FAMILY MEDICINE CLERKSHIP (BCC 7175) SYLLABUS

2010-2011

EDUCATION/CLERKSHIP DIRECTORS PARTICIPATING IN CLERKSHIP

Suzanne Harrison, M.D., Education Director, Main Campus
Nancy Baker, M.D., Fort Pierce Regional Campus
Nicole Bentze, D.O., Sarasota Regional Campus
George Bernardo, M.D., Daytona Beach Regional Campus
Amanda McBane, M.D., Tallahassee Regional Campus
Dennis Mayeaux, M.D., Pensacola Regional Campus
Douglas Meuser, M.D., Orlando Regional Campus

Family physician clerkship faculty have been recruited and trained at each regional campus, and at the Thomasville, Marianna and Immokalee sites.

COURSE DESCRIPTION

The Family Medicine Clerkship is a six-week, community-based, clerkship. Students spend at least 8 patient care sessions each week providing clinical care to patients under the direct supervision of a practicing family physician/clerkship faculty.

The educational goals of the Family Medicine Clerkship include:

1. To familiarize each student with the medical content and principles that define the discipline of family medicine;
2. To provide opportunities for each student to apply this content knowledge and these principles in a supervised family medicine clinical experience; and,
3. To expose each student to an experienced and competent family physician role model.

The educational content of the Family Medicine Clerkship’s clinical experience emphasizes improving the student’s ability to recognize, evaluate and manage ambulatory patients with common clinical problems/conditions.

In addition to the clinical experience, students document their patient encounters via the CDCS system, complete two (2) required clerkship projects and employ self-directed and faculty-directed learning activities to achieve clerkship objectives.

Sample Week Schedule:

NOTE: The Doctoring 3 curriculum runs concurrently with all required third-year clerkships, and includes a Longitudinal Preceptorship* (one half-day every week) and a weekly half-day didactic session** held at the regional campus.
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<td>Doctoring 3:</td>
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**RECOMMENDED TEXTBOOK**

*Fundamentals of Family Medicine: The Family Medicine Clerkship Textbook*

There is no required textbook for this clerkship. Reading of the medical literature and/or medical textbooks is strongly encouraged. What the student reads should be dictated by his/her personal education needs and the care needs of patients with whom the student is involved.

**TEACHING AND LEARNING METHODS**

To insure comparable learning experiences for Family Medicine Clerkship students, a standardized curriculum is employed at all clerkship sites and student experiences are monitored via the CDCS system reports. **Students must record a minimum of 100 patient visits during the first 5 weeks of the Clerkship.** (Though students may enter CDCS data during the sixth (final) week of the Clerkship, data entry during this last week is not required.)

The Family Medicine Clerkship begins with an orientation to the Clerkship conducted by the regional campus Clerkship Director. The Clerkship Director also will meet with the students near the end of the clerkship for a terminal debriefing session. These orientation and debriefing sessions are in addition to weekly meetings with the Clerkship Director. At these weekly meetings, the Clerkship Director reviews CDCS data to insure that clerkship objectives are being met. If it appears that students are not meeting minimum requirements for the numbers of patients or the types of problems expected, the Clerkship Director—working with the clerkship faculty and the student—identifies an appropriate alternative educational activity (usually, a targeted reading) for the student.

The Clerkship Director also observes the student interacting with patients. The purpose of this direct observation is to evaluate the student’s patient interaction/communication skills, medical interviewing skills, physical exam skills, verbal presentation skills, clinical reasoning skills and clinical informatics skills. Formative feedback is provided to the
Student following these observations. Each Clerkship student is observed at least once by
the Clerkship Director during the Clerkship. When concerns about student performance
are noted either by the Clerkship Director or the Clerkship Faculty, additional student
observations are completed.

Student learning occurs primarily via a “structured clinical apprenticeship” (supervised
experiential learning). Students learn by actively participating in patient care activities.
This “active learning” is a key component of the Clerkship, and the student’s self-
reported “level of care” is routinely monitored by both the Clerkship Director and
Education Director. **Students are expected to have at least 75% of patient encounters
at the “moderate” and/or “full” level of care.**

Clerkship Faculty provide informal, patient-triggered teaching with students. This
teaching emphasizes appropriate clerkship content and often requires the student to locate
and read relevant information. Emphasis is placed on helping the student develop these
“life-long learning” skills. In the context of the Family Medicine Clerkship, as students
become aware of a personal learning need, they are encouraged to identify, evaluate and
utilize learning resources to meet that need.

**Students must complete two (2) written projects: 1) the Consultation/Referral
Project; and, 2) the Motivational Interviewing Project.**

The Consultation/Referral Project is a self-directed learning activity that requires the
student to analyze and reflect on observations he/she has made about a common patient
care process: consultation/referral.

The Motivational Interviewing Project encourages students to apply the techniques of
Motivational Interviewing when encouraging behavior change in an actual patient, and
then answer a series of questions about the student-patient interaction.

**Both of these projects are explained on the Family Medicine Clerkship Blackboard
site, and all necessary forms and project questions are provided.** Completed projects
may be discussed at the terminal debriefing session, and are reviewed by the Education
Director.

There are no student requirements for after-hours, on-call participation;
nonetheless, students are encouraged to participate in being on call with their
Clerkship Faculty.

Students will adhere to the ACGME rules regarding the workweek, which include
working no more than 80 hours per week, no more than 24 hours continuously,
except an additional 6 hours may be added to the 24 to perform wrap-up duties, and
have at least one of every 7 days completely off from educational activities.
**CLERKSHIP OBJECTIVES**

By the completion of the Family Medicine Clerkship, the student will be able to:

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<th>Clerkship Objective</th>
<th>Assessment Strategy*</th>
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<tr>
<td>1. Demonstrate the ability to obtain accurate and complete information via the patient interview and conduct an appropriate physical examination in the following clinical situations: a) a patient visit to diagnose/treat/manage an acute medical problem; b) a patient visit to diagnose/treat/manage a chronic medical problem; and, c) a patient visit to diagnose/treat/manage a patient presenting with multiple problems.</td>
<td>Clerkship Faculty via end-of-clerkship student assessment; Clerkship Director via direct observation of student.</td>
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<td>2. Demonstrate the ability to apply principles of clinical epidemiology and probabilistic reasoning to develop preliminary assessments/diagnoses and treatment plans.</td>
<td>Clerkship Faculty via end of clerkship student assessment; Clerkship Director via direct observation of student.</td>
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<td>3. Demonstrate familiarity with the common clinical presentations, physical exam findings, appropriate diagnostic tools and evidence-based treatments for each of the following patient problems seen by family physicians. a) Hypertension b) Hyperlipidemia c) Diabetes Mellitus d) Acute URI/Acute Sinusitis e) Low Back Pain f) Mood Disorders, esp., major depressive disorder g) Anxiety Disorders h) Abdominal Pain, undifferentiated i) GERD j) Obesity k) Thyroid disorders l) Degenerative Joint Disease m) Pain, muscle/soft tissue/bursa/tendon n) Ischemic Heart Disease o) Acute cough/Acute Lower Respiratory Infection p) COPD q) Asthma r) Knee pain s) Headache t) Chronic Rhinitis u) UTI</td>
<td>Clerkship Director via CDCS monitoring; Clerkship Faculty via end of clerkship student assessment; NBME subject exam.</td>
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<td>4. Demonstrate familiarity with the common clinical presentations (including, symptoms and physical exam findings), appropriate diagnostic tools and evidence-based treatments for common mental health problems and emotional illnesses seen by family physicians</td>
<td>Clerkship Faculty via end of clerkship student assessment; Clerkship Director via direct observation of student and questioning at debriefing; NBME Subject exam.</td>
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<td>5. Demonstrate the ability to access and apply clinical information from evidence-</td>
<td>Clerkship Faculty via end of</td>
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based electronic resources during a patient encounter.  

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<td><strong>6.</strong> Structure and complete a patient visit using the current recommendations from the United States Preventive Services Task Force (USPSTF).</td>
<td>Clerkship Faculty via end of clerkship student assessment; Clerkship Director via direct observation of student and questioning at debriefing.</td>
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<td><strong>7.</strong> Demonstrate the ability to assess the patient’s current understanding of his/her illness/condition, identify the patient’s most pressing educational needs and implement a “patient education plan” to increase the patient’s knowledge or skills required to manage the illness condition.</td>
<td>Clerkship Faculty via end of clerkship student assessment; Clerkship Director via direct observation of student and questioning at debriefing.</td>
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<td><strong>8.</strong> Using the medical record system available in the clerkship faculty’s office, create progress notes that document at least one example of each of the visit types described in objective #1 (acute medical problem visit, chronic medical problem visit and visit for patient with multiple medical problems) and #6 (preventive services visit) above.</td>
<td>Clerkship Faculty via end of clerkship student assessment; Clerkship Director via direct observation of student and weekly meetings with student.</td>
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<td><strong>9.</strong> Participate in and analyze the process of referral/consultation by: creating a referral/consultation letter, analyzing the process of referral/consultation and determining the characteristics that contribute to a successful referral/consultation.</td>
<td>Education Director via Clerkship Project.</td>
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<td><strong>10.</strong> Articulate those methods/activities utilized by the clerkship faculty to: 1) identify his/her professional educational needs; 2) update his/her professional knowledge/skills; and, 3) integrate that new knowledge/skill into his/her practice.</td>
<td>Clerkship Director via query at debriefing.</td>
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<td><strong>11.</strong> Design a personal education plan to expand his/her general medical knowledge and skills based on both a self-assessment and on the feedback/evaluation the preceptor.</td>
<td>Clerkship Director via query at debriefing.</td>
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<td><strong>12.</strong> Demonstrate awareness of the impact of culture, ethnicity, socioeconomic status, advancing age and gender on the patient’s expression of illness and response to treatment, and demonstrate the ability to incorporate that awareness into patient interactions.</td>
<td>Clerkship Faculty via end of clerkship student assessment; Clerkship Director via direct observation of student.</td>
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<td><strong>13.</strong> Articulate the theoretical and actual benefits of health care that is continuous, comprehensive, coordinated and is provided within the context of family and community.</td>
<td>Clerkship Director via query at debriefing.</td>
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<td><strong>14.</strong> Integrate the process of therapeutic review into each patient encounter, regardless of whether the primary reason for visit is an acute medical condition(s), a chronic medical condition(s) or provision of preventive services.</td>
<td>Clerkship Director via direct observation of student.</td>
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<td><strong>15.</strong> Apply Motivational Interviewing techniques with a patient to encourage behavior change.</td>
<td>Education Director via Clerkship Project.</td>
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**CLERKSHIP EXAM AND GRADING POLICY, ACADEMIC YEAR 2010-2011**

Student grades for required clerkships are calculated using information from the following sources:

- NBME subject examinations, or FSU COM internal clerkship-specific examinations, taken by students at the end of each clerkship,
- FSU COM Clerkship Assessment of Student forms completed by the clerkship faculty at the end of each clerkship,
The Clerkship Director Summaries completed at the end of each clerkship, CDCS reports (see individual clerkship syllabi for data entry requirements), Required clerkship projects and activities, (see individual clerkship syllabi), and, Patient and staff evaluations.

Students are expected to achieve the competencies/objectives for each clerkship as specified in the clerkship syllabus. Depending on the clerkship, the clerkship director, the education director or both working together will monitor and attest to the satisfactory completion of clerkship competencies/objectives.

- Third-year students who do not meet clerkship competencies/objectives must remediate identified deficiencies before advancing to the fourth year curriculum.
- Fourth year students who do not meet clerkship competencies/objectives must remediate identified deficiencies before being permitted to graduate.
- All clerkship students are provided opportunities to assess their performance in non-graded activities and to identify areas of strength and weakness.

Clerkship Grade Considerations:

The NBME subject exam scores and percentiles used to calculate grades are based upon the most recent NBME Academic Year Norms for Examinee Performance that are available at the beginning of an academic year, and do not change during the academic year.

Scores for NBME subject exams taken by third year students and students completing the Advanced Internal Medicine Clerkship in fourth year shall be referenced to national norms from the same quarter during which the clerkship occurred. In the event that a clerkship straddles two quarters, the scores shall be referenced to norms from the earlier of the quarters in which 50% or more of the rotation was completed.

Scores for the subject exam taken by students completing the Advanced Family Medicine Clerkship in fourth year shall be referenced to norms of students in the fourth quarter of their third year.

The Education Director in the appropriate discipline is responsible for reviewing all student assessments and assigning the student’s grade for the clerkship. (For most students, the Education Director will assign the student’s grade according to the Grading Standards described below. If extenuating circumstances exist, the Education Director may request a deviation from the established standards by presenting the reason for the proposed deviation to the assembled Education Directors who will decide whether or not the deviation from the standards will be allowed.)

Grading Standards for Required Clerkships:
FSU COM has adopted the following Honors/Pass/Fail grading system and a uniform policy governing the assignment of grades to students completing required clerkships.
**Honors Criteria:**
A student will be assigned an “Honors” grade if the “Honors Criteria” listed below are met:
1) Receives a “yes” rating in all 6 subcategories of the clerkship assessment form pertaining to “Professionalism” and “Ethical Standards”; AND
2) Receives at least 10 “excellent” ratings in the remaining 17 subcategories on the clerkship faculty assessment form; AND
3) Has no more than 2 ratings of “satisfactory” and no ratings of either “marginal” or “poor”; AND
4) Receives a narrative summary by the clerkship director documenting excellent performance; AND
5) Scores at or above the 75th percentile for NBME shelf exam reference scores by students completing clerkships of comparable length at a similar time in the academic year; OR scores at a pre-determined honors-level score on the internal clerkship-specific exam; AND
6) Receives a satisfactory rating on all required clerkship projects and activities; AND
7) Satisfactorily complies with CDCS data entry requirements; AND
8) Receives satisfactory patient and staff evaluations.

Note: Education Directors may assign an “Honors” grade to high-performing clerkship students meeting either (but not both) of the following situations:
Situation # 1: If the student satisfies all of the “Honors” criteria listed above, but receives only 9 “excellent” ratings in the remaining 17 subcategories on the clerkship faculty assessment form, OR
Situation # 2: If the student satisfies all of the “Honors” criteria listed above, but receives an NBME shelf exam score at or above the 72nd percentile when referenced to students completing clerkships of comparable length at a similar time in the academic year, or scores at a predetermined level on the internal clerkship-specific exams.

**Pass Criteria:**
A student will receive a “Pass” grade if all of the “Pass Criteria” listed below are met:
1) Receives a “yes” rating in all 6 subcategories on the clerkship faculty assessment form pertaining to “Professionalism” and “Ethical Standards”; AND
2) Has no subcategories rated as “poor,” and no more than two subcategories rated as “marginal;” AND
3) Receives a clerkship director’s narrative summary denoting a satisfactory performance, AND
4) Scores at or above the 10th percentile for NBME shelf exam reference scores by students completing clerkships of comparable length at a similar time in the academic year; OR scores at a pre-determined minimum passing score on the internal clerkship-specific exam; AND
5) Receives a satisfactory rating on all required clerkship projects and activities, where applicable, AND
6) Satisfactorily complies with CDCS data entry requirements, AND
7) Receives satisfactory patient and staff evaluations.
**Fail Criteria:**
A student is at risk for a grade of “Fail” if any of the Criteria listed below are met:

1) Receives a “no” rating in any of the 6 subcategories of the clerkship faculty assessment form pertaining to “Professionalism” and “Ethical Standards”; OR
2) Receives three (3) or more of the remaining 17 subcategories rated as “marginal;” OR,
3) Receives a rating of “poor” in any remaining subcategory; OR
4) Receives a clerkship director’s summary denoting unsatisfactory performance; OR
5) Scores below the 10th percentile of students completing clerkship of comparable length at a similar time in the academic year on the retake* of his/her NBME specialty subject exam; OR scores below a predetermined minimum passing score on the retake of the internal clerkship-specific exam; OR
6) Does not receive a satisfactory rating on all required clerkship projects and activities, where applicable; OR
7) Does not comply with CDCS data entry requirements; OR
8) Does not receive satisfactory patient and staff evaluations
*Note: A student who fails the initial post-clerkship NBME subject exam or fails to achieve a minimum passing score on the initial internal clerkship-specific exam, but performs at a satisfactory level in all other aspects of the clerkship, will receive an initial clerkship grade of “IR” and will be reported to the Student Evaluation & Promotion Committee (SEPC).

The student will be given one opportunity to re-take the examination to achieve a passing score. This re-take must occur within 90 days from the day the student is notified that he/she has failed the initial subject examination, unless a different time-frame is approved by the SEPC. The student and regional campus dean will determine the date of the re-take examination, and provide at least four (4) weeks’ notice to the regional campus student support coordinator who will coordinate the ordering and re-take of the previously-failed examination.

Students who have an initial third-year clerkship grade of “IR”, and re-take the shelf exam, must achieve a score at or above the 10th percentile for the NBME shelf exam reference scores by students taking the exam at a similar time in the academic year. The date of the re-take exam—-and not the dates of the clerkship--will establish which set of NBME norms are used to determine whether a passing grade has been achieved. Students, who complete the re-take exam during or following the fourth quarter of their third year curriculum, will have their scores referenced to those fourth quarter scores.

If a passing score is achieved on the re-take examination, the initial “IR” grade will be changed to a grade of “Pass.” A student who fails the initial exam cannot achieve an “honors” grade regardless of the score on the re-take exam.

If a student does not pass the re-take examination or fails to re-take the examination within the 90 day window, the original “IR” grade will be changed to a grade of “Fail.”

Students who receive a failing clinical evaluation from the Clerkship Faculty will receive a grade of “Fail” for the clerkship (regardless of the subject exam score or the score on the internal clerkship-specific exam) and will be referred to the Student Evaluation and Promotion Committee (SEPC).

**Students who fail to meet CDCS requirements for required clerkships:**
Data from the CDCS system is used to assess and direct individual educational objectives for each student as well as meet accreditation standards for the COM. This makes accurate and timely data entry into the CDCS system imperative for clerkship students. Identification by the clerkship director of failure to comply with clerkship-specific CDCS data-entry standards may result in a lowering of the student’s clerkship grade by the Education Director, and in cases of blatant noncompliance, may result in a student’s failing the clerkship due to concerns of professionalism.

**Students who receive poor evaluations by patients or staff:**
Patient and staff evaluations provide important information about student performance, and are required to be collected during all third-year required clerkships. Consistently low evaluations by either patients or staff may result in a lowering of the student’s
clerkship grade by the Education Director, and in extreme cases, may result in a student’s failing the clerkship due to concerns about professionalism.

Students who receive a grade of “Fail” for any reason will be referred to the SEPC for disciplinary action.

**A student must receive a “Pass” or “Honors” grade for all required third-year clerkships in order to be eligible for promotion to the fourth year. In addition, a student must receive a “Pass” or “Honors” grade for all fourth-year required clerkships and electives to be eligible to graduate from FSU COM.**

### STUDENTS WITH DISABILITIES

The Florida State University adheres to Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990 (ADA) in prohibiting discrimination against any qualified person with a disability. Students with specific questions regarding the FSU policies governing students with disabilities may contact the Student Disability Resource Center.

Students with disabilities who wish accommodations based on a disability must notify the College of Medicine Office of Student Affairs and register with the FSU Student Disability Resource Center (SDRC). In order to register with the SDRC the student must provide the Center with the required documentation. A definitive diagnosis of disability must be stated in the documentation. Details regarding the required documentation for each disability can be found at the SDRC website [www.fsu.edu/~staffair/dean/StudentDisability](http://www.fsu.edu/~staffair/dean/StudentDisability).

**Exam Protocol for Students with Disabilities at Florida State University College of Medicine**

The Florida State University adheres to Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990 (ADA) in prohibiting discrimination against any qualified person with a disability. Students with specified questions regarding the FSU policies governing students with disabilities may contact the Student Disability Resource Center (SDRC).

Students who warrant accommodations based upon the functional effects of a physical or learning disability should adhere to the following procedure:

1. **Student meets with a representative of the Student Disability Resource Center (SDRC), provides documentation of a disability and requests accommodations. (A definitive diagnosis of a disability must be identified in the documentation. Details regarding the required documentation for each disability can be found at the SDRC website: [www.fsu.edu/~staffair/dean/StudentDisability](http://www.fsu.edu/~staffair/dean/StudentDisability).)**

2. **For entering students, this is best accomplished prior to the beginning of classes (e.g., Orientation Week). For all other students, it must be completed at**
least one month prior to the examination date when accommodations would be instituted.

3. SDRC staff will review the documentation to determine sufficiency and eligibility for accommodations. If additional documentation is needed, this may be obtained through the Office of Student Counseling Services (OSCS) at the COM or elsewhere in the community. If additional testing is required, temporary accommodations may be granted while documentation is completed.

4. Student and SDRC staff identifies the type of accommodations that are appropriate based upon the student’s disability.

5. SDRC staff completes and signs a Faculty Letter addressed to the COM’s Associate Dean for Student Affairs indicating that documentation supports specific accommodations.

6. Student signs Faculty Letter indicating agreement with suggested accommodations and understanding of his or her responsibility to present the letter to the Associate Dean for Student Affairs at the College of Medicine.

7. SDRC prints two copies of the Faculty Letter and retains a copy as a record of the initial meeting, eligibility and accommodation request.

8. Student will schedule an appointment to meet with the Associate Dean for Student Affairs within one week’s time to present the second original Faculty Letter. The student is also encouraged to keep a copy of this document.

9. The Associate Dean for Student Affairs will review the letter, determine appropriateness of all requests based on the requirements for the college, and discuss concerns with student and/or call SDRC when appropriate.

10. The letter will be kept in a confidential place in the Office of Student Affairs and not made part of the academic record of the student.

11. Once accommodation shave been confirmed, the student is to schedule an appointment with the OSCS.

12. The OSCE’s at the COM will be the representative responsible for facilitating accommodations for medical school students who have been determined eligible for services. The OSCS will explain to the student how the accommodations will be facilitated.

13. The student will then be responsible for completing the SDRC Exam Sign-Up Sheet and ensuring that his/her Year 1/Year 2 Year and Course Directors overseeing the examination have signed it. Exam Sign-Up Sheets may be obtained from year 1/Year 2 Coordinators or the OSCS.
14. The student will return the completed SDRC Exam Sign-up Sheet to the SDRC at least **5 WORKING DAYS** prior to the scheduled date/time of the exam in order to facilitate testing/exam accommodations. Failure to meet this requirement will release the COM and SDRC from the responsibility of providing accommodations for that particular examination.

15. A special situation arises with the NBME examinations. Since these examinations need to be ordered well in advance of the test date, students who are requesting to take an NBME under special accommodations should complete the Exam Sign-Up sheet at least **4 weeks** prior to the date the exam is to be administered.

16. Students who qualify for exam accommodations will follow SDRC’s Testing Center policies. If the examination is not taken at the SDRC, the COM (in collaboration with SDRC) will coordinate the provision of other accommodations. This might occur for quizzes or shorter, in-class exams. The student is responsible for notifying the instructor at least **five working days** prior to the quiz/exam if on-site accommodations are desired. Except for extenuating circumstances, all Year1/Year2 integrated and Year1/Year2 NBME exams requiring accommodation will be administered at the SDRC.

17. For those students attending the regional campuses, Steps 1-11 should be followed in order to be approved for accommodations. However, the Regional Campus Dean will be responsible for overseeing the implementation of the accommodations in collaboration with the Associate Dean for Student Affairs.

18. Provision of exam proctors and appropriate distribution of exams for students receiving accommodation will be administered by the Office of Medical Education (for Year 1/2 and the Regional Campus Deans (Year 3/4).

**FSU COM ATTENDANCE POLICY**

**COM Philosophy**

We believe that:

Professionalism is a major component of our medical curriculum. We believe students should conduct themselves appropriately in the various educational activities of the curriculum. This conduct includes coming to educational activities on-time, using the laptop computers only for course work during the educational activity, and not disrupting the class if late. The faculty should also demonstrate professionalism, by starting and ending all scheduled educational activities on time and providing a course schedule with clearly explained course policies in the course syllabus. Any changes in the schedule should be given to the students in a timely manner.
Students will be accountable and personally responsible for attending all educational activities (small groups, labs, clinical experiences, examinations, lectures, computer sessions, etc.).

Unexcused absences reflect negatively on the goals and objectives of the medical curriculum and demonstrate unprofessional behavior by the respective student.

We owe it to our state legislature and the citizens of the State of Florida to provide a quality educational program that meets the needs of our students in preparing them for the M.D. degree.

**Attendance Policy:**

Students are expected to attend all scheduled activities. Students are expected to be on time. Being on time is defined as being ready to start at the assigned time. If a student has an emergency that prevents her/him from attending a scheduled activity, s/he is to call and notify the Office of Student Affairs (Year 1/2) or the Regional Campus Dean / Student Support Coordinator (Year 3/4) and request that they inform the supervisors/professors/clerkship faculty/Education Director for that activity. If at all possible, the student should also call and at a minimum, leave a message with one of the course/Clerkship Directors. It is important that students realize that their absence or tardiness negatively impacts a number of other people. Attendance, including tardiness, is part of the student’s evaluation for professionalism. Negative evaluations may result in decreased grades and in severe cases, referral to the Student Evaluation and Promotion Committee.

**Procedure for Notification of Absence:**

**Year 3/4 Required Clerkships**

If the student requests an absence in advance, the “Advance Request for Absence from Educational Activity(ies)” form (Appendix B) should be completed, signed by the student and given to the Regional Campus Dean. Requests for excused absences from a required clerkship should be rare and made only in situations that cannot be rescheduled to occur during a scheduled time off or during an elective. An excused absence from a required clerkship may be allowed when it is determined by the Regional Campus Dean that the student has no alternative (see Fourth Year Scheduling Policies).

The Regional Campus Dean, after consultation with the Education Director and the Clerkship Director, will make the final decision regarding the student’s request and give the student the implications for the absence (e.g., remediation, course grade adjustment, make-up exam, etc.). Final decisions regarding implications for the student’s grade shall rest with the Education Director. The Clerkship Director will notify the clerkship faculty member of the decision. The form will be filed in the Office of Student Affairs at the regional campus.

If the absence occurs due to an unforeseen emergency, the student should contact the Clerkship Director and the Regional Campus Dean immediately to report the absence including the reason for the absence. The Regional Campus Dean, after consultation with the Education Director and the Clerkship Director will make the final decision regarding implications of the student’s absence. The implications for the absence (e.g., remediation, course grade adjustment, make-up exam, etc.) will be given to the student by the Regional Campus Dean. Final decisions regarding
implications for the student’s grade shall rest with the Education Director. The Clerkship Director will notify the clerkship faculty member of the decision. The form will be filed in the Office of Student Affairs at the regional campus.

Course Evaluation:

Each student will be given the opportunity to provide constructive feed-back to the clerkship faculty and directors using the on-line evaluation system. Numerical ratings and student comments will be sought at the end of the clerkship. Thoughtful student feed-back and faculty evaluation are vital to improving the quality of the clerkship learning experience.

Academic Honor System:

Students are expected to uphold the Academic Honor Code published in the Florida State University Bulletin and the Student Handbook: “The Academic Honor System of the Florida State University is based on the premise that each student has the responsibility (1) to uphold the highest standards of academic integrity in the student’s own work, (2) to refuse to tolerate violations of academic integrity in the academic community, and (3) to foster a high sense of integrity and social responsibility on the part of the University community.” Violations of this Academic Honor System will not be tolerated in this clerkship. Specifically, incidents of plagiarism of any type or referring to any unauthorized material during examinations will be rigorously pursued.