

Neurology Clerkship Syllabus Academic Year 2023-2024

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Section A - Neurology Clerkship Curriculum

Clerkship Information

Prerequisites: All students must successfully pass all pre-clerkship curricular elements in order to progress to the third year. Link to policy: Enrollment, Sequencing and Grading for Pre-Clerkships Policy

Credit Hours: 4

Course Code: NEUP 844 Clerkship Length: 4 Weeks

UArizona Website: Neurology Clerkship

Clerkship Resources: Neurology Resources, OASIS, one45

Clerkship Contacts

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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: 4-week rotation

1. Two weeks in an inpatient setting



- 2. Two weeks in an outpatient 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):
 - Cognitive Disorders
 - Epilepsy
 - General Neurology
 - Headache
 - Movement Disorder
 - Neuroimmunology
 - Neuromuscular
 - Neuro-Oncology
 - Stroke
 - Traumatic Brain Injury

Clinical Sites

For a list and description of the Neurology Clerkship sites, please see the following site: Clerkship Resources

Clerkship 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.



Clerkship Requirements

Attendance Requirements

All clerkship experiences are mandatory, and any absence must be recorded via the absence tracking system. To submit an absence request please use <u>Formsite</u>. Excused absences will be remediated as deemed appropriate by the Clerkship Director. Please see Section B for COM-P attendance policies.

Required/Suggested Reading and Resources

Required:

1. 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)
- 2. Neurology Survival Guide: The Washington Manual Survival Guide Series, 2004, Rengachary, Lin (ISBN: 0781743621/ 978-0781743624)

Websites:

- American Academy of Neurology Curriculum
- New England Journal of Medicine Lumbar Puncture Procedure Video

Didactic/Interactive Learning/Simulations Sessions (Schedule)

The student will participate in interactive lectures (virtual or in person) or learning modules for the following topics or conditions:

- 1. Neuro Exam: Conscious & Unconscious
- 2. Neuromuscular Disorders
- 3. Multiple Sclerosis
- 4. Movement Disorders
- 5. Headache/Migraine
- 6. Epilepsy
- 7. TIA/Stroke
- 8. Ethics in Neurology

This schedule can be found in one45.

Required Clinical Experiences: Procedures and Diagnoses Log (Px/Dx)

Below is a list of procedures and diagnoses commonly encountered on the Neurology Clerkship as well as an associated theme to reflect upon. If not yet encountered in a previous clerkship, each item from the list below must be completed by the end of the Neurology Clerkship. All highlighted Px/Dx are required to be completed during the Neurology Clerkship, even if encountered on previous clerkships. This means a student will be required to log an encounter for the highlighted Px or Dx items, indicating that it was seen during the Neurology Clerkship timeframe.



Global Px/Dx List

Required Procedures	Clinical Setting	Level of Responsibility	Alternative Experience	Associated Theme	
Lumbar Puncture (Must watch video)	Inpatient	Observe and discuss	<u>Lumbar Puncture</u> <u>Procedure Video</u>	Evidence-Based Medicine	
I was observed taking the relevant portions of the history for a neurological patient	Inpatient or Outpatient	Actively Participate in Care	N/A, Required	Precision medicine	
I was observed performing the relevant portions of the physical exam on a neurological patient.	Inpatient or Outpatient	Actively Participate in Care	N/A, Required	Precision medicine	

Required Diagnosis	Clinical Setting	Level of Responsibility	Alternative Experience	Associated Theme
Abnormal Cognition, Dementia, Delirium, Encephalopathy	Inpatient or Outpatient	Observe and discuss Determined by Clerkship Director		Gerontology/ Geriatrics
Headache	Inpatient or Outpatient	I ()hserve and discuss I		Evidence-Based Medicine
Movement disorder (Parkinson's disease, essential tremor, Dystonia, Huntington Disease)	essential tremor, Outpatient Observe and discuss		Determined by Clerkship Director	Behavioral and Social Sciences
Stroke/TIA (Ischemic Stroke or TIA)	I Innatient I '' ' I		Determined by Clerkship Director	Interprofessional Education
Weakness or a sensory disturbance stemming from CNS or PNS. (Multiple Sclerosis, Myasthenia Gravis, etc.)	Inpatient or Outpatient	Observe and discuss	Determined by Clerkship Director	Interprofessional Education
Focal or generalized pain syndrome (back or neck pain, painful neuropathy)	Inpatient or Outpatient	Observe and discuss	Determined by Clerkship Director	Precision Medicine
Neuroinfectious Disease (meningitis, encephalitis, CJD, cerebral abscess, herpes zoster)	Inpatient	Observe and discuss	Determined by Clerkship Director	Health Equity
Seizure	Inpatient	Actively Participate in Care	Determined by Clerkship Director	Public Health, Prevention and Health Promotion

Px/Dx Alternative Experiences

Students are expected to meet the required clinical experiences and procedures listed on the Global Px/Dx list before advancing to fourth year. Please see link for list and additional information: Global Px/Dx List

Students are responsible for proactively monitoring their Px/Dx log and communicating their progress and learning goals with supervising faculty throughout each clerkship. If the student does not encounter all the required clinical experiences as listed within the procedures and diagnoses table above by the end of the Neurology Clerkship, the student will remedy the deficiency by completing the alternative



experience utilizing the process below:

- 1. If an alternative experience is needed for a procedure or diagnosis, the student must notify the Clerkship Director or designee a minimum of 15 days prior to the end of the clerkship.
- 2. The Clerkship Director will assign an alternative experience/requirement to be completed.
- 3. Once the alternative experience/requirement is completed, the student will log the experience in OASIS by selecting the type of *Patient Encounter* in the drop-down menu.

Please see Section B for information related to Px/Dx compliance.

Observable Learning Activities/Other Requirements

	Total		
Case Presentation	History and Exam	4	
	Differential Diagnosis	3	10 Points
	Treatment-Evidence Based	3	
	5 points		
	3 points		
H & P	2 points		

Specific Assessment Process

Mid-Clerkship Formative Assessment

A mid-clerkship assessment for each student is required as per the <u>Competency Assessment Policy</u>. Throughout the clerkship, faculty (including nurse practitioners and physician assistants with faculty title) 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, PRIME+ form, NCAT, etc.) that may be communicated by writing or verbally. The purpose of this feedback is to identify strengths and opportunities for improvement.

During the Neurology Clerkship, the student will request up to 1 PRIME+ per week (4 total max) from attendings, residents or advanced practitioners via the myTlPreport app. At least 1 PRIME+ form must be completed by the end of Week 2. This will serve as an ongoing mid-clerkship formative assessment. Additionally, the Clerkship Director will meet with each student at a mid-point of the clerkship to check in, discuss the formative feedback, Px/Dx logging, duty hours, and any other questions or concerns the student or director may have.

Summative Clinical Assessment

Significant interaction in the Neurology Clerkship is defined as at least one-half day spent with the same physician. Attending physicians who have a faculty title can complete an end of rotation assessment form (EOR). 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 with the student. When only a single faculty member has been assigned to work with a student, this faculty member must provide the assessment for the student. The clerkship EOR assessment form is distributed through one45. Students must obtain a **minimum of 2 PRIME+ evaluations** over their rotation.



Students may obtain a maximum of 4 PRIME+ evaluations. These may be obtained from attendings, residents or advanced practitioners, however, attending evaluations carry more weight towards the final clinical grade. A minimum of one evaluation from an attending is required. Only one evaluation may be from a resident. The PRIME+ data will inform end-of-rotation assessment forms that will be filled out by site directors after discussion among those site leaders.

Calculating the Final Grade

The clerkship grading calculator is posted in <u>one45</u> for assistance calculating the final clerkship grade. This grading calculator is meant to be used as a tool, but final grade determinations will be made using the table below.

CLINICA	L (50%)	Required Activities/ OTHER (20%)	EXAMINATION (30%)		COMPOSITE		FINAL GRADE
Score	Qualifies for		Score	Qualifies for	Score	Qualifies for	
≥2.6 - 3.0	Honors		≥85	Honors	≥87.30-100	Honors	Honors <i>IF</i> Composite score is within Honors range, Clinical Score is within Honors range, and qualifying shelf score meets at least the High Pass Cutoff
<u>></u> 2.3-2.59	High Pass		≥81-84	High Pass	≥78.10- 87.29	High Pass	High Pass <i>IF</i> Composite score is within High Pass range and Clinical Score is at least within High Pass range.
≥2.0 - 2.29	Pass	Pass ≥ 12 points (<u>></u> 60% <u>)</u>	<u>></u> 67-80	Pass	≥65.10- 78.09	Pass	Pass <i>IF</i> Composite score is within Pass range and Clinical Score is at least within Pass range.
< 2.00	Fail	Fail < 12 points (<60%)	<u><</u> 66	Fail	<65.10	Fail	

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

- 1. The clinical score is < 2.0
- 2. Receipt of a final Level 1 on two or more different EPOs*
- 3. Failure of the shelf exam on both initial** and one retake attempt
- 4. Achievement of a score of less than 60 % from the "OTHER" / Required Activities
- 5. Achievement of a total composite score of Fail

^{*}For the purpose of assessment in the clinical years, an individual EPO rating of Level 1.5 will not be considered a Level 1 as defined in the Competency Assessment Policy.

^{**}If a student fails the shelf exam on the first attempt, they are eligible for no higher than a final grade of Pass, regardless of their second attempted score.



Additional Clerkship Information

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.
- At sites without residents, students should let the attending on-call about being on call
- The call assignment is to be completed by 8:00PM.
- Page the on-call resident or attending.



Section B – Clerkship Policy and Resource

General Information

Prerequisites: All students must successfully pass all pre-clerkship curricular elements to progress to the third year and must have taken USMLE Step 1. Link to policies:

Enrollment, Sequencing and Grading for Pre-Clerkships Policy

United States Medical Licensing Examination (USMLE) Timing and Failure Policy

Students are responsible for their own transportation to and from, and parking fees at clinical sites as indicated in the Clinical Site Placement and Transportation Policy.

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, the PRO liaisons
 or in the student evaluations of the clerkship, site, and faculty.
- The <u>Professionalism Conduct Comment Form</u> is an additional on-line mechanism for students to report any concerns, including those about supervision, across the four-year curriculum. This mechanism ensures confidentiality and is collected directly by the PRO.
- A professionalism lanyard card with a PRO QR code for direct, real time reporting of exemplary examples of professionalism or concerning professionalism/mistreatment behaviors has been distributed to each student.



The University of Arizona College of Medicine – Phoenix 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>Reporting Mistreatment or Harassment of Medical 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 Policy</u>.

Website and contact information for the Professional Resource Office can be located here.



Educational Program Objectives

The Educational Program Objectives (EPO) are competencies and measurable objectives by which attainment of each can be assessed. The full text of The University of Arizona College of Medicine – Phoenix EPO's can be accessed in the <u>Educational Program Objectives Policy</u> and require dissemination as noted in the <u>Orientation to EPOs and Curricular Unit Objectives Policy</u>.

In addition to EPOs, the clerkship objectives are closely tied to student learning outcomes. The University of Arizona College of Medicine – Phoenix measures these outcomes both quantitatively (via National Board of Medical Examiners [NBME] shelf exams) and qualitatively (via behavioral competency assessments).

Attendance Requirements

All clerkship experiences are mandatory, and any absence must be recorded via the absence tracking system. To submit an absence request please use Formsite.

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 link to the following policies:

- Attendance and Absence Years 3 and 4 Policy
- Leave of Absence Policy

Required Clinical Experiences: Procedures and Diagnosis (Px/Dx) Log

The University of Arizona College of Medicine – Phoenix, in accordance with the <u>Core Clinical Skills Observation Policy</u>, monitors and tracks the types of patients and clinical conditions that medical students must encounter, so as to remedy any identified gaps in patients, procedures, or diagnoses across clinical sites. Details of supervision expectations for student clinical encounters can be reviewed in the <u>Faculty Supervision of Medical Students in Clinical Learning Situations Policy</u> and the <u>Faculty Supervision of Sensitive Physical Examination Policy</u>. Procedures and clinical conditions will be recorded in the student's Px/Dx log and reviewed with the site or Clerkship Director at the midclerkship and end of clerkship review.

Students are expected to meet the required clinical experiences and procedures listed on the Global PxDx List. If not yet encountered in a previous clerkship, the clinical encounter must be completed before the conclusion of the designated clerkship, as described on the global Px/Dx list, and detailed in each individual clerkship's syllabus. All highlighted Px/Dx on the global Px/Dx list, and demarcated on each individual clerkship's syllabus, must be encountered on the designated clerkship, even if also encountered on previous clerkships.

Across the third year, students must encounter the assigned clinical conditions, diagnoses, and procedures at the indicated level of student responsibility. The standardized levels of student responsibility include the following:



- 1. **Observe and Discuss:** observing the key elements of care (e.g., physical exam, procedure, etc.) as they are performed by another member of the team and discussing the case, condition, and relevant clinical aspects with the team.
- 2. **Actively Participate in Care:** observing and discussing, but also indicates increased 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:** actively participate in care and is additionally defined as the student performing the procedure with supervision.

To best prepare you for the NBME and your future career in medicine, the following scaffolding outlines for the minimum understanding of each Px and each Dx. In the spirit of self-directed learning, your approach to mastery of each component is up to you.

List for each Px

- 1. Explain the anatomy and pathophysiology related to the Px
- 2. Define relevant pharmacology to the Px
- 3. Summarize the informed consent process (including risks, benefits, indications, and alternatives) for the Px
- 4. Compare associated imaging modalities for the Px
- 5. Analyze potential complications and prevention or management strategies for the Px
- 6. Understand post procedural care, patient education and anticipatory guidance for the Px
- 7. THEME: Reflect upon the assigned theme objective related to Px

List for each Dx

- 1. Define the key epidemiological characteristics of Dx
- 2. List the risk factors for acquiring Dx
- 3. Describe the pathophysiology of Dx
- 4. Create a differential diagnosis algorithm for Dx
- 5. Develop and initiate an effective treatment plan for Dx
- 6. Obtain a relevant history and physical examination for Dx
- 7. THEME: Reflect upon the assigned theme objective related to each Dx

Alternative Experiences

If the student does not encounter all the required clinical experiences as listed on the Global Px/Dx link and detailed in each clerkship's syllabus, the student will remedy the deficiency by completing the alternative experience with the appropriate Clerkship Director, utilizing the process outlined in the clerkship specific portion of the syllabus.

Assessment Process

Formative Assessments

Throughout the clerkship, faculty (including nurse practitioners and physician assistants with faculty

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title), fellows, 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, PRIME+ form, NCAT, etc.) that may be communicated by writing or verbally. The purpose of this feedback is to help students identify strengths and opportunities for improvement. Students should proactively request formative feedback on a regular basis and the required frequency for written formative feedback is outlined in the clerkship specific section of each syllabus.

Any significant deficiencies or concerns should be communicated by the faculty to the clerkship and/or site director with written documentation that the feedback has been provided to the student. If deficiencies or problematic issues are noted late in the clerkship, timely feedback will be given by an assessor to offer the student the opportunity to improve. Ideally this should have occurred prior to assigning a score of <2.0 on an EPO. The Clerkship Director maintains the ability to assign a summative level 1 for an egregious action even late in clerkship.

Mid-Clerkship Formative Assessment

A mid-clerkship formative assessment for each student is required as per the <u>Competency Assessment Policy</u>. The mid-clerkship formative assessment will be completed by the Clerkship Director, Site Director or a designated faculty member at the student's primary clinical site using The University of Arizona College of Medicine mid-clerkship formative assessment form. The mid-clerkship formative assessment form is distributed through <u>myTIPreport</u>. The PRIME+ form will serve as the mid-clerkship formative assessment. The student's mid-clerkship performance will be reviewed by the Clerkship Director, and a one-on-one meeting will occur between the student and the Clerkship Director to review mid-clerkship feedback.

Summative Assessment

The University of Arizona College of Medicine – Phoenix has internal deadlines for the summative assessment forms to ensure the LCME 6-week requirement is met. The end of rotation (EOR) form is to be completed by the faculty within two weeks of the rotation ending. This will allow Clerkship Directors to complete the final grades as close to the four-week mark as possible. All end-of-rotation assessment forms and the clerkship final grade form can be viewed by students in one45 six (6) weeks after the end of the clerkship according to the Final Grades Reporting Timeline Policy in accordance with the LCME.

What to do if an assessor is not listed in one45 or myTIPreport

Contact The University of Arizona College of Medicine – Phoenix coordinator, (PBC-Evaluation@arizona.edu) and the Clerkship Director.

Conflict of Interest

It should be noted that faculty at The University of Arizona College of Medicine – Phoenix who are family members of the student, have a personal relationship with the student, or are/have been health service providers of the student, may not be involved in the academic assessment or promotion of the medical student as described in the Conflict of Interest - Physician-Student Personal Relationship Policy

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and the Conflict of Interest - Physician-Student Health Services Relationship Policy.

Standardized Grading Process

The final clerkship grade will be determined by the Clerkship Director using the composite score (consisting 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 five categories: Honors, High Pass, Pass, Incomplete, or Fail (H, HP, P, I, 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 and serves as the qualifier for the overall grade. The clinical score is calculated through assessment of student performance within each individual EPO. When more than one EOR form is submitted for a student, the final EPO score is determined by averaging the scores on the EOR assessment for each EPO. The Clerkship Director will ensure that an adequate amount of information is available prior to calculating the clinical score, which may include incorporating feedback from narrative formative feedback tools, preceptor feedback, and/or additional requested comments from faculty. After grades are submitted, no further information will be sought, nor will additional assessments be accepted.
- 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 <u>retake</u> of the examination cannot be awarded any final grade higher than a "Pass" for the clerkship. (See <u>Clerkship Grading After Examination Failure Policy</u> for additional details.)
- III. <u>Required Activities/"Other"</u>: the required activities/"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 a minimum 60% of these points to pass the clerkship.
- * Each component of the grade, including the composite score, will be rounded to the hundredths place except for the NBME shelf exam, which is a round number.

Calculating the Final Grade

See the clerkship specific portion of the syllabus.

Additional Grading Criteria

- 1. To obtain a final grade of Honors a student must achieve a clinical score of Honors in addition to a composite score of Honors and a shelf exam score of at least High Pass.
- 2. To obtain a final grade of High Pass a student must achieve a composite score that meets the cut off for High Pass and at a minimum a clinical score of High Pass.
- 3. Failure of the shelf exam on both initial and one retake attempt results in failure of the clerkship and necessitates repeat of clerkship in entirety.

A Level 1, 1.5, 2, 2.5 or 3 is generated for each EPO based on the scale below as described in detail in the Competency Assessment Policy.



Level 1 - Failure to meet even minimal expectations; the only grade that is appealable and the only grade that is tracked via advisor/SA dean/student progress committee

Level 1.5 - Acquiring necessary skills/behaviors to meet expectations

Level 2 - Meeting expectations

Level 2.5 - Acquiring skills/behaviors to exceed expectations

Level 3 - Exceeding expectations

* For the purpose of assessment in the clinical years, an individual EPO rating of Level 1.5 will not be considered a Level 1 as defined in the <u>Competency Assessment Policy</u>.

A final summative Level 1 can be generated for an EPO based on the following ways:

- a) If two or more separate faculty raters assign a rating of Level 1 on the same individual EPO on an EOR form, this will result in a Level 1 regardless of the average score.
- b) Assigned by Clerkship Director based on prolonged demonstration of performance not meeting expectations, a substantial incident, extreme behavior, or other events that warrant the summative Level 1 as determined by the Clerkship Director.

Narrative Feedback

The clerkship final grade form has two separate areas which include narrative feedback. The first area includes formative comments from the EOR forms (these are not included in the Dean's Letter/MSPE). The second area 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 discretion 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 select 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, Associate Dean of Clinical and Competency Based Education or Associate Dean of Student Affairs (see the Student Progress Policy for more information).

Required Student Evaluation

Assigned student evaluation of the clerkship, sites, and didactics is required. The student must complete 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 assigned evaluations within one week after the end of the clerkship, the student will be assigned a formative Level 1 for the EPO targeting giving and receiving constructive feedback and 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 a summative Level 1 rating for the EPO targeting giving and receiving constructive feedback will be automatically assigned. The Office of Assessment and Evaluation will track this and report to the Clerkship Director.

For more information, see the Assessment and Evaluation of Students, Faculty and Curriculum Policy.

Deadline Compliance

The following must be completed as part of the clerkship requirements.

- 1. Duty Hour logging is due at the end of the rotation by **Sunday at 11:59pm.** See the <u>Duty Hours</u> <u>Policy</u> for specifics regarding duty hour limits, documentation of hours, and a FAQ section.
- 2. Required Procedure/Diagnosis (Px/Dx) logging is due at the end of the rotation by **Sunday at 11:59pm**.

NOTE

- A formative Level 1 will be given if the duty hour or Px/Dx log requirement is not completed by the end of the rotation Sunday at 11:59pm. The student will have until Tuesday at 11:59pm following the conclusion of the clerkship to remediate the duty hour or Px/Dx logging requirement. All logs must be completed accurately.
- A summative Level 1 will be given for any failure to properly complete the duty hour or Px/Dx log requirement by Tuesday at 11:59pm following the completion of the clerkship.
 A grade of Incomplete will be given until requirements are met. All logs must be completed accurately.
- The Level 1 will be on a single professionalism EPO related to accountability. Compliance
 with these deadlines will be determined by the Clinical and Competency Based Education
 (CCBE) team and reported to the Office of Assessment and Evaluation.
- A summative Level 1 will be taken into account as part of a comprehensive assessment
 and final grade. All summative, or "final" Level 1 ratings are tracked by the Office of
 Assessment and Evaluation in collaboration with the Office of Student Affairs. Cumulative
 Level ratings are retained throughout the student's enrollment. See Competency
 Assessment Policy.
- 3. Completion of the mid-clerkship feedback forms (PRIME+) (see the <u>Competency Assessment Policy</u>).
- 4. Completion of assigned site, faculty, and end of the clerkship evaluations (see the <u>Assessment and Evaluation of Students, Faculty and Curriculum Policy</u>).

Additional Resources

Rural Health Professions Program

Students scheduled for rural rotations must complete required documents and attend a rural rotation orientation.



Housing expenses are supported by the Rural Health Professions Program (RHPP) and funded by Arizona Area Health Education Centers (AzAHEC). Students are responsible for damages and incidental charges. Housing options vary depending on rotation location. In most cases, it is pre-arranged by RHPP staff; in others, the preceptor or health center hosting the student provides housing (occasionally in the home of the faculty). Occasionally, students are asked to make their own arrangements. At times, housing options are limited and may require sharing common areas and bathrooms with other students. Individualized accommodation requests cannot be guaranteed, therefore flexibility and a resilient attitude regarding housing are key to having a great experience. Once housing has been secured, changes are generally not allowed less than six weeks prior to the rotation. In addition to housing, AzAHEC also funds one round trip to and from the rural site and a small stipend applied to the student's bursar's account.

Contact Information: Director, RHPP - Jonathan Cartsonis, MD

Email: jcartsonis@arizona.edu, Phone: 602-684-0598

Urgent/Emergent Health Care Services

On-Campus and in the Immediate Phoenix Area

Students can access the list of local healthcare services on The University of Arizona College of Medicine - Phoenix website. Students are given a rectangular card that contains a list of emergency contact numbers and local healthcare service addresses and phone numbers. This card is placed in their identification holder along with The University of Arizona College of Medicine – Phoenix identification badge to allow easy access to healthcare information while at instructional sites. All information is also accessible on the wellness website at wellness.arizona.edu.

For a list of emergency contact numbers please visit The University of Arizona College of Medicine – Phoenix website at the following link: <u>Security - Emergency Numbers</u>

Off Campus Outside of the Metro Phoenix Area

Students who are in need of urgent/emergent health care services, or other healthcare services, while on a remote/rural rotation can find healthcare resources on the site description website: Clerkship Resources

Students may also contact the Associate Dean of Student Affairs or Associate Dean of Clinical and Competency Based Education.

All sites are assessed for student safety. Details of this assessment are included in the <u>Training Site</u> <u>Safety Policy</u>.

Faculty shall not provide health services for students if they are directly involved in the assessment of the students; however, in the event of an emergency, faculty should perform services to stabilize a student until the appropriate transfer of care can occur. Please see the Conflict of Interest - Physician-Student Health Services Relationship Policy.

The University of Arizona College of Medicine – Phoenix requires that all students have an updated immunization record. Please see the <u>Immunization and Health Screening Policy</u> for details regarding the contents of the record.



In the event of any exposure to blood/bodily fluids through needle stick, inhalation, mucus membrane or skin exposure, or percutaneously, students must follow the required procedures as indicated in the Student Exposure to Potentially Infectious Agents and/or Hazardous Materials Policy, with steps also outlined on the student occupational exposure procedure card that each student receives at the beginning of their clerkship year.

Expectations for Mobile Communication

The student must always be reachable during usual extended work hours and on-call hours, and if in a clinical setting, the student should respond within 15 minutes. Most students opt to provide 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*. This may be reflected in the student's overall assessment (grade). Students who opt to not provide cell phone numbers can request a pager from the Director of Student Affairs at least three weeks prior to starting clerkships. A pager will be assigned to the student and must be returned prior to their commencement from The University of Arizona College of Medicine – Phoenix.

Accessibility and Accommodations

The University of Arizona strives to make learning experiences as accessible as possible. If there is anticipation or experience of barriers based on disability or pregnancy, please contact the disability resource center (520-621-3268, https://drc.arizona.edu/) to establish reasonable accommodations.

one45: Curriculum Management System

one45 is the curricular management system used to manage evaluations, EOR assessments, final grade forms, and may be used to access learning materials and schedules. In clerkships using only one45 for learning materials, general information about the clerkship rotations, such as syllabi, site information, learning objectives, materials for didactic sessions, links, etc. will be attached as handouts to each clerkship "course" under handouts and links within one45. one45 can be accessed at the web address: one45.

Clerkships additionally using D2L may house this information through the D2L clerkship page. D2L can be accessed at the web address: <u>D2L</u>

Assessments are collected via one45, and automatic emails are sent to the attendings with instructions and reminders to complete. A list of pending and completed assessments can be reviewed in one45, if applicable. Students will use OASIS to log observed Px/Dx at clinical sites. Students can use their smartphones to make log entries on-the-go, if allowed by site policy where the student is rotating.

OASIS: Course Schedule

The University of Arizona College of Medicine – Phoenix uses a web-based scheduling system, OASIS. OASIS maintains site information, student schedules, course catalog, and various other details that are pertinent to the clinical rotations. OASIS has detailed, up to the minute course information and allows students to request schedule changes. All students will use this resource for any scheduling purpose throughout their 3rd and 4th year of clinical rotations. Oasis can be accessed on the web address: OASIS

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myTIPreport Formative Assessment Application

myTIPreport is an application (app) used by The University of Arizona College of Medicine – Phoenix to collect formative assessments and EOR student self-assessment/reflection for the clerkship rotations. myTIPreport can be accessed via the app and at the web address: myTIPreport

Formative assessments are collected via myTIPreport, and automatic emails are sent to faculty, fellows, or residents with instructions and reminders to complete. A list of pending and completed assessments can be reviewed in myTIPreport.

Student Use of University Sponsored Educational Material

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