RAD 610
Radiology Clerkship
Radiology Clerkship Rotation Syllabus

RADIOLOGY
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Please Note: At MSUCOM, we are constantly working to improve our curriculum and to meet new AOA accreditation guidelines. We need to meet the challenges of modern medicine that force us to innovate. While major changes will generally be instituted at the beginning of the school year, most minor changes may be implemented semester to semester.

Please be mindful of the need to read your syllabi before beginning your rotations.
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Introduction and Overview

Welcome to the radiology clerkship. During this two week clerkship, it is anticipated that you will have the opportunity to build on your current knowledge of diagnostic imaging to better equip you both for the remainder of your clinical experiences, as well as in your postgraduate training.

This curriculum is extremely flexible consisting of 17 on line education modules as well as additional materials and links on the MSU Desire 2 Learn (D2L) RAD 610 site that will offer other resources to assist you in obtaining the maximum value from your radiology clerkship. The on-line modules are available from the D2L site, as well as from direct links from the Michigan State University Radiology web site at: http://education.rad.msu.edu/Courses/RAD_Clerkship/index.html

Please familiarize yourself with the content of the syllabus, as it will be your guide to managing this course.

Goals and Objectives

GOALS

Our overall goal of this rotation is to provide all of our students with a basic level of understanding of the principles and applications of diagnostic imaging with direct exposure to the individuals obtaining and interpreting the diagnostic examinations.

OBJECTIVES

- Through the course of the 2 week rotation, the student will reinforce their understanding of x-ray, ultrasound, CT, MRI, Nuclear Medicine and PET imaging obtained during the first 2 years of the MSU-COM curriculum.

- Gain additional insight into how diagnostic imaging fits into the multidisciplinary approach to patient care and understand the importance of communication, professionalism, and teamwork between clinicians and radiologists relating to patient management while developing a better understanding of the synergies possible between clinicians and radiologists in the consultative care of patients

- To encourage correlation of diagnostic images with previously learned normal and pathologic anatomy and pathophysiology to increase the student's understanding and recognition of common processes and pathology available from diagnostic images.

- Understand the basic requirements and restrictions necessary to obtain quality imaging by the various modalities and the impact on that quality by variation in patient condition, size, and mental status while introducing the students to the indications, contra-indications, patient preparation, post-procedure care, and relative radiation exposure and risks for various diagnostic imaging exams.

- To increase the student's knowledge of the various diagnostic imaging modalities offered by a modern radiology department and achieve a better understanding of how to select and sequence the appropriate imaging examinations for specific clinical presentations while considering the relative costs of different diagnostic imaging exams to be better able to plan and sequence patient exams that optimizes outcome and cost-effective patient care.
• To offer the student the opportunity to observe diagnostic imaging exams, instill sensitivity towards the patient's needs and apprehension about particular procedures and discuss the results and interpretation with the radiologist.

• Increase the students understanding of image digitization, how variables in digitization influence resolution and the computer's impact on diagnostic imaging (PACS).

References

Selected texts that can be of value during the clerkship and to assist in the understanding of the materials included in the on-line learning modules. Suggested readings will be provided via D2L but are not essential for the successful completion of the clerkship.

Felson’s Principles of Chest Roentgenology, A Programmed Text, Third Ed. by Lawrence R. Goodman
Essential Radiology, Second Edition by Richard B. Gunderman
Chest, Abdomen, Bone and Clinical Skills, A Problem-Based Text, Third Edition by Amorosa, Novelline, and Squire.
Squires: Fundamentals of Radiology (Sixth Edition), Harvard University Press, 2004 Novelline R,

Textbooks, current radiology periodicals, and digital teaching series may be available in the onsite Radiology library and may vary somewhat by site.

Full service, extended hour, libraries are present at Michigan State University with onsite medical librarians, web-based searchable medical databases, and standard medical journals in both print and electronic formats. In addition, all MSU students have 24-hour access to the extensive online Michigan State University electronic library, including databases and electronic journals.
Student Responsibilities

The student is expected to be available daily in their assigned radiology department for the assigned hours each day (typically 8:00 – 5:00). During the course of the rotation the student is expected to participate in the 17 on-line modules and their associated quizzes. The preparation of a brief PowerPoint presentation to be presented to the local faculty/house staff is expected during the second week of the rotation on a radiology related topic of the student’s choice. Specific dress requirements may be dictated by the location specific faculty dependent on the clinical experiences the student might be scheduled for on a given day. White coats should be worn unless instructed otherwise by the local faculty.

<table>
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<tr>
<th>Radiology 610 Rotation Academic Requirements</th>
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<tr>
<td>Requirements</td>
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<tr>
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<tr>
<td>Completion of quiz assignment on D2L associated with each module.</td>
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<tr>
<td>Preparation of a PowerPoint on topic of choice in radiology with presentation to local faculty and copy to MSU radiology</td>
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RAD 610 Exam Information

Brief quizzes will be available at the conclusion of each learning module on D2L. Satisfactory overall completion of the 17 quizzes with an 80% score is necessary for completion of the course.

Radiology 610 Corrective Action Process for Deficient Academic Requirements

If a student does not successfully complete the academic requirements of the course, the student will be permitted to go through a “Corrective Action” process.

The “Corrective Action” process for Radiology 610 is as follows:

1) Module D2L Quizzes – The student will be provided a total of 3 opportunities to satisfactorily complete each module quiz. If a minimum overall combined 80% quiz score is not achieved within those 3 opportunities, the student will receive an “N” grade and will proceed to the remediation process.

2) PowerPoint Presentation – In the case the student does not satisfactorily complete and submit the PowerPoint Presentation, the student will be notified via email and given 24 hours to successfully submit their presentation to the course DropBox.
If a student completes the corrective action successfully, as determined by the Instructor of Record, the student will receive credit for the deficient academic grading requirement(s).

If a student does not complete the corrective action successfully, as determined by the Instructor of Record, the student will receive an “N” grade for the course.

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<thead>
<tr>
<th>Requirements</th>
<th>Submission Method</th>
<th>Due Date</th>
<th>Grading</th>
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<tbody>
<tr>
<td>Satisfactory Evaluation of Student</td>
<td>Submit completed evaluation to your base hospital’s Medical Education office.</td>
<td>After rotation</td>
<td>Must have satisfactory completion of rotation.</td>
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<tr>
<td><em>the determination of a satisfactory attending evaluation is governed by the University’s Policy for Retention, Promotion, and Graduation</em></td>
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<tr>
<td>Student Evaluation of Rotation</td>
<td>“Evaluate” Link in Kobiljak Schedule</td>
<td>After rotation</td>
<td>Must be completed</td>
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**Radiology 610 Rotation Clinical Requirements**

**Unsatisfactory Clinical Performance**

A student’s clinical performance will be assessed through the Attending Evaluation. A satisfactory Attending Evaluation is required for completion of the clinical requirements for the course.

Unsatisfactory Attending Evaluations are governed by the Policy for Retention, Promotion and Graduation. Evaluations with below average scores in two or more categories defined as rankings of Needs Improvement/Unsatisfactory (on a scale of Needs Improvement/Unsatisfactory-Exceptional) or 3 and below (on a numerical scale of 1-7) will be referred to the Department Chairperson/Instructor of Record for review and grade determination.

Any student with marginal evaluations in two or more rotations will be referred to the COSE Clerkship Performance Subcommittee for review.

**IMPORTANT NOTE:** The student will maintain an “Extended” (ET) grade until they have successfully completed all academic and clinical requirements for the course.
“N” Grade and Remediation

http://com.msu.edu/Students/Policies_and_Programs/Remediation_Policy.htm

A student who receives an “N” grade will be required to appear before the Committee on Student Evaluation (COSE) Clerkship Performance Subcommittee for review of the student's overall performance. The Subcommittee may recommend that the student who has received an "N" grade be permitted to remediate the “N” grade (see below) or academically dismissed. If a student is recommended for dismissal, the student will appear before COSE to have their status in MSUCOM determined. COSE will review the student’s academic/clinical performance; determine whether dismissal is appropriate or if the student’s circumstances warrant an opportunity for continuation in the curriculum. The student’s eligibility to remediate will be determined following this COSE decision.

Remediation is the method by which course objectives will be met after receiving an "N" grade. Remediation will be offered only after the student’s eligibility for remediation has been determined.

To successfully remediate an “N” grade, a student must demonstrate mastery of the course objectives. To do this the student may be required to retake the course or enroll and participate in a College directed study course demonstrating successful mastery of the course objectives.

Upon remediation of the “N” grade, the original “N” grade remains on the permanent transcript along with the grade, “P” or “N,” for the remediation experience.

Base Hospital Requirements
(To be defined and evaluated by individual hospitals)
## Core Radiology Core Competencies/Learning Modules

| Unit 1/Module 1 | Introduction/ Chest Radiography | • X-Ray production review  
| | | • Image Capture mechanisms  
| | | • Radiographic attenuation principles  
| | | • Normal Chest X-Ray /technical considerations  
| | | • Normal variations / congenital variation in imaging chest anatomy  
| | | • Technical artifacts  
| Unit 1/Module 2 | Chest Radiography  
| | Continued/Inflammatory processes Lobar disease | • Review of chest radiography positioning  
| | | • Chest imaging presentation of inflammatory processes  
| | | • Understand differences in presentation of alveolar and interstitial disease.  
| | | • Pleural inflammatory disease  
| Unit 1/Module 3 | Chest CT/ PET Imaging Lung neoplasm | • Computed Tomography operational principles review  
| | | • PET imaging operational principles  
| | | • X-Ray, CT and PET presentation of lung / mediastinum neoplasm  
| Unit 1/Module 4 | Chest Radiography / Cardiac Evaluation Pulmonary Embolism | • Cardiac evaluation with diagnostic imaging techniques - application and interpretation  
| | | • Congestive heart failure evaluation with diagnostic imaging  
| | | • Cardiac ultrasound techniques and appearances  
| | | • Coronary angiography techniques  
| | | • CT evaluation of the heart techniques and appearances  
| | | • MRI evaluation of the heart techniques and appearances  
| | | • Radionuclide cardiac imaging – perfusion, blood pool and metabolism techniques and appearances  
| | | • Principles and techniques, current status of Pulmonary Embolism Detection.  
| Unit 2/Module 1 | Imaging Evaluation of the Abdomen | • Abdomen evaluation imaging technologies their application and interpretation  
| | | • Renal calculi disease evaluation  
| | | • Intestinal obstruction/ ileus evaluation utilizing x-ray  
| | | • Pneumoperitoneum evaluation  
| Unit 2/Module 2 | Gastrointestinal Imaging | • Understand the utilization of positive and negative contrast agents in the GI tract including both GI studies and CT.  
| | | • Identify the different varieties GI tract diverticula  
| | | • Understand and identify hiatal hernia.  
| | | • Understand the variable causes of GI tract obstruction, i.e. Foreign Bodies, Ulcer disease, Neoplasm, Volvulus, Hernia.  
| | | • Inflammatory disease of the GI tract, infection, ulcer disease, Regional Enteritis, Ulcerative colitis, Appendicitis, Diverticulitis.  
| | | • Neoplastic disease of the GI tract.  

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<thead>
<tr>
<th>Unit 2/ Module 3</th>
<th>Hepatobiliary disease Pancreatic disease</th>
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<td>• Review and understand the imaging modalities used in hepatobiliary and pancreatic evaluation including; x-ray, radioisotope, ultrasound, CT and MRI.</td>
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<td>• Understand the imaging presentation of gallbladder pathology including cholecystitis and cholelithiasis.</td>
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<td>• Understand the imaging presentation of focal and diffuse liver diseases including cirrhosis, hepatitis, vascular abnormalities and neoplasm</td>
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<td>• Review and understand the appearance pancreatic disease including pancreatitis and neoplasm</td>
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<tr>
<th>Unit 2/ Module 4</th>
<th>Evaluation of the urinary tract</th>
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<td>• Review and understand the imaging modalities utilized in evaluation of the urinary tract including; x-ray, ultrasound, nuclear medicine, CT, MRI and PET.</td>
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<td>• Review the imaging anatomy of the urinary tract.</td>
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<td></td>
<td>• Understand the nature and imaging appearance of various renal calculi</td>
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<td>• Understand the relative benefits and risks of iodinated contrast agents utilized in diagnostic x-ray based imaging</td>
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<td></td>
<td>• Understand the imaging appearances of various developmental anomalies of the urinary tract.</td>
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<td>• Understand the imaging presentation of neoplasms affecting the urinary tract.</td>
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<td></td>
<td>• Understand the imaging approach to conditions affecting the prostate gland and the scrotum/ scrotal contents.</td>
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<th>Unit 3/ Module 1</th>
<th>Musculoskeletal imaging introduction</th>
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<td></td>
<td>• Review and understand the imaging modalities utilized in the evaluation of musculoskeletal structures including; x-ray, ultrasound, nuclear medicine, CT, MRI and PET</td>
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<td>• Review the normal anatomy of bone and the normal ossification structures.</td>
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<td>• Review and understand the imaging evaluation and findings associated with skeletal trauma and fracture.</td>
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<td>• Understand the descriptive terms utilized in the description of fractures and dislocations</td>
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<td>• Demonstrate an understanding of the principles related to the development of stress injury to musculoskeletal structures.</td>
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<td>• Understand the varied appearance of musculoskeletal soft tissue injuries utilizing US and MRI.</td>
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<tr>
<td>Unit 3/ Module 2</td>
<td>Bone tumors and tumor like conditions of bone.</td>
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|                  | • Review and understand the imaging techniques utilized in the evaluation of bone tumors and tumor like conditions of bone including; x-ray, CT, MRI and Nuclear Medicine.  
                | • Review the descriptive terms utilized in the evaluation of bone lesions.  
                | • Understand the steps in the evaluation of bone lesions including the modalities and the appropriate sequence of evaluation.  
                | • Review and understand the imaging appearance of benign and malignant neoplastic processes involving bone.  
                | • Review the imaging appearances of infection involving the skeletal system  
                | • Develop an awareness of other bone abnormalities that may mimic more serious conditions and their imaging appearance. |

| Unit 3/ Module 3 | Imaging presentation of arthritis  
                  | Imaging evaluation of the aging skeletal system |
|------------------|--------------------------------------------------|
|                  | • Review and understand the imaging evaluation of the various sero-negative and sero-positive arthritides.  
                | • Understand the imaging approach to evaluation of declining bone mass in the aging adult. |

| Unit 3/ Module 4 | Pediatric Fractures  
                  | Other unusual bone diseases |
|------------------|--------------------------------------------------|
|                  | • Identify and describe Salter-Harris fractures.  
                | • Identify and describe findings and mechanisms of injury of fractures peculiar to the pediatric population.  
                | • Understand the mechanisms and appearances of delayed and non-union fractures  
                | • Demonstrate an understanding of the appearance of, significance of and cause of tendon insertion avulsion injuries  
                | • Demonstrate an awareness of various skeletal manifestations of various defects of osteochondral structures and their appearance by diagnostic imaging.  
                | • Demonstrate an awareness of skeletal manifestations of vascular compromise abnormalities and their appearance by diagnostic imaging. |

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<tr>
<th>Unit 4/ Module 1</th>
<th>Spine evaluation</th>
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|                  | • Understand the techniques of evaluating and the appearance of the spine utilizing imaging techniques including, x-ray, CT and MRI.  
                | • Recognize and understand developmental anomalies of the spine that may be demonstrated with diagnostic imaging techniques.  
                | • Recognize and understand the appearance of spine injury including both fractures and dislocations with the knowledge of the appropriate modality to choose.  
                | • Recognize and understand the appearances related to vertebral disk disease using imaging technologies including x-ray, CT and MRI.  
                | • Understand the basic principles of myelography and its value in evaluating the thecal sac, cord and roots. |
| Unit 4/ Module 2 | Neuroradiology | Review and understand the imaging modalities utilized in the evaluation of the neural axis.  
Review the findings related to head trauma using imaging technologies  
Understand the imaging of pituitary disease  
Understand the imaging of orbits and diseases affecting the orbits.  
Understand the imaging appearances of primary and metastatic benign and malignant brain neoplasms.  
Understand the appropriate imaging work-up of headache and the imaging appearances of various underlying etiologies for headache.  
Understand the application of imaging modalities in the diagnosis of intracranial vascular abnormalities |
| Unit 4/ Module 3 | Imaging evaluation of facial and neck abnormalities | Imaging of pediatric airway disease, techniques and findings  
Evaluation of swallowing difficulties originating in the neck by imaging techniques.  
Imaging of congenital cystic structures arising in the neck.  
Imaging of facial and neck trauma.  
Imaging of infectious processes affecting the facial structures and neck. |
| Unit 4/ Module 4 | Pelvic ultrasound | Review and understand the principles of diagnostic ultrasound and its application to pelvic structure  
Review and understand the application of ultrasound in the evaluation of ovarian disease including, cysts, torsion and neoplasm.  
Review and understand the application of ultrasound in evaluation of diseases of the uterus including infection, and neoplasm.  
Review and understand the applications of ultrasound to the evaluation of pregnancy and its complications including ectopic pregnancy and placental abnormalities. |
| Unit 4/ Module 5 | Pediatric Imaging | Review and understand the differences inherent in the imaging of the pediatric patient compared to the adult patient  
Understand the three main types of respiratory distress that may be encountered during the newborn period.  
Review and understand the various developmental anomalies that can be evaluated with diagnostic imaging.  
Review and understand the application of the various imaging modalities in the pediatric population. |
MSU College of Osteopathic Medicine Standard Policies

The following are the standard MSUCOM policies students must adhere to across rotations.

ATTENDANCE POLICY

Attendance at all scheduled Clerkship activities is mandatory.

If a student is unable to be present for a scheduled clerkship activity because of extenuating circumstances, the student is required to complete a Clerkship Excused Absence Request form. In all cases except for emergencies or sudden illness, requests for scheduled absences are to be submitted at least 30 days prior to the date(s) of absence. Absences are not approved until the form is completed with all required signatures. Once approved, the student is required to notify their preceptor of their absence within 24 hours. Failure to complete this form or obtain required signatures will result in an unexcused absence from the rotation. Unexcused absences are considered unprofessional behavior and could be noted as a mark of unprofessionalism on the student’s performance evaluation, and may lead to failure of the rotation.

An absence request for the first or last day of the rotation will be denied. All absences (excused or unexcused) must be made up as specified on the Excused Absence Form as outlined under the conditions of approval. Makeup experience will be determined by the Director of Medical Education and may include additional clinical day(s) or written assignment(s).

If a student has an emergency or sudden illness they should immediately notify the Director of Medical Education and rotation preceptor. The excused absence request form must be submitted to the Medical Education Office within 24 hours of the original emergency or sudden illness notification.

IMPORTANT NOTE: The only exception to this attendance policy is Emergency Medicine, where attendance is based on a shift schedule assigned by the hospital. Please refer to the Emergency Medicine “Introduction and Overview” for more information.

STATEMENT OF PROFESSIONALISM

Principles of professionalism are not rules that specify behaviors, but guidelines that provide direction in identifying appropriate conduct. These principles include the safety and welfare of patients, competence in knowledge and skills, responsibility for consequences of actions, professional communication, confidentiality, and lifelong learning for maintenance of professional skills and judgments. Professionalism and professional ethics are terms that signify certain scholastic, interpersonal and behavioral expectations. Among the characteristics included in this context are the knowledge, competence, demeanor, attitude, appearance, mannerisms, integrity and morals displayed by the student to faculty, peers, patients and colleagues in other health care professions. Students are expected to conduct themselves at all times in a professional manner and to exhibit characteristics of a professional student.

STUDENTS RIGHTS AND RESPONSIBILITIES

Each individual student is responsible for their behavior and is expected to maintain standards of academic honesty. Students share the responsibility with faculty for creating an environment that supports academic honesty and principles of professionalism. Proper relationship between faculty and student are fundamental to the college's function and this should be built on mutual respect and understanding together with shared dedication to the education process. It is a fundamental belief that each student is worthy of trust and that each student has the right to live in an academic environment that is free of injustice caused by dishonesty. While students have an obligation to assist their fellow students in meeting the common goals of their education, students have an equal obligation to maintain the highest standards of personal integrity.
FACULTY RESPONSIBILITIES

It is the responsibility of the college faculty to specify the limits of authorized aid (including but not limited to exams, study aids, internet resources and materials from senior students) in their syllabi, and it is the responsibility of students to honor and adhere to those limits. Course instructors shall inform students at the beginning of the semester of any special criteria of academic honesty pertinent to the class or course.

It is the responsibility of the clinical faculty to provide students with ongoing feedback during rotation upon request. Clinical faculty are generally recommended (though not required) to limit student assigned duty hours from 40 to 60 hours weekly (and not exceeding 60 hours). Both faculty and students are to be treated fairly and professionally in order to maintain a proper working relationship between trainer and trainee.

COURSE GRADES

- **P-Pass** — means that credit is granted and that the student achieved a level of performance judged to be satisfactory according to didactic and clinical performance by the department.
- **N-No Grade** — means that no credit is granted and that the student did not achieve a level of performance judged to be satisfactory to be satisfactory according to didactic and clinical performance by the department.
- **ET-Extended Grade** — means that a final grade (“Pass” or “No Grade”) cannot be determined due to one or more missing course requirements. In Years 3 and 4, the ET grade is used instead of an “Incomplete (I)” grade. Once all course requirements have been completed, received, and processed, the ET grade will be changed to a final grade. An “ET” will NOT remain on a student’s transcript.

ROTATION EVALUATIONS

**Attending/Faculty/ Resident Evaluation of Student**

Students are responsible for assuring that his/her clinical supervisor receives the appropriate evaluation form. Forms can be accessed via the “Attending Evaluation” link in the student’s Kobiljak online Clerkship schedule.

Students should assertively seek feedback on his/her performance throughout the course of the clinical rotation. Students should also sit down and discuss the formal evaluation with the clinical supervisor. Note that the clinical supervisor and the DME from the rotation hospital are required to sign the form.

Students should keep a copy of the evaluation and leave the original with the Medical Education Office at the clinical training site where that office will review, sign, and forward the completed form to the Office of Student Services. It is important to know that evaluations will not be accepted by the Office of Student Services if submitted by the student. Any evidence of tampering or modification while in the possession of the student will be considered “unprofessional behavior” resulting in an “N” grade and review by the Committee on Student Evaluation (COSE) and/or the College Heading Committee.

Grades are held until all rotation requirements, including evaluation forms, are received. Be sure you are using the correct form.

**Student Evaluation of Rotation**

Students will submit their rotation evaluations electronically at the conclusion of every rotation by accessing their online schedule through Kobiljak.

EXPOSURE INCIDENTS PROTOCOL

A form has been developed by the University to report exposure incidents. These forms will be on file in your DME's office. You can also access the form at [www.com.msu.edu/AP/clerkship_program/clerkship/documents/exposure.pdf](http://www.com.msu.edu/AP/clerkship_program/clerkship/documents/exposure.pdf). Please make yourself familiar with the procedure and the form.