



BCC 7130 Obstetrics and Gynecology Clerkship 2024-2025

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Overview

Course Description

Students will participate in this clerkship as either a 6-week block or through the Longitudinal Integrated Curriculum (LIC). The Obstetrics and Gynecology Clerkship is a community-based clerkship coordinated by the regional campus Clerkship Director and supervised by the assigned Clerkship faculty members. The purpose of the Obstetrics and Gynecology Clerkship is to develop a level of clinical competency in the obstetrical and gynecological care of women that is appropriate for the general education of all medical students. Students work in ambulatory, inpatient, and surgical settings, experiencing the breadth of both obstetrical and gynecological care. Students will deliver basic preventive care for women compassionately and insightfully and learn to apply appropriate screening practices. Students will communicate appropriate health education to patients and will work collaboratively with healthcare team members. Under the close supervision of experienced Clerkship faculty, students are expected to assume increasing responsibility for providing ambulatory and in-patient patient care. Students are expected to fully participate in the prenatal, labor, delivery, and postpartum experiences of assigned patients. Students are also expected to participate in the surgical care of patients including the preoperative evaluation, operative care, and postoperative care, and to participate in the performance of obstetrical and gynecologic procedures. Students are expected to work effectively with others in each of the clinic settings.

Orientation and Syllabus Review

Students are required to read the syllabus located on the [Office of Medical Education](#) site to become familiar with expectations before beginning the clerkship. In addition, students must read the *Welcome Letter, 10 Things to Do Before You Begin the OBGYN Rotation*, and the *APGO OBGYN Clerkship Guide to Success* located on the [Canvas M.D. Clerkships AY2024-2025](#) OBGYN page. A site-specific orientation will occur at the assigned clinical site before the initiation of clinical activities. Students are responsible for communicating with Clerkship Faculty before the start date of the clerkship to coordinate meetings.

Longitudinal Integrated Curriculum (LIC)

General information and policy regarding the Longitudinal Integrated Curriculum (LIC) in Marianna can be found on the syllabi page of the [Office of Medical Education](#) site.

Scheduled Hours/On-Call

Participating in evening and weekend calls is required in each of the first 5 weeks of the clerkship. During the last week of the clerkship, a call is not required so that students may study for the end-of-rotation exam. However, if you have been absent or other requirements have not been met, a call may be required that week. Students should track hours of all clinical activity. When Dean's Rounds are not scheduled, students will work a minimum of 5 days per week with Clerkship Faculty. The exact number of other weekend and weekday on-call days/nights required to accomplish the clerkship goals depends on the nature and volume of the Clerkship Faculty member's practice. On-call may be taken from home only if your commute is less than 15 minutes away from the hospital and it is approved by your Clerkship Faculty. Otherwise, it is strongly encouraged that calls be spent "in-house" to completely obtain the hospital experience, and to discourage driving while tired, or sleep deprived.

If overnight calls are limited, students may take "short call" during the week so as not to miss clinic days. Short call usually begins after daytime clinical activities and ends at 10 p.m. unless directed otherwise. For example, if the attending has a patient who comes in ready for delivery after 10 pm, the student would be expected to return to the hospital for her delivery. Students should email their schedules to their Clerkship Director. **Work hours must be documented in the [Encounter Tracking System \(ETS\)](#) daily.**

Required Assignments

Completion of all assignments with a satisfactory and timely submission is a clerkship requirement. If Student Academics is unavailable students will email their documents to their Clerkship and Education Director.

Required Assignment 1: First Delivery Reflection

The purpose of this exercise is for the student to mentally and emotionally process the experience of the delivery of a baby as a health professional (first delivery preferred). The student will reflect on the type of delivery, experience from a personal standpoint, participation as part of the healthcare team, and the impact of becoming part of a significant life

experience for a woman and her family. Complete instructions are located on the [Canvas M.D. Clerkships AY2024-2025 OBGYN](#) page.

Submission

- Upload First Delivery Reflection to the “Project Documents” tab for the course in Student Academics **by midnight on Sunday at the end of the third week of the clerkship.**

Evaluation

- The evaluation of this assignment will be completed by the Education Director after the clerkship, according to the rubric below.

First Delivery Reflection evaluation rubric	Above expectations	Meets expectations	Below expectations	Feedback
Patient interaction				
Interprofessional identified, role and interaction				
Concerns documented				
Context identified				
Social determinants of health mentioned (optional)				
Insight or observation of student’s mental and emotional process in the encounter				

Required Assignment 2: History and Physical Project

The student will produce focused, context-specific documentation of a clinical encounter. Their written documentation should contain key components of the intake history for a new obstetrical patient, gynecological problem visit, or well-woman exam. The document must include a breast exam, a complete pelvic exam, an ordered differential diagnosis and/or problem list with a plan and follow-up patient education. Complete instructions are located on the [Canvas M.D. Clerkships AY2024-2025 OBGYN](#) page.

Submission

- Upload the History and Physical Project to the “Project Documents” tab for the course in Student Academics **by midnight on Sunday at the end of the third week of the clerkship.**

Evaluation

- The evaluation of this assignment will be completed by the Education Director after the clerkship, according to the rubric below.

History and Physical Project evaluation rubric	Above expectations	Meets expectations	Below expectations	Feedback
Chief Complaint				
HPI				
PMH, PSH, MED, ROS Allergy				
Physical				
Breast				
Complete Pelvic				
Assessment/Problem List				
Plan				
Patient Education				
Overall				

Required Assignment 3: Labor & Delivery Project with Integrated Pediatrics

Labor is an amazing event. How women deal with the process is often even more amazing. A physician may never know what a woman and her family go through unless time is spent with a patient in labor from start to finish. Even an OBGYN, whose attention is divided amongst multiple concerns, is unlikely to ever spend this concentrated amount of time with a single patient in labor again. The student will report and analyze the labor, delivery, postpartum and immediate care of the newborn process which contains fundamental knowledge found to be on the subject exam. Common NBME subject exam questions will require interpretation of abnormalities in fetal heart tracings and stages of labor, anesthesia, and cord gas interpretation. To complete the total obstetrical experience, a physician must always consider the newborn’s progress as well as the maternal postpartum care. An ideal newborn to follow would be that of the patient whose labor, delivery, and post-partum course were followed for the L&D with integrated pediatrics packet. However, if due to time constraints, that newborn cannot be followed in continuity, the student will use a newborn of

another patient to complete these tasks or questions in the labor and delivery with integrated pediatrics project. Complete instructions are located on the [Canvas M.D. Clerkships AY2024-2025](#) OBGYN page.

Submission

- Upload the labor and delivery with integrated pediatrics project into the “Project Documents” tab for the course in Student Academics by **5:00 PM on the last day of the clerkship.**

Evaluation

- Evaluation of this assignment will be completed by the Education Director after the clerkship, according to the rubric below.

Labor and Delivery Project evaluation rubric	Above expectations	Meets expectations	Below expectations	Feedback
Labor: normal or abnormal				
Labor Curve corresponds to the labor described				
Assessment of the delivery, blood loss, and complications if any described				
Newborn immediate resuscitation with APGAR				
Immediate postpartum recovery of dyad mother and newborn				
Newborn exam observed				
Requirements for discharge of a newborn include looking for social service involvement				
Overall comments by the student documenting their insight into the complete process				
Questions answered with annotated EBM				
Overall				

Required Assignment 4: Mini-Oral Exam

The mini-oral examination is an end-of-clerkship formative assessment administered by the Clerkship Director. The purpose of the mini-oral exam is to assess the student’s ability to synthesize a History and Physical Examination, present it succinctly, and prioritize differential diagnosis with a basic plan. The oral exam offers an opportunity to demonstrate clinical reasoning and medical knowledge in a different format. Complete instructions are located on the [Canvas M.D. Clerkships AY2024-2025](#) OBGYN page.

Submission

- Upload the mini oral exam case list into the “Project Documents” tab for the course in Student Academics **by the end of week 5 of the clerkship.**
AND
- Students will **also document as an Educational Activity in ETS** by selecting “[OBGYN] Completion of Mini-Oral Exam Case List” in the drop-down menu.

Evaluation

- Evaluation of the oral exam will be completed by the Clerkship Director or their designee, in their final assessment with immediate feedback to the student.

Required Assignment 5: APGO uWise Self-Assessment

The [APGO uWise](#) is available online and is a supplemental student learning tool consisting of sample quizzes, and students will complete a timed online self-assessment free of charge. This self-assessment will allow meaningful mid-rotation feedback, assess gaps in medical knowledge, and identify content areas to improve by the end of the clerkship. The APGO uWise question bank is very beneficial in preparation for the end of the clerkship NBME subject exam. Initial sign-up instructions “APGO uWise Interactive Self-Evaluation Guide” can be found on the [Canvas M.D. Clerkships AY2024-2025](#) site.

Submission

- Upload the **score to Student Academics** into the “Project Documents” tab for the course in Student Academics **at the end of week 3.**

Evaluation

- Students are required to discuss their uploaded score and improvement plan with their Clerkship Director during mid-rotation formative feedback meetings.

Patient Care

Patient Care is delivered in a variety of settings. Students are expected to develop patient care skills that are compassionate, appropriate, and effective for treating health problems and promoting health. In this clerkship, students will participate in the care of patients in the following settings:

1. Physician's office, ambulatory clinic, emergency department, or hospital
2. Surgical care of patients (ambulatory or inpatient)
3. Evaluation and management of patients in Labor and Delivery
4. On-call responsibilities in the hospital setting or emergency department

Patient Log Requirements using the Encounter Tracking System (ETS)

Students should enter patient encounter data into the Encounters Tracking System (ETS) *daily*. Students are required to see a **minimum of 100 patient encounters** during the Obstetrics and Gynecology clerkship. Students will record all clinical problems and procedures that were part of patient encounters. The table below lists the required visit types, problems, and procedures including the expected level of participation. One (1) breast exam must be performed in the clinical setting with direct patient contact, while others may be completed on a simulator/model.

- Students who have difficulty seeing a patient within a problem or procedure category should notify their Clerkship Director with sufficient time to **enable remedial action**.
- The problems and/or procedures marked with an asterisk* must be completed in the clinical setting and require direct patient contact. The remaining conditions should be seen in the clinical setting but may be fulfilled by alternate educational activities as determined by the Education Director.

Min. Req.	Visit Type
1	Periodic preventive care (health maintenance)

Category	Min. Req.	Problems as listed in ETS	Location of Service	Min. Level of Participation		
				Observe	Assist	Perform
Abnormal 1st Trimester Bleeding	1 from this category	Abortion, spontaneous Abortion, threatened Abortion, ectopic	Inpatient Hosp. or Outpatient Clinic	x		
Abnormal Uterine Bleeding	1 from this category	Abnormal uterine bleeding Endometrial polyp Postmenopausal or uterine bleeding	Inpatient Hosp. or Outpatient Clinic		x	
Diabetes in Pregnancy	1	Gestational diabetes	Inpatient Hosp. or Outpatient Clinic		x	
Hypertensive Disorder in Pregnancy	1 from this category	Gestational hypertension Preeclampsia or eclampsia	Inpatient Hosp. or Outpatient Clinic		x	
Labor*	3	Labor Labor, premature Labor, second stage	Inpatient Hosp. or Outpatient Clinic		x	
Pelvic pain, acute or chronic	1 from this category	Dysmenorrhea Endometriosis Pelvic inflammatory disease (PID)	Inpatient Hosp. or Outpatient Clinic		x	
Third Trimester Bleeding	1 from this category	Placenta previa Placental abruption	Inpatient Hosp. or Outpatient Clinic		x	
Abnormal Cervical Cancer Screening (i.e. results of cervical cytology)	1	Cancer, cervical	Outpatient Clinic			x
Menopause or Menopause Transition	3 from this category	Amenorrhea Dyspareunia Oligomenorrhea	Outpatient Clinic			x
Postpartum care	10	Postpartum care	Inpatient Hosp. or Outpatient Clinic			x
Prenatal care	10	Prenatal care	Inpatient Hosp. or			x

			Outpatient Clinic			
Sexually transmitted infection or vaginitis (any type)	1	Bacterial vaginosis Human papillomavirus (HPV) Sexually transmitted infection (STI) Vaginitis	Outpatient Clinic			x

	Min. Req.	Procedures	Min. Level of Participation		
			Observe	Assist	Perform
	10	Breast exam*			x
	10	Fetal well-being assessment*			x
	5	Cervical cancer screening*			x
	5	Contraception counseling *			x
	5	Culture, cervical or vaginal*			x
	5	Domestic violence screening*			x
	5	Incontinence assessment*			x
	5	Lactation counseling*			x
	5	Sexually transmitted infection counseling/prevention*			x
	5	Sexually transmitted infection screening			x
	5	Substance abuse screening (general or opioid) *			x
	5	Tobacco use screening*			x
	5	Use of folic acid (preconception counseling) *			x
	3	APGAR score determination*			x
	3	Coach second stage labor *			x
	1	Foley placement*			x
	1	Wound repair/suturing*			x
	1	Cesarean section*		x	
	2	Major surgical procedure		x	
	2	Minor surgical procedure		x	
	3	Vaginal delivery*		x	
	1	Colposcopy	x		
	1	Epidural/spinal anesthesia	x		
	2	Laparoscopic surgery	x		
	1	Surgical safety timeout	x		
	1	Ultrasound (OB or GYN)	x		

Optional Patient Encounters

In addition to the required patient encounters, the table below provides an example of several optional procedures that provide an excellent learning experience but are not always possible to see and document in a 6-week clerkship.

Optional ETS Problem List
Abnormal pap management
Dilation and curettage
Endometrial ablation
IUD insertion
KOH/wet prep
Mammogram
Tubal ligation

Alternate Educational Experiences

For students unable to complete and record a required clinical encounter or other clerkship requirements due to circumstances beyond their control, the Education Director will determine an appropriate alternative educational experience. Additional clinical encounters are the preferred method to complete the requirements of this clerkship. Students may be exposed to the conditions or diseases secondarily through reading assignments, completion of Aquifer cases, or discussions with the Clerkship Director, and will record as instructed in the ETS, and only under the direction of the Education Director. The utilization of alternative educational activities is monitored by the curriculum committee regularly.

Online Curriculum

Students are encouraged to use the free [APGO uWise](#) content as a supplemental student learning tool.

Clerkship Director Meeting

Students meet with the Clerkship Director weekly for teaching, evaluation, review of patient logs, cases, work hours, feedback, and review of case-based learning modules which are interspersed with NBME-style questions. The Clerkship Director facilitates the sessions to build medical knowledge, foster critical thinking/clinical reasoning, and improve team (IPE) participation. These sessions are matched to the readings assigned each week, keeping students on task for the completion of material by the fifth week of the clerkship. The students are asked to give an oral presentation of a patient encounter most weeks, working on their poise, content, and proficiency. Near the end of the clerkship, student skills will be assessed via a simulated breast and pelvic exam and the mini-oral exam.

Clerkship Examinations

Summative Examinations

At the end of the clerkship, students will take the 110-question NBME Clinical Subject Examination for Obstetrics and Gynecology. LIC students will schedule the exam according to the LIC policies document.

Optional Formative Self-Assessment

The [NBME's Self-Assessment Services \(NSAS\)](#) Clinical Science Mastery Series offers a \$20 clerkship-specific exam preparation that includes in-depth answer explanations. Students may purchase an NSAS examination for any clerkship.

Learning Resources

Institutional Resources

The [Maguire Medical Library](#) offers 24/7 remote access to online resources such as [Mobile Resources](#), [Point of Care](#), and [Subject Guides](#) to support the **core clerkships**.

Required Reading

Students are introduced to the core content of Obstetrics and Gynecology through readings in the required textbooks located on the [OBGYN subject guide](#). A weekly outline of reading assignments and cases is available on the [Canvas M.D. Clerkships AY2024-2025](#) OBGYN page.

1. *Obstetrics and Gynecology for Medical Students* 8th edition by Beckmann, et al. Published April 2019. ISBN-10: 9781451144314
2. *Case Files Obstetrics and Gynecology*, 6th Edition, by Toy, et al. Published 2023. ISBN: 978-1260468786

Electronic Resources

These resources are commonly used by obstetricians and gynecologists, and are available in the [OBGYN subject guide](#):

- The Period App
- MenoPro App
- Sprout Pregnancy App
- PMS Tracker
- Infertility Survival Kit
- Yeast App (ISSVD)
- PTB Toolkit (Prevention of Preterm Birth Algorithms) Also includes what to do for PPROM
- Ovia Fertility (Ovulation calculator and period tracker)
- ACOG App (with a link to the pregnancy calculator)
- ASCCP (ultimate source for all things PAP/HPV, but cost \$11)
- The PAP App (not quite as good as ASCCP APP, but it's free)
- PregWheel (but we prefer the Pregnancy Calculator APP on the ACOG App)
- WUSM APP OB GUIDE (Washington University School of Medicine OB Guide/The Washington Manual)
- The CDC Apps for Contraception, STI/STD Screening and Treatment, AND Opioid Guidelines
- Contraception (\$10/yr)

Evaluation

Formative Evaluation

A mid-clerkship evaluation is completed by the Clerkship Director to provide feedback on student progress toward the achievement of clerkship objectives, competencies, assignments, and required encounters. A student workflow guide is available on the [Canvas M.D. Clerkships AY2024-2025](#) homepage.

Summative Evaluation

An evaluation of student clinical performance will be completed by the assigned clerkship faculty at the end of the clerkship, as well as by the resident the student worked with during the clerkship. A final summative report will be completed by the Clerkship Director at the end of the clerkship. The Education Director will review all components of the clerkship and include an assessment of each in the final grade summary.

Grading

Years 3 and 4 Grading Policy

The standardized Years 3 and 4 Grading Policy for clerkships and courses is located on the [Office of Medical Education](#). The final grade is assigned by the Education Director and is based on all aspects of the clerkship, including clinical performance, attitude, performance during weekly Clerkship Director meetings, and the results of the NBME Clinical Subject Exam. There are no grade quotas, and any student can earn a grade of honors.

Clerkship-Specific Grading Criteria

1. Any breach in professionalism renders a student ineligible for honors
 2. Any assignment submitted late (without permission) or which requires remediation renders the student ineligible for honors and will result in the assignment of an initial grade of IR (Incomplete Remediation) until remediation has been completed
 3. Failure to document timely and accurate work hours renders a student ineligible for honors
 4. Clinical performance and content knowledge must be exemplary to be considered for honors or high pass
 5. End of clerkship NBME examination must be at the
 - a. 75th percentile or higher to be eligible for Honors consideration
 - b. 60th percentile or higher to be eligible for High Pass consideration
 - c. 10th percentile or higher to Pass
 6. Active participation in weekly Clerkship Director meetings (pass/fail)
 7. Satisfactory Clerkship Faculty and Clerkship Director evaluations documenting competency in all required domains
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8. Satisfactory documentation of **at least 100** patient encounters in ETS (pass/fail)
 9. Satisfactory documentation of all required problems, procedures, and visit types at the indicated level of participation in ETS (pass/fail)
 10. Satisfactory completion and timely **submission/upload of first delivery reflection** in Student Academics (pass/fail)
 11. Satisfactory completion and timely **submission/upload of history and physical project** in Student Academics (pass/fail)
 12. Satisfactory completion and timely **submission/upload of labor and delivery project with integrated pediatrics** in Student Academics (pass/fail)
 13. Satisfactory completion and documentation of **mini oral exam** assignment **AND** record as an Educational Activity in ETS (pass/fail)
 14. Satisfactory completion and timely **submission/upload of formative APGO exam with satisfactory creation of self-improvement plan** in Student Academics before mid-rotation (pass/fail)

Course Objectives

The following tables outline clerkship objectives and assessment methods for each, and are intended to be used as a guide for student learning. Each clerkship objective is mapped to the [FSU COM Educational Program Objectives \(EPOs\)](#) and the [ACGME Core Entrustable Professional Activities \(EPAs\)](#).

OBSTETRICS AND GYNECOLOGY CLERKSHIP COURSE OBJECTIVES	EPO
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OBGYN-1	Demonstrate proficiency in information gathering, reporting, and documentation with a focus on OBGYN history, including menstrual, sexual, and contraceptive histories, and pelvic and standard breast exams.	1,4
OBGYN-2	Identify appropriate diagnostic testing for a patient presenting in the ambulatory setting with vaginal discharge, abnormal PAP smear results, abnormal uterine bleeding, post-menopausal bleeding, and breast mass or an abnormal mammogram.	1,2
OBGYN-3	Demonstrate core knowledge and basic skill in the delivery of routine obstetric care: prenatal, antepartum, intrapartum, and postpartum.	1,2,4
OBGYN-4	Demonstrate core knowledge and basic skill in the delivery of pre-operative and post-operative OBGYN care	1,2
OBGYN-5	Demonstrate patient education skills for common women's health concerns, and basic counseling skills for contraception choices, lactation and breastfeeding, osteoporosis prevention, preconception recommendations, prevention of sexually transmitted infections, and smoking cessation.	1,2,4
OBGYN-6	Support self-awareness and professional identity through reflection on knowledge and insight gained through accompanying a single patient through the entire labor and delivery experience.	3,5,
OBGYN-7	Demonstrate knowledge of the ethical conflicts that arise in the practice of obstetrics and gynecology, self-awareness of personal bias on these issues, and respect for patients with different ethical beliefs.	5,7
OBGYN-8	Identify the unique knowledge, skills, and abilities of non-physician members of the health care team, and work collaboratively with them to maximize the quality of care and safety of maternity and surgical patients.	4,6
OBGYN-9	Seek and implement feedback on knowledge, skill and attitudes in women's health care to improve performance.	3,5

Component	Learning Objectives	Assessment
Patient care MAPS TO OBGYN1, OBGYN2, OBGYN3, OBGYN4, OBGYN5	<ol style="list-style-type: none"> 1. Demonstrate knowledge and skills to provide routine OBGYN care in the ambulatory setting 2. Demonstrate proficiency in performing an OB/GYN H&P 3. Demonstrate best practice techniques when collecting gynecological specimens. 4. Utilize evidence-based screening tools to identify women at risk for depression, domestic violence, opioid/substance use, tobacco use, urinary incontinence, and osteoporosis. 5. Demonstrate clinical reasoning to formulate appropriate differential diagnoses and diagnostic and management plans. 6. Identify and implement age-appropriate, evidence-based preventive services. 7. Demonstrate shared decision-making techniques when negotiating and communicating patient management plans. 8. Demonstrate basic pre-and post-operative care skills. 9. Demonstrate effective and patient-centered communication 10. Construct organized and thorough patient presentations 11. Demonstrate understanding of appropriate prenatal care: pregnancy diagnosis, laboratory assessment of the pregnant patient; explain the appropriate use of diagnostic ultrasonography; identify women at high risk throughout the pregnancy; recognize and help for common concerns of the pregnant woman; recognize common complications of pregnancy. 12. Demonstrate understanding of appropriate Antepartum care: diagnose labor; diagnose ruptured membranes; determine cervical dilatation; monitor the progress of labor utilizing Friedman's curve; interpret basic patterns on a fetal monitoring strip; assist/perform deliveries; assist/performing at least 3 perineal repairs 13. Demonstrate understanding of appropriate post-partum care: encourage successful breastfeeding; recognize common breastfeeding problems; recognize the symptoms and signs of an uncomplicated post- partum course; identify common post-partum conditions/complications; assist with choosing appropriate post-partum contraception. 	<ul style="list-style-type: none"> • Performance rating/checklists • Weekly monitoring of ETS • Clinical faculty observations

	<ol style="list-style-type: none"> 14. Demonstrate core knowledge and basic skill in the delivery of care of the woman in labor 15. Demonstrate appropriate scrubbing and sterile technique 16. Perform surgical-associated procedures (dressing changes, suture/staple removal, catheter care, etc.) 17. Identify common post-operative complications in OB/GYN 18. Generate reasonable patient problem lists 	
<p>Required patient encounters and procedures</p> <p>MAPS TO OBGYN1, OBGYN3, OBGYN4, OBGYN5</p>	<ol style="list-style-type: none"> 1. Document a minimum of 100 patient encounters 2. Document the following procedure categories at the specified minimum number and level of participation: Breast exam, Fetal well-being assessment, Cervical cancer screening, Contraception counseling, Culture(cervical or vaginal), Domestic violence screening, Incontinence assessment, Lactation counseling, Sexually transmitted infection counseling/prevention, Sexually transmitted infection screening, Substance abuse screening (general or opioid), Tobacco use screening, Use of folic acid (preconception counseling), APGAR score determination, Coach second stage labor, Foley placement, Wound repair/suturing, Cesarean section, Major surgical procedure, Minor surgical procedure, Vaginal delivery, Colposcopy, Epidural/spinal anesthesia, Laparoscopic surgery, Surgical safety timeout, Ultrasound (OB or GYN) 3. Document the following problem categories at the specified minimum number and level of participation: Abnormal 1st trimester bleeding, Abnormal uterine bleeding, Diabetes in pregnancy, Hypertensive disorder in pregnancy, Labor, Pelvic pain (acute or chronic), Third trimester bleeding, Abnormal cervical cancer screening (results of cervical cytology), Menopause or menopause transition, Postpartum care, Prenatal care, Sexually transmitted infection or vaginitis 	<ul style="list-style-type: none"> • Weekly review of patient logs in ETS
<p>History and Physical project</p> <p>OBGYN1, OBGYN5</p>	<ol style="list-style-type: none"> 1. Demonstrate proficiency in performing and documenting an OB/GYN H&P for a new patient (obstetric, gynecologic problem, or well-woman exam) 	<p>Education Director assessment according to the evaluation rubric</p> <ul style="list-style-type: none"> • Chief complaint • HPI • PMH, PSH, MED, ROS, Allergy • Physical exam • Breast exam • Complete pelvic exam • Assessment/Problem list • Plan • Patient education
<p>Labor and delivery project with integrated pediatrics</p> <p>MAPS TO OBGYN3, OBGYN6, OBGYN8</p>	<ol style="list-style-type: none"> 1. Observe, report and analyze the labor, delivery, postpartum and immediate care of the newborn process 2. Diagnose labor and ruptured membranes; determine cervical dilatation; utilize Friedman's curve to monitor the progress of labor; interpret basic patterns on a fetal monitoring strip 3. Observe a newborn screening process including assessment of milestones required for discharge. 	<p>Education Director assessment according to the evaluation rubric</p> <ul style="list-style-type: none"> • Labor – Normal/Abnormal • Labor curve corresponds to the labor described • Assessment of delivery, blood loss, complications • Newborn immediate resuscitation with APGAR • Immediate postpartum recovery of the dyad (mother and newborn) • Newborn exam observed

		<ul style="list-style-type: none"> Requirements for discharge of newborn to include social service involvement Overall comments on student insight Questions answered with annotated EBM
Interprofessional collaborative skills MAPS TO OBGYN4, OBGYN8	<ol style="list-style-type: none"> Demonstrate effective communication (both verbal and written) with healthcare teams and staff. Recognize the system-based process, a surgical “timeout,” as a means to prevent medical error and create a culture of safety in an inter-profession team. 	<ul style="list-style-type: none"> Performance rating/checklists of ICS competencies
Mini oral exam MAPS TO OBGYN1	<ol style="list-style-type: none"> Synthesize an H&P and provide a succinct oral presentation Prioritize and justify clinical reasoning for a differential diagnosis Generate a basic plan of care 	<ul style="list-style-type: none"> Formative assessment by the clerkship director
Reflection: first delivery MAPS TO OBGYN6	<ol style="list-style-type: none"> Reflect on the emotional and intellectual experience of witnessing your first delivery as a part of the M3 provider team. 	<ul style="list-style-type: none"> Education Director assessment according to evaluation rubric <ul style="list-style-type: none"> Patient interaction IP identified, role, interaction Concerns documented Context identified Insight/observation of mental/emotional process
Weekly meeting with Clerkship Director MAPS TO OBGYN7, OBGYN9	<ol style="list-style-type: none"> Participate in the analysis of performance on assignments and incorporation of feedback Discuss case-related ethical issues Demonstrate oral presentation skills Review patient encounter progress and identify learning needs 	<ul style="list-style-type: none"> Mid-rotation feedback summary Clerkship director evaluation
NBME clinical subject exam MAPS TO OBGYN2, OBGYN3, OBGYN4, OBGYN7	<ol style="list-style-type: none"> Demonstrate knowledge and clinical reasoning to interpret clinical scenarios and answer basic, clinical, behavioral, and social science questions related to psychiatry and mental health. 	<ul style="list-style-type: none"> Minimum score of 10th percentile

Policies

Absence and Attendance Policy

The College of Medicine has detailed attendance policies as they relate to each cohort and events that conflict with course schedules. See the [FSU COM Student Handbook](#) for details of the attendance policy, a notice of absences, and remediation. Students must use the [student absence request form located on Student Academics](#). Extended absences from the clerkships are not permitted. Any absence from the clerkships must be **pre-approved by the Regional Campus Dean** before the beginning of the clerkship, using the student absence request form. The clerkship faculty, Clerkship Director, and Education Director must be notified of any absence in advance by the student, once approved by the campus dean. Under no circumstances should a student arrange with the clerkship faculty or elective faculty to be away from the rotation without first obtaining the approval of the campus dean. Any approved absence from a required clerkship may result in the student receiving a grade of “incomplete” and the student is expected to make up missed time and/or complete alternative/additional assignments before a final grade will be assigned. **Unapproved absences during the clerkship are considered unprofessional behavior, will result in a grade of “incomplete” until remediated, and may result in a grade of “fail” for the clerkship.** In the case of illness or other unavoidable absence, follow the same procedure outlined above, and notify everyone as soon as possible.

Academic Honor Policy

The Florida State University Academic Honor Policy outlines the University's expectations for the integrity of student's academic work, the procedures for resolving alleged violations of those expectations, and the rights and responsibilities of students and faculty members throughout the process. Students are responsible for reading the Academic Honor Policy and for living up to their pledge to "...be honest and truthful and...[to] strive for personal and institutional integrity at Florida State University." (Florida State University Academic Honor Policy, found at <http://fda.fsu.edu/academic-resources/academic-integrity-and-grievances/academic-honor-policy>.)

Americans with Disabilities Act

Florida State University (FSU) values diversity and inclusion; we are committed to a climate of mutual respect and full participation. Our goal is to create learning environments that are usable, equitable, inclusive, and welcoming. FSU is committed to providing reasonable accommodations for all persons with disabilities in a manner that is consistent with the academic standards of the course while empowering the student to meet the integral requirements of the course. To receive academic accommodations, a student: (1) must register with and provide documentation to the Office of Accessibility Services (OAS); (2) must provide a letter from OAS to the instructor indicating the need for accommodation and what type; and, (3) should communicate with the instructor, as needed, to discuss recommended accommodations. A request for a meeting may be initiated by the student or the instructor. Please note that instructors are not allowed to provide classroom accommodations to a student until appropriate verification from the Office of Accessibility Services has been provided. This syllabus and other class materials are available in an alternative format upon request. For more information about services available to FSU students with disabilities, contact the Office of Accessibility Services, 874 Traditions Way, 108 Student Services Building, Florida State University, Tallahassee, FL 32306-4167; (850) 644-9566 (voice); (850) 644-8504 (TDD), oas@fsu.edu, <https://dsst.fsu.edu/oas/>.

Clinical Experience and Education Policy (formerly Duty Hours or Work Hours)

The FSU COM uses the ACGME requirements regarding clinical experience and education as a guideline for our policy. Our goal is to provide a structure that supports patient safety and student education and facilitates personal-professional balance and well-being.

- Clinical experience and scheduled educational activities must be limited to no more than 80 hours per week when averaged over 4 weeks.
- Students must have at least one day out of every 7 completely free from clinical duties and required educational activities when averaged over 4 weeks.
- Clinical experience must not exceed 24 hours of continuously scheduled assignments, with the exception that up to 4 hours of additional time may be used for effective transitions of care or student education. No additional patient care responsibilities may be undertaken during these 4 hours. After 24 hours continuously on call, students must have at least 14 hours free of clinical work and scheduled educational activities.
- Students should have 8 hours off between scheduled clinical experience and education periods.

Documentation of time spent on clinical experience and education:

Students will use ETS to document by self-report their daily work hours on required clerkships and courses. Students must enter daily hours to include both clinical experience and required educational activities. Failure to report work hours is considered a breach of professionalism.

Students will report the following:

- Clinical experience, including documentation in the medical record
- Required educational meetings (i.e. Doctoring 3, clerkship meetings, meetings with clerkship faculty, educational meetings at residency programs)
- **Hours that should not be included** in self-reported "work" hours include reading about patient conditions and procedures, self-directed study for clerkships/courses, work completed for assignments, learning modules, and assigned reading.

Office of Student Counseling Services

Candidates for the M.D. degree must be able to fully and promptly perform the essential functions in each of the following categories: Observation, Communication, Motor, Intellectual, and Behavioral/Social. However, it is recognized that degrees of ability vary widely between individuals. Individuals are encouraged to discuss their disabilities with the College of Medicine's Director of the Office of Student Counseling Services and the FSU Office of Accessibility Services (OAS) to determine whether they might be eligible to receive the accommodations needed to train and function

effectively as a physician. The Florida State University College of Medicine is committed to enabling its students by any reasonable means or accommodations to complete the course of study leading to a medical degree.

Patient Log (ETS) Monitoring Policy

Encounter data are monitored by the Clerkship Directors to assure that students are meeting clerkship requirements. If it becomes apparent that students are not encountering the required patient conditions, efforts will be made to specifically select the patients with the required conditions. The level of participation in the care of patients is determined by the student's involvement during the history, physical exam, assessment, and treatment plan. The complexity of these components will vary, but to choose a level of participation, three categories have been created, all of which include supervision of the medical student. The student will select the level of participation that most closely describes their involvement in the patient encounter and will receive credit for documented participation at the required level or higher.

- **Observe** should be selected when the student observes a clinician conducting a patient encounter.
- **Assist** should be selected when the student assists a clinician in conducting the patient encounter.
- **Perform** should be selected when the student leads or conducts the patient encounter.

Student Mistreatment Policy

“Mistreatment” arises when behavior shows disrespect for the dignity of others and unreasonably interferes with the learning process. It can take the form of physical punishment, sexual harassment, psychological cruelty, and discrimination based on race, religion, ethnicity, sex, age, or sexual orientation. If a student feels they are being mistreated, the student should report this concern to the Division of Student Affairs (Student Support Coordinator, Assistant or Associate Dean for Student Affairs, or the Regional Campus Dean). We treat all such reports as confidential and do not tolerate reprisals or retaliations of any kind. Please refer to the Student Mistreatment Policy in the [FSU COM Student Handbook](#) and [report incidents of mistreatment](#) as soon as possible.

Syllabus Change Policy

Except for changes that substantially affect the implementation of the evaluation (grading) statement, this syllabus is a guide for the course and is subject to change with advance notice.