................................................................. Page 2  
Chapter 1:  
  Pediatric Clerkship Organization and Description .................................................. Page 3  
  Educational Program Objectives ............................................................................. Page 4  
  Pediatric Clerkship Objectives ................................................................................ Page 4  
  Clerkship Attendance Requirements ...................................................................... Page 5  
  Additional Clerkship Requirements ........................................................................ Page 7  
  Required and Suggested Reading .......................................................................... Page 7  
  Required Clinical Experience Logs ........................................................................ Page 7  
  Alternative Experiences .......................................................................................... Page 8  
  Didactic/Interactive Learning/Simulation Sessions ................................................ Page 9  
  Urgent/Emergent Health Care Services ................................................................ Page 9  
  Expectations for Mobile Communications ............................................................... Page 9  
  Accessibility and Accommodations ....................................................................... Page 9  
Chapter 2:  
  Clerkship, Assessments, Evaluation, and Standardization Grading Process .......... Page 11  
  Assessment process ............................................................................................... Page 11  
  Standardized Grading Process .............................................................................. Page 12  
  Pediatric Clerkship Observable Learning Activities ............................................. Page 12  
  Calculating the Final Grade .................................................................................... Page 13  
  Additional Grading Criteria .................................................................................... Page 14  
  Narrative Feedback ............................................................................................... Page 15  
  Required Student Evaluation ................................................................................ Page 15  
Chapter 3:  
  Pediatric Clerkship Additional Information .......................................................... Page 17  
Chapter 4:  
  Rural Health Professions Program ...................................................................... Page 19  
Chapter 5:  
  Integrated Courses ............................................................................................... Page 20  
  Longitudinal Patient Care Course ........................................................................ Page 20  
  Intersessions Course .............................................................................................. Page 21  
Chapter 6:  
  National Board of Medical Examiners (NBME) Shelf Exam .................................. Page 23  
  Accommodations .................................................................................................. Page 23  
  Exam Retake ........................................................................................................ Page 23  
Chapter 7:  
  Data Management – One45 .................................................................................. Page 24  
  For Faculty and Site Coordinators ........................................................................ Page 24  
  For Students .......................................................................................................... Page 24  
Chapter 8:  
  Professional Resource Office ................................................................................ Page 26
Welcome to the Pediatric Clerkship. The mission of this clerkship is to provide medical students with an appreciation and understanding of pediatrics through an excellent clinical and educational experience, while fostering the development of more complete and compassionate physicians.

The focus of this experience will be on developing an ample understanding of basic and clinical science. During the next six weeks, students will be challenged in areas of medical knowledge; patient care; interpersonal and communication skills; professionalism; critical appraisal and quality improvement; and societal awareness and responsiveness.

The Pediatric Clerkship will encompass activities in several subspecialty areas. While students may not master all aspects of pediatrics by the end of this clerkship, students are expected to achieve a level appropriate for a third-year clerk.

Edith Allen, M.D.
Pediatric Clerkship Director
Pediatric Clerkship Organization and Description

The pediatric clerkship is a six-week clerkship experience that is divided into a three-week inpatient and three-week outpatient experience. Students are expected to achieve a level of responsibility in the clinical setting appropriate for a third year clerk including: independent data gathering, critical assessment of the data, and communication to other health professionals, as well as demonstrate professional behavior.

<table>
<thead>
<tr>
<th>Clerkship</th>
<th>Pediatrics</th>
</tr>
</thead>
<tbody>
<tr>
<td>Edith Allen, MD, FAAP Clerkship Director</td>
<td>Edith Prieto Allen, MD, FAAP, is a Hospitalist at Phoenix Children’s Hospital. She is a Clinical Associate Professor and a Board Certified Pediatrician. She earned her Medical Degree from the Universidad Mexico-Americana del Norte in 1998 and practiced general medicine from 1999-2002 at the Santander Specialty Hospital. She immigrated to the United States to start her pediatric residency training in 2002 at Driscoll Children’s Hospital in Corpus Christi, Texas. She later transferred to St. Joseph’s Hospital as a third year pediatric resident. She completed a fellowship in General Academic Pediatric at St. Joseph’s Hospital as well as the Faculty Development Fellowship Program thru the University of Arizona 2005-06. Prior to joining PCH in 2011, she was part of the Pediatric Faculty at St. Joseph’s Hospital. She served as Creighton University’s Pediatric Clerkship Director (2006-2014). She is the recipient of teaching awards from the Pediatric residency program.</td>
</tr>
</tbody>
</table>

| Length | Six week rotation |
| Didactics/Interactive Learning Sessions | Academic Half-day – Thursday afternoons (except for Week 6, which will occur on Tuesday). |
Educational Program Objectives

As approved by the general faculty, the Educational Policy Committee has established educational program objectives for the program leading to the M.D. degree. The Educational Program Objectives are comprised of competencies and the measureable 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 http://phoenixmed.arizona.edu/students/curriculum/educational-program-objectives and require dissemination as noted in the Orientation to EPOs and Course Objectives Policy.

Pediatric Clerkship Objectives

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Obtains a complete pediatric history and perform a physical examination adjusting to the child's age and developmental milestones.</td>
</tr>
<tr>
<td></td>
<td>- Learn the pertinent information for the different types of encounters and child's age</td>
</tr>
<tr>
<td></td>
<td>- Learn to perform a HEADDDS interview in adolescents.</td>
</tr>
<tr>
<td></td>
<td>- Learn to interpret growth parameters and vital signs.</td>
</tr>
<tr>
<td>2</td>
<td>Prioritizes the clinical problems and generates a logical differential diagnosis.</td>
</tr>
<tr>
<td>3</td>
<td>Constructs a plan for a well-child and a sick encounter. Pediatric preventative care in a sick encounter.</td>
</tr>
<tr>
<td>4</td>
<td>Documents accurate information in the electronic health care record (ex. physical examination findings) and modify the care plan in accordance to the most current information or best available evidence.</td>
</tr>
<tr>
<td>5</td>
<td>Concisely communicates with healthcare members (intern, resident, attending or subspecialists - including presentations during rounds and written documentation).</td>
</tr>
<tr>
<td>6</td>
<td>Interpret common laboratory and radiologic test performed in pediatric patients.</td>
</tr>
<tr>
<td>7</td>
<td>Anticipate needs for patients and their families (ex. Non-English speaking families and the use of translator, need to refer to a subspecialists or therapist, discharge instructions and education).</td>
</tr>
<tr>
<td>8</td>
<td>Provide age and cultural appropriate health education, safety instruction, preventative care and anticipatory guidance for a child and their family based on their needs and reason for the encounter.</td>
</tr>
<tr>
<td>9</td>
<td>Show integrity and accountability in all interactions with patients, their families, professional colleagues and all the clerkship requirements.</td>
</tr>
</tbody>
</table>
### Clerkship Attendance Requirements

A student may not miss more than 0.5 days per week of a rotation due to illness or emergency. A longer absence must be remediated in consultation with the Clerkship Director and Academic Affairs or the rotation must be repeated. Please see the **Attendance and Absence-Year 3 and 4 Policy**, the **Leave of Absence Policy** and the **Attendance Expectations and Absence Reporting Requirements Policy**.

<table>
<thead>
<tr>
<th>Didactics/Interactive Learning Sessions</th>
<th>ACADEMIC HALF-DAY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Thursday afternoons except for Week 6, when this will occur on Tuesday (See Clerkship Objectives above.) Students will be required to attend didactic sessions, which are held Thursday or Tuesday afternoon during the six week clerkship. During those sessions, we will cover a total of 32 case-base modules that the student will be responsible to prepare for. The student will take a 50-question quiz on Weeks 2, 4 and 6.</td>
<td></td>
</tr>
<tr>
<td>STUDY TIME</td>
<td>The students have spared every day from 5:00 p.m. – 6:00 p.m. to study and to complete CLIPP cases.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Clinical Site Requirements</th>
<th>GRAND ROUNDS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grand rounds are held on Tuesday mornings from 7:30 a.m. – 8:30 a.m. Students at PCH or MMC are expected to attend grand rounds (physically or on-line thru GoToMeeting.com). The clerkship coordinator will send you the schedule specifying the topic and location.</td>
<td></td>
</tr>
<tr>
<td>CHIEF MORNING REPORT</td>
<td>Chief morning reports are held on Friday mornings from 7:30 a.m. – 8:30 a.m. Students should attend the morning reports at their respective assigned sites.</td>
</tr>
<tr>
<td>RESIDENT CONFERENCES</td>
<td>Resident noon conferences are held at each respective site and students can participate, although attendance is NOT mandatory. This time can be used to complete the CLIPP case of the day (12:15 p.m. – 1:15 p.m.).</td>
</tr>
</tbody>
</table>
| INPATIENT | Students will be assigned to a particular ward team, consisting of interns, senior residents and an attending. Students will be directly following patients with an intern and will be expected to:

1. Obtain initial history and physical exam |
2. Write progress notes in the electronic medical record
3. When permitted, write orders and prescriptions
4. Present patients on morning work rounds and attending rounds
5. Formulate a differential and management plan, and
6. Be an active participating member of the ward team

It is anticipated that students should maintain a minimum daily census of three patients. At both locations, students are expected to arrive daily to the wards no later than 7:00 a.m. At both locations, the residents work on shifts from 6:00 am. – 6:00 p.m. There are no weekday calls. At both locations, the student will have one weekend call (Saturday and Sunday from 6:00 am. – 6:00 p.m.). Students may also be assigned to night shifts from 6:00 p.m. – 6:00 a.m. from Sunday to Tuesday. Call rooms are available for students. (If fatigued, do not drive after the above delineated call duties).

**OUTPATIENT**
Students will be assigned to rotate through a variety of different outpatient clinics. Each particular site will provide more details about the specific outpatient clinics and newborn nursery or urgent care experience that students will rotate through during this outpatient experience. Students are expected to engage in similar responsibilities as described above in the inpatient experience.
Clinic hours are 7:45 a.m. – 5:00 p.m. Monday to Friday, except for Tuesday and Thursday to accommodate for Grand Rounds and Chief morning report respectively (7:30 a.m. – 8:30 a.m.).
For Nursery, the hours are 6:00 a.m. – 12:00 p.m. Monday to Friday, and then report to the afternoon clinic.
For the Urgent Care, the shift is 5:00 p.m. – 12 p.m. Monday to Thursday.
There are no call responsibilities during the outpatient portion of the clerkship.

<table>
<thead>
<tr>
<th>Structured Clinical Observations (SCO’s)</th>
<th>Direct observation of students’ clinical skills and experience is a requirement to get credit for the clerkship. Students will be asked to have residents and/or faculty complete direct observation cards through an encounter known as the structured clinical observation (SCO). Residents and faculty will observe students for a brief amount of time during one of the following areas: History taking, Physical exam, and Oral presentations to both patients/families and house staff/faculty (see attached direct observation card). Students will be responsible for having direct observation cards completed and submitted to the clerkship coordinator at their respective site. It is expected that students should have completed 2 observation cards (one during the</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Quizzees</th>
<th>The quizzes are based on the assigned CLIPP cases (see session objectives in Chapter 4 for specific assignments). During the didactic sessions on Week 2, 4 and 6 (50 questions in 60 minutes).</th>
</tr>
</thead>
</table>
| Additional Requirements | Procedure and Diagnosis Logging in One45  
Duty Hours Logging in One45 |
| Websites | Other web-based sources for information include: Up To Date ([www.utdol.com](http://www.utdol.com)) and Pediatrics in Review ([www.pedsinreview.aappublications.org](http://www.pedsinreview.aappublications.org)). |

### Required and Suggested Reading

1. **Nelson Essentials of Pediatrics** by Richard Behrman & Robert M. Kliegman  
2. **Blueprints Q & A Step 2 Pediatrics** by Dr. Jeff Foti & Janice P. Piatt- a multiple choice question book designed to mimic the Step exam and useful for SHELF exam studying/general knowledge, and  
3. **The John Hopkins Hospital Harriet Lane Handbook** by Jason Robertson & Nicole Shilkofski- a handbook designed to be used as a point of care reference for quick education, laboratory values and formulary needs.

These will be made available to you by Steven Allen (Clerkship Coordinator) during Orientation.

### 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 to remedy any identified gaps as detailed in the [Core Clinical Skills Observation Policy](#). 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 H&Ps, presenting the patient on rounds, as scrubbing into a case 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 [Faculty Supervision of Medical Students in Clinical Learning Situations Policy](#) and the [Faculty Supervision of Sensitive Physical Examination Policy](#). 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.
<table>
<thead>
<tr>
<th>Required Procedures</th>
<th>Clinical Setting</th>
<th>Level of Student Responsibility</th>
<th>Alternative Experience</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interpret weight, height, OFC, BMI</td>
<td>Both</td>
<td>Perform Procedure</td>
<td>CLIPP Case 26</td>
</tr>
<tr>
<td>Interpretation of vital signs (age 0-1yr)</td>
<td>Both</td>
<td>Perform Procedure</td>
<td>CLIPP Case 2</td>
</tr>
<tr>
<td>Interpretation of vital signs (age 1-5yr)</td>
<td>Both</td>
<td>Perform Procedure</td>
<td>CLIPP Case 3</td>
</tr>
<tr>
<td>Interpretation of vital signs (age 6-12yr)</td>
<td>Both</td>
<td>Perform Procedure</td>
<td>CLIPP Case 4</td>
</tr>
<tr>
<td>Interpretation of vital signs (age 13-20yr)</td>
<td>Both</td>
<td>Perform Procedure</td>
<td>CLIPP Case 5</td>
</tr>
<tr>
<td>mCHAT (autism screening tool)</td>
<td>Outpatient</td>
<td>Perform Procedure</td>
<td>Simulation</td>
</tr>
<tr>
<td>PEDS tool (development screening tool)</td>
<td>Outpatient</td>
<td>Perform Procedure</td>
<td>Simulation</td>
</tr>
<tr>
<td>HEADDDS interview</td>
<td>Both</td>
<td>Perform Procedure</td>
<td>CLIPP Case 5</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Required Diagnoses</th>
<th>Clinical Setting</th>
<th>Level of Student Responsibility</th>
<th>Alternative Experience/Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hyperbilirubinemia</td>
<td>Both</td>
<td>Actively Participate in Care</td>
<td>CLIPP case 8</td>
</tr>
<tr>
<td>Fever</td>
<td>Both</td>
<td>Actively Participate in Care</td>
<td>CLIPP case 10 &amp; 11</td>
</tr>
<tr>
<td>Growth and/or developmental delays and/or concern</td>
<td>Both</td>
<td>Actively Participate in Care</td>
<td>CLIPP case 26 &amp; 28</td>
</tr>
<tr>
<td>Abdominal pain</td>
<td>Both</td>
<td>Actively Participate in Care</td>
<td>CLIPP case 27</td>
</tr>
<tr>
<td>Respiratory tract infection: upper and/or lower</td>
<td>Both</td>
<td>Actively Participate in Care</td>
<td>CLIPP case 12 &amp; 14</td>
</tr>
<tr>
<td>Well-child exam: infant</td>
<td>Outpatient</td>
<td>Actively Participate in Care</td>
<td>CLIPP case 2</td>
</tr>
<tr>
<td>Well-child exam: toddler</td>
<td>Outpatient</td>
<td>Actively Participate in Care</td>
<td>CLIPP case 3</td>
</tr>
<tr>
<td>Well-child exam: school-age</td>
<td>Outpatient</td>
<td>Actively Participate in Care</td>
<td>CLIPP case 4</td>
</tr>
</tbody>
</table>

**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 that an alternative experience is needed for a procedure or diagnoses one week 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/Simulation Sessions

Abdominal pain
Adolescent’s common complaints
Breastfeeding
Common problems in neonates
Cough and wheezing
Endocrinology cases
Ethics session
Fever and Rashes in Children
Fluids and electrolytes
Fussy baby
Neurology Review
Pediatric Radiology
Poor Feeding in the Neonate
Respiratory distress
Rheumatology cases
Telephone Interview and Documentation in the EHR workshop
Well child exam and Preventive Pediatrics

Urgent/Emergent Health Care Services

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

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

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

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

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 to not provide their cell phone numbers. In that case, the students will be provided a COM-P pager. Students also have an option to give their mobile number for texts; however, the pager and/or voice portion of the cell phone must still 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 http://drc.arizona.edu/instructors for information and resources.

It is the University’s goal that learning experiences be as accessible as possible. If the student anticipates or experiences physical or academic barriers based on disability or pregnancy, please contact the Associate Dean of Student Affairs, at 602-827-9997 immediately to discuss options. Students are also welcome to contact Disability Resources at DRC-Info@email.arizona.edu or (520-621-3268) to establish reasonable accommodations. Please review the Disability Resource Policy for additional detail.

Please be aware that the accessible table and chairs in this room should remain available for students who find that standard classroom seating is not usable.

Instructors are encouraged to provide appropriate individual flexibility to all students. When disability-related accommodations are requested, instructors should consult with DRC staff to identify strategies or accommodations to provide access.

DRC staff is available for individual consultation or to attend departmental meetings to address concerns and provide information. Contact DRC-Info@email.arizona.edu or 520-621-3268.
Clerkship Assessments, Evaluation and Standardized Grading Process

Assessment Process

A mid-clerkship assessment for each student is required as per the Mid-Clerkship Formative Assessment policy. 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 teacher, and the student and clinical teacher 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 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 Conflict of Interest-Assessment and Evaluation Policy.
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.

**Pediatric Clerkship Mid Assessment Form** – Posted in One45
**Pediatric 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 Grading and Progression for Clerkships Policy. Below is a listing of the components of the composite score:

I. **Clinical Score:** 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 EPO Scores.

II. **Exam Score:** 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 Clerkship Grading after Examination Failure Policy for additional details)

III. “Other”: 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.

**Pediatric Clerkship Observable Learning Activities**

<table>
<thead>
<tr>
<th>Activity</th>
<th>Potential Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Bi-weekly quiz average score or CLIPP case completion</td>
<td>Up to 10 points</td>
</tr>
</tbody>
</table>
1. Bi-weekly quiz average score or CLIPP case completion: up to 10 points.
   CLIPP cases: Successfully completion of 26 cases or more = 10 points; 21-25 = 9 points; 15-20 = 8 points; 13-14 = 7 points, 11-12 = 6 points; 9-10 cases = 5 points; 7-8 cases = 4 points; 5-6 cases = 3 points; 3-4 cases = 2 points; 1-2 cases = 1 point.
   OR
   If the student chooses the bi-weekly quiz scores to obtain the 10 points, there are three bi-weekly quizzes (to be administered on Weeks 2, 4 and 6 of the clerkship). The scores will be added and from the average of the three scores, those scores with decimals below <0.5 will be rounded down; scores with decimals ≥0.5 will be rounded up. The final average score of the three bi-weekly quizzes will be multiplied by .10.

2. Simulation and teaching conference participation + timely submission of SCO (observation cards), duty hours and logging of procedure and diagnoses (PXDX): up to 5 points.
   - Incomplete diagnoses list will be a point deduction the “Other” category.
   - Incomplete procedures will be a point deduction the “Other” category.
   - Incomplete time logs will be a point deduction the “Other” category.
   - Incomplete SCO will be a point deduction the “Other” category.

* Days off (including weekend and holidays) must be marked as “off” to be 100% complaint with the time log report.

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.

<table>
<thead>
<tr>
<th>CLINICAL (50%)</th>
<th>OTHER (20%)</th>
<th>EXAMINATION (30%)</th>
<th>COMPOSITE</th>
<th>FINAL GRADE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Score</td>
<td>Grade</td>
<td>Score</td>
<td>Qualifies for</td>
<td>Score</td>
</tr>
<tr>
<td>2.60 - 3.00</td>
<td>Honors</td>
<td>83 - 100</td>
<td>Honors</td>
<td>≥86.2</td>
</tr>
<tr>
<td>2.30 – 2.59</td>
<td>High Pass</td>
<td>79 - 82</td>
<td>High Pass</td>
<td>≥85</td>
</tr>
<tr>
<td>2.00 - 2.29</td>
<td>Pass</td>
<td>62 - 78</td>
<td>Pass</td>
<td>≥63.9</td>
</tr>
<tr>
<td>&lt; 2.00</td>
<td>Fail</td>
<td>&lt;62</td>
<td>Fail</td>
<td>&lt;63.9</td>
</tr>
</tbody>
</table>
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 following requirements must be completed by the defined deadlines:
1. Duty hour logging (within 3 days of the end of the clerkship). See the Duty Hours Policy for specifics regarding documentation of hours and a description of a violation.
2. Logging of required clinical encounters (“Procedure logging”) (within 3 days of the end of the clerkship)
3. Completion of the Mid-clerkship Feedback form (see the Mid-Clerkship Formative Assessment Policy for additional detail)
4. Completion of assigned didactic, site, faculty and end of the clerkship evaluations (see the Course and Faculty Evaluation by Student Policy 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 completed. Once completed late, a student will receive a grade no higher than Pass.

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.
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 Clerkship Grading after Examination Policy 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 Competency Assessment Policy.

<table>
<thead>
<tr>
<th>Level</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Level 1</td>
<td>1.00-1.99</td>
</tr>
<tr>
<td>Level 2</td>
<td>2.00–2.59</td>
</tr>
<tr>
<td>Level 3</td>
<td>2.60-3.00</td>
</tr>
</tbody>
</table>

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.
Examples of how levels are assigned:

<table>
<thead>
<tr>
<th>EPO</th>
<th>End of rotation #1</th>
<th>End of rotation #2</th>
<th>End of rotation #3</th>
<th>End of rotation #4</th>
<th>Final EPO Score</th>
<th>Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>Demonstrate H&amp;P</td>
<td>2</td>
<td>2.5</td>
<td>2.5</td>
<td>3</td>
<td>2.5</td>
<td>Level 2</td>
</tr>
<tr>
<td>Explain and interpret diagnostic tests</td>
<td>1.5</td>
<td>2</td>
<td>2.5</td>
<td>3</td>
<td>2.25</td>
<td>Level 2</td>
</tr>
<tr>
<td>Create a management plan</td>
<td>1.5</td>
<td>1.5</td>
<td>1.5</td>
<td>1.5</td>
<td>1.5</td>
<td>Level 1</td>
</tr>
<tr>
<td>Collaborate with team members</td>
<td>1.5</td>
<td>1.5</td>
<td>3</td>
<td>2.5</td>
<td>2.1</td>
<td>Level 1</td>
</tr>
</tbody>
</table>

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.

Receiving a Level 1 on one EPO will make the student ineligible for a grade higher than pass.

If a student achieves a level 1 for two or more EPOs, they fail the clerkship. The failure will result in the assignment of 2 summative level 1s. The [Level 1 Competency Appeal Policy](#) describes a student’s option to appeal a level 1.

Please review the [Promotion Policy](#) and the [Student Progress Policy](#) for information regarding student progression.

**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 timeframe. 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 mid or 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 Course and Faculty Evaluation by Student Policy.

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

Computer Assisted Learning in Pediatrics Program (CLIPP)

CLIPP cases are a comprehensive and interactive internet-based learning program that is designed to provide students with a supplemental exposure to various concepts and pediatric patient types. CLIPP is composed of 32 cases (encompassing the entire COMSEP curriculum), with each case taking about 30-60 minutes to complete. The website to access these cases can be found at http://www.med-u.org/clipp/.

The cases emphasize clinical problem solving and each module has practice questions, answers and teaching pearls.

To register, follow these instructions.
1. Go to http://www.med-u.org/clipp/
2. Under the Support tab on top toolbar, click on Login In/Registering.
3. Click on Step 2 – Register for Virtual Case Access.
4. Under the statement, if you are a student at a subscribing institution, click the link Institutional Subscribers.
5. Enter your name, U of A email address and your chosen password. Create a password that you will be able to remember. The institution is Arizona.
6. Please accept the User Terms and Conditions and click Send.

Note! If you do not receive an email with a confirmation link which allows you to finalize the registration process within a day, please contact Matt Stelling to help troubleshoot your registration.
CLINICAL SITES

2601 E. Roosevelt
Phoenix, AZ 85008
602-344-5011
http://www.mihs.org

David Brodkin, M.D.
Inpatient Site Clerkship Director
Clinical Assistant Professor
David_Brodkin@dmgaz.org

Zachary Robbins, M.D.
Outpatient Site Clerkship Director
Clinical Assistant Professor
Zachary_Robbins@dmgaz.org

Lysette Borquez
Coordinator
Lysette_Borquez@dmgaz.org
Phone: 602-344-5885
Fax: 602-344-5859

1919 E. Thomas Road
Phoenix, AZ  85016
602-933-1000
www.phoenixchildrens.com

Dustin Rayhorn, M.D.
Inpatient Site Clerkship Director
Clinical Assistant Professor
drayhorn@phoenixchildrens.com

Kathy Mullens, M.D.
Outpatient Site Clerkship Director
Clinical Assistant Professor
kmullens@phoenixchildrens.com

Steven Allen
Clerkship Coordinator
Sallen5@phoenixchildrens.com
Phone: 602-933-0778
Rural Health Professions Program

Students completing a rural rotation are encouraged to attend the Rural Rotation Orientation scheduled during Transitions.

Housing is offered by the Rural Health Professions Program (RHPP) and funded by Arizona Area Health Education Centers (AzAHEC). The student is responsible for damages and incidental charges. Housing is booked on availability and within budget, often housing is with host family or shared living situation. Student must notify us with specific accommodations outside of single occupancy during Rural Rotation Orientation. The student will be notified of housing accommodations offered by university, 8 weeks before rotation, student must either confirm or deny accommodations. If student opts out of offered housing it will then be the student’s responsibility to arrange all housing accommodations and the student will be responsible for payment. The student will then receive a reimbursement determined by the RHPP.

After successful completion of the rotation student will be reimbursed for one round trip mileage and stipend. Money is reimbursed through student’s bursar’s account and is subject to change based on funding period.

The student must complete all required Rural Rotation paperwork through the Student Portal prior to the start of the rotation.

Contact Information:

Jonathan Cartsonis, MD  
Director, RHPP  
jcartsonis@email.arizona.edu  
Cell: 602-684-0598

Sara Hillman, MBA  
Assistant Director, RHPP  
shillman@email.arizona.edu

Hanna LoGrasso  
Program Coordinator  
hmlogras@email.arizona.edu
Integrated Courses

During the academic year, the student will be required to attend these integrated courses.

Longitudinal Patient Care

The Longitudinal Patient Care Course (LPC) provides students the opportunity to work in interprofessional teams with a community health mentor throughout a two year course in Years 3 and 4 of the medical curriculum. The community health mentor is an adult in the community with a chronic medical condition that is willing to share their experience as a patient with a team of interprofessional students. The students will meet with their community health mentor as a group once per clerkship block to learn about the community health mentor’s medical condition, barriers to care, effective communication strategies, and interprofessional collaboration. Activities and objectives are designed to prepare students for interprofessional patient centered care to improve healthcare quality and collaboration.

Contact information:
Course Director – TBA
email – TBA
Office Hours and Location – TBA

Mary Blair, Assistant Director
Phone/Email: 602-827-2241 maryblair@email.arizona.edu
Office Location: HSEB BC503C

Required Assignments and Dates are included within one45.
All LPC sessions are mandatory

- In the event a student is ill the day of a scheduled LPC session, the student must first contact their community health mentor and members of their team. They must then notify Mary Blair, LPC Assistant Director (maryblair@email.arizona.edu). Students will be provided an alternate assignment to complete in the setting of an excused absence.
- In the event of a missed session at the behest of the community health mentor, the student must notify Mary Blair, LPC Assistant Director (maryblair@email.arizona.edu). The team will receive an alternative assignment to complete in person with their interprofessional team during the originally scheduled time. The students are not to reschedule the community health mentor session.
Student Responsibilities:

- Attend scheduled sessions with community health mentor once during each six-week clerkship block at the assigned date and time.
- Students are excused from their clerkship responsibilities from 1-5 PM on that day, providing students the time to travel to the meeting location, participate in the module with the community health mentor, and begin to work on the written assignment.
- Students may not be on call the night before a community health mentor visit and may not violate duty hour requirements.
  - If a student is scheduled on call the night prior to the visit, the student must work with the site director and clerkship director at the beginning of the rotation to reschedule the call night.
- Complete all written assignments by the assigned due date.
- Log attendance at all community health mentor sessions.
- Adhere to the Longitudinal Patient Care Course Student Procedures and the Information Protection Protocol.
- Wear professional dress and adhere to professional behaviors.
- Students are not engaging in a doctor-patient relationship with the community health mentor. The student may not provide medical advice to the community health mentor. The student may not comment on the health care provided by the community health mentor’s physicians or other healthcare professionals.
- If the student at any point feels unsafe, the student must immediately seek safety and contact emergency personnel (911) as appropriate. The student must contact the Course Director so that alternative arrangements can be made.
- In the event of an emergency, the student must immediately contact 911. The student must contact the Course Director so that alternative arrangements can be made.

For additional information, please see the Longitudinal Patient Care Course syllabus.

**Intersession Courses – Year Three Advanced Clinical Skills**

The year three Intersession Course is an opportunity for students to return to campus to learn new skills and revisit basic sciences after being actively involved in patient care. It is a time to FOCUS on personal and professional goals, and come together as a class for collaborative and reflective time as they continue to progress in their journey of becoming physician.

The Year 3 Advanced Clinical Skills course is a Pass/Fail course with attendance and participation the most important keys to success.

Content includes the following:

- Themes: Ethics, Biomedical Informatics, Behavioral Science, Healthcare Transformation and Public Health, Prevention, Population Health, Cultural Competency, Gerontology/Geriatrics, Individualized Prevention and Care, Interprofessional Education & Practice
- Revisit Basic Science curriculum in the context of the clinical years
  - Clinical Radiology
Contact Information:
Jayne Peterson, MD, Course Director
jpeterson@email.arizona.edu

Lisa Yanez, MBA, Assistant Director
lyanez@email.arizona.edu

For additional information, please see the Intersession Course syllabus.
National Board of Medical Examiners (NBME) Shelf Exam

NBME subject exams are achievement tests in a broad sense, requiring medical students to solve scientific and clinical problems. Although students’ performance on the exams will reflect the learning specific to their course and clerkship experiences, their test scores will also reflect educational development resulting from their overall medical school experiences. These exams are constructed to be appropriate for a broad range of curricular approaches.

All shelf exams are administered on the last day of the rotation. Students will be sent a reminder notice that will include the date, time and location of the exam. The time allotted for the exam is 2 hours and 30 minutes.

Accommodations

As per the Examination Day Policy and Course, Clerkship & OSCE Exam Absence Policy, permission must be obtained for an exception to sitting for the exam at the scheduled time/date and will only be granted due to illness or a serious unforeseen circumstance.

Special accommodations must be approved through the Student Affairs. Permission must be obtained for an exception to sitting for the exam at the scheduled time/date and will only be granted due to illness or a serious unforeseen circumstance. If a student has a documented disability on file with the Disability Resource Center, and would like to utilize testing accommodations, the student should notify Stephanie Smith, Director of Student Development slsmith1@email.arizona.edu within five business days prior to the exam to ensure the proper accommodation can be made on the student’s behalf.

Exam Retake

A student, who fails a clerkship or clerkship examination and is successful in the retake of the clerkship and/or examination, cannot be awarded any grade higher than a “Pass” for the clerkship. Specifically, no grade of “high pass” or “honors” can be awarded for the clerkship, regardless of the student score on the retake examination or the clinical assessment score.

See Exam Retake policy for additional details.
Data Management

One45 is the curricular management system used to manage assessments about students, and to access learning materials and schedules. One45 is accessed at the web address: comphx.one45.com

For Faculty and Site Coordinators

If your role requires you to review clerkship rotation schedules, you will be able to 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.

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.

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. One45 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.

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.

One45 will also continue to be the location where you log procedures and diagnoses (as you did in CCE), for all of the clerkships. With the increased frequency of Px/Dx logging in the clerkships, remember that the One45 procedure logging page is mobile-web compatible, for easy logging during your rotations.

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.
Professional Resource Office

The Professional Resource Office (the Office) provides guidance, support and information to students on professionalism issues. The Office supports medical 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 Professionalism Conduct Comment Form 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 Mistreatment of Medical Students Policy, the Anti-Harassment and Nondiscrimination Policy and the Professionalism Policy for additional information. In addition, professional attributes are expected of all students. These attributes are within the Teacher-Learner Compact.

Frequently Asked Questions

What is the Professional Resource Office? The Professional Resource Office at the University of Arizona College of Medicine – Phoenix (College of Medicine) provides education, information and support to students and faculty on professionalism issues. The Office’s activities focus in three areas:

- Outreach and education. The Office provides outreach and education to identify and increase understanding of professional practices and effective communication.
- Support and resources. The Office supports students and faculty seeking to address a particular concern by providing information on policies, procedures, resources, and options. This can include support in handling an issue independently, serving as a neutral in resolving an issue, shuttle diplomacy or facilitating access to other resources.
• **Tracking and feedback.** The Office works with College of Medicine leadership to identify and recognize instances of strong professionalism and to address areas of potential concern or improvement.

**How can I contact the Office?**

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

You can also provide information through the feedback box located in the student lounge or through the online Professionalism Conduct Comment form at:  
http://phoenixmed.arizona.edu/about/college-glance/leadership/deans-office/professional-resource-office/professionalism-conduct

**Are discussions confidential?** The Office will maintain confidentiality concerning matter brought to it to the extent permitted by law and University of Arizona policy unless there appears to be an imminent threat of serious harm or unless given permission from the student to do otherwise. The Office will take all reasonable steps to protect records and files pertaining to confidential discussions, to the extent permitted by law and University of Arizona policy.

**Is the Office the only place to raise professionalism issues?** No. The College of Medicine provides a wide range of resources to its students to address professionalism issues, including the Office of Student Affairs, student mentor programs, wellness programs and professionalism studies integrated into curriculum components. The Office is another portal for students to gain information on professional practices that is independent of student evaluations and review.