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Dear Students,

Congratulations and welcome to Year IV at the School of Medicine! We hope that you will use this year to increase the knowledge and hone the skills you have worked so hard to develop during the first three years of your medical education. This primarily elective-focused year will give you the opportunity to explore different areas of medicine and continue to prepare you for your residency and your career as a physician. While sometimes stressful with the demands of deciding on a career path and pursuing a residency position, many students have described Year 4 as the most enjoyable period of their professional training. We hope that you will find the year both valuable and rewarding.

This curriculum guide contains important information about policies and procedures for Year IV. Among these are a list of the requirements that must be fulfilled in order for you to graduate. Additionally, there is critical information about the structure of Year IV, elective policies, and information about the NBME Step 2 CK and 2 CS examinations. Please take the time now to read over this information carefully and keep the guide available for reference throughout the year. You also will receive information regularly from the Office of Student Affairs regarding the residency application process including important information about ERAS and the NRMP program. As always, it is very important for you to check your email frequently since this is the School of Medicine’s official means of communicating with you about these topics that are of vital importance to your future.

Like all curriculum guides, this Curriculum Guide is subject to revision. Updates will be posted to the electronic version of this Curriculum Guide that will be found on the School of Medicine website. Once these revisions are made to the on-line version, any policies they contain will take effect at the time of posting. Important updates also will be emailed to the class. Please refer to this updated information frequently and don’t hesitate to contact me or any other member of the School of Medicine administration with questions you might have. Again our goal is to provide you with the best medical education possible and we hope that you will have an enjoyable and enriching Year IV experience.

Sincerely,

Kendra Schwartz, MD, MSPH
Professor and Assistant Dean of Clinical Education
Wayne State University School of Medicine
II. OVERVIEW OF THE YEAR 4 CLINICAL CURRICULUM

In the Senior Year of the medical school curriculum, students are required to complete at least eight (8) months of study, assuming that an elective was done as part of your Year III program. There are two required clerkships of one month duration each: Inpatient Sub-Internship and Emergency Medicine. The other six months include elective courses, with the intention that you plan a balanced program of study to complete your medical school education. If you deferred your junior elective into the senior year to take a month off in Year III, you must complete seven elective months (9 months total) in Year IV.

A. Clinical Competencies and the School of Medicine Educational Objectives

The Wayne State University School of Medicine has established a comprehensive set of competencies and institutional objectives to prepare students for practicing medicine in the 21st century.

The following table summarizes the general competencies and institutional learning objectives. The first row defines the general competency. The second row refers to the specific learning objective associated with each competency and the cognitive domain (knowledge, skill, attitude/behavior) being evaluated for each objective.

The six general clinical competencies for medical students (identical to the general competences of residency training) include

- Integration of the Basic Sciences in Medicine
- Integration of Clinical Knowledge and Skills to Patient Care
- Interpersonal and Communication Skills
- Professionalism
- Organization and Systems-Based Approach to Medicine
- Life Long Learning and Self-Improvement

As you progress through the clinical curriculum of medical school, periodically review these competencies and educational objectives. They provide valuable guides to the organization of the knowledge, skills and attitudes you will learn during this phase of your professional growth.

<table>
<thead>
<tr>
<th>Competency:</th>
<th>Integration of the Basic Sciences in Medicine</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Cognitive Domain:</strong></td>
<td><strong>Institutional Learning Objectives:</strong></td>
</tr>
<tr>
<td>K=Knowledge  S=Skill  AB=Attitude/Behavior</td>
<td></td>
</tr>
<tr>
<td>K1</td>
<td>Knowledge of the normal structure of the human body (cell tissues and organs).</td>
</tr>
<tr>
<td>K2</td>
<td>Knowledge of the normal function of the human body (cell tissues and organs).</td>
</tr>
<tr>
<td>K3</td>
<td>Knowledge of the nature of agents and mechanisms that produce alterations in structure and function of the body.</td>
</tr>
<tr>
<td>K4</td>
<td>Knowledge of the nature and course of alterations in function produced by etiological agents and mechanisms (Pathophysiology) of the body.</td>
</tr>
<tr>
<td>K5</td>
<td>Knowledge of the nature and course of alterations in structure produced by etiological agents and mechanisms (Pathological Anatomy) of the body.</td>
</tr>
<tr>
<td>K6</td>
<td>Knowledge of the appropriate use of laboratory techniques in identifying diseases or health problems.</td>
</tr>
<tr>
<td>K7</td>
<td>Knowledge of the action, metabolism, and toxic effects of drugs.</td>
</tr>
<tr>
<td>K8</td>
<td>Knowledge of the therapeutic use of drugs.</td>
</tr>
<tr>
<td>K9</td>
<td>Knowledge of normal growth and development.</td>
</tr>
<tr>
<td>K10</td>
<td>Knowledge of the principles and concepts underlying normal behavior and mental illness.</td>
</tr>
<tr>
<td>K11</td>
<td>Knowledge of the aging process.</td>
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</tbody>
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**Competency:**
Integration of Clinical Knowledge and Skills to Patient Care

<table>
<thead>
<tr>
<th>Cognitive Domain:</th>
<th>Institutional Learning Objectives:</th>
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</thead>
<tbody>
<tr>
<td>K=Knowledge S=Skill AB=Attitude/Behavior</td>
<td></td>
</tr>
<tr>
<td>S1</td>
<td>The ability to perform a satisfactory physical exam.</td>
</tr>
<tr>
<td>S2</td>
<td>The ability to take a satisfactory medical history including psychosocial, nutritional, occupational and sexual dimensions.</td>
</tr>
<tr>
<td>S3</td>
<td>The ability to utilize data from the history, physical exam and laboratory evaluations to identify the health problem.</td>
</tr>
<tr>
<td>S4</td>
<td>The ability to formulate an appropriate differential diagnosis.</td>
</tr>
<tr>
<td>S5</td>
<td>The ability to formulate effective management plans (diagnostic, treatment, and prevention strategies) for diseases and other health problems.</td>
</tr>
<tr>
<td>S6</td>
<td>The ability to monitor the course of illnesses and to appropriately revise the management plan.</td>
</tr>
<tr>
<td>S7</td>
<td>The ability to perform routine technical procedures specific to the medical specialty.</td>
</tr>
<tr>
<td>S8</td>
<td>The ability to document the clinical encounter.</td>
</tr>
<tr>
<td>S9</td>
<td>The ability to apply the principles and concepts underlying normal behavior and mental illness.</td>
</tr>
<tr>
<td>S10</td>
<td>The ability to diagnose and participate in the management of mental illnesses.</td>
</tr>
<tr>
<td>S11</td>
<td>The ability to apply the therapeutic use of drugs in patient care.</td>
</tr>
<tr>
<td>S12</td>
<td>The ability to recognize normal growth and development.</td>
</tr>
<tr>
<td>S13</td>
<td>The ability to recognize the relationship between health and illness, the patient and the patient's environment.</td>
</tr>
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| S14 | The ability to apply psychosocial principles and concepts in the delivery of
<table>
<thead>
<tr>
<th>Competency: Interpersonal and Communication Skills</th>
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<tbody>
<tr>
<td><strong>Cognitive Domain:</strong></td>
</tr>
<tr>
<td>K=Knowledge  S=Skill  AB=Attitude/Behavior</td>
</tr>
<tr>
<td><strong>S19</strong></td>
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<td><strong>S20</strong></td>
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<td><strong>S21</strong></td>
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<table>
<thead>
<tr>
<th>Competency: Professionalism</th>
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</thead>
<tbody>
<tr>
<td><strong>Cognitive Domain:</strong></td>
</tr>
<tr>
<td>K=Knowledge  S=Skill  AB=Attitude/Behavior</td>
</tr>
<tr>
<td><strong>AB1</strong></td>
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<tr>
<td><strong>AB2</strong></td>
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<tr>
<td><strong>AB3</strong></td>
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<tr>
<td><strong>AB4</strong></td>
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<table>
<thead>
<tr>
<th>Competency: Organization and Systems-Based Approach to Medicine</th>
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</thead>
<tbody>
<tr>
<td><strong>Cognitive Domain:</strong></td>
</tr>
<tr>
<td>K=Knowledge  S=Skill</td>
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</table>

health care.

**S15** The ability to apply preventive and health maintenance principles and techniques in the delivery of health care.

**S16** The ability to apply the appropriate use of laboratory methods in identifying diseases or health problems.

**S17** The ability to recognize patients with immediately life threatening conditions.

**K12** Knowledge about relieving pain and ameliorating the suffering of patients.

**S18** The ability to apply Evidence Based Medicine principles to clinical decision making.

**Competency:**

<table>
<thead>
<tr>
<th><strong>Institutional Learning Objectives:</strong></th>
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</thead>
<tbody>
<tr>
<td><strong>S19</strong></td>
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<td><strong>S20</strong></td>
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<td><strong>S21</strong></td>
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<table>
<thead>
<tr>
<th><strong>Competency:</strong> Professionalism</th>
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<tbody>
<tr>
<td><strong>Institutional Learning Objectives:</strong></td>
</tr>
<tr>
<td><strong>AB1</strong></td>
</tr>
<tr>
<td><strong>AB2</strong></td>
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<tr>
<td><strong>AB3</strong></td>
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<td><strong>AB4</strong></td>
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<table>
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<tr>
<th><strong>Competency:</strong> Organization and Systems-Based Approach to Medicine</th>
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</thead>
<tbody>
<tr>
<td><strong>Institutional Learning Objectives:</strong></td>
</tr>
<tr>
<td><strong>K=Knowledge  S=Skill</strong></td>
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6
### Competency:
**Life Long Learning and Self-Improvement**

<table>
<thead>
<tr>
<th>Cognitive Domain:</th>
<th>Institutional Learning Objectives:</th>
</tr>
</thead>
<tbody>
<tr>
<td>K=Knowledge</td>
<td>Recognize the need to engage in lifelong learning to stay abreast of relevant scientific advances.</td>
</tr>
<tr>
<td>S=Skill</td>
<td>The ability to recognize personal educational needs and to select and utilize appropriate learning resources.</td>
</tr>
<tr>
<td>AB=Attitude/Behavior</td>
<td>The ability to critically appraise the medical literature.</td>
</tr>
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### B. Promotion of Year III Students to Year IV (Senior) Status

At the end of Year III, students are promoted to Year IV upon the recommendation of the Clerkship Committee to the School of Medicine Promotions Committee. It is important to note that students are not promoted to Year IV status until all requirements of Year III are met. This includes remediation of any and all Year III courses and examinations, including Incomplete grades. This is an extremely important issue, since senior electives taken without clearing all Year III deficiencies means that those electives will not be credited toward graduation. It is the student’s responsibility to make sure that this rule is followed and that all deficiencies and requirements are met.

### III. YEAR IV POLICIES AND PROCEDURES

#### A. General Policies, Senior Course Requirements and Senior Program Scheduling

1. Year IV begins on July 1 of the academic year, and ends on May 31 of the following calendar year. In contrast to the Year III rotations, each senior year course follows the calendar month, beginning on the first of the month and ending on the last day of the month.

2. Each HOME elective is one (calendar) month in length. AWAY (including International) electives may start on a different day than the first of the month, but they must be at least four (4) weeks long.
3. Students are required to take a minimum of eight (8) months of course work during this academic year, counting the earned credit for the month of Co-Curricular program if appropriate.

4. If a student elects a clerkship of more than four but less than eight weeks duration, he or she will be awarded only one month of academic credit. Thus, completion of two 6-week electives earns only 2 months of elective credit, not 3 months of credit.

5. The eight months of course work must include at a minimum:

   A. Two required senior clerkships (see below)

   B. Six elective courses

6. These courses should constitute a Balanced Program of study. Generally, students are encouraged to take no more than three electives in any one specialty. At least one elective must be outside the specialty. The reason for this requirement is to assure that you will graduate from medical school as a broadly educated physician with the breadth of knowledge necessary to practice medicine in today’s healthcare environment.

7. Upon completion of Phase 2 of the Year IV scheduling process, all student schedules will be reviewed for balance as described above. Students with unbalanced schedules will be required to meet with the Assistant Dean of Clinical Education to discuss their proposed plan of study. The Year III Elective will not be considered in evaluating the Year IV schedule for balance.

   Students who believe their chances of successfully matching in the more competitive disciplines (e.g., orthopedics, dermatology) would be improved by taking a fourth elective in that discipline may request a formal Administrative Schedule Review. This review will include a meeting between the student and the Assistant Dean of Clinical Education. Decisions will be made based on the student’s residency goals in relationship to their academic record and NBME examination scores.

8. All of the clerkships and elective courses are five to seven full days of work each week. No vacations or other travel (e.g., travel to/from other sites, etc.) are allowed during electives or required Year IV clerkships unless prior arrangements in writing are made with the course director and approved by the Assistant Dean of Clinical Education. Exceptions to this policy, allowing limited number of days away from electives for Residency Interviews, is discussed below.

9. Each student should work with his/her senior program advisor to develop his/her senior curriculum. Of course, students are free to consult other faculty members for advice as well. The roster of senior program advisors is available: http://www.studentaffairs.med.wayne.edu/faculty-advisors.php
B. Student-Initiated Changes in the Senior Program

1. After the scheduling lottery is completed in the late spring of your junior year, the senior required and elective programs are disseminated to students, hospitals, departments, etc.

2. Because the timing of scheduling in spring would make it impossible to propose changes to senior programs with at least 45 days notice, no changes will be allowed for other than extenuating circumstances to senior programs during the months of July and August.

3. There will be changes in required course schedules only under extenuating circumstances at any time in the academic year.

4. Changes to elective courses beginning after September 1st will be allowed with at least 45 days written notice as detailed elsewhere in this Curriculum Guide.

5. After all assignments are made, senior student’s programs are reviewed for content and balance by the Year IV Committee. Final approval of each proposed student program will be determined by the Year IV Committee. Unapproved senior programs must be modified by students with assistance of the Assistant Dean of Clinical Education.

6. Students who will not complete all required Year IV courses and requirements by May 31st of each academic year must have their Year IV proposed programs reviewed by the Office of Student Affairs prior to submitting their proposed program into the lottery request system.

7. Students are advised to allow for time off for residency interviews during the months of November, December or January. Therefore, it is strongly suggested that one of these months should be taken as a vacation period designated for residency interviewing. The policy regarding taking time off from electives for residency interviews are detailed later in this guide.

8. No clerkship can be dropped once it has begun. Any clerkship approved for a student’s senior program MUST be taken, and students cannot shorten their programs at a later date. Thus, if a student signs up for 9, 10, or 11 months of coursework he or she WILL BE REQUIRED to satisfactorily complete that number of clerkships.

10. Up to two months may be taken in research clerkships listed in the School of Medicine on-line Elective Catalog or arranged with a research mentor as Independent Study Electives. However, these two research clerkship months count towards the balance requirement.
11. It is the student's responsibility to contact the coordinator of the clerkship regarding the date, time and location to report to on the first day of the course.

12. Each student is required to pay the full per-credit-hour tuition for all Year IV courses/clerkships, including those required for remediation. In addition, each student is to pay any fees required by other institutions for courses taken at their facilities.

C. Required Senior Clerkships

There are two required senior courses:

1. An Inpatient Sub-Internship clerkship—Can be taken in the departments of Internal Medicine, Family Medicine, Surgery, or Pediatrics at hospitals designated by each respective department. No other inpatient medicine course will be accepted for this Sub-Internship requirement.

2. Emergency Medicine

These requirements must be fulfilled from the list of courses detailed in an annual senior course scheduling document. No other courses can be substituted for these three required courses. These courses complete the sequence of required courses begun in Year III.

Once assignments of these required courses have been made, this schedule cannot be changed except in the case of emergency and/or extenuating circumstances as judged by the Dean’s office.

D. The Year IV Scheduling Process

1. The dates for entering your requests for senior courses into the scheduling system will be disseminated by e-mail. A class meeting will be announced and held prior to the start of senior elective scheduling to discuss the senior program scheduling process and the lottery system.

2. The web-based scheduling system will be used by students to input their proposed senior program for their required and elective senior courses. Details of how the scheduling assignment process functions will be provided well in advance of the scheduling period.

3. Results of the computerized scheduling system are final.

4. Students who fail to submit their course requests by the announced date for the closing of the scheduling process system will not be allowed to enter requests into the system at a later date. These students will meet with the Assistant Dean of Clinical Education or his/her designee to schedule their rotations from whatever choices remain after scheduling for all other students is completed.
E. Special or Restricted Year IV Programs

The Clerkship Committee, Year IV Committee, Promotions Committee and the Office of the Associate Dean for Academic and Student Programs (including the Assistant Dean of Clinical Education) are empowered to alter senior programs to guarantee the highest possible academic achievement and knowledge of the graduates of the Wayne State University School of Medicine. This includes, but is not limited to, alterations to help remediate academic difficulties and clinical weakness. No student can receive Year IV credit for Year III make-up work. Year IV clerkships cannot be substituted for Year III clinical core clerkships.

Students who have not completed Year III by June 30 of each academic year or who have an unresolved unsatisfactory grade in any Year III clerkship or whose performance on the end-of-year Objective Structured Clinical Examination (OSCE) indicates a need for remedial work or who have had other significant academic difficulties may be required to do one or more of the following:

1. Make up the deficiency by November 1 of his or her senior academic year. This includes OSCE remediation.
2. Revise his/her previously approved Year IV program to make up a deficiency.
3. Take a prescribed program during their senior year.
4. Not be allowed to take AWAY electives.
5. Take all senior clerkships (required or elective) at locations determined by School of Medicine Administration and/ or Clerkship Directors.

F. Time Off for USMLE Step 2CK and Step 2CS

1. YR III (Junior) students are not allowed to take time off to take the USMLE Step 2 examination.
2. Year IV students are allowed one day off from Senior coursework to take USMLE Step 2 CK (Clinical Knowledge, the written exam) and three days off for the USMLE Step 2 CS (Clinical Skills, see below). No additional time off from Year IV electives or required courses will be allowed to study for the USMLE, or to travel to or from distant testing sites or review courses. There will be no exceptions to this policy.
3. Because you are not allowed to take time away from a senior course to study for the USMLE, many students elect to take a month off during their senior year to complete their pre-USMLE review. However, there is no requirement that you do so.
4. Once you have a date for either of these exams, please inform your counselor and the involved clerkship director/elective coordinator in writing at least 2 weeks before the anticipated days off for the exam.

5. The Administration of the School of Medicine strongly recommends that you attempt to post a score for Step 2 CK of the USMLE relatively early in your senior year since many program directors are now requiring a passing score on Step 2 CK before offering interviews for residency positions. Since program directors begin reviewing applications in mid-fall and start to consider who to invite for interviews, it is important to try to have a score as early as possible. Furthermore, if a student does not pass the examination on his or her first attempt, he/she will have sufficient time to repeat the exam and still have a passing score for their residencies of choice before the ERAS match closes. Students who have not passed Step 2 CK before match certification may have difficulty securing their top choices. If the May 1 deadline for posting a passing score for Step 2 CK is not met, it is likely that the student’s ability to obtain a temporary license to practice medicine will be delayed and they will not be able to begin their residency on time (July 1).

6. The Administration of the School of Medicine requires that you take Step 2 CS prior to November 1 of Year IV. Taking the exam by November 1 allows for the possibility of repeating the exam in the case of failure and still posting a passing score by May 1. The score for Step 2 CS takes approximately 9 weeks to return.

7. The USMLE Step 2 CS and CK exams can be taken in either order.

8. Additional information regarding the USMLE examination process, including registration for the Step 2 examinations, can be obtained from their website http://www.usmle.org

G. Senior Program Balance

The Year IV Committee will review senior programs for balance, and require changes for those programs which are not adequately diversified. If the Assistant Dean of Clinical Education or Year IV Committee determines that the program is unbalanced, changes to that program must be made. The Assistant Dean of Clinical Education and/or your Counselor in the Office of Student Affairs will assist you in complying with the requirements of the Year IV Committee.

As stated in the general policy section above, it is your responsibility to plan a balanced senior year program, since you are graduating as an "undifferentiated physician" from medical school. Take this into consideration when planning your senior elective program so that you will not be required to make changes at the end of the scheduling process or later in the academic year to correct an imbalance. Changes to your senior program will also be reviewed to maintain a balanced
program, and program changes may be denied if in the judgment of the School of Medicine the change will result in an imbalanced program.

H. Time off for Residency Interviews

Limited travel during senior courses is now permitted for residency interviews under the following policy:

1. You must obtain permission from the course director or his/her designee after written request for time off is submitted at least two weeks before the start of the course.

2. You are allowed to take up to two days off from the Sub-Internship or Emergency Medicine. Up to five days may be taken off from electives for interviewing. No more than 5 days may be taken off in any month for residency interview travel. If more than 5 days is needed, the course should be rescheduled.

3. At the course director’s discretion, all time off from the elective or required course must be made up.

I. Travel To and From AWAY Electives

1. If travel time conflicts with the completion of one elective period and the beginning of another, permission must be obtained from the faculty member in charge of the elective from which time will be lost for travel prior to beginning the course that will cause the conflict.

2. Paid clerkships or externships are not acceptable as official electives for credit towards graduation. If you get paid for an elective, you cannot also receive course credit for that elective.

J. Grades in Senior Courses

Students will be evaluated in their respective senior required clerkships and electives, using grading policies and procedures established and disseminated for each course. See the Policies and Procedures Manual for further information regarding grading and remediation policies.

K. Grade Appeals

Refer to the Policies and Procedures Manual regarding the grade appeal process.
IV. ELECTIVES

A. AWAY and HOME Electives

AWAY electives are electives that are not at an institution affiliated with WSU-SOM. HOME electives are those that are provided at an institution affiliated with WSU-SOM, that is, the institution is a member of SouthEast Michigan Center for Medical Education (SEMCME).

Students need to submit the necessary paperwork for the approval of all electives other than those in the WSUSOM catalog with our affiliated institutions.

A student may elect to do more than the minimum number of electives required for graduation. Please note that any additional elective for which the student wishes to receive academic credit will incur additional tuition fees assessed by the credit hour.

B. Applying for AWAY Electives

1. At no time will a student be allowed to complete his or her two required senior clerkships (Sub-Internship and Emergency Medicine) outside the usual course offerings. Consideration will be given to students doing more than three (3) AWAY electives when documented circumstances (e.g., marriage) can be verified before the 4th AWAY elective would be started.

2. AWAY electives are available from many medical schools and a variety of clinical facilities. The Office of Student Affairs has information regarding various available electives which prior students have taken. Counselors also have information regarding AWAY electives that students have found beneficial, as do various faculty members in the departments who act as advisors to junior and senior students.

3. Most medical schools will use the AAMC’s Visiting Student Application Service (VSAS) to receive applications from students wishing to do 4th year clinical AWAY electives at their institutions. This service includes a searchable database of electives, a short application, the ability to pay application fees online, and tracking of offers and schedules. Detailed helpful information for students about VSAS and a list of participating host schools is available at:

https://www.aamc.org/students/medstudents/vsas/

The WSU School of Medicine Records and Registration office will issue you authorizations to log into VSAS. This office as well as the Office of Student Affairs will assist you in the VSAS application process.

4. The application process for AWAY electives at host schools not yet participating in the VSAS process includes first making contact with the medical school or institution in question. In conjunction with your counselor in the Office of Student Affairs, the School of Medicine’s AWAY Elective form is then completed. This includes obtaining approval of the Assistant Dean of Clinical Education. The
Office of Student Affairs will also help you complete other application materials required by host institutions such as proof of vaccination or other health matters, verification of ‘good standing’ status, malpractice insurance, etc. It is the student’s responsibility to complete all required forms and requests (health forms, transcript requests, proof of health insurance, HIPAA training, respirator fit testing, USMLE scores, photo ID) and submit the completed packet to the Office of Student Affairs. **Students requesting an elective from a school/hospital requiring additional medical liability insurance beyond the schools policy will bear the cost. This additional fee will not be reimbursed by the School of Medicine.** Be certain to read host school requirements carefully and comply with the policies in addition to all WSU School of Medicine policies. The Office of Student Affairs will review and mail all of this information to the host institution to complete your application for an away elective. Please note that no applications will be processed or mailed by the Office of Student Affairs without submission of all of the required application materials.

5. Only one AWAY clerkship request form will be processed for a given month. Students may not try to get several different AWAY electives for a particular month as “backup electives”. Applying to and being accepted at two different institutions for the same month necessitates that the student will have to cancel one of the electives he or she requested after the request was approved by the institution; this is never interpreted favorably by the institution, and could have an impact on future student learning there. You are advised to list alternate courses in the same department when making your requests. By doing so you will avoid having to secure multiple chairs' signatures for a given month and maximize your choices at a given institution.

6. The Office of Student Affairs will maintain a file of all completed requests and provide the student with a copy of the application materials.

7. The AAMC Extramural Electives Compendium (usually released in March or April of each academic year) contains information of electives offered to visiting students from a variety of institutions. It can be found on the web at:

   [http://www.aamc.org/students/medstudents/electives/start.htm](http://www.aamc.org/students/medstudents/electives/start.htm)

   The compendium contains detailed information regarding the application, approval processes, deadline dates, etc. for taking guest electives at all accredited US and Canadian schools. Copies will be available in the Office of Records & Registration, the Office of Student Affairs, Student Organizations Office and the Shiffman Library. Most medical schools also post their senior year curriculum guide and elective offerings on their institutional web-site.

8. WSU AWAY elective forms are available in the Office of Records & Registration and the Office of Student Affairs.

9. The Office of Records & Registration must receive written confirmation of your acceptance as a guest student from the institution at least four weeks prior to the
scheduled starting date for the clerkship. Please be sure to monitor this requirement carefully. If you do not obtain written confirmation by one month before the start of the elective, contact the Office of Student Affairs or the Office of the Assistant Dean of Clinical Education for assistance.

10. As with all other clerkships and electives, failure to attend an approved clerkship will result in an unsatisfactory grade. That unsatisfactory grade will be made up at the Detroit Medical Center or Henry Ford Health System.

11. Students will be given credit only for those AWAY courses for which they have registered and which appear on their approved Senior program. If changes are made by the student or imposed by the host institution, the Office of Records & Registration must be notified immediately.

C. Independent Study Electives

An Independent Study Elective is defined as any elective taken during the clinical curriculum of medical school (whether during Year III or Year IV) that does not have a previously defined and published syllabus, which describes the objectives, work hours and environment, resources, and evaluation methods of the course. In essence, the course is established by and for the particular student. This definition applies to proposed electives at Wayne State University School of Medicine or one of its affiliated HOME clinical institutions (HOME Independent Study Electives) as well as courses at other institutions (AWAY Independent Study Electives).

Except in unusual circumstances approved in writing after written petition by the student, students will not be allowed to complete more than three independent study electives during Years III and IV of medical school. This includes research electives. As discussed elsewhere, YR III Independent Study Electives can only be done at the School of Medicine or its affiliated hospitals. YR IV Independent Study Electives can be done here, elsewhere in the USA, or at international sites (see below).

1. HOME Independent Study Electives

Requests to establish a HOME Independent Study course for your elective will be considered by the Assistant Dean of Clinical Education in conjunction with the relevant Department of the School of Medicine. The request to establish an Independent Study Course is initiated at the Office of the Assistant Dean of Clinical Education or the Office of Student Affairs with the student’s counselor. The School of Medicine Independent Study Elective form must be completed in order to process the request. Several criteria are used in considering approval of the Independent Study request, including but not limited to, the student’s academic record, departmental resources, the student’s planned career, the presence of a compelling reason to establish such a course (for example the absence of an identical elective course at the School of Medicine), etc.

The student must contact the department and/or individual with whom he or she intends to work. Together the plan of study is developed and written on the
Independent Study form. When completed and signed, this is then submitted to the Assistant Dean of Clinical Education for formal approval.

2. AWAY Independent Study Electives

AWAY Independent Study Electives are developed and approved in a very similar fashion, except that the approval from the Assistant Dean of Clinical Education should be sought before attempting to establish the elective. The process is altered in this way to make sure that everyone at the School of Medicine will approve the elective before the student contacts the other institution. During Year IV, AWAY Independent Study Electives can be arranged when proper documentation of the educational value of the elective can be obtained.

b. AWAY International Electives, which by their very nature are an Independent Study Elective because the experience is unique, are discussed below.

Additional important points to consider regarding Away electives include the following:

1. If you plan to do an AWAY Independent Study Elective, it is your responsibility to make all arrangements regarding the elective, including approval by WSU School of Medicine. No credit will be given retroactively for courses taken but not approved before the start of the course.

2. Monitor the situation with regard to your AWAY Independent Study Elective requests carefully. If you determine that you will not get a requested AWAY Independent Study Elective, you must propose a substitute for that course which is then added to your program using the mechanism for course changes specified in this program guide.

D. Elective Grades

You will be eligible for the usual clinical grades of Honors, Satisfactory, or Unsatisfactory for electives. The elective taken during Year III is not counted towards the number of Honors course evaluations needed to achieve YR III Honors.

E. Changing Your Year IV Elective

The following policy refers only to changes involving electives.

1. ALL requests to change electives must be initiated through either the Office of Records and Registration or the Assistant Dean of Clinical Education. Records and Registration handles requests that meet the 45 day guideline. The Assistant Dean of Clinical Education handles requests that are less than 45 days before the start of the elective.
2. The current program, requested change (the new course and alternatives, if indicated), and reason for the change will be listed on the Add/Drop Change form available in Student Affairs, Records and Registration, and Academic Affairs offices.

3. No changes will be made without the required signed Add/Drop form; if you have previously communicated with administration regarding the change by email, please submit a copy of the relevant discussion along with the change request so that all documentation is together that needs to be reviewed. To reiterate, any explanations, descriptions of extenuating circumstances, etc. including copies of email correspondence must be submitted with the Add/Drop form, as a decision will be made on the program change only with materials available at that time; no attempt will be made by School of Medicine Administration to correlate an Add/Drop form with past submitted information or verbal discussions.

4. **All requests to change electives must be submitted at least 45 days before the start of the elective.** Note that all paperwork to effect a change must be submitted at least 45 days before the start of the elective in question.

5. This will allow completion of the change request within the Office of Records and Registration at least 30 days before the start of the elective. Affiliated hospitals and other clinical facilities have agreed to reserve their spots for WSU SOM students in exchange for the School’s adherence to the policy that last minute changes (i.e., those elective changes within 30 days of the start of the elective) will be limited. Since those individuals in the Offices of Student Affairs and/or Clinical Education who can approve your request could be busy, out of the office, etc., you should plan to initiate your request early. There will generally be no exceptions to the 45 day limit for changing electives, and in the case where the 45 day limit is waived it is only for extenuating circumstances beyond the control of the student.

6. If requested by administration, or at the student’s request, the student will meet with the Assistant Dean of Clinical Education for discussion of his or her modified program. Once approved, the documents will be forwarded to the Office of Records and Registration for modification of the student’s official record. Course directors impacted by the change will be notified by the Office of Records and Registration.

7. It is to your advantage to submit the request as soon as you know you want to change your program, since the elective you wish to change into may not be available at a later time.

8. To request consideration for a program change with less than 45 days before the start of the course because of extenuating circumstances, you must personally meet with the Assistant Dean of Clinical Education or his/her designee.

9. While you are free to contact an elective coordinator, department, hospital, etc. to discuss your desire to change your senior program and take their elective, the
availability of space in their elective does not necessarily mean that your elective change will be approved by the School of Medicine. Similarly, a program change suggested by your advisor or another faculty member is not automatically approved without review by School of Medicine administration via the procedures detailed above.

10. Decisions regarding the approval or disapproval of a senior elective change are final, irrespective of the availability of space to accommodate the student’s request.

11. All program changes must follow the policies in force at the School of Medicine, and be approved by School of Medicine administration. There are several reasons for possibly denying approval even though it appears to you that the course is available, including possible obligations by the School of Medicine to fill spots once students have indicated their desire to take them; other changes that have been recorded but not communicated to the coordinator or department or hospital that takes up the free spot; academic concerns after review of a student’s prior performance; program balance, etc. Any program change made by a student that does not have prior School of Medicine approval may not be recognized by the School of Medicine, resulting in denial of credit towards graduation for that elective.

F. International Electives

A one-month elective within a foreign country may be taken for credit by senior students only if the educational value of the elective can be verified. Establishing and approving the elective follows the guidelines outlined below. Prior to contacting an international institution, students must meet with Dr. Chih Chuang, Director of Global Health and Education.

Students who have not obtained senior status may not take International Electives for credit. Students who are on academic probation, have a status of Special Matriculation or on leave of absence are not permitted to participate in international clinical experiences.

Only one international away elective (of one month duration) is allowed per student. This elective is considered in the evaluation of program balance.

The procedure for approval of international electives for senior students at the School of Medicine involves discussing with the Director of Global Health and Education to assess the educational value as well as assessing the logistical aspects of the elective. The Director will also assess whether the elective fits into the School of Medicine’s long term objective of potential partnership and sustainability. The Director will give final approval and all requisite paperwork and evaluations must be completed before a final mark will be issued.

You will need to complete a Schedule Change Request Form if you are adding this elective to your schedule.
V. STUDENT RESPONSIBILITY AND CLERKSHIP/ELECTIVE EVALUATIONS

A. It is the student’s responsibility to know the requirements for completion of the senior program, the requirements for awarding the medical degree, the requirements for graduation, and the rules regarding away electives. Do not procrastinate and put off completion of these requirements until the end of the year when you have insufficient time to complete them before graduation.

B. In addition, you are required to complete an evaluation of each clerkship and elective course you complete during your clinical years. This requirement applies to both junior and senior elective courses as well as all required junior and senior clerkships. The School of Medicine Administration monitors the educational process with the hope of continually improving it.

C. No grade will be recorded by the Office of Records and Registration until the student has completed the evaluation for each clerkship or elective.

D. The School of Medicine may at times require students to complete surveys for ongoing educational research, online educational activities for regulatory compliance (e.g., Risk Management) or other activities not listed or announced previously. Once these are announced via email or other means, students will do everything possible to complete the requirement in a timely fashion.

VI. PARKING AT ASSIGNED HOSPITALS

Parking is at a premium at many of the hospitals to which you will be assigned or electively rotate. However, some of the hospitals provide contiguous parking in employee lots or structures; check the information at the end of this document and contact the departments to which you are assigned for more information.

Because of a supply-demand mismatch at the Detroit Medical Center Central Campus, contiguous parking in well-lit, safe lots or structures is not always provided by the hospital or department to which you are assigned. The individual departments will distribute to the students located at DMC Central Campus for Emergency Medicine, Sub-Internship and most electives. The School of Medicine STRONGLY advises all students to avoid parking on public streets at any time.

Parking cards and tags will be distributed either by the WSU department to which students are assigned or through the DMC Medical Education Office. Failure to return parking cards and tags immediately upon completion of a rotation or elective may lead to the imposition of late fees and/or administrative sanctions being applied to the student.
VII. REQUESTS FOR EXCUSED ABSENCES FOR RELIGIOUS HOLIDAYS AND OTHER ABSENCES

The School of Medicine recognizes and appreciates the diverse cultural and religious backgrounds of its students. However, there are no official days off during your junior and senior electives. For students on electives, all days off are determined by the clinical service to which you are assigned for each month.

Requests for time away from clerkships and electives must be submitted in writing to the student’s counselor. The counselor will work with the student to request the time off from the Clerkship/Elective Director if the request is found to be appropriate. The counselor and student will also determine if the student should offer to make up time in the clerkship/elective; however, the requirement for the time to be made up is at the discretion of the Clerkship/Elective Director. The Clerkship/Elective Director may not grant absences if this policy is not followed.

Your attendance is expected and required at all other times by the faculty and the Clerkship/Elective Director for satisfactory completion of each clinical clerkship or elective. Not appearing for clinical responsibilities and assignments is unprofessional as well. Indeed, unexcused absences could severely affect your grade; as detailed elsewhere in the policies and procedures for each clerkship, a clerkship or elective may fail you if you do not show up for an assigned activity, miss call, etc.

If for any reason you miss clinical time for illness, family emergency, weather delays, etc., you should immediately notify your supervising resident/faculty member or site coordinator and the Clerkship Director or his/her designee. Having notified these individuals, it is still the student’s responsibility to obtain an approved/excused absence from the Office of Student Affairs. To do so you must contact the Assistant Dean of Student Affairs or your counselor. When you return even from an excused absence, it is always a good idea to discuss making up the missed clinical time with the Clerkship.

VIII. CHANGES TO THESE CURRICULUM GUIDELINES

Changes may be made to these guidelines for the junior and senior clinical curriculum at any time. The administration will notify you by e-mail when a change has been made. You should periodically check your e-mail and the web page for possible changes to these policies and procedures. It is your responsibility to keep up with the policies as they may change through the academic year.

IX. OTHER IMPORTANT INFORMATION

Refer to the Policies and Procedures Manual for information about:

- Duty Hours and Work Environment
- Clinical Student Dress and Grooming Standards
• Student Mistreatment Policy
• Sexual Harassment Statute and Policy
SENIOR MEDICAL STUDENT EMERGENCY MEDICINE ROTATION STUDENT MANUAL 2015 – 2016
Welcome to your senior rotation in Emergency Medicine! The faculty and staff from the various departments of Emergency Medicine assure you that this will be an exciting educational experience. You will have the unique opportunity of being exposed to many different acute care situations and will be actively involved in the clinical care of patients. Below you will find a list of the site coordinators and their email addresses. They are to be contacted for any problems you may encounter during the rotation and will be responsible for coordinating your clinical experience.

**Detroit Receiving Hospital**  
Sarkis Kouyoumjian, MD  
Trifun Dimitrijevski, MD  
Shazzandra Doze (Coordinator)  
313-993-2530  
skouyoum@dmc.org  
tdimitri@med.wayne.edu  
sdoze@med.wayne.edu

**Children's Hospital of Michigan**  
Earl Hartwig, MD  
313-745-5260  
ehartwig@dmc.org

**Sinai-Grace Hospital**  
Erin Brennan, M.D.  
Michael Cuz (Coordinator)  
313-966-1020  
EBrennan@dmc.org  
MCuz@dmc.org

**St. John Hospital**  
Elizabeth Bascom, M.D.  
Lynn Huber (Coordinator)  
313-343-8797  
lizbascom@gmail.com  
Lynn.Huber@stjohn.org

**Henry Ford Health Systems**  
Jacob Manteuffel, MD  
313-916-7232  
313-916-1553  
jmanteu1@hfhs.org
## Emergency Medicine

### Dates for Orientation and Exams

**July, 2015 - May, 2016**

<table>
<thead>
<tr>
<th>Month</th>
<th>Orientation Day</th>
<th>OSCE/Exam Day</th>
</tr>
</thead>
<tbody>
<tr>
<td>November</td>
<td>Nov. 1, 2015</td>
<td>Nov. 25, 2015</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Exam – Dec. 27, 2015</td>
</tr>
<tr>
<td>April</td>
<td>Apr. 1, 2016</td>
<td>Apr. 30, 2016</td>
</tr>
<tr>
<td>May</td>
<td>May 1, 2016</td>
<td>May 30, 2016</td>
</tr>
</tbody>
</table>
Senior Medical Student Emergency Medicine Clerkship

Clerkship Director: **Sarkis R Kouyoumjian, M.D.**

Objectives:

1. The student will become familiar with the initial evaluation, assessment, and stabilization of patients who present with urgent and emergent medical illness and injury.

2. The student will play an active role in managing acutely ill patients in a timely manner, following their Emergency Department course, and deciding on an appropriate disposition.

3. Students will become exposed to a variety of invasive and noninvasive procedures that are performed in the Emergency Department i.e. arterial punctures, IV lines, peripheral blood draws, suturing, lumbar punctures, NG tubes, Foley catheters, resuscitation skills, airway management and many other procedures under the direct supervision of faculty.

4. The student will further enhance basic clinical skills, such as the history and physical exam; and learn how to identify and treat life-threatening conditions.

Clerkship Orientation

The course begins on the first weekday of the month with a mandatory orientation at 8:30 am in Mazurek Medical Commons room 301-302 unless specified otherwise by Sonya Scott in the Orientation email. In addition, there is a mandatory Hospital Site Orientation at each individual site. The time and location will be specified by the site director.

Clerkship Locations and Hours

The clerkship is composed of approximately 18-20 clinical shifts in a variety of clinical settings from high volume urban centers to high volume suburban centers. The clinical sites include Detroit Receiving Hospital, Sinai-Grace Hospital, St. John’s Hospital, Henry Ford Hospital. The student will be expected to perform as a sub intern, working under the direct supervision of a senior emergency medicine resident and attending staff.

There is a weekly didactic program for the medical students consisting of a core curriculum and facilitated discussions. All students will attend lectures at a central location in Mazurek Medical Commons 307-308 or at another location specified during orientation. In addition, a High Fidelity Patient Simulator in the Kado Clinical skills center is used to simulate a variety of clinical settings.

Students are provided with a student Emergency Medicine Rotation Manual upon which the facilitated weekly discussions are based. They also are encouraged to attend the weekly Emergency Department Grand Rounds in the department they are rotating.
Days/Week: 5 clinical 1 didactic

Hours/Week: 52. Students will work day, afternoon, and midnight shifts.
Maximum Number of Students: Maximum visiting students: 1 / Month

Evaluation of Student Performance
There is both an OSCE and a written final exam on the last day of the clerkship, which is the last weekday of the month. The student can receive the grade of Unsatisfactory, Satisfactory with Remediation, Satisfactory, S with commendation or Honors. The grade is based on clinical evaluations, final exam score and conference attendance and dependent upon completion of all requirements in a timely manner. Clinical evaluations and the examination are weighted equally. If the student wants to attain Honors or Satisfactory with commendation they must attend resident grand rounds at their site. The OSCE is a single case OSCE and is only formative, not summative. The students will be given feedback by faculty immediately following their OSCE.

Assignment of Clinical Grade
The Clerkship Director in accordance with the SOM grading policies assigns the clinical grade. Determination of the composite clinical grade is based on the clinical evaluations received and any additional input from the Site Directors.

- **Clinical “Outstanding”**
  Students must achieve “Exceeds course expectations” in seven out of eleven competencies on the composite clinical evaluation including three of the first five critical competencies (with no ratings of “fails to meet expectations”) to achieve a final clinical evaluation of “Outstanding.”

- **Clinical “Unsatisfactory”**
  Students achieving “Fails to meet course expectations” in any of the five critical competencies, or is rated as “Failed to Meet Course Expectations” in any three of the non-critical competencies will receive a final clinical evaluation of “Unsatisfactory.”

- **Clinical “Satisfactory”**
  Students who do not meet the criteria for a clinical grade of “Outstanding” or Unsatisfactory” will receive a clinical grade of “Satisfactory.”

Student Evaluation of the Clerkship
Students will be expected to complete an evaluation of their clinical site and to evaluate the OSCE. A clerkship evaluation is to be completed on E*Value and a hospital site evaluation is to be completed on Blackboard.

Requirement to Complete All Clerkship Assignments
Students are required to complete all clerkship assignments before the end of the clerkship (including the logging of all required clinical encounters and procedures (Px/Dx) cases in E*Value- due by the midnight of the last Wednesday of the Clerkship). Students will be given the initial grade of Incomplete if assignments are not completed by the deadline. The Incomplete grade will change to a final grade when the assignments, including PxDx, are completed and turned in.
Clinical Encounters and Procedures (Px/Dx) Requirement
Clerkship directors need to ensure that all students are having similar educational experiences at all sites; thus, students at all sites must log all required encounters/procedures (direct patient care and alternative experiences). By logging required cases, Clerkship Directors and the Office of Assessment will have the opportunity to track and monitor the skills/experiences acquired by the students and monitor in real-time. By logging patient encounters (Px/Dx) in E*Value, students will be able to build and maintain a portfolio of their clinical skills and experiences in Year 3 and 4. Additionally, this requirement will allow students to start the habit of logging, which is a requirement in residency.

The deadline for logging all PxDx cases is midnight of the Wednesday of the last week of the rotation. Refer to the “Requirement to Complete All Clerkship Assignments” section above for more information regarding the grading policies that apply to this clerkship requirement.
### EMERGENCY MEDICINE REQUIRED PxDx

<table>
<thead>
<tr>
<th>Required Diagnoses</th>
<th># Required</th>
<th>Student Role-</th>
<th>D= Care of Patient-Direct, O= Care of Patient-Observed</th>
<th>Clinical Setting (inpatient/outpatient)</th>
<th>Alternative Option (MedU case/paper case, etc.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Abdominal Pain</td>
<td>1</td>
<td>D/O</td>
<td>O</td>
<td>Paper case</td>
<td></td>
</tr>
<tr>
<td>Chest Pain</td>
<td>1</td>
<td>D/O</td>
<td>O</td>
<td>Paper case</td>
<td></td>
</tr>
<tr>
<td>Respiratory Distress</td>
<td>1</td>
<td>D/O</td>
<td>O</td>
<td>Paper case</td>
<td></td>
</tr>
<tr>
<td>Medical Code</td>
<td>1</td>
<td>D/O</td>
<td>O</td>
<td>Paper case</td>
<td></td>
</tr>
<tr>
<td>Eyes, Ears or Throat Case</td>
<td>1</td>
<td>D/O</td>
<td>O</td>
<td>Paper case</td>
<td></td>
</tr>
<tr>
<td>Musculoskeletal Case</td>
<td>1</td>
<td>D/O</td>
<td>O</td>
<td>Paper case</td>
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<tr>
<td>Neurologic Case</td>
<td>1</td>
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<td>O</td>
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<td>Pediatric Case</td>
<td>1</td>
<td>D/O</td>
<td>O</td>
<td>Paper case</td>
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<tr>
<td>Traumatic Injury Case (not trauma code)</td>
<td>1</td>
<td>D/O</td>
<td>O</td>
<td>Paper case</td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Required Procedures</th>
<th># Required</th>
<th>Student Role-</th>
<th>P= Actual Patient-performed, O= Actual Patient-observed</th>
<th>Clinical Setting (inpatient/outpatient)</th>
<th>Alternative Option (MedU case/paper case, etc.)</th>
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</thead>
<tbody>
<tr>
<td>IV/Blood Draw</td>
<td>1</td>
<td>P</td>
<td>O</td>
<td>Clinical Skills Simulation</td>
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<tr>
<td>ABG</td>
<td>1</td>
<td>P</td>
<td>O</td>
<td>Clinical Skills Simulation</td>
<td></td>
</tr>
<tr>
<td>Suturing/Wound Repair</td>
<td>1</td>
<td>P</td>
<td>O</td>
<td>Clinical Skills Simulation</td>
<td></td>
</tr>
<tr>
<td>Foley</td>
<td>1</td>
<td>P</td>
<td>O</td>
<td>Clinical Skills Simulation</td>
<td></td>
</tr>
</tbody>
</table>

**Grade Appeals**

If a student wishes to appeal their grade, they must contact the Clerkship Director in writing (by email) within 30 days of receiving their grade. All appeals must be directed to the Clerkship Director. Students must not contact their Site Director regarding appeals. Appeals will be voided if the student contacts the Site Director for the purpose of Appeal.
Wayne State University School of Medicine

Year IV Sub Internship

2015—2016
SUBINTERNSHIP
The Sub-Internship rotation is mandatory in Year 4. Sub-Internships are available in Family Medicine, Internal Medicine, Pediatrics and Surgery. Students schedule their preference through the lottery. The date of the rotation is determined in the lottery.

CONTACTS AND KEY PERSONNEL
Each of the specialties with a Sub-Internship has a coordinator who facilitates the student’s placement for their rotation. Students may be contacted by the coordinator or may be contacted by the site where the rotation will occur. Contact should be made a week or more prior to the start of the clerkship. Students who do not receive notice of where to report within a week of the start of the Sub-Internship should contact the appropriate person below.

Family Medicine Sub-Internship Coordinator
Ms. Lisa Blackwell
Program Project Assistant
(313) 577-0878
lblackwe@med.wayne.edu

Internal Medicine Sub-Internship Coordinator
Shirley Kmetz (K is silent)
Department of Internal Medicine
University Health Center, Suite 2E (near Crockett classrooms)
313 966-7541 or 313 745-4901
Fax: 313 745-4052
skmetz@med.wayne.edu

Pediatrics Sub-Internship Coordinator
Kelly Wood
Undergraduate Medical Education Coordinator
(313) 745-5751
kwoo@med.wayne.edu

Surgery Sub-Internship Coordinator
Nancy Linenger
(313) 916-2879
nlinenge@med.wayne.edu

EVALUATION OF STUDENT PERFORMANCE
Students have the possibility of earning Unsatisfactory, Satisfactory or Honors in this clerkship based on the evaluation of their clinical skills, knowledge and attitude. The evaluation form is the same used in all required clerkships and is completed by your site preceptor.

Honors are awarded to students who achieve “Exceeds course expectations” in seven out of eleven competencies on the clinical evaluation, including three of the first five critical competencies, AND have no ratings of “Below expectations”.

Unsatisfactory is awarded to students who are “Below expectations” in any of the five critical competencies OR three or more competencies total are evaluated as “Below expectations”.

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SUCCESSFUL CLERKSHIP
Students must obtain a Satisfactory Final Clinical Evaluation. If an Unsatisfactory evaluation is awarded, students must repeat the clerkship.

GRADE APPEALS
Students who want to appeal their grade must contact the Clerkship Coordinator, who will then direct the student to Clerkship Director of that specialty. All grade appeals must be submitted in writing (email) to the Clerkship Director within 30 days of receipt of the grade. Students should not contact their site director/preceptor. If the site director is contacted, the appeal will be voided.
Year IV Sub-Intern Clinical Competencies (Abridged Form)

I. **Communication Skills** – Sub-Interns play a key role in communicating aspects of patient care to patients, families and healthcare providers, often in diverse clinical settings.

   A. Communicate effectively with patients and family members
      1. Utilize lay terms appropriate to the patient’s or patient’s family level of education and be able to explain scientific terminology.
      2. Communicate abnormal results and/or “bad news” to patients or their families in a sensitive manner.
      3. Discuss end-of-life issues with patients and family members
      4. Provide concise daily updates for patients and family members regarding hospital course and rationale for ongoing or new treatment plans.
      5. Consider cultural sensitivities and patient wishes when providing information.

   B. Recognize verbal and non-verbal clues of a patient’s mental and physical health.

   C. Clearly summarize for the patient and/or family the reason for admission and rationale for clinical plan.

   D. Initiate a conversation with a patient about advance directives.

   E. Demonstrate the ability to clearly and concisely present oral and written summaries of patients to members of the health care team.
      1. Recognition and synthesis of relevant information
      2. Communication of clinical information to the primary care physician

II. **Coordination of Care** – Sub-Interns play a central role in coordinating patient care; both during hospitalization and upon transition from the inpatient to outpatient setting. This involves communication between the patient and his/her family, colleagues, consultants, members of the health care team and other hospital personnel. Appropriate management and coordination is essential to ensure optimal patient care.

   A. Prioritize tasks for daily patient care in order to effectively utilize time.

   B. Appropriately utilize consultants
      1. Define a consultant’s role in the care of a patient.
      2. Identify appropriate issues for the consultant referral.
      3. Discuss a consultant’s recommendation with members of the health care team.

   C. Effectively coordinate with physician and non-physician members of the health care team including:
      1. Nursing staff
      2. Physician assistants and nurse practitioners
      3. Social Workers
      4. Therapists (occupational, physical, speech, art...)
      5. Pharmacists
      6. Nutrition support staff
      7. Discharge planners
      8. Respiratory therapists

   D. Identify on-call housestaff and cross-coverage schedules among housestaff.

   E. Communicate oral and written transfer of patient care responsibilities to other housestaff.
1. During on-call days
2. Upon transfer of the patient between services.
F. Demonstrate proficiency in coordinating a comprehensive, longitudinal patient care plan.
G. Communicate the plan with outpatient health care provider; arranging for follow-up when appropriate
H. Coordinate care plan utilizing community resources when necessary.

III. **Information Management** – Sub-Interns face an extraordinary challenge in managing large amounts of clinical information relevant to a patient’s hospital admission. Accurate and timely acquisition, documentation and transfer of clinical information are necessary for safe and efficient hospital practice.
A. Be able to access the clinical information system in use at their hospital.
B. Understand how panic values are communicated from the hospital laboratory to the responsible team member.
C. Use a systematic method to track clinical/laboratory/radiologic data.
D. Be aware of patient confidentiality regulations governing medical records and clinical information.
E. Understand the importance of precision and clarity when prescribing medications.
F. Document the following in an organized and efficient manner:
   1. Admissions notes; including the History and Physical Exam
   2. Daily progress notes
   3. Transfer notes
   4. On-call emergency notes
   5. Discharge summaries
G. Use electronic or paper reference to access evidence-based medicine to solve clinical problems.

IV. **Procedures** - The sub-internship presents an opportunity to gain experience with procedures that are commonly performed by interns and residents. The sub-intern should be able to:
A. Describe indications, contraindications, risks and benefits of each of the following procedures:
   1. Venipuncture
   2. Intravenous catheter insertion
   3. Intravenous catheter insertion
   4. Arterial blood sampling
   5. Nasogastric tube placement
   6. Lumbar puncture
   7. Urethral catheter insertion
   8. Intramuscular and subcutaneous injections
   9. Bag and Mask placement and utilization
   10. Other procedures that are service appropriate
B. Recognize clinical situations where one or more procedures are indicated.
C. Effectively explain the rational, risks and benefits for the procedure in language that is understandable by the patient and/or his/her family.
D. Obtain and document informed consent, if necessary.
E. Recognize limitations of skill or proficiency in performing one of the above procedures.
F. Recognize potential procedure related risks for the operator and the need for universal
precautions.
G. Personally perform, with direct supervision, the above procedures, when possible.
H. Write a procedure note.
I. Ensure that samples obtained are properly prepared for laboratory processing.
J. Teach procedure skills to a third year medical student, when appropriate.