PEDIATRICS 1
REQUIREMENTS and GRADING

OVERALL GRADING:

- 70%: Clinical Evaluations (from Attendings and Residents)
- 20%: NBME Pediatric Subject “Shelf” Exam
- 10%: Required CLIPP Cases

100%

There are three components to your grade. You must achieve an overall passing grade (3 points) on your clinical evaluations in order to pass the clerkship. Additionally, if your combined grade score (all three components calculated together) is less than 3 points (on a 1-5 scale), you will be required to remediate some of the required components of the clerkship, as determined by the Clerkship Director.

CLINICAL EVALUATIONS FROM ATTENDINGS AND RESIDENTS: You will be evaluated by the attendings and senior residents who supervise you on your clinical teams. Combined, these evaluations are worth 70% of your overall grade. Please refer to the grading scale that is included in your Clerkship Orientation Manual for the clinical descriptors.

Manager 5 points
Interpreter 4
Reporter 3
Observer 2

The breakdown is as follows:

DCH students
- 2-3 Ward Attendings – averaged grade points = 20%
- 1 Specialty Consensus Attendings Evaluation = 20%
- 2-5 Residents – averaged grade points = 30%

Legacy Emanuel students
- 4-7 Attendings – averaged grade points = 40%
- 1-2 Senior Residents – averaged grade points 30%

Providence St. Vincent students
- 5-7 Attendings – averaged grade points = 70%

NBME PEDIATRIC SUBJECT EXAM: All students rotating through Pediatrics 1 are required to take the National Board of Medical Examiners (NBME) Pediatric Subject exam at the end of the clerkship. This is a standardized, multiple choice achievement test that requires medical students to solve scientific and clinical problems. Although students’ performance on the test will reflect the learning specific to their clerkship experience, students’ test scores will also reflect educational development resulting from the overall medical school experience. You can get more information on the web site: www.NBME.org. This test will be given the last Friday morning of the clerkship. Because of security reasons, if you are unable to take the exam at this time, you will be required to make up your test with the next rotation, and you will received an Incomplete for the clerkship until the test is taken. Grading for the shelf exam is based on your scaled score and you will be given a point value from 2-5 that correlates with this score. Minimum passing score is 3 points.
You are strongly encouraged to read frequently during your clerkship. You are given a pediatric textbook to use as a general reference during your clerkship. **You are also encouraged to obtain and read a pediatric board review book early in your clerkship to help you when taking this exam.** This will also aid you when studying for the USMLE Step 2 exam. Because it is impossible to teach you everything during the clerkship that could be on this exam, it is important to read generally during the clerkship. Some examples of board review books include the BRS series “Pediatrics” by Brown and Miller, “Blueprints in Pediatrics”, Lange’s “Case Files in Pediatrics” or Appleton and Lange’s Review of Pediatrics question book.

**CLIPP CASES:** Computer-assisted Learning in Pediatrics Project (CLIPP) is a national project that offers students 31 interactive, Internet-based patient simulations to augment their clinical medical education. All cases offer a standardized curriculum, model clinical reasoning and best practice, and provide links to further information about selected topics. The use of video and still images greatly enhances this exciting project. Using your OHSU email address, students can log on at [www.clippcases.org](http://www.clippcases.org) using any computer with Internet access to complete the cases. For Pediatrics 1, **17 cases are required:** case numbers 1, 2, 7, 8, 9, 10, 11, 15, 16, 18, 21, 23, 24, 25, 27, 30, 31. If you do not complete these 17 required cases by **5 pm on the last day of the clerkship**, you will not receive any points for this aspect of your grade (see grading scheme below.) When you complete your Pediatrics 2 rotation, the other cases will be required. By the time you finish Pediatrics 2, you should have completed all 31 cases. If you complete these cases during your Pediatrics 1 rotation, you will not be required to repeat them next year. Keep in mind that the CLIPP cases are great preparation for the end-of-rotation Pediatric Subject “Shelf” Exam so the completion of all cases during Pediatrics 1 is highly recommended. You are **strongly encouraged** to complete these cases throughout the 5-week clerkship and not wait until the last week. **CLIPP cases are worth 10% of your grade** and the grading for the CLIPP cases is on a **pass-fail system** – if you complete all the required 17 cases you will pass and get the full 5 points. If you do not complete one or more of the required cases during your Pediatrics 1 rotation, you will get 0 points for this component of your grade.

**CHART NOTES:** One of the more important skills you will be learning during the Clerkship is how to effectively and efficiently document patient care encounters in the medical record. For every patient you admit to the hospital and will follow subsequently, you are expected to write a full History and Physical (H+P) and enter it into the patient’s chart, to be co-signed by one of your supervising physicians. You should also write a complete progress note for every patient your supervising physician assigns you to follow in the morning for presentation during rounds. If you are involved with admitting a patient but will not be following that patient primarily after the admission, you should ask your supervising physician whether you should write up a full H+P or not. The maximum number of full H+Ps expected for an MS3 to write-up while on-call is 4. This is due to the fact that you are expected to have a detailed assessment and plan outlining your clinical decision making, which often requires research and time to analyze the information you’ve obtained. Your supervising physician can provide guidance on those patients that offer the most educational value and should therefore be prioritized for written chart documentation.

**CLERKSHIP PROCEDURE LOG:** You are required to keep a record of certain patients and educational experiences during your clerkship as instructed by the Dean’s Office. This log mirrors the clerkship objectives given to you at orientation. Please turn in your log at the time of the shelf exam on the last day of the clerkship.
CALL: You will be required to take overnight call during your pediatric clerkship. The call schedule is set in advance by the Clerkship Director. If you are unable to take your call for any reason, you must notify the Clerkship Director to discuss this and design a make-up plan during the clerkship. You must also notify your team of your absence. If you and another student would like to switch call nights, you must gain approval of this switch prior to the call night with the Clerkship Director (students at DCH) or Lauren Rose/Ellen Stevenson (students at Emanuel) or Elroy Jan/Yolanda Domond (students at St.V’s). For further details about overnight call, please see the Clerkship Orientation Manual.

FEEDBACK: Throughout your clerkship, you will be given feedback regarding your performance from many people – attendings, residents, interns and even other students. In addition, you will be given a set of 10 feedback notecards for you to give to physicians who supervise you performing history and physicals or oral presentations each week. This is designed to give you quick (<1 minute) feedback on-the-fly immediately after you have completed a task. The physician will then give the card back to you for your professional development. Please write your name and the date the feedback was provided on the back, and then all of your cards should be turned in to Trevor Monteith at the time of the Shelf Exam the last day of the clerkship. If you do not feel you are receiving enough feedback, please ask those physicians who supervise you to give you a few suggestions about ways to improve your performance. You will also receive formal mid-term feedback from your 2nd or 3rd week ward attending. This feedback session is designed to give you information about what you are doing well midway through the rotation, and what areas you need to work on for the remainder of the clerkship. Your evaluator will assess your fund of knowledge, clinical skills and professionalism. Please use this opportunity to identify areas for academic and professional growth. Similarly, your feedback about the clerkship as a whole is welcomed! If you have suggestions regarding any aspect of your clerkship experience, please contact the Clerkship Director. We want this clerkship to be the best one you have throughout your MS3 year – please tell us how we can get there!

PROFESSIONALISM: As in all clerkships, you will receive a professionalism assessment at the end of your rotation that comments on your honesty, integrity, respect for others, teamwork, and respect for patients. It is graded as pass/fail. In the event a student is deemed to be unprofessional during the clerkship, a more detailed Professional Development Evaluation may be completed by the Clerkship Director. If you have a concern regarding any aspect of your clerkship experience or have a conflict with a member of your team that you are unable to solve directly, please contact the Clerkship Director immediately. Additionally, failure to turn in your procedure and patient log by the end of the clerkship will trigger a professionalism concern on your professionalism assessment and your grade will be withheld until the log is completed. Professional dress is expected, and includes no open-toed shoes, no tank tops, no showing umbilicus, no T-shirts, no showing underwear or cleavage; men should wear long pants and shirts with collars (ties optional); women should wear slacks or skirts/dresses, shirts that cover shoulders and abdomen; white coats are optional, unless you are wearing scrubs and then they are required.

ATTENDANCE: It is an unfortunate reality that during your pediatric clerkship some of you may share the germs that infect your patients. Respiratory and GI germs are the most popular. In the event you become ill, we do not want you coming to work to spread the wealth. It’s also true, however, that the Dean’s Office policy of attendance will be enforced during this clerkship. If you become ill and cannot come to work for any reason, you must notify 3 people: the Clerkship Director (via email), Trevor Monteith (via phone or email) and either your senior resident or your attending (via phone conversation, NOT email or text page). It is not acceptable to notify a fellow classmate. You must also fill out a “Request for Time Off” form, which may be done after
you return to work. Per Dean’s Office rules, we keep track of all missed days and if you are absent more than 2 days during the academic year, you must make up that time in order to receive your final grade. **Holidays** that fall during your clerkship, except in select circumstances, should be viewed as normal workdays. If you do not receive notification that you will have a particular holiday off, you should assume you are working and report as usual. Please clarify any confusion about holiday schedules with your team well in advance.

**ENJOY YOUR CLERKSHIP. HAVE FUN. LEARN AS MUCH AS POSSIBLE. TEACH EACH OTHER!**

**CONTACT INFO:**

Tracy Bumsted, M.D., MPH  
Clerkship Director, Pediatrics 1  
bumstedt@ohsu.edu  
Office: CDRC 3227  494-5982  
Pager #14793 or 503-202-4841

Rob Bogacz, Student Coordinator  
bogacz@ohsu.edu  
Office: CDRC 2114D, 8:00 – 4:30  
Phone: 494-3195  
Pager: #12026