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 your core rotation in women’s health/obstetrics and gynecology. Irrespective of your future area of medical practice, we believe it important to have a good grasp of this subject area.

The purpose of this syllabus is to provide you with an overview of your goals and objectives during this rotation. These goals and objectives are designed to help you gain an understanding of the breadth and scope of obstetrics and gynecology. As you progress through the month, you will perform certain activities designed to help you meet the goals and objectives identified. Please make sure you review this entire syllabus to understand the format and content of this syllabus. If at any time you have question, please direct them to your attending physician(s), residents, and to your DME office if necessary.

**Rotation Format**: The OB/GYN Clerkship consists of a four-week rotation of hospital and ambulatory-based obstetrics and gynecology. This service should expose the medical student to all aspects of obstetrical and gynecological management of the female patient. Opportunities for experience in office gynecology and hospital or office-managed gynecologic surgery should be available. These experiences will be gained by reading, attendance at lectures, seminars, ambulatory clinics, floor coverage, delivery room and operating room exposure.

This rotation has been designed to cover primary topics commonly seen in Obstetrics and Gynecologic practice. To accomplish this, each week will focus on one didactic topic of importance. Each recommended text or online reference should be reviewed at a reasonable pace. It should take you approximately 90 minutes to review these elements. Online references will require an active internet connection to review as they will be accessed remotely via the MSU Health Science Library or other online source.

These topics are:

**All Text references are from: Beckman, Obstetrics & Gynecology, 7th edition**

Beckman’s text of Ob-Gyn was the required text for the female reproductive course. While it is not mandatory that you have this on your rotation, it is written for the ob-gyn clerkship curriculum. The appropriate chapters or pages are listed below for your convenience. There are other references listed for your convenience as well. It is expected that you will review this material or comparable material to grasp an understanding of this subject matter, and you will be tested on this material as well.

**Week 1: Fetal Monitoring and Antenatal testing:**
- Evaluation of Fetal Well Being: page 99
- Intrapartum Fetal Surveillance, page 113-119
- PowerPoint on Electronic Fetal Monitoring in Desire2Learn Course
Week 2: Normal and Abnormal Labor

- PowerPoint Presentation on Normal Labor in Desire2Learn Course (see OST 574 PowerPoint Presentation in D2L Course)
- PowerPoint Presentation on Abnormal Labor in Desire2Learn Course
- Beckman, Chapter 8 – Intrapartum Care
- Beckman, Chapter 9 – Abnormal Labor
- **If you do not use Beckman for your reference, you should choose an ob text that covers this material. (normal and abnormal labor)**

Week 3: Contraception and Sterilization (Family Planning)

- Beckman, Chapter 26 & 27
- **If you do not use Beckman for your reference, you should choose an ob text that covers this material.**
- PowerPoint Presentation in Desire2Learn Course
- [http://umm.edu/health/medical/reports/articles/birth-control-options-for-women](http://umm.edu/health/medical/reports/articles/birth-control-options-for-women)

Week 4: Cervical Neoplasia Screening with Pap Smear and HPV Testing

- Beckman, Chapter 47
- **If you do not use Beckman for your reference, you should choose an ob text that covers this material.**
- [http://www.asccp.org/Guidelines](http://www.asccp.org/Guidelines)

At the end of each week, you will take an online quiz based on the topic and your readings. This quiz will be completed via Desire2Learn (D2L), which is accessed at [http://d2l.msu.edu](http://d2l.msu.edu) and will require you to have computer access. You may also choose to discuss these cases with preceptors you work with and you are encouraged to engage the attending physician in discussion as this will lend a greater understanding of these critical issues.

**What’s In This Syllabus:** This syllabus is broken down into the following areas:

- **Goals & Objectives:** A list of learning goals & objective covering the scope of Obstetrics & Gynecology
- **References:** A list of recommended reading references for this specialty; these include recommended readings to meet the stated goals and objectives
- **Summary of Didactic Requirements:** A list of required didactic elements for this month with completion dates and respective percentage of grade (readings will be housed in D2L)
- **Core Competencies:** A list of core competencies (as identified by the American Association of Colleges of Osteopathic Medicine) addressed during this month
**Summary of Clinical Requirements**
A list of required activities for this month with required submission method and completion dates

**Special Considerations**
Things to remember about rotating in Obstetrics and Gynecology

**Obstetrics & Gynecology COMAT Exam Information**
Explanation of the COMAT exam for Ob-Gyn

**Rotation Remediation Process**
An explanation of remediation steps should you not pass the rotation initially

References


(This text was utilized in your female reproductive course and was written especially for clerkship students adhering to the APGO educational objectives.)

General topics that should be covered during the rotation are noted below, and appropriate chapters from Beckman’s text are listed. These chapters are short and to the point. Additionally there are online practice questions for each chapter. These topics are best learned as encountered in patient care and you are encouraged to read on these topics from the text as you encounter patients with these problems.

Alternative texts are readily available as well as on-line resources:
- Hacker & Moore's Essentials of Obstetrics and Gynecology
- Williams Obstetrics, 23rd Edition
- Gabbe: Obstetrics: Normal and Problem Pregnancies

Goals and Objectives

Goals

1. Provide the medical student a fundamental knowledge base in obstetrics and gynecology.
2. Introduce the medical student to basic obstetrical and gynecological surgery procedures.
3. Facilitate the understanding of the approach to clinical problem solving in obstetrics and gynecologic surgical management.
4. Encourage the continued development of the medical student's professional attitude and behavior within obstetrics/gynecology settings. Identify resources for reviewing current guidelines for the management of common problems encountered in ob-gyn practice.

5. Consider osteopathic manipulative techniques for specific manifestations of problems seen in ob-gyn where applicable. (Examples are low back pain in pregnancy, post operative care, & chronic pelvic pain encountered frequently in gynecologic care).

Objectives

Note: Page #s and chapters refer to Beckman Text:

1. Demonstrate clinical skills pertinent to each patient encounter.
   a. Write a thorough H & P (Pages 9-11)
   b. Demonstrate ability to conduct an adequate physical exam of the patient (Pages 11-23)
   c. Explain female stages of sexual development (be able to relate each patient to their development stage) and risks associated with each age group (Chapter 3)

Obstetrics

2. Evaluate the obstetrics patient.
   a. Discuss the changes to the maternal-fetal physiology during pregnancy (Chap 5)
   b. Describe care of the pregnant patient (Chap 6)
   c. Evaluate elements of proper counseling for antepartum care. (Chap 7)

3. Describe how electronic fetal monitoring is used in assessing the normal labor pattern as well as how it can be helpful in evaluating dysfunctional labor and fetal status. Understand the limitations of electronic fetal monitoring. (Pages 69-71)

4. Describe normal labor and delivery. (Chapter 8)
   a. Describe the difference between true and false labor
   b. Evaluate the various stages of labor
   c. Explain the delivery process
   d. State the methods for pain management during delivery, including indications for local and regional anesthesia during labor and delivery
   e. List the steps involved in immediate postpartum care following delivery—see also #9 below

5. Distinguish the characteristics of normal and abnormal labor (Chapter 9) and understand basic interventions for management of abnormal labor

6. Understand the approach to normal and abnormal postpartum bleeding/hemorrhage (Chapter 12)

7. Understand management of postpartum care (Chapter 11)

8. Have a basic understanding of placentation of twins and its clinical importance, as well as understand some of the common complications of multiple gestation (Chapter 13)
9. Understand the causes, complications and assessment of 3rd trimester bleeding (Chapter 16)

10. Understand common obstetrical problems, with basic assessment and management including:
    a. Fetal growth abnormalities (Chapter 14)
    b. Preterm labor (Chapter 15)
    c. Premature rupture of membranes (Chapter 17)
    d. Post-term pregnancy
    e. Rh negative patient
       *best to read on these topics when encountered in clinical care

11. Understand the basic assessment and management medical problems in pregnancy including:
    a. Diabetes mellitus and thyroid disorders (Chapter 20)
    b. Nausea and vomiting of pregnancy (Chapter 21)
    c. Hypertensive disorders (Chapter 22)
    d. Asthma and anemia (Chapter 23)
    e. Infectious diseases (Chapter 24)
       *best to read on these topics when encountered in clinical care

Gynecology

12. Compare and contrast contraceptive options, including risks and benefits. (Chapter 26 & 27)

13. Understand basic approach to diagnosis and treatment of vaginitis (Chapter 28) and sexually transmitted infections (STIs) (Chapter 29)

14. Understanding basic causes and evaluation/treatment of Dysmenorrhea and chronic pelvic pain (Chapter 32)

15. Understand basic approach to common breast complaints, including evaluation and management (Chapter 33)

16. Understand basic evaluation and treatment of abnormal uterine bleeding (Chapter 39), & hyperandrogen disorders (Chapter 40)

17. Understand how to properly obtain a Pap Smear, as well as indications and basic management of the abnormal pap smear. (You can access a video at the following website: http://obgyn101.org/videos.html)
   a. Understand and describe cervical cytology screening guidelines
   b. Understand when to utilize High Risk HPV screening/testing
   c. Bethesda classification of cytologic abnormalities (Pages 377-379; Pages 403-404.)
   d. List the initial steps toward the treatment of a person with an abnormal pap smear
   e. Be aware of the ASCCP guidelines (algorithms) for management of the abnormal pap smear http://www.asccp.org/Guidelines

18. Understand the basic approach to management of uterine leiomyoma (Chapter 48)

19. Understand a basic approach to and understanding of Endometrial Hyperplasia/Neoplasia. (Chapter 49)
20. Understand a basic approach to women with **ovarian abnormalities** (Chapter 50)

21. Be able to understand basic management of **menopause related problems** (Chapter 41)

22. Be aware of **preventative health care measures (\& controversies)** for women
   a. Chapter 1 & 2
   b. Chapter 36 (Sexual Assault and Domestic Violence)
Student Responsibilities and Expectations

During the course of this month, the student is expected to take a proactive approach to learning about the discipline of obstetrics and gynecology. Students should make every effort to have an initial orientation session with their attending physician/resident in an effort to review goals, objectives and expectations on both the part of the preceptor and student. During this initial orientation meeting, students should present the preceptor with both a copy of their evaluation form as well as review this syllabus with him or her. Doing so will improve the overall rotational experience in terms of training and evaluation. Students should also suggest having a mid-month evaluation during the rotation to gain formative feedback and make adjustments as needed based on commentary from the preceptor. Doing so will encourage active participation and improve summative evaluations that occur at the end of the rotation.

It is expected that the student will meet the following clinical responsibilities during this rotation:
- Report to their rotation in a timely fashion, dressed appropriately for each day of work. Be cognizant of any scheduling changes that occur and provide timely communication to the preceptor about excused or unexpected absences.
- Demonstrate an enthusiastic and proactive attitude towards the learning process in general and Obstetrics & Gynecology specifically.
- Treat all staff members, other rotators and patients with respect and demonstrate professional behavior in all interactions.
- Not engage in behaviors that are either: unprofessional/unethical, illegal or pose a risk to the patient or practice. If there is a question about something you are asked to do, speak with your precepting physician or (if the person you have concern about is the precepting physician) your Student Coordinator and/or Director of Medical Education for your base hospital.
- Complete any and all requested responsibilities in a timely fashion and as directed by your precepting physician excepting behaviors mentioned previously.
- Represent you, fellow students and the College in a positive and professional manner.

It is expected that the student will meet the following academic responsibilities during this rotation:
- Complete all College’s curricular elements of the rotation as specified in this syllabus in a timely fashion.
- Regularly access and review content provided within Desire2Learn (D2L) during the rotation to support and supplement your active learning process.
- Attend the C3 didactic sessions (if present) provided during this month as indicated in the C3 (OST 603) syllabus. No exception for this attendance is allowed except as approved by the C3 Director of your base hospital, the Instructor of Record for OST 603 and/or the Director of Medical Education of your base hospital.

Failure to meet the clinical and/or academic responsibilities (as determined by your preceptor, DME and Instructor of Record for OSS 651) may result in a failing grade for this course and require a corrective action plan and/or remediation as outlined below.
Obstetrics & Gynecology Rotation Grading Requirements

### Didactic Grading Requirements

<table>
<thead>
<tr>
<th>Requirements</th>
<th>Submission Method</th>
<th>Due Date</th>
<th>Grade Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Quiz #1 electronic fetal monitoring</td>
<td>D2L</td>
<td>A passing score of at least 80% must be met by the 1st Sunday of the rotation</td>
<td>25%</td>
</tr>
<tr>
<td>Quiz #2 normal and abnormal labor</td>
<td>D2L</td>
<td>A passing score of at least 80% must be met by the 2nd Sunday of the rotation</td>
<td>25%</td>
</tr>
<tr>
<td>Quiz #3 contraception</td>
<td>D2L</td>
<td>A passing score of at least 80% must be met by the 3rd Sunday of the rotation</td>
<td>25%</td>
</tr>
<tr>
<td>Quiz #4 cervical neoplasia screening</td>
<td>D2L</td>
<td>A passing score of at least 80% must be met by the 4th Sunday of the rotation</td>
<td>25%</td>
</tr>
<tr>
<td>Ob-Gyn COMAT Examination</td>
<td>Online at Assigned Testing Site</td>
<td>4th Friday of the rotation</td>
<td>1.5 standard deviation below National Mean</td>
</tr>
</tbody>
</table>

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**Rotation Corrective Action Process and Remediation**

For any student who does not achieve an initial passing grade for the rotation, the following corrective plan will go into immediate effect:

1) The student will be required to retake the quizzes provided until an **80% passing score** is the average achieved on all four quizzes.

2) The student will be required to provide an additional essay of no less than 2 pages discussing the impact of primary care on the direction of women’s healthcare as it is practiced in this country. The essay may espouse the students’ view, but must include citations for facts provided by the student to support his or her viewpoint. This will be reviewed by the Chair as well for evaluation.

3) Upon successful completion of the above, the student will be given a passing grade for the course.

4) Students must score above 1.5 Standard Deviations below the National Mean on the day you take the exam. Each exam date that the test is given has a different Standard Deviation and a different National Mean. Each student will be allowed to take the OB/GYN exam only twice before receiving an “N” grade for the rotation. Students will be notified of their failure by the Department.
5) If the student fails the rotation for other reasons (poor performance in the eyes of the specialist and/or Director of Medical Education) or fails the Corrective Action Process outlined above for curricular elements, the student will receive an ‘N’ grade on their transcript. The student will then be subject to a remediation plan designed by the Director of Medical Education in conjunction with the Dean of Student Services and Clinical Curriculum Director.

*Students please understand that you will not have a passing grade for this rotation until ALL of your requirements are in our office and marked as received in your KOBILJAK schedule. This may take months after your rotation ends and you initial grade of “ET” to have your grade changed to a “P”. Thank you in advance for your understanding.*

**Exam Information**

**EXAM PREPARATION**

Students always wish to know ‘What is the best way to prepare for an exam?’ The short and simple answer is STUDY APPROPRIATE CONTENT REGULARLY. Doing so will likely increase your ability to pass any testing elements you may encounter during your training, but also help you to develop good habits in the pursuit of becoming an effective ‘lifelong learner’. This is the ideal every physician strives for, as should you.

‘Appropriate content’ is harder to define – in the case of the Ob-Gyn National Board of Osteopathic Medical Examiners’ (NBOME) Comprehensive Osteopathic Medical Achievement Test (COMAT) exam, which serves as a summative testing element for core rotations in ob-gyn, the NBOME has provided a list of recommended areas of concentration covering specific dimensions of knowledge (Patient Presentation and Physician Tasks) as well as general and specific learner objectives. In addition, the NBOME provides recommended resources for learning as well as practice examinations. All of these elements may be accessed at the NBOME website (http://www.nbome.org/comat-ob.asp?m=can).

Other resources that would be beneficial:

1) APGO Medical Student Educational Objectives (9th edition)  
http://www.apgo.org/binary/Final%20EDUC%20OBJ.pdf

2) A practice question bank is available to anyone who purchases the *Beckman, Obstetrics & Gynecology*, 7th edition (or 6th edition) textbook. This question bank can be accessed and active using the link and code listed in the textbook.

The curriculum provided as part of this course is designed to support your preparation for the COMAT exam, but it is by no means comprehensive and should **NOT** serve as your only learning resource for preparing for this exam. While designed to aid in studying for COMAT testing, it has multiple goals that extend beyond COMAT testing performance.

The OB/GYN – Comprehensive Osteopathic Medical Achievement Test (COMAT), as developed and managed by the National Board of Osteopathic Medical Examiners, is a nationally standardized examination which can provide participating COM’s and students with an educational equivalency assessment. It was developed by osteopathic surgeons with the intent to evaluate the knowledge of a third year student after the general surgery CORE rotation. Content outlines and assessment objectives
as well as a practice exam can be found on the NBOME website as well. An explanation of score reporting is also discussed. MSUCOM students are required to take the OB/GYN- COMAT upon completion of their rotation.

The OB/GYN – COMAT covers a broad area of surgical knowledge. It is quite unlikely that a student would be exposed to such a broad scope of practice in a typical four week rotation. For this reason, the reading assignments as outlined in this syllabus are crucial in the preparation for this examination as well as a reference for reading assignments during the rotation. Learning this material is an active process and simply being present during the rotation will not suffice.

Each month students receive a MSUCOM e-mail announcement with instructions to access the MSUCOM NBOME COMAT online computer program and select the subject, time and location for their exam. A confirmation is returned to the student upon submission of the information.

EXAM ADMINISTRATION

THE OB-GYN NBOME COMAT EXAM: All students are required to take the NBOME subject COMAT examination in ob-gyn in order to receive a “Pass” grade for the OSS 651 rotations. Students must take the OB-GYN Medicine exam on the last Friday of their Rotation. For exam dates/times, please refer to the COMAT Exam Schedule on the Academic Programs website at http://com.msu.edu/AP/clerkship_program/ top_page_links_clerkship/comat_exam_protocol.htm.

The exam is offered on the Michigan State University campus, the DMC, and Macomb University Center. Western Michigan University School of Medicine, Mercy General, Munson Medical Center, McLaren Bay Regional Medical Center, and Lakeland Healthcare will administer exams only for students based at their hospital. The exams are 2½ hours in length and contain 125 questions.

Additional information is available at http://com.msu.edu/AP/clerkship_program/syllabus/core_syllabus/comat_exam_protocol_2013.10.01.pdf. Contact Ms. Evita Gilbert (517-432-5423 / gilber10@msu.edu) with questions.

EXAM ATTENDANCE

Recognizing that the college’s current resources for the administration of online exams are limited, students will be asked to commit to a specific exam location and scheduled exam time substantially before the scheduled exam date. Due to the substantial teamwork that is needed to scheduling COMAT exams among college and NBOME staff, students cannot make late, last minute changes in these schedules.

STUDENTS MUST BRING A VALID GOVERNMENT ISSUED PICTURE ID (i.e. driver’s license or passport) TO THE EXAM.

EXAM SCORING

The NBOME sends scores two to three weeks after the exam. E-mail notification is sent to the class when the scores have been entered on the student’s individual clerkship schedule.
Students must score higher than 1.5 Standard Deviations below the National Mean on the day of their exam to pass the COMAT Exam portion of the Rotation. For example, Student Jones took the test on June 1, he scored a 94, the National Mean was 98.7 and the National Standard Deviation was 10.2 – he would pass the exam as his score was above the cut score of 83.4 required to pass the exam. Any student who scored below 83.4 would be required to retake the exam.

Students that do not pass the exam will be notified by the Department and then required to take the COMAT Exam again within the following two exam dates offered. Students should be aware of their poor performance and that unless they take steps to improve their knowledge in this area, they can expect to perform comparatively in this area on their COMLEX Level 2. Please note that the DME’s of the Base Hospitals will be notified of your score on this exam. Also note, some residency programs will begin asking for your results on the COMAT Exams to be submitted with your application to their programs.

Students required to schedule a make-up exam, will need to contact Evita Gilbert in Academic Programs here at MSUCOM. A confirmation e-mail of the registration is sent once registration has been completed. If you miss the registration, and you do not take the exam within the next two exam dates, you will receive an “N” grade for the rotation.

The cut off score for passing the rotation will be above 1.5 standard deviations below the National Average of your new exam date. Each student will be allowed to take the OB/GYN exam only twice before receiving an “N” grade for the rotation. Students will be notified of their failure by the Department.

EXAM ATTENDANCE
Recognizing that the college’s current resources for the administration of online exams are limited, students will be asked to commit to a specific exam location and scheduled exam time substantially before the scheduled exam date. Due to the substantial teamwork that is needed to scheduling COMAT exams among college and NBOME staff, students cannot make late, last minute changes in these schedules.
Base Hospital Requirements
(To be defined and evaluated by individual hospitals)

This page is left intentionally blank to allow you (the student) to fill in any additional requirements as defined by your base hospital. Use as needed for documentation purposes.
Special Considerations

OB-GYN provides an opportunity for blending primary care with elements of medical care, endocrinology, and surgery— you can see a wide spectrum of physicians practice an even wider range in the sub-specialty areas of OB-GYN. For many women OB-GYN represents the frontline of medical care, not only in terms of interaction with the community and society, but also in terms of good stewardship of medical resources, both financial and material. During your time on this rotation, consider discussing with your attending physician(s) aspects of medical care such as: health care reform and its impact, being a financially responsible physician and the delivery of care in a resource-deprived environment, etc.

The practice of ob-gyn is also a sensitive area of medical care for women. Be respectful and non-judgmental in your approach to patients in this setting.

=================================================================

OB-GYN Core Competencies/Learning Modules

The Core Competencies were developed by the AOA to represent seven defined areas. In 2007, the American Association of Colleges of Osteopathic Medicine developed a document to assist colleges in integrating these same core competencies into medical education at the medical student level. The following core competencies are addressed during the month of Family Medicine:

1) Osteopathic Principles and Practice
   a. Approach the patient with recognition of the entire clinical context, including mind-body and psychosocial interrelationships
   b. Diagnose clinical conditions and plan patient care
   c. Perform or recommend OMT as part of a treatment plan
   d. Communicate and document treatment details

2) Medical Knowledge
   a. Articulate basic biomedical science and epidemiological and clinical science principles related to patient presentation

3) Patient Care
   a. Gather accurate data related to the patient encounter
   b. Develop a differential diagnosis appropriate to the context of the patient setting and findings
   c. Form a patient-centered, inter-professional, evidence-based management plan
   d. Provide health promotion and disease prevention (HPDP)
   e. Engage in documentation, case presentation, and team communication

4) Interpersonal and Communication Skills
   a. Establish and maintain the physician-patient relationship
   b. Demonstrate effective written and electronic communication in dealing with patients and other health care professionals
   c. Work effectively with other health professionals as a member or leader of a health care team
5) Professionalism
   a. Demonstrate humanistic behavior, including respect, compassion, probity, honesty, and trustworthiness
   b. Demonstrate accountability to patients, society, and the profession, including the duty to act in response to the knowledge of professional behavior of others
   c. Attain milestones that indicate a commitment to excellence, as, for example, through ongoing professional development as evidence of a commitment to continuous learning

6) Practice-Based Learning and Improvement
   a. Describe the clinical significance of and apply strategies for integrating research evidence into clinical practice
   b. Critically evaluate medical information and its sources, and apply such information appropriately to decisions relating to patient care

7) Systems-Based Practice
   a. Demonstrate understanding of how patient care and professional practices affect other health care professionals, health care organizations, and society
   b. Identify and utilize effective strategies for assessing patients
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.

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 attending clinical faculty to:

1) Provide feedback during rotation
2) Enforce the 60 hour work week
3) Treat students fairly and professionally

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 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 receive the appropriate evaluation form. Forms can be found in [insert location of evaluations in D2L] or in the individual D2L Rotation Course. 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. |

IMPORTANT NOTE: Attending Evaluations do not follow the above “Corrective Action” process. Marginal Attending Evaluations will be reviewed on a case-by-case basis by the department, where the Instructor of Record will then determine whether to give the students a Pass or an N grade for the rotation. If the department determines students will be given an N grade in light of the evaluation, they will then proceed to “Remediation Policy” process.
**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 two or more marginal evaluations 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 of 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 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.
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. Please make yourself familiar with the procedure and the form.