

Core Sub-Internship Selective Syllabus



Academic Year 2025-2026

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Section A – Core Sub-Internship (Sub-I) Selective Curriculum

Selective Information

General Selective Information and Contacts

Credit Hours	4
Course Code	841
Selective Length	4 weeks
Selective Website and Contacts	Core Sub-Internship Selective Website and Contacts
Selective-Specific Resources	OASIS , one45 , Box , Panopto
Clinical Sites	For a list and description of selective sites, please see: Course Catalog
Prerequisites	All students must successfully pass all pre-selective courses* to progress to the fourth year. Link to policy: Enrollment, Sequencing and Grading for Pre-Clerkships Policy
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Course* = Any component of the curriculum where a grade is earned.

Selective Description

The Core Sub-Internship selective utilizes a variety of 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. [Core Sub-Internship Rotations Policy](#)

Selective Learning Objectives

Each Core Sub-Internship selective objective listed below has been mapped with relevant competencies, i.e., patient care, medical knowledge, clinical appraisal and quality improvements, interpersonal and communication skills, professionalism, and societal awareness and responsiveness and is available within [one45](#).

1. Perform and document complete history and physical exam and interpret laboratory, radiologic, and other pertinent data and provide a differential diagnosis, assessment and treatment plan, to include operative management if indicated.
2. Provide concise and organized 24-hour patient summaries including previous and upcoming treatment plans at daily rounds.
3. Describe the management of common disorders in the core discipline, including procedures and operative management if indicated.
4. Demonstrate sensitivity to the concerns of patients and their families regarding the patient's illness and treatment (including complications, procedural/operative issues, quality of life and end-of-life issues).
5. Demonstrate appreciation and respect for other professionals by appropriately contacting/responding to consultative and support services.
6. Demonstrate ability to provide high quality sign-out that is concise, accurate, and complete.
7. Attend and participate in procedures and operations on assigned patients (while appropriately supervised); assist in obtaining informed consent for procedures performed by the assigned team.
8. Prepare patients for discharge by identifying social determinants of health and addressing barriers to health care.
9. Learn about ordering long term central venous access for infusions/dialysis, home health services, oxygen, durable medical equipment, discharge medications (including narcotics and medications requiring prior authorization) in preparation for hospital discharge.
10. Become familiar with options for discharge for a patient whose needs cannot be met at home: acute rehab, SNF, etc.
11. Demonstrate knowledge of documents used in transitions of care: cross cover notes, transfer notes, discharge summaries.

Selective Requirements

Attendance Requirements

All selective 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 selective director. Please see section B for the University of Arizona College of Medicine - Phoenix (COM-P) attendance policies.

1. The sub-intern's schedule should mirror a typical resident schedule on that service. On average residents and students should have at least one day off a week, four days off per month. Students work a minimum of 22 shifts during the rotation (as long as [Duty Hours Policy](#) is followed). Students should not expect to have weekends off.
2. It is the student's responsibility to make up any clinical shifts they may miss (for instance, on account of interviews) and to notify the selective program coordinator and core sub-I director immediately if their schedule will not allow them to complete the required minimum shifts per course during the block.
 - a. Remediation could take place outside the block. Remediation will be inpatient care and may be in a different setting/field than the original rotation. (For example, a student could make up excused absences on a vascular surgery core Sub-I and then would make up those clinical shifts during PPDB/4 on a general surgery service.). Students are not allowed to make up clinical shifts in other patient care blocks, they will need to utilize discretionary time, or time in PPDB/4 (with approval).
3. Students will observe the holiday schedule of the institutions of their rotations. Students may be assigned patient duty on a holiday and will be expected to report for duty. The sub-internship is an in-patient rotation and is designed to mirror the responsibilities of internship and residency, which includes all-hours patient care.
4. Failure to report for duty, submit an absence request using [Formsite](#) within 24 hours, and notify the site director (on day of occurrence) for the absence will result in a 'does not meet expectations' under professionalism, and a formative level one. The student will not be eligible for honors.

5. Case Based Activities: attendance is mandatory. If a student needs to be excused from a learning session, contact the selective coordinator and core sub-I director a minimum of 48 hours ahead of time. Refer to the schedule in [one45](#) for exact dates and room numbers.
6. If any of the Case Based Activities (simulation or didactics) are missed they will need to be made up in a future block, subsequent block preferred.
7. If a student is off cycle or unable to complete due to being at a rural site, they will need to alert the Core Sub-I director and selective coordinator to coordinate remediation of these mandatory experiences.

Mandatory Case Based Activities	Time*
Virtual Orientation and Didactics	Half Day typically first Tuesday afternoon
In-Person Half-Day Simulations and Half-Day Wellness	Full Day typically third Tuesday or Wednesday,

*Dates and time of these required sessions are subject to change and will be available to view in [one45](#).

Required/Recommended Reading and Resources

1. Readings for case based activities must be completed prior to the applicable didactic session and will be posted in [one45](#). A detailed email will be sent the week before each block detailing meeting date, time, location, daily schedule, topics of instruction and links to preparation materials. All preparation material is also located in [one45](#).
2. Dependent on individual rotation. Refer to the course description in the [Course Catalog](#).

Didactic/Interactive Learning/Simulation Sessions (Schedule)

Statement of copyrighted materials: All lecture notes, lectures, study guides and other course materials (besides the required reading) disseminated by the instructor to the students, whether in-class or online, are original materials and reflect the intellectual property of the instructor or author of those works. All readings, study guides, lecture notes and handouts are intended for individual use by students. You may not distribute or reproduce these materials for commercial purposes without the express consent of the instructor. Students who sell or distribute these materials for any use other than their own are in violation of the [Arizona Board of Regents Intellectual Property Policy](#). Violations of the instructor's copyright may result in course sanctions and violate the code of academic integrity.

Structure of Case Based Activities:

Week 1, Tuesday (Virtual)

1. Orientation
2. Transitions of care interactive workshop

Week 3, Tuesday (In Simulation Center)

1. Students on family medicine and pediatrics will participate in the pediatric simulation curriculum if there are ≥ 3 family medicine and pediatric students total for that block. If not they will participate in the adult simulation curriculum.
2. Students on all other core sub-internships will participate in the adult simulation curriculum.

Additional didactics may be required by the individual sub-internship rotations.

Observable Learning Activities/Other Requirements

Week 3 In-Person Simulation Session

- Required readings for simulation are posted under "Simulation" in [one45](#).
- Students will go through the assigned simulation and receive feedback immediately. In some instances, they may go through a second simulation related to that topic.
- Some simulations may be coupled with other exercises such as writing a cross cover note.
- Students will call in a consult during the session wherein they are team lead. Feedback will be given by their faculty preceptor. Information is posted under simulation in [one45](#).

Wellness Half Day

- A wellness half day will be scheduled along with the simulation half day.
- The schedule for the wellness half day and simulation will be posted in [one45](#) 2 (two) weeks before the rotation starts and sent to students in the welcome email that goes out 1 (one) week before the rotation starts.
- Students will be assigned wellness time in the morning with simulation in the afternoon, or vice versa.
- Requests for morning or afternoon wellness time will be considered but cannot be guaranteed due to faculty availability for simulation. Requests should be made as soon as possible, preferably more than two weeks before the block begins, to aid in scheduling.

Release From Duty for Didactics and Simulation/Wellness Sessions

- Students should be released from clinical duty no later than 11:30pm the day before any Case Based Activities session (simulation or didactics) if they are on nights/call.
- Students are to be excused from all morning/rounding patient care responsibilities on the simulation/wellness day.
- Students may be assigned clinical duties after 5:00pm on a Case Based Activities day (extended duty hours or overnight shifts) so long as the clinical assignments do not create a duty hour violation.
- There should be at least eight (8) hours from the time the student leaves the hospital in the evening and when they report again in the morning.
- Site directors are made aware of the student's absence to participate in Case Based Activities; however, it is strongly recommended that students speak with the attending faculty in addition to the resident team if applicable regarding their expected absence.

Example of Simulation/Wellness Session Schedule

Time	Group A	Group B
7:30am-Noon	Wellness Time	Simulation (In-Person)
12:30pm-5:00pm	Simulation (In-Person)	Wellness Time

If students are unable to attend any of the Case Based Activities, the selective program coordinator and course director must be contacted before the absence occurs to have the absence excused and arrangements made to remediate the absence (this includes students who missed the experience due to being at a rural site). If the remediation occurs after the block is complete, the grade will be incomplete until the mandatory activities are completed. Refer to the unexcused absence policy [here](#). All missed mandatory activities must be remediated. An unexcused absence from the selective Case Based Activities will result in failure of the course.

Mandatory Case Based Activities	Location of Activities
In-Class Discharge Summary	Virtual Didactic
Social Determinants of Health In-Class Exercise	Virtual Didactic
Discharge Planning Exercise	Virtual Didactic
In-Class patient handoff	Virtual Didactic
Simulation #1	Simulation
Simulation #2	Simulation
Simulation #3	Simulation
Write a Cross Cover Note	Simulation
Call In a Consult	Simulation

The sub-internship is the opportunity for a student to demonstrate behavioral skills expected of an intern, therefore, students will be held to a high professionalism standard.

Behavior*	Consequence
Unexcused Absence	Fail the Sub-Internship Selective

Submission of Absence Request > 24 Hours After Absence	Formative Level 1, Ineligible for Honors
Failure to Notify Site Director of Absence on Day of Absence	Formative Level 1, Ineligible for Honors
Failure to Satisfactorily Complete and Submit Call Logs and Duty Hours	Grade is Incomplete Until Assignments are Received. Formative Level 1 Potentially ineligible for Honors in the absence of extenuating circumstances and/or poor communication.

*Extenuating circumstances will be considered according to the COM-P attendance policies, linked in Section B.

Selective Specific Assessment Process

Mid-Selective Formative Assessment

Assessment is the mechanism used to measure progress in learning over a given time. A mid-rotation formative assessment with feedback is strongly suggested for every student. Student progress, achievements, strengths, weaknesses, and areas for improvement should be discussed. If at any point during the selective the student is at risk of not meeting expectations in one or more of the Educational Program Objectives (EPOs), in-person formative feedback with written documentation is required. Any significant deficiencies or concern should be communicated to the course director and selective director with written documentation that the feedback has been provided to the student. If deficiencies are noted late in the selective, timely feedback will be given. Students may be offered additional assignments to address weaknesses as approved by the course director and selective director. The Office of Student Affairs will be notified of any deficiencies or failures.

Additionally, throughout the selective, faculty and residents engaged in student teaching and supervision will provide real time 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. Students should proactively request formative feedback on a regular basis and the required frequency for written formative feedback is outlined in the selective specific section of each syllabus.

Summative Clinical Assessment

Significant interaction in the Core Sub-Internship selective is defined as having spent significant time with the student, a minimum of four shifts. Attending physicians (with faculty title) can complete an end-of-rotation (EOR) assessment form. In the instance that only one EOR assessment is submitted, it will need to 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 selective EOR assessment form is distributed through [one45](#).

The selective EOR assessment does not have a numerical clinical score, the faculty are asked to assess the students in the EPOs on a “does not meet expectations”, “almost meets expectations”, “meets expectations”, or “exceeds expectations.” The faculty will then place the overall grade at the bottom of the form, remembering we use a four-tier grading system (Honors, High Pass, Pass, and Fail).

Calculating the Final Grade

Final grade determinations will be made using the table below:

CLINICAL GRADE	CASE BASED ACTIVITIES	FINAL GRADE
Honors	Complete	Honors*
High Pass	Complete	High Pass
Pass	Complete	Pass
Honors or High Pass or Pass	<u>More than</u> two Incomplete	Fail
Fail	Complete or Incomplete	Fail

*A student will not be eligible for Honors if they have received a formative Level 1; extenuating circumstances will be considered by the selective director on a case-by-case basis for Level 1 (and “Does Not Meet Expectations” feedback) and all assignments.

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

1. The clinical grade is Fail OR
2. The student does not take the minimum four on-call or after hours experiences including uploading of call logs and duty hours logs OR
3. Receives a final “does not meet” on two or more different EPOs* OR
4. More than two Case Based Activities are not completed or remediated.

*For the purpose of assessment in the clinical years, an individual EPO rating of “Almost Meets Expectations” (previously a “Level 1.5”) will not trigger the ramifications or follow up of a “Does Not Meet Expectations” rating be considered (previously a “Level 1”) as defined in the [Competency Assessment Policy](#).

Section B – Selective Policy and Resources

General Information

Prerequisites: All students must successfully pass all 3rd Year courses* to progress to the 4th Year. Link to policy: [Credit Requirement Years 3 and 4 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](#).

Learning Environment Office

The [Learning Environment Office](#) (LEO) provides guidance, support, and information to students on professionalism issues and challenges they may face in the learning environment. The LEO 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 course* director, the LEO liaisons or in the student evaluations of the clerkship, site, and faculty, which links to the LEO form.
- The [Learning Environment Feedback Form](#) is an online 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 LEO and allows the student to track their report through the process to action.
- A professionalism lanyard card with a LEO 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 (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 [Reporting Mistreatment or Harassment 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 Policy](#).

Website and contact information for the Learning Environment Office can be located [here](#).

Educational Program Objectives

The Educational Program Objectives (EPO) comprise competencies and the measurable objectives by which attainment of each competency can be assessed. The full text of the COM-P educational program objectives can be accessed in the [Educational Program Objectives Policy](#) and requires dissemination as noted in the [Orientation to EPOs and Curricular Unit Objectives Policy](#).

In addition to EPOs, the selective objectives are closely tied to student learning outcomes. COM-P measures these outcomes both quantitatively (via National Board of Medical Examiners [NBME] shelf exams) and qualitatively (via behavioral competency assessments).

Attendance Requirements

All selective 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 selective director and are not to exceed 0.5 days per week on average. Exceptions to this may be considered in consultation with the selective director and the dean, student affairs/or designee. Please see links to the following policies:

- [Years 3 and 4 Attendance and Absence Policy](#)
- [Leave of Absence Policy](#)

Required Clinical Experiences: Procedures and Diagnoses (Px/Dx) Log (Only Applicable to Critical Care)

COM-P in accordance with the [Core Clinical Skills Observation Policy](#), monitors and tracks the types of patients and clinical conditions that medical students must encounter, so as to remedy any identified gaps in patients, Px, or Dx across clinical sites. Details of supervision expectations for student clinical encounters can be reviewed in the [Faculty Supervision of Medical Students in Clinical Learning Situations Policy](#) and the [Faculty Supervision of Sensitive Physical Examination Policy](#). Procedures and clinical conditions will be recorded in the student's Px/Dx log and reviewed with the site or selective director at the mid-selective and end of selective review.

Across the fourth year, students must encounter the following clinical conditions, Dx, and Px at the indicated level of student responsibility. Levels of student responsibility include the following:

1. **Observe and Discuss:** this includes 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:** this includes 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:** this includes actively participating in care and is additionally defined as the student performing the procedure with supervision.

To best prepare you for your future career in medicine, the following scaffolding outlines the minimum understanding of each Dx and each Px. 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 list and detailed in each selective syllabus, the student will remedy the deficiency by completing the alternative experience with the appropriate selective director, utilizing the process outlined in the selective specific portion of the syllabus.

Assessment Process Additional Information

Formative Assessments

Any significant deficiencies or concerns should be communicated by the faculty to the selective 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 selective, 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 a “does not meet expectations” on an EPO. The selective director maintains the ability to assign a summative Level 1 for an egregious action even late in a selective.

Summative Assessment

COM-P has internal deadlines for the summative assessment forms to ensure the LCME 6-week requirement is met. The EOR form is to be completed by the faculty within two weeks of the rotation ending. This will allow for selective directors to complete the final grades as close to the four-week mark as possible. All EOR assessment forms and the selective final grade form can be viewed by students in one45 six weeks after the end of the selective according to the [Final Grades Reporting Timeline Policy](#).

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

Contact the COM-P coordinator, (PBC-Evaluation@arizona.edu) and selective director.

Conflict of Interest

It should be noted that faculty at the COM-P 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](#) and the [Conflict of Interest - Physician-student Health Services Relationship Policy](#).

Standardized Grading Process

The final selective grade will be determined by the selective director using the composite score (comprised of clinical score, case based activity completion or “non-clinical” score) and additional criteria for grading approved by the Curriculum Committee (explained further in the “calculating the final grade” section below). The final selective grade will be divided into four categories: Honors, High Pass, Pass, or Fail (H, HP, P, F). Details regarding grading in the selective are included in the [Grading and Progression for Clerkships and Selectives Policy](#).

Calculating the Final Grade

See the selective specific portion of the syllabus.

Narrative Feedback

The selective final grade form includes two separate areas which include narrative feedback. The first area includes formative comments from the EOR forms, the second includes formalized summative comments which will be included in the Dean’s Letter (Medical Student Performance Evaluation [MSPE]). The summative final comments are generally not a direct “cut and paste” but rather a sample summary determined by the selective director. The selective director has the discretion to include or not include comments based on their interpretation of which best summarize the student’s performance over the entirety of the selective. 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 or final grade may be addressed by submission of a [grade appeal](#) (see the [Student Progress Committee Procedures and Process for Dismissal Policy](#) for more information).

Required Student Evaluation

Assigned student evaluation of the selective sites, faculty, and curriculum 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 selective, 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 selective.

Once the student has successfully submitted their evaluation in narrative form within the second week after the selective 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 selective 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 Assessments and Evaluation will track this and report to the Office of Student Affairs..

For more information, see the [Assessment and Evaluation of Students, Faculty and Curriculum Policy](#).

Deadline Compliance

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

1. Duty hour logging is due at the end of the rotation by **Sunday at 11:59pm**. See the [Duty Hours Policy](#) for specifics regarding duty hour limits, documentation of hours, and a FAQ section.
2. (Only Applicable to Critical Care) Required procedure/diagnosis (Px/Dx) logging is due at the end of the rotation by **Sunday at 11:59pm**.
3. (Only Applicable to Core Sub-Internship Selective) Required call logs submission 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, call log 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 selective to remediate the duty hour, call log submission, 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, call log, or Px/Dx log requirement by **Tuesday at 11:59pm** following the completion of the selective. **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 Office of Clinical Curriculum (OCC) 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-selective feedback forms (PRIME+) (see the [Competency Assessment Policy](#)).
 4. Completion of assigned site, faculty, and end of the selective evaluations (see the [Assessment and Evaluation of Students, Faculty and Curriculum Policy](#)).

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. Housing options, at times, 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 is 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 [COM-P 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 their COM-P identification to allow easy access to healthcare information while at instructional sites. All information is accessible on the wellness website at <https://phoenixmed.arizona.edu/wellness>.

For a list of emergency contact numbers please visit the COM-P website at the following link: [Security - Emergency Numbers](#).

All sites are assessed for student safety. Details of this assessment are included in the [Training Site Safety Policy](#).

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](#).

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.

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 on the student occupational exposure procedure card.

Expectations for Mobile Communication

The student must always be reachable during usual extended work 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 are unable or unwilling to utilize their personal mobile device while in their clinical rotation should reach out to the dean, student affairs/or designee to discuss alternatives.

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 to access learning materials and schedules. General information about the selective rotations, such as syllabi, site information,

learning objectives, materials for didactic sessions, links, etc. will be attached as handouts to each selective “course” under handouts and links within one45. one45 can be accessed at the web address: [one45](#)
Assessments are collected via one45, and automatic emails are sent to 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

COM-P 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](#)

Course Catalog

The Course Catalog provides course descriptions, location, first day reporting, and contact information for site directors and site coordinators. Students should utilize this resource at least two weeks prior to the start of a rotation for site instructions and expectation. The Course Catalog can be accessed on the web address: [Course Catalog](#)

myTIPReport Formative Assessment Application (Only Applicable to Critical Care)

myTIPReport is an application (app) that COM-P uses to collect formative assessments and EOR student self-assessment/reflection for the selective rotations. myTIPReport can be accessed via the app and at the web address: [myTIPReport](#)

Automatic emails are sent to assessing 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

Statement of copyrighted materials: All lecture notes, lectures, study guides and other course materials (besides the required reading) disseminated by the instructor to the students, whether in class or online, are original materials and reflect the intellectual property of the instructor or author of those works. All readings, study guides, lecture notes and handouts are intended for individual use by students. These materials may not be distributed or reproduced for commercial purposes without the express consent of the instructor. Students who sell or distribute these materials for any use other than their own are in violation of the [Arizona Board of Regents Intellectual Property Policy](#). Violations of the instructors' copyright may result in course sanctions and violate the Code of Academic Integrity.

Use of Video Recordings of Students

Recordings of certain simulation activities, by the University of Arizona College of Medicine-Phoenix, for the purposes of academic assessment are required and students may not opt-out. These videos and/or audio recordings are a part of the educational record, and subject to the privacy provisions under the Family Educational Rights and Privacy Act (FERPA). If you have questions regarding the video recording of classroom simulations, please contact the Office of Clinical Curriculum for Years 3 and 4.

Student Code of Conduct

Medical students are required to follow the policies and codes of conduct governing all students at the University of Arizona. In addition, medical students are also bound by the COM-P [Code of Conduct and Procedures for the Honor Code](#) Committee.

COM-P recognizes the existence of generative artificial intelligence (AI) tools (e.g., ChatGPT & Grammarly) and the educational benefits they can provide when used ethically. It is imperative any use of generative AI is appropriately disclosed and referenced (e.g., APA, Chicago, MLA). Use of generative AI without citation is considered a form of plagiarism and therefore a breach of Academic Integrity. Students are advised to review assignment instructions for specific guidelines concerning the use of generative AI.

COM-P requires medical students to abide by the professional standards required of physicians under Arizona law students must also abide by A.R.S 32-1401, et.seq. which can be accessed at: <http://www.azleg.gov/arsDetail/?title=32>