

GENERAL COURSE INFORMATION

Course # & Title:	General Clinical Electives with Prefixes of ANE, ANT, CRT, DRM, EMR, FAM, GLB, INT, MED, NEU, OPH, ORT, PED, PSY, PTH, RAD, RWM, SRG, TRM, ULT, URG, URO, WMN, WND, and course number from 4000-4600
Course Credit Hours:	1-8 credit hours based on 37.5 clinical hours per week/per credit
Contact Hours:	<input checked="" type="checkbox"/> Distance, Blended, or Clinical Courses: 1 Credit = 37.5 hrs. to complete all activities
Semester(s) & Year:	Fall 2024 Spring 2025
Grading Scale:	Honors, Pass, Fail (H, P, F)
Delivery Mode:	Clinical
Class Meeting Times/Locations:	Clinicals – The Preceptor's schedule will determine the location and average workday, including office hours, hospital rounds, clinic or nursing home visits, and call schedule etc. RVU mandates a minimum of 37.5 hours and maximum of 70 hours of service per week to maintain patient safety and allows for self-learning.

FACULTY CONTACT INFORMATION

Student Inquiry Contact:	Dr. Stephen J. Miller, DO, MPH, Clerkship Director In order to make an appointment or to contact someone with an urgent clerkship issue, please email ClinEdHelpline@rvu.edu
Additional Faculty (if any):	Credentialed Clinical Faculty (Preceptors)

COURSE DETAILS

Course Description:

Individual Course Descriptions can be found in the RVU Student Catalog |2023 – 2024

<http://www.rvu.edu/handbook/>

Elective Clinical Clerkships

Elective clinical clerkships allow students to expand their medical education in areas directly related to their career path. When available, students may choose in-network clerkships in specialties to fulfill elective requirements (e.g., Internal Medicine, Surgery, Behavioral Medicine, etc.). Each Regional Coordinator will contact their students regarding their interests and identify in-network opportunities based on Preceptor availability. Fulfilling a medical specialty interest may require students to leave their assigned region in order to augment students' preparation for residency training.

Elective clerkships generally range from one to eight weeks. Elective clerkships are requested by the student and arranged in conjunction with the 4th-year clinical coordinators at the approval of the Office of Clinical Education.

Fourth-year students are required to complete a minimum of 8 clinical credit hours of clerkships at ACGME approved residency programs, though more are encouraged.

Prerequisite: successful completion of all pre-clinical (Year 1 and Year 2) coursework, and post initial attempt on COMLEX Level 1 with passing score reported to clinical education.

Learning Outcome Information:

Course Learning Objectives/Outcomes and Observed Behaviors				
When Mapping, please use a competency-based progression of learning: I= Introduce; R= Reinforce; C= Competent				
Upon Successful completion of the course, the student will be able to:	ILOs	PLOs	Clinical Skills	Assessment Method
Apply clinical reasoning and judgment skills in the practice of medicine through observed behaviors of: <ol style="list-style-type: none">1. Gather a history and perform a physical examination, including structural, pertinent to the given history.2. Create a differential diagnosis meaningful to the clinical situation.3. Recommend and interpret common testing within the context of a given clinical situation.4. Generate treatment plans relevant to the clinical situation.5. Document encounters appropriately6. Perform an oral presentation of a clinical encounter concisely.7. Ask questions that lead to the acquisition of clinical knowledge that advances a patient's care which includes informatics and evidence-based medicine (EBM)10. Ability to triage patients appropriately	1c, 2c, 4c, 5c	1c, 2c, 3c, 6c	1c, 2c, 3c, 4c, 5c, 6c, 7c, 10C	• Preceptor Assessment Questions 1-8, 10-12, 14, 17
Demonstrate interpersonal communication and relationship skills with patients, care team members, and others through observed behaviors of: <ol style="list-style-type: none">8. Handoff and receive patients in the transition of care appropriately and with empathy.9. Work collaboratively and respectfully with all care team members, patient families, and others.10. Triage a patient to appropriate levels of care.	1c, 2c, 3c, 4c	4c, 5c	8c, 9c, 10c	• Preceptor Assessment Questions 7, 9, 13, 15
Conduct patient and condition-appropriate physical exams and procedures with compassion and empathy through observed behaviors of:	1c, 2c, 4c, 5c	3c, 4c, 6c	11c, 12c	• Preceptor Assessment Questions 2- 4, 10, 12, 15,

11. Can articulate appropriately the requirements for a typical informed consent. 12. Perform procedures and physical exam skills, including OMT, recognized as necessary for an entry-level resident physician.				
Evaluate systems-based practices to contribute to quality improvements through observed behaviors of: 13. Recognize system failures and can contribute to improvements.	1c, 2c, 5c	7c	13c	• Preceptor Assessment Question 17
Act in a professional manner that meets the standards of the osteopathic profession through observed behaviors of: 14. Practice lifelong learning consistently (practice-based learning) 15. Self-reflect honestly, consistently, and openly with supervisors. 16. Consistently act to meet the Preceptor's expectations of a colleague in training. 17. Consistently exhibit a quiet, compassionate hand of tolerance towards others	1c, 2c, 3c, 4c	5c	14c, 15c, 16c, 17c.	• Preceptor Assessment Questions 9, 13, 15, 16

Required Texts/Materials:

There are no required learning resources; however, Credentialed Adjunct Clinical Faculty may request students purchase resources for individual externship electives.

Assignments and Due Dates:

1. Patient Logs - Enter Patient Logs to New Innovations daily. All logs must be submitted by 5 days following the end of the elective
2. Preceptor Assessment Form – Ensure the preceptor has a copy of the Preceptor Assessment prior to the last day of the elective

Patient Logs

Students will log each virtual or direct patient care into New Innovations. Minimum patient contact/logs are considered an average of at least 6 outpatients or 3 inpatients per day. The log will include the patient's age, patient diagnosis, procedures done if performed with the preceptor, and whether the patient encounter was conducted via direct patient care or telehealth. It will serve multiple purposes including as a contact tracer if needed, documented proof of quality and quantity of patient experiences, and in preparation of students for residency portfolio recordkeeping. The Patient Logs portion of the externship is graded as a Pass or Fail. A passing grade will be achieved if the required Patient Logs are complete and are submitted to New Innovations by 5 days following the end of the externship.

Preceptor Assessment

A Clinical Externship Faculty Assessment of Student Doctors on Clinical Rotation (**see Appendix A**) must be completed and submitted by the preceptor for each clinical externship for a grade for the course to be posted. The grade for the assessment will be assigned by the Course Director based on the preceptor's overall recommendation as well as responses to professionalism, EPAs, and skills questions. Should a student fail the assessment, the Course Director will assign remediation. Successful remediation will result in a course grade of Px. Unsuccessful remediation will result in a second course failure and referral to SPC.

Final Grade Calculation:

Category of Assessment	Possible Grade
Patient Logs	P/F
Preceptor Assessment Form (s) Recommendation	Clerkship Director review of Preceptor Assessment Form

Final grades for the course are awarded by the Course Director as:

- H – Honors
 - Preceptor Assessment – Totality of assessment places student at the level of Manager or Educator as awarded by the Course Director
 - On-time submission of complete patient logs

- P – Pass
 - Preceptor Assessment – Totality of assessment places student at the level of Pass as awarded by the Course Director
 - On-time submission of complete patient logs
- F – Fail
 - Preceptor Assessment – Student does not achieve the level of Pass or Honors as awarded by the Course Director
 - Insufficient Patient Logs
- Incomplete
 - A grade will be awarded once the complete Patient Logs are submitted. The student is not eligible to receive a grade of Honors if the Patient Logs are not submitted on-time.
- Px – Pass with Remediation
- WIP – Work in Progress

Course Policies:

Please refer to the RVU Student Catalog/Handbook and the Clinical Education Manual for policies including, but not limited to:

Email and MyVista Utilization
 Academic Integrity
 Academic Accommodations Process
 Health and Technical Standards
 OPP and PCM Laboratory Policies
 Biosafety, Universal Precautions, and Bloodborne Pathogens
 Academic Grievances Policy (Grading Disputes)
 Attendance Policy
 Excused Absences
 Course Adjustment Policy
 Student Supervision Policy

Please note, course syllabi are subject to change as necessary at the discretion of the Course Director.

Credit Hours

Clinical Elective Externships generally range from one to eight weeks. One credit hour for clinical elective externships is awarded based on at least 37.5 hours spent in direct patient care and demonstrating adequate patient log support of an average of 4 outpatients or 2 inpatients per day if completed in the 3rd year or at least 6 outpatients or 3 inpatients per day if completed in the 4th year.

Attendance Policy

The focus of the clinical experience in years 3 and 4 is patient care and interaction. One hundred percent attendance is, therefore, required to be sure that continuity of care is maintained. It is understood that certain situations may arise that will result in an absence from required daily participation. In such instances, the following policies will be observed:

- Absences for any reason must be approved by both by both the Preceptor and Clinical Dean.
- Preplanned absences - Submit the Clinical Education Excused Absence Request form in iNet for preplanned absence as soon as event dates and details are known.
- Emergency absences - Submit the Clinical Education Excused Absence Request form in iNet the same day as any emergency absence.

Professional Conduct Policy

RVUCOM holds in high regard professional behaviors and attitudes including integrity, collegiality, compassion, diversity, service, innovation, and a commitment to excellence. Effective learning is best fostered in an environment of mutual respect between teachers and learners. In the context of medical education, the term “teacher” is used broadly to include peers, resident physicians, full-time and volunteer faculty members, clinical coordinators, clinical preceptors, and ancillary support staff, as well as others from who students learn.

Students are expected to always adhere to the highest level of professional conduct. Students will always treat *all* employees of Rocky Vista University and those in clinical training sites with respect and courtesy. Students will demonstrate ethically responsible behavior; act honestly and with integrity to patients, their representatives, faculty/preceptors, and coworkers. Students will preserve confidentiality and not discuss patients publicly or with unauthorized persons. No documents with patient-identifying information will leave the clinical setting. Compliance with all institutional regulations, including state and federal HIPAA laws, is expected.

The Preceptor has the authority to dismiss a student from the clerkship for violations of the student's duties and responsibilities as delineated in this manual, a threat to public health or safety, or as deemed appropriate for the continued operation of the clinical site. Any such action will result in evaluation by the Senior Associate Dean of Clinical Education or designee for review and possible disciplinary action. In addition, any problems or concerns affecting students not adequately resolved at the clinical training site should be referred to the appropriate Dean of Clinical Education. Students should read and comply with the Student Supervision Policy in the Clinical Education Manual.

Helpful Scheduling Information

With more than 700 students on clerkships at any one-time, clinical clerkships involve many different sites, people, hospitals, clinics, and physicians, thus requiring a complex scheduling process. The number of students assigned to each clerkship is determined by the mutual agreement of Hospital Administrators, Preceptors, and the Department of Clinical Education. Therefore, flexibility on assigned clerkships is limited. RVUCOM reserves the right to change a student's clerkship, subjects, and schedule at any time as required due to preceptor and clerkship site availability. Those students so affected will be notified of any changes, and an appropriate replacement clerkship will be offered to the affected student; again, typically within the student's clerkship site region. If the student must be assigned to an OMS III clinical clerkship 60 miles or more away from their core site, the student will be given a stipend for housing required during the clerkship.

Despite apparent clerkship openings, there will be little opportunity for change once a clerkship has been scheduled. OMS III clinical clerkships may not be canceled or changed by the student within 30 days of the start date. The student may not attend a clerkship not approved by the Department of Clinical Education. Credit may not be earned for such a clerkship and the student will not be covered by malpractice insurance.

Students in OMS IV elective clinical clerkships, including clerkships at ACGME-approved residency programs (e.g. Audition or Sub-I rotations), need to be mindful of scheduling and credentialing timelines when out-of-network rotations are being considered to avoid breaks in clinical training and financial aid eligibility. RVU cannot guarantee an elective rotation due to preceptor availability and credentialing deadlines.

Students who plan to cancel scheduled OMS IV elective clinical clerkships, without an approved replacement rotation, must work with their clinical coordinator at least 45 days before the clerkship starts. Students will need to submit an iNet form requesting an elective rotation, GAP course, research, or floating break in advance of canceling the scheduled clerkship.

Students who plan to change a scheduled clerkship at ACGME-approved residency programs with a newly offered/approved Audition or Sub-I rotation, must work with their clinical coordinator at least 21 days prior to cancelation/rescheduling. Students should not cancel a scheduled OMS IV elective clinical clerkship without first receiving approval from their clinical coordinator.

The Department of Clinical Education reserves the right to assign clinical clerkships during the student's clinical training to meet graduation requirements.

Students in clinical settings shall be referred to as "Student Doctor ____". If students have a doctorate in any field, they cannot use that title in any setting related to their education.

Student Supervision Policy

OMS III and OMS IV Students

1. May participate in care and management of the patient, including participation in history taking, physical examination, and critical data analysis, under the supervision (direct or indirect supervision with direct supervision immediately available) of a credentialed RVU clinical faculty physician (full-time, part-time, or credentialed preceptor) or another qualified medical care professional to whom that supervision has been assigned.
2. May assist in procedures under **direct supervision**, when the attending physician agrees that the student has achieved the required level of competence and permission is granted by the patient.
3. May perform the procedures listed below **under indirect supervision with direct supervision immediately available** once a medical student has been observed successfully performing the procedure by a faculty or qualified resident.
 - Blood collection: arterial, venous, or capillary
 - Injections: intramuscular, subcutaneous, intradermal, intravenous
 - Insert peripheral intravenous catheter.
 - EKG
 - Foley catheter insertion (male and female)
 - Nasogastric tube insertion
 - Local anesthesia
 - Suture simple laceration

- Suture or staple removal
 - Ventilation (ambu-bag)
4. May document the following in the patient's permanent medical record: history & physical notes, progress notes, procedure notes, operative notes, or discharge summaries provided that the note is **clearly** identified as a student note for educational purposes only.
 - All student charting in the medical record must be clearly indicated as a Medical Student Note. The supervising physician will remain directly responsible for all student documented notes and comply with CMS guidelines for student documentation in the medical record.
 5. May, under supervision (direct or indirect supervision with direct supervision immediately available), in consultation with the RVU clinical faculty physician or designee, develop a patient management plan.
 6. May **not** give any independent orders, written or verbal. Orders may be given only at the direction of the clinical faculty physician of record.

Course Schedule:

One Credit Hour Elective

Week	Date	Lecture Topics *	Assessments & Assignments Due
1	Day 1	Orientation	Discuss expectations of the rotation with the preceptor.
		Patient Care	Maintain Patient Logs and formative feedback with preceptor.
1	Day 2	Patient Care	Maintain Patient Logs and formative feedback with preceptor.
1	Day 3	Patient Care	Maintain Patient Logs and formative feedback with preceptor.
1	Day 4	Patient Care	Maintain Patient Logs and formative feedback with preceptor.
1	Day 5	Patient Care	Maintain Patient Logs and formative feedback with preceptor.
		Exit Interview	Review of Preceptor Assessment with the Preceptor

Two Though Eight Credit Hours Electives

Week	Date	Lecture Topics *	Assessments & Assignments Due
2-8	Day 1	Patient Care	Maintain Patient Logs and formative feedback with preceptor.
2-8	Day 2	Patient Care	Maintain Patient Logs and formative feedback with preceptor.
2-8	Day 3	Patient Care	Maintain Patient Logs and formative feedback with preceptor.
2-8	Day 4	Patient Care	Maintain Patient Logs and formative feedback with preceptor.
2-8	Day 5	Patient Care	Maintain Patient Logs and formative feedback with preceptor.
2-8	Day 6	Patient Care	Maintain Patient Logs and formative feedback with preceptor per the preceptor's schedule.
2-8	Day 7	Patient Care	Maintain Patient Logs and formative feedback with preceptor per the preceptor's schedule.
2-8	Final day of the Rotation	Exit Interview	Review of Preceptor Assessment with the Preceptor

STUDENT SUCCESS & SUPPORT RESOURCES

POLICIES

Academic Integrity Policy:

<https://catalog.rvu.edu/academic-integrity>

All RVU Policies:

<https://policies.rvu.edu/> (must be logged into inet.rvu.edu)

Program Handbook:

<https://catalog.rvu.edu>

RESEARCH & WRITING SUPPORT

Frank R. Ames Memorial Library:

<https://library.rvu.edu/framl/home>

Plagiarism:

<https://library.rvu.edu/researchguide/researchethics/plagiarism>

Writing Center:

<https://www.rvu.edu/writing-center/>

GENERAL STUDENT SUPPORT

Diversity, Equity, & Inclusion: <https://www.rvu.edu/about/diversity-equity-and-inclusion/>
Financial Services: <https://www.rvu.edu/admissions/financial-aid/>
IT Help Desk: https://myvista.rvu.edu/ics/Help_Desk/ (must be logged into inet.rvu.edu)
Mental Health & Wellness: <https://www.rvu.edu/mental-health/>
Services for Students with Disabilities-CO: <https://www.rvu.edu/co/student-affairs/disability-services/>
Services for Students with Disabilities-UT: <https://www.rvu.edu/ut/student-affairs/disability-services/>
Student Affairs: <https://www.rvu.edu/student-affairs/>

Appendix A: Clinical Clerkship Faculty Assessment of Student Doctors on Clinical Rotation (Preceptor Evaluation)

1* Obtains an appropriate history.

Below Expectations/Need Improvement	Meets Expectations	Exceeds Expectations	Exemplary
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2* Performs an appropriate physical examination.

Below Expectations/Need Improvement	Meets Expectations	Exceeds Expectations	Exemplary
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3* Formulates an appropriate differential diagnosis.

Below Expectations/Need Improvement	Meets Expectations	Exceeds Expectations	Exemplary
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4* Recommends and interprets common diagnostic and screening tests.

Below Expectations/Need Improvement	Meets Expectations	Exceeds Expectations	Exemplary
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5* Recommends an appropriate treatment or management plan.

Below Expectations/Need Improvement	Meets Expectations	Exceeds Expectations	Exemplary
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6* Documents an acceptable clinical encounter note.

Below Expectations/Need Improvement	Meets Expectations	Exceeds Expectations	Exemplary
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7* Provides an organized oral presentation of the clinical case.

Below Expectations/Need Improvement	Meets Expectations	Exceeds Expectations	Exemplary
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8* Demonstrates the ability to access appropriate resources to gather medical information and evidence as needed.

Below Expectations/Need Improvement	Meets Expectations	Exceeds Expectations	Exemplary
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9* Participates and collaborates as a respectful and helpful member of an interprofessional team.

Below Expectations/Need Improvement	Meets Expectations	Exceeds Expectations	Exemplary
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10* Recognizes a patient requiring urgent or emergent care and provides appropriate recommendations when able to discuss with preceptor.

Below Expectations/Need Improvement	Meets Expectations	Exceeds Expectations	Exemplary
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11* Performs general procedures of a physician.

Below Expectations/Need Improvement	Meets Expectations	Exceeds Expectations	Exemplary
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12* Approaches patient care with a whole person approach (body, mind, and spirit) as part of managing patient's medical issues.

- Student Doctor does not use a whole person approach with patient care.
- Student Doctor uses a whole person approach with constant prompting.
- Student Doctor uses a whole person approach with minimal prompting.
- Student Doctor uses a whole person approach without prompting.

13* Demonstrates high level of professionalism expected of a medical student.

Below Expectations/Need Improvement	Meets Expectations	Exceeds Expectations	Exemplary
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14* Demonstrates appropriate medical knowledge in their current year of education.

Below Expectations/Need Improvement	Meets Expectations	Exceeds Expectations	Exemplary
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15* Demonstrates excellent interpersonal and communication skills (phone calls, emails, conversations).

Below Expectations/Need Improvement	Meets Expectations	Exceeds Expectations	Exemplary
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16* Demonstrates self-directed learning on a regular basis.

Below Expectations/Need Improvement	Meets Expectations	Exceeds Expectations	Exemplary
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17* Contributes to a patient care culture of quality and safety.

Below Expectations/Need Improvement	Meets Expectations	Exceeds Expectations	Exemplary
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18* Based on the Student Doctor's performance during this clerkship:

- This individual demonstrates knowledge and abilities BELOW what is expected of an incoming third year student
- This individual demonstrates knowledge and abilities expected of an incoming third year student.
- This individual is advancing and demonstrates additional knowledge and abilities but is not yet performing at the level of an incoming fourth year student.
- This individual continues to advance and demonstrates additional knowledge and abilities, consistently including the majority of those targeted for an incoming fourth year student.
- This individual has advanced so that he or she now substantially demonstrates the knowledge and skills targeted for medical school. This level is designated as the graduation target.
- This individual has advanced beyond performance targets set for medical school and is demonstrating 'aspirational' goals which might describe the performance of a resident. This is an honors designation that only applies to the top 10% of graduating medical students.

19* Looking at the Student Doctor's global performance, which of the four categories best reflects how your student interacted with you?

- Reporter - Reporters can accurately and reliably gather clinical information on each of their patients. Reporters can communicate clearly (both verbally and in writing) the clinical information they have obtained. Reporters can distinguish important information from unimportant information and are able to focus data collection and presentation on central issues.
- Interpreter - Interpreters can identify problems independently and prioritize problems, including new problems, as they arise. Interpreters can develop a differential diagnosis independently and make a case for and against each of the important diagnoses

under consideration for a patient's central problem(s).

Manager - Managers can develop and defend a diagnostic and a therapeutic plan for each of their patients' central problem(s). Managers can utilize their growing clinical judgment to decide when action needs to be taken. Managers can analyze the risk/benefit balance of specific diagnostic and therapeutic measures based on an individual patient's circumstances.

Educator - Educators have mastered the fundamental skills described above. Educators have the insight to define important questions to research in more depth, the drive to seek out the evidence behind clinical practice, and the skills to scrutinize the quality of this evidence. Educators take a share in educating the rest of the team.

20* Did the Student Doctor attend the rotation as expected (35+ hours per week)?

- Yes
- No
- Unknown

21* Did the Student Doctor share and discuss their Clerkship SMART goals with you?

- Yes
- No
- Unknown
- Not applicable for Elective Clerkships

22 Additional feedback for growth and improvement. Please include feedback that provides evidence of the student's strengths and weaknesses (consider skills listed in the syllabus) and give examples of achievement or deficiencies.

23 Comments from you or your team in this section are your opportunity to communicate with the Dean on this student's readiness for residency. If your assessment is submitted prior to September 1st of the student's graduation year, then your comments will be added to the student's MSPE/Dean's Letter. If your assessment is submitted after September 1st of the student's graduation year, then your comments will help inform the Dean of the student's eligibility for special awards recognition for graduation.