

CURRICULAR POLICIES AND PROCEDURES

Attendance Policy for MS1 and MS2

Satisfactory achievement of the educational goals and the objectives of each course requires regular class attendance and participation in all curricular activities. All educational experiences which involve patient contact, clinical demonstration and direct care are required. Students are excused from classes on approved OHSU holidays. Students are expected to adhere to the OHSU Inclement Weather policy as stated in the Administrative Policies section. Students are expected, as a component of their professional responsibility, to complete a course evaluation for each course within one week of the end of the course.

In accordance with the “Guiding Principles” of the undergraduate medical education program, all medical students are expected to participate fully in all aspects of the medical curriculum. The SOM Curriculum Committee expects all students to attend lectures, and to fully participate in small group and laboratory learning experiences unless otherwise indicated by the course director. Active participation by both students and faculty in small groups is an excellent method of learning which strengthens group interactions and professional development skills.

1. Attendance in small groups and laboratories is required in all courses unless specified by the course director.
2. Each course will assign exam questions from the small group content areas apportioned to the value of the small group time.
3. Students are expected to be present in their assigned group, and sign-in, to receive credit for attending the session. Students are expected to come to the small group session having read the assigned materials and prepared to participate in the small group discussions.
4. The small group sessions will comprise at least 5% of the overall grade in a course.

Approval of the Basic Sciences Course Directors July 2005
Revised & Approved FSYC-SC March 14, 2011
Revised & Approved FSYC-SC May 16, 2011

Professional Dress

Students are expected to adhere to professional dress attire when encountering with patients either in the classroom or in a medical setting. Patients come from very diverse backgrounds that need to be respected.

Professional dress consists of a clean white coat and an official OHSU nametag identifying one as a medical student. Both male and female students are expected to be neat and well groomed at all times. Students should not wear shorts, jeans, tennis shoes, cargo pants, or Capri pants. Men should wear ties. Women should wear blouses or dresses that have appropriate necklines and do not expose the midriff. Stockings or leggings are expected if the

dress is above the knees. Students should minimize facial piercing and minimize wearing jewelry. Shoes with closed toes are considered safer in a clinical setting since contaminants and needles are often dropped.

First- and second-year classroom settings are considered informal unless faculty notify students otherwise. However, students should continue to be well-groomed and neat and use good judgment about what is too casual.

Students should adhere to hospital policy regarding appropriate protocols for wearing scrubs.

SOM Conflict of Interest Lecture Policy

1. Lecturers are required to disclose any conflict of interest regarding the content of their presentations, either in person or in the course syllabus.
2. The lack of a disclosure statement will be sufficient evidence that there is no conflict of interest.
3. Course directors will promulgate this policy with the lecturers.

Approved Curriculum Committee Nov. 12, 2009

Policy for Examination Schedule Change

1. If a student defers an examination due to illness, the **student must contact** Teaching Services staff (494-8428) who will forward the deferral request to the course Director and Student Affairs Office. Subsequently, the **student is responsible for arranging to sit** for the deferred examination as outlined below (refer to item 4.)

Health care in the Student Health Service is available to all students who are ill.

2. A student may postpone exams for health reasons no more than once during the academic year. Need for a second examination deferral for health reasons requires meeting with the Associate Dean for Student Affairs and a signed release for health information from SHS.
3. Changing the scheduled time of an examination for non-health reasons is generally not permitted. Exceptions include emergencies and unique academic opportunities. In the case of academic opportunities, **students must submit an e-mail request (which includes the phone number of the course director)** to the Associate Dean for Student Affairs **and** the Course Director at least two weeks prior to the examination. Students must be in satisfactory academic standing to be considered for an examination schedule change for non-health reasons.

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The Associate Dean for Student Affairs is responsible for reviewing non-health related examination schedule change requests from students, discussing the issues with the Course Director, and conveying the final written decision to the student, Course Director and Teaching Services office.

4. Students deferring **exams must take the examination within one week** of the original examination date. Failure to do so will be cause for assigning a grade of “incomplete.” Students who are approved for examination deferral must reschedule the examination through Teaching Services.
5. Students who defer examinations shall sign the following affirmation prior to taking a deferred examination: “I affirm that I have not received any knowledge of the content of the exam that is to be made-up or discussed its contents with my classmates or others who may have knowledge of its contents.”
6. Students who receive permission to take an examination early, shall sign the following affirmation prior to taking the exam: “I affirm that I will not disclose any knowledge of the content of the exam or discuss its contents with my classmates or others who may take this examination later.”

Revised and Approved
March 10, 1999
August 8, 1999
February 9, 2009
Amended FSYC-SC 1/24/11

Policy on Examination Scoring

Class performance on each question following an examination will be reviewed by the course steering committee by reviewing the examination item analysis, reviewing student queries, and individual faculty review of examination content. If the course steering committee recommends a change in an answer, then the recommended change shall apply to all students in the course. Upon a review of performance, if the course steering committee decides to eliminate a question from an examination then no credit is given to students for this question under any circumstances.

Finalized Basic Sciences Subcommittee
May 13, 1996
Curriculum Committee
June 13, 1996

Passing Grade Expectations for MS1 and MS2 Courses

Students in the MS-1 and MS-2 required curriculum must achieve an average of 70% (75% in Gross Anatomy, Imaging & Embryology) on the cumulative examination scores in order to receive a passing grade for any course.

All other components of the course, including quizzes, labs small group attendance etc., may change the final grade as long as the minimum 70% (75% in Gross Anatomy, Imaging &

Embryology) has been achieved on the exams.

Students receiving less than 70% average score (75% in Gross Anatomy, Imaging & Embryology) in any course will receive a marginal or failing grade for that course. Students in the MS1 and MS2 PCM course must achieve a summative score of 70% or higher on all graded course criteria over the duration of three terms in each academic year, to receive a passing grade for the course.

Grades considered less than satisfactory will be reviewed by the School of Medicine Student Progress Board.

The Student Progress Board in conjunction with the Course Director will determine remediation of the course if warranted.

Approved by Basic Science Subcommittee (aka: FSYC-SC) September 20, 2010
Approved by Curriculum Committee, October 2010
Amended FSYC-SC, March 14, 2011

Submission of Grades to Registrar's Office MS1 and MS2 Courses

Final course grades for student in the MS-1 & MS-2 curriculum will be submitted by the Teaching Services Office, to the SoM Registrar's Office for official recording no later than 6 weeks after the completion of each course.

Amended & Approved by First & Second Year Curriculum Sub-committee FSYC-SC 2/14/11

Examination Administration Guideline

1. Student Personal Belongings
 - Backpacks are permitted in the classroom and are to remain closed and undisturbed during the exam administration.
 - Students may utilize only identified exam materials during an exam administration. Exam materials include exams, scan sheets, query forms, pencils and calculators when permitted.
 - Watches with alarms and cell phones are to be turned off. Cell phone use is not permitted in the exam room. Pagers should be turned off or alternatively placed on vibrate mode if necessary. Recording/filming devices and radios are not permitted in the exam room. Personal digital assistants (PDAs) should be stored out of sight.
2. Exam Time Period
 - The designated exam time begins on the hour and ends at 50 minutes past the hour unless otherwise noted. This time frame includes exam distribution, proctor announcements and scan sheet completion. Students must be seated and quiet for the exam distribution to begin.
 - Students who have received approved testing accommodations will contact the Course Director at least one week prior to each exam date to request extended examination time.

3. Exam Materials Distribution

- Students shall collect an answer sheet, query forms, and pencils from a central location prior to the start of the exam.
- The proctor(s) shall distribute the exam material to each row of seated students.

4. Admitting Late Examinees

- A 15-minute grace period shall be observed after the start of an exam.
- A student arriving later than 15 minutes after the start of an exam shall be documented as late. Additional testing time is not added to the testing session for a student who is late.
- A student arriving late for a second time will be permitted to sit for the exam and will be required to meet with the Associate Dean for Student Affairs.
- A student arriving late for a third time will be permitted to sit for the exam and will be referred to meet with the Student Progress Board.
- Late arrival documentations are cumulative throughout the first- and second-year medical curriculum and will be recorded by the Teaching Services Office.

5. Examinees Personal Breaks

- A maximum of six students may leave the exam for a personal break at any given time.
- Personal breaks are not to exceed five minutes duration and are restricted to use of the restroom.
- A student taking a personal break must deposit their exam and answer sheet, face down, at a location at the front of the classroom visible to all taking the exam.

6. Exam Queries

- The proctor will not answer any questions regarding interpretation of exam content.
- If there is a concern about the intent of an exam item, students should complete a query form.
- Queries are only accepted during the examination period and must be completed within the allocated exam period.

7. Collecting Test Materials at the End of the Session

- The proctor will announce 30-minute, 10-minute and end-of-exam announcements.
- Each student shall individually return their exam, scan sheet, query forms and pencils to the central location in the classroom.
- Exams are not permitted to leave the classroom.

8. School of Medicine Public Domain Policy

The following SOM policy pertains to all required courses for the MD Degree:

The content of an examination is confidential and distribution of the content in the public domain is prohibited when the examination bears the School of Medicine Public Domain Advisory. In this circumstance the reproduction or transcription of the content of the examination by any means is unauthorized. Possession and distribution of the examination or the content of this examination outside of the classroom setting or of the supervision of the course director or his/her designee is prohibited. Individuals possessing or distributing exams or exam content that is not authorized to the public domain will be subject to academic disciplinary action for failure to meet professional standards.

The following examinations are not authorized for distribution in the public domain:

Gross Anatomy, Imaging and Embryology

PCM I and II

Cell Structure and Function

Systems Process & Homeostasis

Biological Basis of Disease

Circulation

Metabolism

Neurosciences & Behavior

Pathophysiology of Blood

Human Growth and Development

Medicine I and II

Psychiatry

Surgery I and II

Pediatrics I and II

Obstetrics & Gynecology

Family Medicine

Neurology

Confidentiality Policy for Duplicating Course Content Materials – All Four Years

All course content materials provided to OHSU medical students are for the educational use of OHSU medical students only. None of these materials are to be shared with anyone outside of this medical school.

All course materials provided by faculty through written or electronic format are considered intellectual property of the author and OHSU and are considered to be private and legally protected.

Consequently, there will be no duplication or sharing of course materials outside of the OHSU SOM *in any form*. These course materials include, but are not limited to, lecture materials, audio or video presentations, small group, laboratory and syllabi materials, as well as postings from Sakai or SOM websites.

If a student is granted permission to duplicate any course materials, these reproductions may only be used for internal educational purposes and only by that student or by other OHSU medical students.

There will be no duplicating in any form of examinations or quizzes for any reason.

Any breach of this policy will result in disciplinary action.

Adopted by Basic Science Subcommittee, June 25, 2010

Electronic Information

Electronic information and communication technology are provided specifically for meeting educational and professional responsibilities. The School of Medicine and OHSU computers

are tools to enhance and provide learning, communication and information management. Using these computers is a privilege and all users have responsibilities regarding their use.

- Changing or rearranging the setup of any computer without authorization is prohibited.
- Compliance with copyright laws regarding software and information is required.
- The privacy of others must be respected.
- Use of appropriate language is essential. Language that would be offensive to others is unacceptable.

Other activities that are considered inappropriate use include, but not limited to:

- Accessing, viewing or downloading pornographic materials.
- Copy or downloading materials in a way that violates another's licensure/copyright protection.
- Use of OHSU computing resources to harass others.

The Internet provides access to valuable information and interactions. Use of the Internet should support the educational mission and provide individuals with access to databases and other similar resources. In using the Internet, violating the rights of others including privacy as well as using or posting profanity, obscenities or language that may be offensive to another use is prohibited. Likewise accessing inappropriate graphic or factual information or responding to messages that are obscene or threatening is unacceptable conduct.

All students are expected to maintain utmost respect and confidentiality of patients, faculty and colleagues in accessing privileged information. Improper use of computer technology is considered professional misconduct and accordingly students will be referred to the Medical Student Progress Board for action which could include dismissal from the School of Medicine.

Medical Curriculum While in Combined Degree Programs

Medical students in the combined degree programs must take all required MD program courses while enrolled as a first- or second-year student. This includes the passing of USMLE Step I prior to beginning any graduate studies and/or clinical clerkships. If a student feels extenuating circumstances exist, the student may petition the Medical Student Progress Board to defer specific MS1 and MS2 courses or USMLE Step I. Combined degree students may register/participate in an elective clinical preceptorship while taking graduate program courses.

Policy for Providing Tutors

Tutors are provided when a student is identified by a course director for not making satisfactory progress in a course. The Office of Education and Student Affairs coordinates selection of a tutor at no cost to the student.

USMLE Requirements

Effective with the Class Entering in 2009

This policy is a change and is effective starting with all students in the first year curriculum in 2009-2010. All students will be required to take and record a passing score for the USMLE Step 1 and Step 2 CK and CS exams in order to graduate from the MD program.

Approved by Curriculum Committee April 2009
Approved by Faculty Council May 2009

Procedures

Students are required to take and record a passing score for USMLE Step 1 prior to entering the third year. All students must take the exam prior to starting the Transition to Clerkship course. MD/PHD and MD/MPH students are required to take and pass the USMLE Step 1 prior to being eligible to enter graduate studies or clinical curriculum.

Students who receive a non-passing score may complete their current clerkship rotation or take an incomplete grade. These students will be given an automatic one year leave of absence to achieve a passing score on Step 1 and must pass the exam before they can re-enter the clinical curriculum. During this leave year, students can decide to be registered for the Clinical Review Course for a maximum of two terms to remediate USMLE Step 1 or Step 2 CK/CS. Students must seek approval from the Associate Dean for Student Affairs prior to registration. If they do not pass USMLE Step 1 within that year, they will be subject to a dismissal hearing by the Medical Student Progress Board. If a student wishes to re-enter the curriculum before the one year leave of absence is completed, the student must request this in writing 6 weeks prior to the start of the next clerkship.

The only exception will be for students selected by the Associate Deans to be at significant risk for not passing. They will be identified based on overall academic performance and MOCK board scores. See Administrative Deferrals Policy for detail. Any student that **does not sit for the exam by July 30** will be required to take an automatic one year leave of absence from the third year. Students who delay the USMLE Step 1 beyond the August rotation will no longer be able to meet the graduation requirements with their class and therefore automatically extend their curriculum by one year. During this leave year, students can decide to be registered for the Clinical Review Course for a maximum of two terms to remediate USMLE Step 1 or Step 2 CK/CS. Students must seek approval from the Associate Dean for Student Affairs prior to registration.

Students are required to take and record a passing score on both USMLE Step 2 clinical knowledge (CK) and clinical skills (CS) prior to graduation. They must complete both exams with a passing score received by the Dean's Office no later than May 15 of their graduation year in order to be able to participate in the commencement ceremony. They will be given a one year automatic leave of absence to achieve a passing score on Step 2 CK and CS and must pass the exam before they can re-enter the clinical curriculum. If they do not pass USMLE Step 2 CK and CS within that year, they will be subject to a dismissal hearing by the Student Progress Board.

MEDICAL STUDENT HANDBOOK

Approved by the Clinical Sciences Subcommittee March 9, 2009
Approved by the Basic Science Subcommittee March 16, 2009
Approved by the Curriculum Committee April 9, 2009

Deferral of USMLE Examinations

School of Medicine policy requires students to take USMLE Step 1 prior to beginning the Transition to Clerkship and/or a clerkship.

A deferral of USMLE Step 1 is only granted for documented illness or injury.

Failure to Comply with the USMLE Step 1 Policy

If a student does not take the USMLE Step 1 exam prior to the Transition to Clerkship and clinical curriculum:

- A student will not be permitted to begin clerkships until the USMLE Step 1 has been taken and passed. Student is subject to policies and procedures regarding the USMLE Policy (refer to the policy for specifics).
- A student must contact the clerkship director for the July rotation at least 1 week in advance to arrange for dropping the course. Likewise, the student must contact the Office of Education and Student Affairs.
- A student will not have priority as a fourth year student to reschedule this third year rotation.
- A Professional Development Evaluation may be submitted for non-compliance with the USMLE Step 1 policy.

Administrative Deferrals Policy

Administrative deferrals can be granted by the Associate Dean for Undergraduate Medical Education. The following criteria will be used, but is not limited to:

A group of students can be identified by the Associate Deans to have demonstrated academic performances in years one and two which may put them at risk for not passing Step 1. These identified students must meet the following performance criteria to be considered at risk:

Mock Board score of 40 or less

OR

Mock Board score of 50 or less and a course class average of 77% or less

If a student falls into one of these categories, they might be identified as needing additional time to prepare for Step 1 and may be required to participate in preparation programs.

The following are some of the components that might be outlined for participation in this program.

- Required participation in any identified preparation program
- Attendance at all sessions is required
- The course will be held prior to Transition to Clerkship so students will have an additional 4 weeks of study time for the exam.
- Permitted to drop the July clerkship
- Required to take the Transition to Clerkship course
- Requested to take Step 1 exam at least one week prior to the start of the second rotation period. Must be completed by July 30.
- Cannot begin clerkships until Step 1 exam has been taken. (Please refer to the USMLE policies and procedures for details)

USMLE Policy for Students Prior to Entering Class of 2009

Students are required to sit for USMLE Step 1 at the end of the second year curriculum prior to starting the Transition to Clerkship course and clerkships. If a student is unable to meet this requirement or fails Step 1, they are required to take or repeat the exam in the November/December elective block. USMLE Step 2 CK and CS should be completed by March prior to graduation in June.

Clerkship Expectations

The overall objective of the third year is to integrate all that students have learned into the basic skills needed to be a successful physician. Physicians are lifelong learners who must always reach for the next level. In order to reach that goal, the clerkship directors are providing you with a list of expectations to assist you during the core clerkship year.

1. You are expected to be present and participate fully in all activities involved in the clerkship, including orientation, seminars, and the final exam.
2. You are expected to make decisions, defend them, and understand the consequences of a poor decision.
3. You are expected to give 100% effort while on a clerkship and you should expect the same from your classmates.
4. You are expected to be respectful of your classmates, residents, faculty and other staff at all times. Do not undermine your colleagues.
5. You are expected to be current with all your patients and you are encouraged to do advanced reading on those patients. You should feel free to bring relevant articles to the team.
6. You should expect the residents and attendings to provide constructive criticism, so that you can improve throughout the clerkship. A formal midterm feedback session is required at week 3 of the rotation and week 5 of the Medicine rotation.
7. You are expected to be present daily unless you are ill or have a family emergency. You must seek approval for this time off by contacting the clerkship director for permission. There are no scheduled holidays during required third year clerkships.
8. You will be assigned to specific sites and team by the Clerkship Director.
9. You should expect that you will receive your final evaluation within 6 weeks of completing your rotation.
10. You are expected to submit your procedural logs electronically on the last day of the clerkship.
11. You are expected to complete your course evaluation for the clerkship within one week of the end of the clerkship.
12. Remember that patient is the focus of the patient care experience, not you.

Attendance Policy Regarding Clinical Clerkships

Students are expected to attend all activities involved in a required clinical clerkship. If a student is granted an approved absence that exceeds two days, then the student is expected to make up the time as outlined by the clerkship director. For absences that can be anticipated, approval must be obtained at least 6 weeks prior to the start of the clerkship. A student requesting time off must notify the clerkship director and attending physician by using the Request for Time Off Form. Finalized Request for Time Off forms will be submitted to the Dean's Office for tracking.

There are three categories regarding absences from a clerkship:

1. Student or immediate family illness or emergency. Student should contact the clerkship director or designee immediately and request time off. Student should submit the Request for Time Off form to the clerkship director within 24 hours. Clerkship director can require this time to be made up if it exceeds two days.
2. Request to attend/or present at a professional conference. This category also includes interviewing or taking the USMLE exams. These events are known well in advance and the student should submit a Request for Time Off form to the clerkship director at least 6 weeks prior to the start of the clerkship to seek approval. Students are permitted to have a total of 2 days during the third year and 2 days off during the fourth year to pursue these kinds of events. If the request conflicts with required activities in the clerkship (e.g. exams), the request can be denied. Clerkship director can require this time to be made up if it exceeds two days.
3. Request for Time Off for non-urgent personal reasons such as weddings, reunions, etc. are usually not approved by the clerkship director but can be reviewed if you submit a Request for Time Off form. The clerkship director requires all this time to be made up.

Steps for Requesting Time Off

1. A student submits to the Clerkship Director the Request for Time Off form at least 6 weeks prior to the start of that clerkship.
2. Clerkship Director will review the request to determine if this time off will compromise the clinical service or the academic experience for this student.
3. Clerkship Director reviews the request and will approve with conditions or deny.
4. Clerkship Director forwards the final decision and the Request for Time Off form to the Office of Education and Student Affairs where the attendance records will be maintained for all clerkships.

If a student has a sudden illness and must be out for a day then the student will seek approval per telephone with the clerkship director and submit the Request for Time Off form upon their return.

Clinical Clerkships Scheduling

All students must complete the curriculum of the first two years and meet requirements for promotion prior to entering clinical clerkships. Under rare justifiable circumstances students may request to take a required course at another institution. This request must be directed to the Associate Dean for Undergraduate Medical Education for consideration.

All changes in the clinical rotations must be directed to the Office of Education and Student Affairs and not the specific departments. Students requesting a change, cancellation or modification of clerkship schedules must do so at least five weeks prior to the start date of the clerkship to be modified. If an emergency occurs after the deadline has passed, the student must direct the request to the Assistant Dean for Undergraduate Medical Education. All clinical rotations begin and end on a specific date which students are expected to adhere to unless prior approval has been granted by the clerkship director. Students are responsible for monitoring their courses and credits to assure they meet the graduation requirements.

Delaying a Clerkship

Students are expected to complete all required third year clerkships during the third year of medical school. Students may not drop a required clerkship and replace it with an elective or fourth year required course. Students can request a delay of a clerkship if: 1) enrollment is full which is determined by the Office of Education and Student Affairs, 2) military obligation, or 3) personal or academic issues approved by the Associate Dean for Student Affairs. These requests must be approved 6 weeks in advance of requested change.

Students in the MD/MPH program may request to delay a clerkship. In order to receive consideration for such a request students must: 1) outline in writing a justification for the request at least 4 months prior to the clerkship; 2) realize that we must consider the feasibility and logistics of being able to reschedule this clerkship, and 3) written approval from the Associate Dean for Student Affairs and the Program Director of MD/MPH program must be granted before the clerkship can be dropped or not scheduled.

Clerkship and Elective Grading

The faculty evaluates a student's academic performance to determine if he or she is displaying adequate knowledge, skills, and attitudes and is meeting the standards of the clerkship/course. The clerkship director is responsible for reviewing all faculty and resident comments, examination scores, and any other evaluation instruments requested and to arrive at a final grade. The clerkship directors must submit the final grade and a written summary evaluation within 6 weeks of the conclusion of a clerkship. Timely evaluation is essential so that students with academic or professional difficulties can be reviewed and adequately counseled. In addition, faculty are also expected to provide each student in a course with mid-course feedback in written format. Mid-clerkship feedback must be provided by the 3rd week of a five-week rotation so the student has adequate time to respond.

Clerkship Principles of Evaluation

1. The process must include evaluation of students, faculty, curricular content, and curricular methodology.
2. All required rotations must submit a final grade and comments to the Dean's Office no later than 6 weeks after the completion of a clerkship.
3. Accountability to the standards for distribution of feedback must be monitored.
4. Midterm formative feedback of students must be completed in week 3 of a 5-week rotation and week 5 of a 10-week rotation.
5. The midterm formative feedback form will be common for all third year required clerkships and be in a checklist format.
6. A common set of skills and attitudes pertaining to professionalism will be assessed by each clerkship director for third and fourth year required clerkships. If a student receives an overall evaluation of below expectation, they will be required to remediate. The clerkship director will recommend a remediation plan that is submitted to the Student Progress Board for implementation. A clerkship director can also determine use professionalism as part of overall final assessment.
7. The class grade distribution expectation will be 20-25% Honors, 40-45% Near Honors, 30-35% Satisfactory. The grade distribution will be reviewed annually by the clerkship directors.
8. The students must be evaluated based on the instructional objectives that have been developed by each clerkship director.
9. Evaluation of students must include direct monitoring by faculty of patient care skills, including history taking, physical examination, and procedural skills, appropriate for each clerkship.
10. Summative feedback must be obtained regarding student performance, faculty teaching effectiveness, and effectiveness of educational methodology at the end of each rotation.
11. The ACGME Core Competencies should serve as a guide to general areas of evaluation of students.
 - a. **Patient Care** that is compassionate, appropriate, and effective care for the treatment of health problems and the promotion of health
 - b. **Medical Knowledge** about established and evolving biomedical, clinical, epidemiological, social and behavioral sciences, and the application of this knowledge to patient care.
 - c. **Practice-Based Learning and Improvement** that involves investigation and evaluation of their own patient care, appraisal and assimilation of scientific evidence, and improvements in patient care.
 - d. **Interpersonal and Communication Skills** that result in effective information exchange and teaming with patients, their families, and other health professionals.
 - e. **Professionalism**, as manifested through a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population.
 - f. **Systems-Based Practice**, as manifested by actions that demonstrate an awareness of and responsiveness to the larger context and system of health care and the ability to effectively call on system resources to provide care that is of optimal value.

OHSU Clerkship Duty Hours Policy

The goals of medical students and the faculty of the School of Medicine are the same: to participate in an educational experience that prepares students to enter residency training and become physicians, while maintaining wellness. During their medical training, students contribute in meaningful ways to patient care. It also is important for students and physicians to develop a healthy balance between work hours and personal time. The student's family and personal obligations are important and need to be balanced with their education.

Duty hour rules for graduate medical programs, often referred to as the "80-hour work week," were developed for residents. Similar rules were not developed at the national level for medical students. There are obvious differences in terms of goals and responsibilities between residents and students. Nonetheless, the School's Curriculum Committee, through the Clinical Sciences Subcommittee, developed the following guidelines.

- The student should work no more than 80 hours per week on the clinical hospital services and/or in clinics, including required clerkship lectures, conferences and exams.
- The student should have at least one full day off per week, averaged over a month.
- No matter how many hours the student has worked, he or she should always check out with their supervising resident or attending before leaving for the day.
- If a student is on a rotation without overnight call responsibilities, the student should feel free to come in early or stay late for the benefit of patient care or the student's education. Students are expected to be at all required educational activities (including lectures, conferences, exams, etc).

Approved by the Clinical Sciences Subcommittee, May 10, 2010
Edited by the Curriculum Committee, May 14th
Edits approved by Clerkship Committee, May 17th.

Elective Courses Taken Away from OHSU

In general students are required to take all the required courses and clerkships as provided by OHSU School of Medicine. In some instances, students may petition to seek required experiences at other major medical teaching hospitals.

Student must be in good academic standing to participate in away rotations.

The procedures for obtaining approval for an elective course not sited at OHSU or at an affiliated site:

1. Complete the Away Clerkship form or the Educational Agreement form
2. Name of person(s) or institution offering the elective
3. Subject matter or course title of the elective; course content description may be requested
4. Duration
5. Immediate supervisor who will provide a final grade
6. Justification for the elective may be requested

The Away Clerkship form must be submitted in writing to the Office of Education and Student Affairs with prior approval by appropriate OHSU department chair or designee sponsoring the student. The signed form is required at least 1 week prior to departure.

Due to liability issues, the OHSU Office of Risk Management does not allow students to seek electives outside of Oregon unless they are participating in 4th year required coursework. Students requesting clinical experiences outside of Oregon are required to be supervised by licensed physicians affiliated with accredited residency programs and/or teaching hospitals.

Requirements for Requesting More than 8 weeks/12 Elective Credits Away from OHSU

If students want to do more than 2 rotations away from OHSU, they will need to get permission from the Associate Dean for Student Affairs.

Third year required clinical clerkships must be done at an OHSU regularly scheduled site. Student cannot take required clinical clerkship away from OHSU.

Some of the fourth year required clerkships can be taken away with prior approval.

To take an away SUBI or ICU clerkship:

1. Students must submit a formal written request to the Office of Education and Student Affairs stating why they want to take the clerkship away from OHSU. The rotation must be taken at a university teaching hospital. Students must include a detailed description of the clerkship they are scheduled to take. The request will be reviewed and a preliminary decision will be made at that time. Final approval will be given based on the evaluation received after the rotation has been completed. The OHSU SUBI/ICU Evaluation Form should be used.

The expectation for the rotation will include: Intensive inpatient experience where the student functions (with supervision) at an intern level in evaluating patients, coordinating for day-to-day patient management, call, coordinating consultations, treatment plans, writing orders and establish diagnosis and therapeutic plans.

2. Students may not fulfill both SUBI and ICU requirements with away rotations

To take an away Neurology clerkship:

1. Students must get permission from the Neurology Clerkship Director to take the rotation away.
2. It must be at another medical school and be one of their regularly scheduled Neurology Clerkships. It cannot be done at a non-medical school site.

To take an away Pediatrics II clerkship:

1. Students must get permission from the Director of Medical Student Education in Pediatrics to take the rotation away.
2. The Director will require an outline/syllabus of the clerkship. It must be at a site that OHSU can approve to be an away rotation.

Students must take the Surgery Subspecialty rotation at an OHSU regularly scheduled site. It cannot be done away under any circumstances.

All away rotations done outside of the state of Oregon must be done at a LCME accredited U.S. Medical School or accredited ACGME Residency Program for OHSU to approve and provide malpractice coverage. Malpractice coverage cannot be provided for rotations outside of the U.S.

The OHSU Domestic Away Elective Form must be filled out and turned in with the appropriate supporting documentation prior to each away rotation. Failure to do so will result in no malpractice coverage and no credit for the rotation.

Approved OHSU Clerkship Directors, May 2011

Criteria for Global Health Experiences

There are two methods for students to seek an international educational experience as specified below:

- A)** Authorized by the School of Medicine to receive academic credit
- B)** Non-sponsored by the School of Medicine and receive no academic credit.

A) Authorized International & Global Health Experiences for Earning Academic Credit

The following are the guidelines for medical students wishing to earn academic credit, receive financial aid or be granted an extension of their curriculum in order to pursue an international educational experience(s). Eligibility for an international educational experience requires that the following criteria must be met at least 12 weeks prior to departure.

1. Successful completion of the required first, second and third year curriculum and pass USMLE Step 1
2. Submission of a request in writing for approval to the SOM Dean's Office with the following required information:
 - a. Indicate the name and location of a person or agency that is supervising/responsible for your experience at each site.
 - b. Indicate the length of stay (dates) for each experience.
 - c. Describe the learning experience expected to be achieved during these experiences.
 - d. If this experience extends your medical curriculum beyond four years, explain why this experience will enhance your education. Meet with the SOM scheduling staff to arrange academic credits for the period you are away.
 - e. Meet with the University Financial Aid Office staff prior to departure regarding financial aid regulations.
3. Students approved for an international education experience, are required to register and pay University tuition (if due) and fees while away on an international experience. Students can earn up to a total of 9 clinical elective academic credits which apply to graduation. The remaining academic credits may be applied to qualify as a full-time student for financial aid purposes and will be represented on the academic transcript.
4. Students are responsible for requesting a final grade from their sponsor, who submits it to the Office of Education and Student Affairs.

5. Prior to departure, students are required to obtain consultation from a travel clinic regarding appropriate immunization and prophylactic medications.
6. OHSU does not provide malpractice insurance for international experiences.
7. Students are required to secure medical insurance as well as emergency medical evacuation insurance prior to departure and this coverage should be in place for the duration of the international experience. It is suggested that students contact AEA-SOS International or a comparable organization to purchase insurance. AEA-SOS, Inc., P.O. Box 11568, Philadelphia, PA 19116 or 1-800-767-1403.

B) Non-Sponsored International Education Experiences without Academic Credit

Medical students may also pursue international experience(s) during the summer term between years one and two. Successful completion of the year one curriculum is required. Students earn no academic credit toward graduation requirements and are considered not sponsored by the School of Medicine. Non-sponsored students pursuing education experiences are encouraged to obtain medical insurance as well as emergency medical evacuation insurance in this circumstance. In this regard, students should contact AEA-SOS International or a comparable organization. AEA-SOS, Inc., P.O.Box 11568, Philadelphia, PA 19116 or 1-800-767-1403.

EPIC Reference Guide for Medical Students

July 1, 2010

Goal: Students are expected to be integrated and engaged in the health care team therefore expected to be fully engaged in the EPIC system in both the inpatient and outpatient settings.

Students are able to do the following in both the ambulatory and inpatient setting:

- Write progress notes
- Pend orders
- Enter information into all components of the patient database, including past medical, family, social history (PFSH) and the review of systems (ROS)
- Access and view data from the medical record
- Access the problem list, medication list, history and allergies which are co-signed
- Develop a student in basket for purposes of sending feedback to them about their documentation
- The medical student can/should initiate the discharge summary. Faculty and residents have the ability to edit the student's note. The faculty who's responsible for the discharge summary can use the "Make me Author or Addend" button to take over the note as a single note with his/her name associated with the note. All previous authors of the different pieces of the note are in previous versions of the note.

The expectations for residents and/or attending involved in teaching medical students:

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- Supervising physician is expected to review the student notes and orders; provide the student with feedback (if developed, faculty and supervising residents could use the in basket for this)
- Supervising physician must approve and sign the orders that are pended by a medical student
- Supervising physician (whether this is an intern, resident or attending) will write their **own** primary note in every situation, but may refer to a medical student's previously documented PFSH and ROS for the purposes of billing, documenting additions or addendums when necessary
- Students are not to be used as scribes. If a faculty members wishes to use a student as a scribe it must be approved by the Clerkship Directors Subcommittee.

Students do not have the ability to do the following in EPIC:

- May not cut, paste or duplicate another person's note (either partial or in its entirety) in the medical record
- Are highly discouraged from using pre-established completed note templates
- May not sign orders (student may pend and should notify the supervising physician for them to sign)

What level of training do students have?

- Third and Fourth year medical students have the same training as faculty and residents.
- Fundamental Online course – 1 hr
- 4 hrs of class time for both inpatient and outpatient training
- Online refresher course and IP104 online prior to starting clerkships
- Students in 1st and 2nd year receive Fundamental Online course – 1 hr and 4 hrs of class time for both inpatient and outpatient training. Prior to clerkships they do the refresher course and IP104 online.

VAMC VS OHSU

- Federal Medicare guidelines requires the billing physician to document and bill based on the key elements, medical decision making and/or time spent with the patient.
- There are differences between the OHSU medical record (EPIC) and the VAMC(CPRS) record with respect to student documentation rules. When students are at the VAMC, they might be able to perform certain functions within the medical record that are prohibited in the EPIC/OHSU system, and this is due to the fact that the VA is not required to follow Medicare compliance guidelines for billing.

EPIC Technology Support

- Epic Help Desk 503 494-2222

The official EPIC Guidelines for Medical Students can be found on the OHSU ozone website

Compliance Contacts:

For compliance questions and to report possible violations

- Clerkship Director for individual clerkships
- Dr. Molly Osborne, Associate Dean for Student Affairs,
- OHSU Chief Compliance Officer, Bobbie Clawson (503) 494-6806

Document Prepared May 2009 by:

Clerkship Directors (Clinical Sciences Subcommittee)
Bobbie Clawson, Chief Compliance Officer
Dr. Molly Osborne, Associate Dean for Student Affairs
Dr. Tana Grady-Weliky, Associate Dean for Medical Education
Dr. Patrick Brunett, Chair, Curriculum Committee
Carolyn Powell, EPIC IT

Course Evaluation Process

Basic Science & PCM Course Evaluation Process

- Each year, the elected student curriculum committee (CC) representative gives TSO a list of 10-15 students they feel would be strong mini-report authors. TSO randomly assigns one student from this list to be the author for each course reviewed during the year.
- At the end of the course, the Report Authoring Team (student report author and curriculum committee student rep) are given all course evaluation materials by TSO. The team has **6 weeks** to complete and submit the final student report.
- Student report author reviews content and then fills in pre-formatted, online form that serves as the report.
- Report contains:
 - Strengths (no more than 10, no less than 5),
 - Weaknesses (no more than 10, no less than 5),
 - Recommendations (no more than 6, no less than 3),
 - Strengths and weaknesses have quantitative (how many comments out of the group mentioned this?) and qualitative (why do you think the students felt this way?) components.
 - Though only the report authoring team has access to the evaluation data, it is recommended that they organize a "focus group" of fellow students during the authoring process to assist in fleshing out the *qualitative* components of the evaluation (e.g. Why the students didn't like the textbook, why they students liked a particular lab, etc.) Raw course evaluation data is not to be shared with the focus group.
 - Focus groups are organized and run by the report authoring team.
- Final report must be approved by curriculum committee student rep prior to being officially submitted to TSO.

Course director and curriculum committee faculty liaison receive final report. *At this point, no further action is needed.* However, a meeting between course director, report

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authoring team and curriculum committee faculty liaison can be requested by any combination of the parties to discuss final report. Additionally:

- When Debbie Lehman sends out the raw course evaluation data, she will ask all parties if they would like to meet. If not, no meeting happens but, if so, she sets up a room and a time: The meetings are non-catered
 - The meetings are ONLY between the report authors, course director and CC liaison. Steering committees and co-course directors can come, but it is not up to TSO to coordinate all of these schedules.
 - Meetings are not open to the general student body
 - The meetings are scheduled 7 weeks out from the end of the term, so all parties have time to review the student evaluation due at week 6 prior to the meeting.
- After final report is submitted, previous mini-reports may be reviewed by curriculum committee student representative.

PCM

- For PCM, only one mini-report will be completed at the end of the year. However, abbreviated versions of these reports will be completed by the elected PCM student representatives after each term. These abbreviated reports will be shared with the PCM Leadership Team and curriculum committee student rep. only. Only the end of year mini-report will be shared with the curriculum committee faculty liaison. The elected student representatives for PCM will use their abbreviated reports to compile the final mini-report at the end of the year.

GIE

- As the first MS1 course (GIE) ends prior to CC student rep election, the process for this course will be the following:
 - MS2 CC rep will facilitate the GIE course review.
 - MS2 CC rep will always designate the newly elected MS1 class president as the report author for GIE.
 - All other timelines and processes remain the same as above.

Student Recognition

Students that participate as a course report author will receive a formal letter of recognition from the SOM Dean's Office acknowledging their contribution to the course evaluation process. This letter will be given to the student and added to his/her academic file.

Curriculum Committee Evals

- Curriculum Committee faculty liaison is privy to yearly student reports and general course evaluations. He/she may choose to follow up with the student and course director with any questions after reviewing.
- For three year eval, CC rep reviews all student mini-reports, putting most emphasis on the most current. From this he/she is able to identify themes and trends over the past three years.

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- CC rep completes a pre-formatted, online form for official submission to the Curriculum Committee.
- Report uses student mini-reports and raw data to determine:
 - Top 5 strengths of the course.
 - Top 5 weaknesses of the course
 - Top 5 formal recommendations to the Curriculum Committee regarding the course.
- Finalized report is presented to Curriculum Committee by faculty liaison.

Developed by the Curriculum Committee and
Implemented in Fall 2009-10

Required Clinical Clerkship Evaluation Process

Each required clerkship is evaluated annually by the students, faculty and Clerkship Directors. Clerkship Directors review student clerkships evaluation and log information every 6 months and annually for a comparative review.

Each required clerkship undergoes a complete evaluation review every 3 years by the members of the Curriculum Committee. During the Transition to Residency course the clerkship requiring to be evaluated are reviewed by students, faculty and Curriculum Committee. A final presentation of the information is then presented to the Curriculum Committee by the Liaison and the Clerkship Director. Student representatives are present.

The Dean's Office randomly selects 4-5 students from each of the 7 rotations from that year to assure that all periods of time during the year are represented. However, any interested student may participate. The Curriculum Committee student chairs the student committee and will review the clerkship evaluation data for the past 3 years and develop a report. Upon completion of their review and report, then the Curriculum Committee faculty liaison assigned to that course will convene a meeting of the Clerkship Director and student committee. The meeting is also open to other students and faculty.

The course evaluation meeting will be chaired by the Curriculum Committee liaison. There should be about 5-10 fourth year medical students present to provide the student perspective on the clerkship. The clerkship director can bring other members of the faculty to the review if they desire. The Curriculum Committee liaison will prepare a final report which will include the strengths, areas of concern and final recommendations which will be presented to the Curriculum Committee. The clerkship director will have the opportunity to review the report prior to the meeting and be present for the Curriculum Committee meeting.

The following materials are used for review

1. List of questions you might consider in the evaluation
2. Summary of the clerkship evaluation data from past 3 years
3. Previous clerkship evaluation reports submitted to the Curriculum Committee
4. Graduation Questionnaire information regarding this clerkship
5. Grade distribution sheet
6. Pertinent information regarding the clerkship.

Evaluation Questions for Clinical Clerkships

The following questions need to be addressed as part of the evaluation of a clinical clerkship.

1. Review the clerkship study guide presented to the students for:
 - Measurable objectives
 - Expectations of the student during the course
 - Criteria for Grading is outlined
 - Schedules of Conferences
2. Is there adequate orientation session between the course director and students prior to the start of the course?
3. Review the distribution of grades for this past year. How many H, NH, etc
4. Review the midterm student assessment process. How does the process guarantee the student was presented with feedback at mid-session. How is the information documented? How does the clerkship director use this information in formulating a final grade.
5. How does the clerkship director guarantee faculty directly observe a student during the clerkship? Do the objectives indicate the expectations regarding this observation?
6. What faculty and resident development information or programs does the clerkship director sponsor or the department? How are the faculty and residents informed of the criteria and grading methods of the grade?
7. If a clerkship uses multiple sites, how does the clerkship director assure continuity between all sites?
8. Review how the clerkship faculty and director assess student professionalism?
9. Review the pages from the Graduation Questionnaire regarding this clerkship.
10. Review the appropriateness for the lecture series? Does someone monitor the attendance of the faculty presenters and the student attendance?
11. Review the overall summary of the patient log and compare to the objectives

Policy on Course and Clerkship Reviews

1. It is the goal of the OHSU SOM Curriculum Committee to assure transparency in its course and clerkship evaluation process, and to afford students the opportunity to fully access, engage and participate in the evaluation of their curriculum

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2. To this end, all three-year Curriculum Committee course and clerkship reviews, and all annual “refined” course and clerkship reports, shall be posted electronically in a manner providing easy accessibility to all students and faculty.
3. Effective immediately, reviews for all first and second year courses will be posted on the Sakai site by their respective course managers. This shall be done in a manner providing ease of location and review, e.g., as a separate folder in “Course Resources” or an independent heading under “Course Materials.”
4. All subsequent course and clerkship reviews shall remain available electronically in a similar manner year to year, thus creating a comprehensive review history for each course or clerkship. Retroactive reports for the two years prior to enactment of this policy shall also be posted on the same site.
5. Additionally, any follow up letters requested by the Curriculum Committee from a course or clerkship director during a course evaluation will also be posted as an addendum to the corresponding evaluation.

Approved by the Curriculum Committee 12/08/2011

Oregon Health & Sciences University

**School of Medicine
Education Agreement for
Regional Education Physicians
(for Third and Fourth Year Medical Students)**

Thank you for agreeing to serve as an attending/preceptor for the _____ clerkship. _____ (*Student Name*) is currently a medical student in good standing at Oregon Health & Sciences University. This student has permission to participate in this clinical clerkship as a part of their required curriculum at OHSU. This letter is to outline the expectations for the student and the preceptor, as well as, provide you with assurances regarding the student's liability and health care coverage.

Date of the experience:

Name of the Clinic and Address:

Name of the OHSU Clerkship Director responsible including email and phone:

OHSU Expectations for the Student at your Facility:

The Student is expected to adhere to all academic standards established by the preceptor and only perform duties within the goals and objectives outlined by the course leadership at OHSU.

The Student is expected to review your facility requirements and abide by all policies, regulations, and procedures as requested by the Preceptor/Supervisor and/or the applicable medical center.

The Student is expected to perform to the best of their ability all course objectives and requirements as outlined by the OHSU course director and the supervision at the facility.

The Student is expected to demonstrate professional demeanor with all students, faculty and staff of your facility.

OHSU Expectations for the Supervising Preceptor and Facility named above:

The preceptor named above (Preceptor) is responsible for the Student's overall educational experience including scheduling, supervision and evaluation. The Student shall at all times while they are at your facility be subject to the direct oversight, supervision, and direction of the Preceptor.

The Preceptor is exclusively responsible the care of all patients, including all determinations of appropriate treatment and care of all patients. The preceptor is an independent contractor and shall not be considered an officer, employee or agent of OHSU for any purpose. And the Preceptor shall not be entitled to any of the benefits that OHSU provides for its employees.

Preceptor is required to submit to the Director of Medical Education at your site a final grade and narrative related to the Student's performance at the end of each OHSU academic quarter.

OHSU Training and Screening of Students:

The Student will have completed an OHSU HIPAA training program.

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Prior to placement, OHSU will conduct a criminal background check on Student and provide to the Hospital upon request.

Prior to placement, OHSU will require that the Student has demonstrated immunity from mumps, measles, rubella, varicella (Chickenpox), and Hepatitis B (completion of Hepatitis B series or signed statement declining series); and OHSU will have proof of a negative Purified Protein Derivative (PPD) skin test or chest x-ray within six (6) months prior to placement.

The Student has major medical insurance, and all personal health care related matters involving the students should be directed to the Student Health Service at OHSU.

If the Student has an occupational blood borne pathogen exposure while at your facility, then OHSU expects the Student to contact OHSU Student Health Services immediately for emergency services and follow up. Medical expenses incurred will be the responsibility of the student and/or OHSU.

Insurance/Liability:

OHSU shall be responsible to provide Professional Liability Insurance coverage for OHSU's students, with minimum limits of \$1,000,000 per incident and \$3,000,000 aggregate while students are participating in this preceptorship.

OHSU does not assume any Professional Liability coverage for the Preceptor or any other facility staff members. The Preceptor shall maintain their own professional liability Insurance coverage in amounts of not less than \$1,000,000 per incident and \$3,000,000 aggregate. The Preceptor is responsible for the care of its patients and under this agreement is providing training for the Student.

If this Student is involved in an incident or claim involving patient care or other related activities, the Preceptor shall notify immediately the School of Medicine, Office of Education and Student Affairs in writing of this incident.

Signatures:

Your signature acknowledges that you have reviewed this document. If you have any additional questions or concerns, please do not hesitate to contact us. Please return the signed original to the Director of Medical Education at your site.

Community Attending/Preceptor:

(Name)

Signature

Date

OHSU Clerkship Director: