

University of South Florida

Morsani College of Medicine

Year 4 Elective

Surgical Transplant

MEL 7819

Syllabus

2023-2024



Transmissible Disease Procedures

All students must be aware of and comply with university policies regarding Covid-19 and other transmissible diseases. They should also be aware of and comply with the policies at the clinical affiliates where their clinical training occurs. Failure to do so may result in disciplinary action.

Key Contacts

Course Director

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Coordinator

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Director's Welcome

Welcome to the Surgical Transplant elective. I hope the four weeks you spend on this elective will be rewarding and educational. This syllabus was designed to serve as a reference guide and it is the responsibility of every student to read it.

This four-week A.I. places the senior medical student on the Transplant Surgery service in the role of an intern. Responsibility will vary with the ability of each student, but the intent is for the student to assume all responsibilities usually assumed by an intern. This A.I. will provide you with an in-depth experience in total patient management so that these responsibilities may be assumed with confidence, regardless of career choice.

Attendance is required at the Department of Surgery's Monday morning Morbidity & Mortality (M&M) conference and Grand Rounds, as well as any other required resident activities. Throughout this elective, you will perform histories and physical examinations, write progress notes, and write orders for diagnostic and therapeutic interventions with supervision from house staff and attending faculty. You will be encouraged to assist with procedures such as central line placement, invasive line monitoring, chest tube placement, etc., as required on the particular service you choose. Operating room experience will be extensive, and you can expect to participate at the discretion of the operating surgeon.

Acting Interns are also required to complete two 24-hour calls on both the first and third weekend of their elective. You should arrive for this shift on Saturday morning, stay at the hospital all day and night, then leave after Sunday morning rounds.

You will be evaluated based on your overall clinical performance. The length of the elective is a full 4-week rotation, and you should expect to work approximately 70 hours per week (Monday-Friday and one weekend day). This A.I. should NOT be scheduled during a period when you expect to travel for interviews or during a time when you will be out of town for any reason. After completion of this A.I., you should be able to identify and understand the management of common surgical problems and be able to complete basic surgical procedures.

Should you have any questions, comments, suggestions, or problems, please feel free to contact me.

Chris DuCoin, M.D.

Course Objectives

1. To expose the senior student to the role of a Transplant Surgeon
2. To afford the student an in-depth experience in total patient management so these responsibilities may be assumed with confidence.

Course Description

This clinical elective affords the students an in-depth experience in total patient management as an acting intern on a Transplant surgery service in order to provide exposure to the daily responsibilities that are associated with a Transplant surgery intern year. Students may choose to participate in the TGH Transplant Surgery, Colorectal Surgery, Bariatric Surgery, Cardiothoracic Surgery, or JAHVA Transplant Surgery services. On these services, the student is expected to function as an intern. Responsibility will vary with the ability of each student.

Course Objective	Program Objective	EPA
Student will demonstrate the ability to gather a history from patients with a variety of clinical conditions within the course's specialty	1.2 Gather essential and accurate information about patients and their conditions through history-taking, physical examination, and the use of laboratory data, imaging, and other tests	EPA 1: Gather a history and perform a physical examination
Student will demonstrate the ability perform a physical exam with a variety of clinical conditions within the course's specialty	1.2 Gather essential and accurate information about patients and their conditions through history-taking, physical examination, and the use of laboratory data, imaging, and other tests	EPA 1: Gather a history and perform a physical examination
Student will demonstrate the ability prioritize a differential diagnosis and give rationale for prioritization	1.4 Interpret laboratory data, imaging studies, and other tests required for the area of practice	EPA 2: Prioritize a differential diagnosis following a clinical encounter
Student will demonstrate the ability to recommend and interpret diagnostic tests for patients based upon their differential diagnosis	1.2 Gather essential and accurate information about patients and their conditions through history-taking, physical examination, and the use of laboratory data, imaging, and other tests 1.4 Interpret laboratory data, imaging studies, and other tests required for the area of practice	EPA 3: Recommend and interpret common diagnostic and screening tests
Student will demonstrate the ability to create and implement a therapeutic plan based upon their differential diagnosis which includes entering orders and prescriptions.	1.4 Interpret laboratory data, imaging studies, and other tests required for the area of practice 1.5 Make informed decisions about diagnostic and therapeutic interventions based on patient information and preferences, up-to-date scientific evidence, and clinical judgment 1.6 Develop and carry out patient management plans 2.2 Apply established and emerging bio-physical scientific principles fundamental to health care for patients and populations 2.3 Apply established and emerging principles of clinical sciences to diagnostic and therapeutic decision-making, clinical problem-solving, and other aspects of evidence-based health care 2.4 Apply principles of epidemiological sciences to the identification of health problems, risk factors, treatment strategies, resources, and disease prevention/health promotion efforts for patients and populations 2.5 Apply principles of social-behavioral sciences to provision of patient care, including assessment of the impact of psychosocial and cultural influences on health, disease, care seeking, care compliance, and barriers to and attitudes toward care	EPA 4: Enter and discuss orders and prescriptions
Student will demonstrate the ability to document a clinical encounter in the patient record	4.5 Maintain comprehensive, timely, and legible medical records	EPA 5: Document a clinical encounter in the patient record

<p>Student will demonstrate the ability to see multiple patients in a clinical session while maintaining accuracy and thoroughness of their history taking, physical exam skills, ability to create a differential diagnosis and implementation of the clinical plan.</p>	<p>1.2 Gather essential and accurate information about patients and their conditions through history-taking, physical examination, and the use of laboratory data, imaging, and other tests 1.3 Organize and prioritize responsibilities to provide care that is safe, effective, and efficient 1.4 Interpret laboratory data, imaging studies, and other tests required for the area of practice 1.5 Make informed decisions about diagnostic and therapeutic interventions based on patient information and preferences, up-to-date scientific evidence, and clinical judgment 1.6 Develop and carry out patient management plans 3.9 Obtain and utilize information about individual patients, populations of patients, or communities from which patients are drawn to improve care</p>	<p>EPA 1-5</p>
<p>Student will demonstrate the ability provide a concise yet pertinent oral presentation of a clinical encounter</p>	<p>4.2 Communicate effectively with colleagues within one's profession or specialty, other health professionals, and health related agencies 4.3 Work effectively with others as a member or leader of a health care team or other professional group 8.5 Demonstrate trustworthiness that makes colleagues feel secure when one is responsible for the care of patients 8.7 Demonstrate self-confidence that puts patients, families, and members of the health care team at ease</p>	<p>EPA 6: Provide an oral presentation of a clinical encounter</p>
<p>Student will demonstrate the ability to investigate clinical questions and apply evidence they obtained from the literature to patient care.</p>	<p>2.1 Demonstrate an investigatory and analytic approach to clinical situations 3.6 Locate, appraise, and assimilate evidence from scientific studies related to patients' health problems 3.7 Use information technology to optimize learning</p>	<p>EPA 7: Form clinical questions and retrieve evidence to advance patient care</p>
<p>Student will participate in the patient handover process to responsibly transition care</p>	<p>1.3 Organize and prioritize responsibilities to provide care that is safe, effective, and efficient</p>	<p>EPA 8: Give and receive a patient handover to transition care responsibility</p>
<p>Student will demonstrate the ability to collaborate as a member of an interprofessional team</p>	<p>3.8 Participate in the education of patients, families, students, trainees, peers, and other health professionals 4.2 Communicate effectively with colleagues within one's profession or specialty, other health professionals, and health related agencies</p>	<p>EPA 9: Collaborate as a member of an interprofessional team</p>

Course Design

The Acting Intern on this elective will be assigned to a single Transplant surgery service, in which he/she will integrate for the entire four-week clinical experience. The knowledge, skills and attitudes expected on this elective are delineated below.

I. Communication

1. **Knowledge.** Acting Interns should demonstrate knowledge of:
 - a. Guidelines governing patient confidentiality regarding written communication and verbal communication with patient and family members
 - b. The importance of cultural issues governing health care decision making by patients
2. **Skills.** Acting Interns should demonstrate the ability to:
 - a. Communicate with patients and patient's family members
 - b. Summarize the reason for patient admissions and rationale for the clinical plan
 - c. Demonstrate the ability to present oral and written summaries of patients to members of the health care team
3. **Attitudes and professional behavior.** Acting Interns should demonstrate the ability to effectively and professionally communicate with physician and non-physician members of the health care team and consultants

II. Coordination of Care

1. **Knowledge.** Acting Interns demonstrate knowledge of:
 - a. How to contact members of the health care team, consultants, and other hospital personnel
 - b. How to transfer care throughout a patient's hospitalization including end of day and end of service coverage
2. **Skills.** Acting Interns should be able to:
 - a. Realize when consultant care is needed and utilize appropriate consultants
 - b. Cooperate with physician and non-physician members of the health care team including nursing staff, physician assistants and nurse practitioners, social workers, therapists, pharmacists, nutrition support staff, discharge planners and others as appropriate
 - c. Identify housestaff on-call and communicate transfer of patient's care responsibilities to other housestaff (e.g. "sign out") when transfer of patient care duties is required
 - d. Demonstrate proficiency in coordinating a comprehensive and longitudinal patient care plan
 - e. Communicate plan with outpatient health care provider and community resources when necessary, arranging for appropriate follow-up
3. **Attitudes and professional behavior.** Acting Interns should demonstrate:
 - a. Respect for all members of the health care team
 - b. Attributes of responsibility, dependability and patient respect

III. Information Management

1. **Knowledge.** Acting Interns should demonstrate knowledge of:

- a. How to access the clinical information system in use at their hospital
 - b. How “panic values” are communicated from the hospital laboratory to the responsible intern
 - c. The necessity for a systematic method to track clinical/laboratory/radiologic data
 - d. Patient confidentiality regulations governing medical records and clinical information
2. **Skills.** Acting Interns should demonstrate the ability to:
 - a. Prioritize tasks for daily patient care in order to efficiently utilize time
 - b. Document in an organized and efficient manner – admission, daily progress, transfer, on-call and discharge documents/notes
 - c. Systematically organize daily tasks and be able to prioritize effectively
- IV. Demonstrate the ability to access evidence-based medicine to solve clinical problems**
- Procedures
1. **Knowledge.** Acting Interns should be able to describe:
 - a. The indications, contraindications, risks and benefits of commonly performed procedures as appropriate to the particular service
 - b. How the information obtained from these procedures will enhance the patient’s care
 - c. How to assess patients’ competence to provide informed consent for a procedure
 - d. Potential procedure related risks to the operator and the need for universal precautions
 2. **Skills.** Acting Interns should be able to:
 - a. Recognize clinical situations where one or more procedures are indicated
 - b. Explain the rationale, risks and benefits of the procedure to the patient
 - c. Obtain and document informed consent
 - d. Perform, with supervision, the appropriate procedure
 - e. Write a procedure note
 3. **Attitudes and professional behavior.** Acting Interns should demonstrate respect for patient autonomy and the principles of informed consent

Working Hours

Medical students are not allowed to work more than **80 hours per week** and should have at least **1 out of every 7 days off work**. If you find yourself working more than that, contact the A.I. director and coordinator immediately.

MCOM students are held to the same work hour guidelines as residents, per ACGME guidelines:

- Students are limited to a maximum of 80 duty hours per week including in-house call, *averaged* over four weeks.
- Students must be given one day out of seven free from all clinical and educational responsibilities, *averaged* over four weeks.
- Students cannot be scheduled for in-house call more than once every three nights, *averaged* over four weeks.
- Students may not work more than 28 consecutive hours.

- Students should be given at least ten hours for rest and personal activities between daily duty periods and after in- house call.
- Students, residents, and faculty are not permitted to allow/require deviation from the above rules.
- **Holidays**
 - Thanksgiving: shall be observed beginning at 6pm on the Wednesday before Thanksgiving and ending on Sunday evening; these count as days off.
 - Students are not required to report to elective over the university winter break. In rare instances, students may opt to work over winter break to make up for any absences.
 - Other university holidays (e.g. Independence Day, Labor Day, Memorial Day, Martin Luther King Day) shall be treated like weekend days, on which students may be expected to work or be on call.

Where to Report / Who to Contact

Where to report and who to contact varies from rotation to rotation and from week to week. Contact the course coordinator 1-2 weeks prior to your start date to find out who your resident point of contact will be.

Locations

Efforts will be made to place the student on their desired service for their elective, if possible. The following services are available for elective selection:

- | | | |
|-------------------------------------|---|------------------|
| ➤ Tampa General Hospital | 1 Tampa General Cir
33606 | Tampa, FL |
| ➤ James A. Haley VA Hospital | 13000 Bruce B Downs Blvd
33612 | Tampa, FL |

Dress Code & Scrub Wear

Elective students are required to dress professionally, either in professional dress attire or in professional looking scrubs, at all times. When in the operating room, surgical scrubs will be provided by the hospital. Professional attire for men includes dress shirts, ties, slacks, belts, and closed-toe dress shoes. Professional attire for women includes dresses or blouses with either dress pants or skirts and closed-toe dress shoes.

Jeans, shorts, short skirts, t-shirts, sandals and tennis shoes are not acceptable at any time.

These dress code requirements are mandated without exception by the Elective Director, regardless of any other allowances by residents, preceptors, or faculty.

Note: Until further notice, the dress code has been altered during the COVID-19 outbreak to include the following rules:

- All clothing should be washable daily. Do not wear ties or coats to clinic. **Do not wear your white coats until instructed to do so.**
- Scrubs that are “professional looking” and in solid, dark colors (dark blue, dark green, black, brown, etc.) are acceptable for rounds.
- Identification badges should always be visible since white coats are not allowed.
- Check with your team about how you should dress for clinic.
- Masks should be worn at all times. If you are wearing a reusable mask, you should wash it daily.

Weekly Educational Conferences

Department of Surgery Morbidity & Mortality Conference

7am – 8am (Microsoft Teams) The purpose of this educational conference is to focus on patient safety improvement, effective communication and teamwork, epidemiology of patient injuries and medical errors, medical injuries, vigilance, attention and fatigue, checklists and inspections, automation, technological processes, and the psychological factors in human error and reporting systems. It is an integral part of the surgical teaching program. Acting Interns are expected to listen and learn during M&M.

Department of Surgery Grand Rounds

8am – 9am (Microsoft Teams) This conference is designed to help the department keep up-to-date in evolving areas of surgery and medicine. Presentations will be given about various current topics and often members from other departments or disciplines are invited to lecture. Acting Interns are expected to listen and learn during Grand Rounds.

Department of Surgery Resident Education

9am – 10am (Microsoft Teams) Medical students are invited to attend the residents’ weekly education meeting, which helps surgical residents prepare for board examinations.

Recommended Reading for the Elective

- Essentials of General Surgery, 5th edition; Peter F. Lawrence; Williams & Wilkens: 2013
- Essentials of Surgical Specialties, 3rd edition; Peter F. Lawrence; Williams & Wilkens: 2007
- Obstetrics and Gynecology, 7th edition; Charles R. Beckmann; Williams & Wilkens: 2009

**Note: these textbooks are held on course reserve at the Shimberg Health Sciences Library on USF campus. Please consult with the librarians at the front desk to check out.*

FINAL GRADING RUBRIC (H, PC, P, F OR S, U)

Final grade of the *Surgical Transplant* course is determined as follows:

The student's final grade is determined solely by clinical faculty evaluations which is completed at the end of the 4-week experience. Students should solicit mid-rotation feedback from their resident and attending at the completion of the first 2 weeks of the experience. No feedback form is required; however, this will facilitate discussion of competencies met or issues that need to be addressed prior to the completion of the rotation.

FINAL GRADING AND RIME RUBRIC (H, PC, P, R, I, F)

Honors Eligibility

In order to be eligible for a grade of honors, a student must achieve ALL of the following:

- Consistently receives outstanding clinical evaluations [mostly and consistently above expectations] from the residents and faculty
- Receives a final RIME scoring of at least a manager.
- Consistently demonstrates professional behavior, including attending all scheduled activities except in the event of an excused absence.
- Completes all portfolio assignments on time
- *Failure to adhere to the MCOM Honor Code will make one ineligible for a grade of H*
- After a holistic review, the A.I. Director agrees that the student's performance has merited an Honors grade.

Pass with Commendation Eligibility

In order to be eligible for a grade of pass with commendation, a student must achieve ALL of the following:

- Consistently receive above average clinical evaluations [mostly above expectations] from the residents and faculty
- Receives a final RIME scoring of at least Interpreter
- Consistently demonstrates professional behavior, including attending all scheduled activities except in the event of an excused absence.
- Completes all portfolio assignments on time
- *Failure to adhere to the MCOM Honor Code will make one ineligible for a grade of PC*
- After a holistic review, the A.I. Director agrees that the student's performance has merited a PC grade.

Pass Eligibility

In order to be eligible for a grade of pass, a student must achieve All of the following:

- Consistently receive average clinical evaluations [consistently meets expectations] from the residents and faculty
- Receives a final RIME scoring of at least reporter with evidence of some interpreter skills
- Consistently demonstrates professional behavior, including attending all scheduled activities except in the event of an excused absence.
- Completes all portfolio assignments on time
- *Failure to adhere to the MCOM Honor Code will make one ineligible for a grade of P*

- After a holistic review, the A.I. Director agrees that the student's performance has merited a P grade.

Remediation

A student will receive a grade of remediation if any of the following occur:

- Consistently receives clinical evaluations from the residents and faculty which are below average [below or mostly meets expectations] in a particular area (ie H&P, documentation).
- The student fails to hand in their completed assignments without being granted an extension for the assignments.
- Receives a final RIME score of reporters without evidence of advancement to interpreter.
- Student has a focal area of unprofessionalism

Incomplete

A student will receive an incomplete grade if any of the following occur:

- The student has assignments which are still due to the course director, but the student proactively asked for and received an extended due date.
- The student fails to make up any absent sessions

Fail

A student will receive a grade of fail if any of the following occur:

- Consistently receives clinical evaluations from the residents and faculty which below average [below or mostly meets expectations] across multiple areas.
- The student fails to make up any absent sessions after one month of the conclusion of the rotation
- The student consistently demonstrates unprofessional behavior

The Surgical RIME Score

Acting Interns are expected to be performing as Managers on the RIME score. Consistent demonstration of all elements are required for each level and encounter. Each level requires completion of all previous levels.

REPORTER

- Gathers history information
 - Independently
 - Accurately
- Performs physical exams
 - Independently
 - Accurately
- Oral presentations
 - Pertinent
 - Uses appropriate terminology
- Written documentation
 - Pertinent for type of documentation
 - Uses appropriate terminology

INTERPRETER

- Creates a differential diagnosis of a new common surgical problem
 - Three reasonable explanations
 - Independently derived
 - Prioritized
- Interprets common diagnostic tests including laboratory and radiologic exams
- Recognizes a patient requiring urgent or emergent care
 - Requiring increased level of care or urgent operative management

MANAGER

- Recommends additional diagnostic options
 - Reasonable
 - Considers risks/benefits
 - Patient centered
- Recommends possible therapies
 - Reasonable
 - Considers risks/benefits
 - Patient centered
- *NO INFORMED CONSENT: Students cannot provide informed consent due to inappropriate considerations of risks, benefits and alternative therapies, including operative techniques*

EDUCATOR

- Independently collaborates as a member of the interprofessional healthcare team
 - Communicates with nursing staff to deliver healthcare plan and advance patient care
 - Communicates with other treatment teams to deliver healthcare plan and advance patient care
- Cites evidence of new or alternative therapies or tests relevant to specific patient cases
 - Disseminates acquired knowledge to healthcare team
 - Independently interprets acquired knowledge to educate patients
- Recognizes patient support persons as a treatment entity

Professionalism:

Any breach of the professionalism as described in the MCOM handbook including but not limited to the professionalism values section and the social media participation guidelines, may be grounds for remediation or failure of the course as determined by the course director in consultation with the Assistant Dean for the Clinical Curriculum.

GRADE APPEALS:

A student may appeal a course grade if the student has evidence that the grade was assigned in an erroneous manner. Within five (5) school days after the receipt of the grade, the student may appeal

in writing to the responsible Course director any assigned grade that they dispute. See handbook for details of the process.

Students are expected to review and be familiar with the student handbook in general.

<https://health.usf.edu/medicine/mdprogram/student-affairs/handbook>

In particular for this course students are expected to review the following areas in the handbook for specific details:

MCOM Clinical Years Monitoring Student Time Guideline

COM students are held to the same work hour guidelines as are residents, per ACGME guidelines. Students are limited to a maximum of 80 duty hours per week including in-house call, *averaged* over four weeks. Students must be given one day out of seven free from all clinical and educational responsibilities, *averaged* over four weeks. Students cannot be scheduled for in-house call more than once every three nights, *averaged* over four weeks. Students may not work more than 28 consecutive hours. Students should be given at least ten hours for rest and personal activities between daily duty periods and after in-house call. Students, residents, and faculty are not permitted to allow/require deviation from the above rules.

MCOM Medical Student Clinical Supervision Guideline

Medical students may not provide care in an unsupervised fashion. Supervisors must either hold a faculty appointment or be supervised in their teaching and assessment role by an individual who has a faculty appointment. This may include residents, fellows, and other licensed health professional faculty supervising an activity within their scope of expertise or practice. Medical students may be supervised at one of two broad levels: 1) Direct observation or 2) Immediately available indirect supervision.

Attendance

During the clinical years the student's responsibilities lie within the individual course. Attendance within a given course is a demonstration of attitude and professional behavior. This behavior impacts all members of the healthcare team, including fellow students and patients. Any absence from the course may have a direct impact on student performance, the clinical experience, the evaluation of professionalism, the overall grade, and the successful completion of the clerkship. Students who miss scheduled hours are expected to acquire the same level of competency as other students in the clerkship. Lectures, reading assignments and clinical duties will not be re-created or offset to accommodate any absences. **All absences are at the discretion of the course director. Students should follow the procedure guidelines for obtaining an excused absence outlined in the handbook.** The course director will use the guidelines outlined in the student handbook when determining if the absence is excused.

Residency Interviews

Students are expected to schedule residency interviews during months that they are not scheduled to have a clinical course. Student may miss up to 2 days for interviews, but those days must be made up.

Mistreatment Guideline and Procedure

USF Health's Morsani College of Medicine is committed to assuring a safe, encouraging, and supportive learning environment that reflects commitments to professionalism, respect, diversity, and virtues such as integrity, compassion, and kindness. All MCOM faculty and staff are expected to conduct themselves in a professional manner and contribute to creation of a culture that is supportive of learning. Mistreatment, bullying, discrimination, harassment, and sexual harassment are prohibited at MCOM. The student mistreatment policy, in accordance with LCME standard 3.6, ensures that concerns about the learning environment are promptly dealt with and resolutions reached in a fair and just manner. The College forbids any retaliatory action against students who present grievances in good faith.

The MCOM Student Mistreatment policy aims to safeguard medical students from mistreatment by any faculty member or staff associated with MCOM, including clerkship directors, attending physicians, residents, and other medical students by:

- educating members of MCOM about student mistreatment;
- prohibiting medical student mistreatment by anyone associated with MCOM;
- encouraging the early identification of medical student mistreatment as a preventative measure;
- identifying individuals to whom medical students can report mistreatment;
- requiring those who receive complaints regarding student mistreatment to report the complaint to the appropriate administrator;
- providing a confidential system for reporting mistreatment;
- assuring confidentiality to the fullest extent possible;
- assuring that all reports of mistreatment will be thoroughly and promptly addressed;
- providing an avenue for corrective action.

Reports of mistreatment will preferably be addressed within an informal framework when appropriate, but formal procedures are available for use when necessary.

MCOM is committed to preventing mistreatment of medical students through education of the MCOM community. The policy and related procedures will be disseminated among MCOM on an annual basis. Additionally, MCOM will periodically use varying methods (e.g., email, workshops, orientations) to inform medical students, faculty, and staff about medical student mistreatment and the MCOM policy on addressing mistreatment.

Professionalism Guidelines and Procedures

Professionalism is grounded in the fundamental values of honesty, integrity and fairness and is an essential part of the practice of medicine. Students are expected to display and will be examined by these exemplary behaviors. Students are expected to uphold their responsibility to

their profession, and to appreciate that behaviors outside of the classroom and clinical learning environments can impact their progression through the program.

In addition to behavioral standards related to the medical profession, students are expected to uphold the principles of honor set forth by the University of South Florida in The Commitment to Honor code.

Attitudes or behaviors inconsistent with compassionate care; refusal by, or inability of, the student to participate constructively in learning or patient care; derogatory attitudes or inappropriate behaviors directed at patients, peers, faculty or staff; misuse of written or electronic patient records; or other unprofessional conduct can be grounds for dismissal and will be reviewed by the APRC.

Title IX:

Title IX provides federal protections for discrimination based on sex, which includes discrimination based on pregnancy, sexual harassment, and interpersonal violence. In an effort to provide support and equal access, USF has designated all faculty (TA, Adjunct, etc.) as Responsible Employees, who are required to report any disclosures of sexual harassment, sexual violence, relationship violence or stalking. The Title IX Office makes every effort, when safe to do so, to reach out and provide resources and accommodations, and to discuss possible options for resolution. Anyone wishing to make a Title IX report or seeking accommodations may do so online, in person, via phone, or email to the Title IX Office. For information about Title IX or for a full list of resources please visit: <https://www.usf.edu/title-ix/gethelp/resources.aspx>. Students who aren't sure what to do, should contact victim advocacy. Call (813-974-5756), email (va@usf.edu) or come to the office (SVC 2057) to schedule an appointment. If students have urgent advocacy needs while the office is closed, an advocate is available through our 24/7 Victim Helpline at (813) 974-5757.

Diversity, Equity, and Inclusion Statement:

The vision of the Morsani College of Medicine (MCOM) Student Diversity and Enrichment programs is to encourage and promote an environment that welcomes and embraces diversity in the student body. We diligently ensure that all students feel supported and accepted in order to optimize their educational experience. USF MCOM defines diversity not solely limited to race and ethnicity, but also encompass talents, life skills and special attributes.

Should you need further assistance or more information about our many USF Health Morsani College of Medicine's diversity-driven events, outreach, and support programs, please contact the Office of Student Diversity and Enrichment via:

- Email or Teams chat: Osde@usf.edu
- The OSDE contact page <https://health.usf.edu/medicine/mdprogram/offices/osde>

More information about USF Health and its commitment to diversity [can be found here](#).

For any disputes in which a student has allegedly violated USF policies or rules, please contact [The Office of the Student Ombudsman](#), at (813) 974-0835 or [Student Conduct and Ethical Development](#), ALN 109, (813) 974-9443 for assistance.

Evaluation Compliance Guideline

Student feedback is an essential component for continuous quality improvement of our teaching faculty and curriculum development. Morsani College of Medicine (MCOM) has implemented the following guidelines for all students currently enrolled:

1. Students will be required to complete a minimum of 80% of the evaluations assigned to them
2. All evaluations should be completed within 25 days upon receipt
3. Students may suspend evaluations only given the following circumstances:
 - a. The evaluation was assigned in error
 - b. The student did not spend enough time with an educator to properly evaluate them
4. At most students will be permitted to suspend up to 20% of their evaluations. Once a student exceeds a 20% suspension rate their evaluations will be reviewed on a case by case basis
5. Comments provided on evaluations should be constructive, respectful, and made in a professional manner

Please note that levels of anonymity are strictly enforced and fail safes are put into place to ensure a student cannot be identified from their evaluation.

Student evaluation completion compliance rates will be monitored on a quarterly basis and any student found to be out of compliance at the time will be required to attend a mandatory one hour session to complete any pending evaluations. Students will receive a notice via email that they are required to attend the mandatory session to complete their evaluations. Failure to complete evaluations and/or attend the mandatory sessions may result in the following disciplinary actions:

1. A written notice from the Associate Dean of Undergraduate Medical Education
2. A mandatory meeting with the Associate Dean of Undergraduate Medical Education
3. Appearance before the Academic Performance Review Committee (APRC)

**Above is a summary of the USF Student Evaluation Guideline. Please review MCOM's Student Handbook for the full text of this guideline.*

Sessions Recording Guideline

In this class, software will be used to record live class lectures and discussions. As a student in this class, your participation in live class discussions will be recorded. These recordings will be made available only to students enrolled in the class, to assist those who cannot attend the live session or to serve as a resource for those who would like to review content that was presented. Recording may be used in subsequent semester for instructional purposes in necessary. Participation in the sessions is considered consent for recording. In courses in which

video of students might be captured due to online software being used, students who prefer to participate via audio only will be allowed to disable their video camera so only audio will be captured. A student's use of video during the session is considered consent for the video to be recorded and used as previously described.

This option to disable video will not apply to video proctored exams. Please discuss recording options with your instructor. Students may use the recordings as a resource to review content. Copying or distributing the video recordings by students is prohibited and considered a professionalism violation.

Student Accessibility and Accommodation

University of South Florida Morsani College of Medicine (MCOM) is committed to providing equitable access to learning opportunities to students with documented disabilities (e.g., mental health, attentional, learning, chronic health, sensory, or physical).

To ensure access to this class, and program, please contact Student Accessibility Services to engage in a confidential conversation about the process for requesting reasonable accommodations in the classroom and clinical settings.

Accommodations are not provided retroactively. Students are encouraged to register with Student Accessibility Services as soon as they begin their program. The University of South Florida Morsani College of Medicine encourages students to access all resources available through Student Accessibility Services for consistent support and access to their programs. More information can be found online at [Student Accessibility Services](#).

LINK TO UNIVERSITY REGULATIONS AND POLICIES

<http://regulationspolicies.usf.edu/policies-and-procedures/pdfs/guideline-11-008.pdf>

MCOM Program Objectives

1. Patient Care

Provide patient-centered care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health

- 1.1 Perform all medical, diagnostic, and surgical procedures considered essential for the area of practice
- 1.2 Gather essential and accurate information about patients and their conditions through history-taking, physical examination, and the use of laboratory data, imaging, and other tests
- 1.3 Organize and prioritize responsibilities to provide care that is safe, effective, and efficient
- 1.4 Interpret laboratory data, imaging studies, and other tests required for the area of practice
- 1.5 Make informed decisions about diagnostic and therapeutic interventions based on patient information and preferences, up-to-date scientific evidence, and clinical judgment
- 1.6 Develop and carry out patient management plans
- 1.7 Counsel and educate patients and their families to empower them to participate in their care and enable shared decision-making
- 1.8 Provide appropriate referral of patients including ensuring continuity of care throughout transitions between providers or settings, and following up on patient progress and outcomes

- 1.9 Provide health care services to patients, families, and communities aimed at preventing health problems or maintaining health
- 1.10 Provide appropriate role modeling
- 1.11 Perform supervisory responsibilities commensurate with one's roles, abilities, and qualifications

SELECT 1.12 Perform values-based patient- centered comprehensive assessment, diagnosis and patient management, utilizing shared decision making in care of the patient.

2. Knowledge for Practice

Demonstrate knowledge of established and evolving biomedical, clinical, epidemiological and social-behavioral sciences, as well as the application of this knowledge to patient care

- 2.1 Demonstrate an investigatory and analytic approach to clinical situations
- 2.2 Apply established and emerging bio-physical scientific principles fundamental to health care for patients and populations
- 2.3 Apply established and emerging principles of clinical sciences to diagnostic and therapeutic decision-making, clinical problem-solving, and other aspects of evidence-based health care
- 2.4 Apply principles of epidemiological sciences to the identification of health problems, risk factors, treatment strategies, resources, and disease prevention/health promotion efforts for patients and populations
- 2.5 Apply principles of social-behavioral sciences to provision of patient care, including assessment of the impact of psychosocial and cultural influences on health, disease, care seeking, care compliance, and barriers to and attitudes toward care
- 2.6 Contribute to the creation, dissemination, application, and translation of new health care knowledge and Practices

SELECT 2.7 Examine national and international health systems, policy and finance.

3. Practice-Based Learning and Improvement

Demonstrate the ability to investigate and evaluate one's care of patients, to appraise and assimilate scientific evidence, and to continuously improve patient care based on constant self-evaluation and life-long learning

- 3.1 Identify strengths, deficiencies, and limits in one's knowledge and expertise
- 3.2 Set learning and improvement goals
- 3.3 Identify and perform learning activities that address one's gaps in knowledge, skills, and/or attitudes
- 3.4 Systematically analyze practice using quality improvement methods, and implement changes with the goal of practice improvement
- 3.5 Incorporate feedback into daily practice
- 3.6 Locate, appraise, and assimilate evidence from scientific studies related to patients' health problems
- 3.7 Use information technology to optimize learning
- 3.8 Participate in the education of patients, families, students, trainees, peers, and other health professionals
- 3.9 Obtain and utilize information about individual patients, populations of patients, or communities from which patients are drawn to improve care
- 3.10 Continually identify, analyze, and implement new knowledge, guidelines, standards, technologies, products, or services that have been demonstrated to improve outcomes

SELECT 3.11 Demonstrate advanced competency in self- assessing knowledge gaps and setting improvement goals, then perform activities to accomplish these.

SELECT 3.12 Analyze a health care environment or system and recommend changes to improve patient outcomes.

4. Interpersonal and Communication Skills

Demonstrate interpersonal and communication skills that result in the effective exchange of information and collaboration with patients, their families, and health professionals

- 4.1 Communicate effectively with patients, families, and the public, as appropriate, across a broad range of socioeconomic and cultural backgrounds
- 4.2 Communicate effectively with colleagues within one's profession or specialty, other health professionals, and health related agencies

- 4.3 Work effectively with others as a member or leader of a health care team or other professional group
- 4.4 Act in a consultative role to other health professionals
- 4.5 Maintain comprehensive, timely, and legible medical records
- 4.6 Demonstrate sensitivity, honesty, and compassion in difficult conversations, including those about death, end of life, adverse events, bad news, disclosure of errors, and other sensitive topics
- 4.7 Demonstrate insight and understanding about emotions and human responses to emotions that allow one to develop and manage interpersonal interactions

SELECT 4.8 Demonstrate advanced team leadership skills that enhance team functioning, the learning environment, and/or the health care system.

SELECT 4.9 Communicate effectively and sensitively with patients, adjusting language and style in order to incorporate their knowledge, values, and culture.

5. Professionalism

Demonstrate a commitment to carrying out professional responsibilities and an adherence to ethical principles

- 5.1 Demonstrate compassion, integrity, and respect for others
- 5.2 Demonstrate responsiveness to patient needs that supersedes self-interest
- 5.3 Demonstrate respect for patient privacy and autonomy
- 5.4 Demonstrate accountability to patients, society, and the profession
- 5.5 Demonstrate sensitivity and responsiveness to a diverse patient population, including but not limited to diversity in gender, age, culture, race, religion, disabilities, and sexual orientation
- 5.6 Demonstrate a commitment to ethical principles pertaining to provision or withholding of care, confidentiality, informed consent, and business practices, including compliance with relevant laws, policies, and regulations

SELECT 5.7 Demonstrate advanced ability in all of the above [Core Professionalism objectives], and the ability to inspire and instruct peers in these areas

6. Systems-Based Practice

Demonstrate an awareness of and responsiveness to the larger context and system of health care, as well as the ability to call effectively on other resources in the system to provide optimal health care

- 6.1 Work effectively in various health care delivery settings and systems relevant to one's clinical specialty
- 6.2 Coordinate patient care within the health care system relevant to one's clinical specialty
- 6.3 Incorporate considerations of cost awareness and risk-benefit analysis in patient and/or population-based care
- 6.4 Advocate for quality patient care and optimal patient care systems
- 6.5 Participate in identifying system errors and implementing potential systems solutions
- 6.6 Perform administrative and practice management responsibilities commensurate with one's role, abilities, and qualifications

SELECT 6.7 Show advanced ability to incorporate knowledge of health systems and cost of care into medical decisions.

SELECT 6.8 Strategize, practice, and advocate for quality improvement in patient care and health care systems. SECECT 6.9 Integrate knowledge of healthcare systems into individual patient care.

7. Interprofessional Collaboration

Demonstrate the ability to engage in an interprofessional team in a manner that optimizes safe, effective patient- and population-centered care

- 7.1 Work with other health professionals to establish and maintain a climate of mutual respect, dignity, diversity, ethical integrity, and trust
- 7.2 Use the knowledge of one's own role and the roles of other health professionals to appropriately assess and address the health care needs of the patients and populations served
- 7.3 Communicate with other health professionals in a responsive and responsible manner that supports the maintenance of health and the treatment of disease in individual patients and populations
- 7.4 Participate in different team roles to establish, develop, and continuously enhance interprofessional teams to provide patient- and population-centered care that is safe, timely, efficient, effective, and equitable

SELECT 7.5 Demonstrate advanced team competencies in assessment and coaching in order to achieve a

common patient-centered end.

8. Personal and Professional Development

Demonstrate the qualities required to sustain lifelong personal and professional growth

- 8.1 Develop the ability to use self-awareness of knowledge, skills, and emotional limitations to engage in appropriate help-seeking behaviors
- 8.2 Demonstrate healthy coping mechanisms to respond to stress
- 8.3 Manage conflict between personal and professional responsibilities
- 8.4 Practice flexibility and maturity in adjusting to change with the capacity to alter one's behavior
- 8.5 Demonstrate trustworthiness that makes colleagues feel secure when one is responsible for the care of patients
- 8.6 Provide leadership skills that enhance team functioning, the learning environment, and/or the health care delivery system
- 8.7 Demonstrate self-confidence that puts patients, families, and members of the health care team at ease
- 8.8 Recognize that ambiguity is part of clinical health care and respond by utilizing appropriate resources in dealing with uncertainty

SELECT 8.9 Demonstrate emotional intelligence by showing awareness of strengths, weaknesses, and idiosyncrasies of self, team, and systems, and then show the ability to modulate one's behavior to positively affect each of these.

SELECT 8.10 Describe the basic competencies necessary for effectiveness as a potential future physician and leader.

SELECT 8.11 Implement the professional and personal development process.

SELECT 8.12 Actively participate in one's own personal and professional development through individual and group coaching.

MCOM Clinical – Specialty Track Phase Objectives

Track EPA 1.1 Student will demonstrate the ability to gather a history

Track EPA 1.2 Student will demonstrate the ability perform a physical exam

Track EPA 2 Student will demonstrate the ability prioritize a differential diagnosis following a clinical encounter

Track EPA 3: Student will demonstrate the ability to recommend and interpret common diagnostic tests

Track EPA 4: Student will demonstrate the ability to enter and discuss orders and prescriptions

Track EPA 5.1: Student will demonstrate the ability to document a clinical encounter in the patient record

Track EPA 5.2: Student will demonstrate the ability to see multiple patients in a clinical session while maintaining accuracy and thoroughness of their history taking, physical exam skills, ability to create a differential diagnosis, implementation of the clinical plan and documentation.

Track EPA 6: Student will demonstrate the ability provide an oral presentation of a clinical encounter

Track EPA 7: Student will demonstrate the ability to form clinical questions and retrieve evidence to advance patient care

Track EPA 8: Student will demonstrate the ability to give or receive a patient handover to transition care responsibly

Track EPA 9: Student will demonstrate the ability to collaborate as a member of an interprofessional team

Track EPA 10: Student will demonstrate the ability to recognize a patient requiring urgent or emergent care and initiate evaluation and management

Track EPA 11: Student will demonstrate the ability to obtain consent for tests or procedures

Track EPA 12: Student will demonstrate the ability to perform procedures appropriate for their track specialty