BCC 7130
Obstetrics and Gynecology Clerkship
2021-2022

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<table>
<thead>
<tr>
<th>Campus</th>
<th>Clerkship Director</th>
</tr>
</thead>
<tbody>
<tr>
<td>Daytona</td>
<td>Pamela Carbiener, MD</td>
</tr>
<tr>
<td>Fort Pierce</td>
<td>Heidi McNaney-Flint, MD</td>
</tr>
<tr>
<td>Orlando</td>
<td>Kristin M. Jackson, MD</td>
</tr>
<tr>
<td>Pensacola</td>
<td>Jill Prafke, MD</td>
</tr>
<tr>
<td>Sarasota</td>
<td>Jon Yenari, MD</td>
</tr>
<tr>
<td>Tallahassee</td>
<td>David O'Bryan, MD</td>
</tr>
</tbody>
</table>

**Rural Program Site Clerkship Administrator**
Marianna       | John D. Byrd, MD         |
Thomasville    | Calvin Reams, MD         |
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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 in a compassionate and insightful manner 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 view the Obstetrics and Gynecology Orientation video and read the syllabus to be familiar with clerkship 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 AY2021-22 MD Clerkship Org Site. 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 website. Students in the LIC should plan to take the NBME Internal Medicine Clinical Subject Examination during the spring semester after other clerkship requirements have been met.

Scheduled Hours/On-Call
Students will work at least 4 full days per week with assigned Clerkship Faculty, as one day per week is allotted for participation in Doctoring 3 and Longitudinal Clerkship. During off-cycle rotations during which Doctoring 3 is not scheduled, students will work 5 or more days per week with Clerkship Faculty. Students will also participate in on-call activities during the first five weeks of the Obstetrics and Gynecology Clerkship, for a total of 5-6 “calls” during the rotation. Students may take call from home if commute time is less than 15 minutes from the hospital; if travel time is more than 15 minutes, students are encouraged to spend time “in house” rather than to risk driving while tired or sleep deprived.
There are two call types in the Clerkship, short call and overnight call. Student call schedules will include at least one overnight call (24 hours), which occurs on a Friday or Saturday to allow for a recovery day before the next week begins. Short call begins after daytime clinical activities and ends at 10 pm unless otherwise directed by the Clerkship Director (unplanned deliveries, operative emergencies). The Clerkship Director will work with students to create, implement and monitor the final call schedule. During the last week of the clerkship, call is not required unless requirements have not been met. Work hours are to be documented in ETS on a daily basis.

Required Assignments

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 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. Instructions are located on the Canvas OBGYN page.

Submission
Students will upload their 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. Students are encouraged to send a copy of this report to both the Education Director AND the Clerkship Director via email in the event that the electronic submission system (Student Academics) is down or otherwise unavailable.

**Evaluation**

Evaluation of this assignment will be completed by the Education Director at the conclusion of the clerkship, according to the rubric below. Completion of this assignment in a satisfactory fashion is a clerkship requirement.

<table>
<thead>
<tr>
<th>First Delivery Reflection Rubric</th>
<th>Present</th>
<th>Absent</th>
<th>Feedback</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patient interaction</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Interprofessional identified, role, interaction</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Concerns documented</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Context Identified</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Insight/observation to student’s mental/emotional process in the encounter</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Required Assignment 2: History and Physical Project**

The student will produce a focused, context-specific documentation of a clinical encounter. Assessment of the key components of the written documentation of an intake history of a new obstetrical patient, gynecology problem visit or well-woman exam. The document must include a breast exam, complete pelvic exam, an ordered differential diagnosis and/or problem list with plan and follow-up patient education. Instructions are located on the Canvas OBGYN page.

**Submission**

Students will upload their 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. Students are encouraged to send a copy of this report to both the Education Director AND the Clerkship Director via email in the event that the electronic submission system (Student Academics) is down or otherwise unavailable.

**Evaluation**

Evaluation of this assignment will be completed by the Education Director at the conclusion of the clerkship, according to the rubric below. Completion of this assignment in a satisfactory fashion is a clerkship requirement.

<table>
<thead>
<tr>
<th>History and Physical Project Rubric</th>
<th>Present</th>
<th>Incomplete</th>
<th>Feedback</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chief Complaint</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>HPI</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PMH, PSH, MED, ROS Allergy</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Physical</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Breast</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Complete Pelvic</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Assessment/Problem List</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Plan</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Patient Education</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**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 spend with a patient in labor from start to finish. Even an OBGYN, with their 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 be on the subject exam. Common NBME subject exam questions will require interpretation of the Friedman curve, abnormalities in fetal heart tracings, and stages of labor, anesthesia and cord gas interpretation. Instructions are located on the Canvas OBGYN page. 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 was followed for the OB 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 & Delivery Project.

**Submission**

Students will upload their Labor & Delivery Project to the “Project Documents” tab for the course in Student Academics by 5:00 PM on the last day of the clerkship. Students are encouraged to send a copy of this report to both...
the Education Director AND the Clerkship Director via email in the event that the electronic submission system (Student Academics) is down or otherwise unavailable.

Evaluation
Evaluation of this assignment will be completed by the Education Director at the conclusion of the clerkship, according to the rubric below. Completion of this assignment in a satisfactory fashion is a clerkship requirement.

<table>
<thead>
<tr>
<th>Labor &amp; Delivery Project Rubric</th>
<th>Present</th>
<th>Incomplete</th>
<th>Feedback</th>
</tr>
</thead>
<tbody>
<tr>
<td>Labor-Normal/Abnormal</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Labor Curve Corresponds to Labor described</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Assessment of the delivery, blood loss, complications if any described</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Newborn immediate resuscitation with APGAR</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Immediate Postpartum recovery of dyad Mother/Baby</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Newborn exam observed</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Requirements for discharge of a newborn including looking for social service involvement</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Overall comments by the student documenting their insight to the complete process</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Questions answered with annotated EBM</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**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 & Physical, 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. Instructions are located on the Canvas OBGYN page.

**Submission**

Students will upload the mini-oral case list to the “Project Documents” tab for the course in Student Academics **by the end of week 5 of the clerkship.** Students will 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 in their final assessment along with immediate feedback to the student.

**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 patient care in the follow 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 on 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 expected level of participation.

Failure to record required patient care by 5:00 pm on the last day of the Clerkship will result in a grade of “IR” (incomplete, requires remediation); the student will therefore be ineligible for honors and additional time on the Clerkship may be required. If a student fails to meet this deadline, they risk failure for the clerkship. The procedures marked with an asterisk* must be completed in the clinical setting and require direct patient contact.

<table>
<thead>
<tr>
<th>Minimum Required</th>
<th>Visit Type</th>
<th>Location of Service</th>
<th>Level of Participation</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Periodic preventive care (health maintenance)</td>
<td>Inpatient or Outpatient</td>
<td></td>
</tr>
<tr>
<td>Minimum Required</td>
<td>Problems</td>
<td>Location of Service</td>
<td>Level of Participation</td>
</tr>
<tr>
<td>1</td>
<td>Abnormal 1st trimester bleeding</td>
<td>Inpatient or Outpatient</td>
<td>x</td>
</tr>
<tr>
<td>Minimum Required</td>
<td>Procedures</td>
<td>Level of Participation</td>
<td></td>
</tr>
<tr>
<td>------------------</td>
<td>------------</td>
<td>-----------------------</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Observe</td>
<td>Assist</td>
</tr>
<tr>
<td>10</td>
<td>Breast exam*</td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>10</td>
<td>Fetal well-being assessment*</td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>5</td>
<td>Cervical cancer screening*</td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>5</td>
<td>Contraception counseling*</td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>5</td>
<td>Culture, cervical or vaginal*</td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>5</td>
<td>Domestic violence screening*</td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>5</td>
<td>Incontinence assessment*</td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>5</td>
<td>Lactation counseling*</td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>5</td>
<td>Sexually transmitted infection counseling/prevention*</td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>5</td>
<td>Sexually transmitted infection screening</td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>5</td>
<td>Substance abuse screening (general or opioid)*</td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>5</td>
<td>Tobacco use screening*</td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>5</td>
<td>Use of folic acid (preconception counseling)*</td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>3</td>
<td>APGAR score determination*</td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>3</td>
<td>Coach second stage labor*</td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>1</td>
<td>Foley placement*</td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>1</td>
<td>Wound repair/suturing*</td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>1</td>
<td>Cesarean section*</td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>2</td>
<td>Major surgical procedure</td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>2</td>
<td>Minor surgical procedure</td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>3</td>
<td>Vaginal delivery*</td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>1</td>
<td>Colposcopy</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Epidural/spinal anesthesia</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Laparoscopic surgery</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Surgical safety timeout</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Ultrasound (OB or GYN)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

One breast exam must be performed in the clinical setting with direct patient contact, while others may be completed on a simulator/model. In addition, 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.

<table>
<thead>
<tr>
<th>Abnormal pap management</th>
<th>Endometrial ablation</th>
<th>KOH/wet prep</th>
<th>Tubal ligation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dilation and curettage</td>
<td>Intrauterine device (IUD) insertion</td>
<td>Mammmogram</td>
<td></td>
</tr>
</tbody>
</table>

**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. If these opportunities for specific patient encounters do not occur, the student will be exposed to the conditions/diseases secondarily through reading assignments, completion of Aquifer or OnlineMedEd cases, or discussions with the Clerkship Director. 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 for the purposes of choosing 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 the 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.

### Alternate Educational Experiences
Should the student be unable to complete and record a required clinical encounter or another clerkship requirement due to circumstances beyond their control, the Education Director will determine an appropriate alternative educational experience. The student will record as instructed in ETS. The utilization of alternative educational activities is monitored by the curriculum committee regularly.

### Online Curriculum

- **APGO uWISE**
  The APGO uWise is available online and is a supplemental student learning tool consisting of sample quizzes. These are not required and not part of the grade, but it is highly recommended that the quizzes are completed each week. This question bank is very beneficial in preparation for the end of clerkship NBME subject exam. Initial sign-up instructions “APGO uWISE Interactive Self-Evaluation Guide” can be found on the OBGYN Canvas page.

### Meetings

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

### Clerkship Exams

- **Formative**
  Meaningful mid-rotation feedback requires self-assessment. The student will complete a timed online test through APGO uWise (free). After completion, the student will upload their score to Student Academics at the end of week 3, assess the gaps in medical knowledge and identify content areas to improve by the end of the clerkship. Students will also document as an Educational Activity in ETS by selecting as “[OBGYN] Completion of NBME or APGO Self-Assessment” in the drop-down menu. Students are required to discuss their score and improvement plan with their Clerkship Director during mid-rotation formative feedback meeting.
  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. Students in academic need should contact their Student Support Coordinator for more information on the institutional paid voucher availability policy.

- **Summative**
  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.

### 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. A weekly outline of reading assignments and cases is available on the Canvas OBGYN page.

**Electronic Resources**
These resources are commonly used by obstetricians and gynecologists, and available on 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**

**Clerkship Specific Grading**
The standardized clerkship policy can be found on the Office of Medical Education website.

1. **If any assignments are submitted late or remediation is required, the student is no longer eligible for honors** and will be assigned an initial grade of IR (Incomplete Remediation) until remediation has been completed
2. **Any breach in professionalism renders a student ineligible for honors**, including failure to document work hours accurately
3. Documentation of at least 100 patient encounters (pass/fail)
4. Timely documentation of all required problems and procedures (pass/fail)
5. Accurate and timely recording of work hours
6. Satisfactory and timely submission of first delivery reflection (pass/fail)
7. Satisfactory and timely submission of history and physical project (pass/fail)
8. Timely completion of formative exam and satisfactory creation of self-improvement plan (pass/fail)
9. Satisfactory and timely submission of labor and delivery project (pass/fail)
10. Satisfactory completion of mini oral exam (pass/fail)
11. Clinical performance must be exemplary to be considered for honors
12. NBME must be at the 75th percentile or higher to be eligible for honors consideration and must be at the 10th percentile to pass the clerkship

**Formative Evaluation**
A mid-clerkship evaluation is completed by the Clerkship Director to provide feedback to students on their progress in the clerkship. This will include progress toward the achievement of clerkship objectives, competencies, assignments, required encounters, and mid-rotation formative quiz/exam. A student workflow guide is available on the AY2021-22 MD Clerkship Org Site.

**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.
**Grade Assignment**

The final grade is assigned by the Education Director and is based on all aspects of the clerkship, including clinical performance, attitude and performance during the weekly meetings with the Clerkship Director, and the results of the NBME Clinical Subject Exam. There are no grade quotas, and it is possible for any student to earn the grade of honors.

**Course Objectives**

The following table outlines the clerkship objectives and assessment method for each, intended to be used as a guide for student learning. Each clerkship objective is mapped to the FSU COM Educational Program Objectives (EPOs) and ACGME Core Entrustable Professional Activities (EPAs). To view the complete table and for an overview of the curricular map for the clerkship years at the Florida State University College of Medicine, please visit the syllabi page of the Office of Medical Education website.

<table>
<thead>
<tr>
<th>Obstetrics and Gynecology Clerkship Objectives</th>
<th>Educational Program Objectives (EPOs)</th>
<th>Entrustable Professional Activities (EPAs)</th>
<th>Assessment</th>
</tr>
</thead>
</table>
| Routinely includes information about the patient’s menstrual, obstetric, gynecologic, sexual and/or contraceptive histories when performing the medical history. | 1.1                                  | 1, 5                                     | • Clerkship Director observation  
• Education Director evaluation of assignments  
• Faculty observation  
• Online modules  
• Oral presentation |
| Routinely includes a pelvic exam and a standard breast exam when appropriate in the physical exam.                | 1.2                                  | 1, 5                                     | • Education Director evaluation of assignments  
• Faculty observation |
| Demonstrate best practice techniques when collecting gynecological specimens.                                    | 1.3                                  | 5, 12                                    | • Education Director evaluation of assignments  
• Faculty observation |
| Identify and implement age-appropriate preventive services.                                                     | 1.4                                  | 1                                        | • Faculty observation |
| Utilize evidence-based screening tools to identify women at risk for: depression, domestic violence, opioid/substance use, tobacco use, urinary incontinence and osteoporosis. | 1.5                                  | 3                                        | • Education Director evaluation of assignments  
• Faculty observation  
• Patient documentation |
| Use evidence-based digital resources at the point of care to access clinical information.                        | 1.6                                  | 7                                        | • Faculty observation |
| Demonstrate sound clinical reasoning by: 1) constructing organized and thorough patient presentations; 2) generating reasonable patient problem lists; 3) formulating appropriate differential diagnoses; and, 4) generating logical diagnostic and management plans. | 1.7                                  | 2, 3, 5, 6                               | • Clerkship Director observation  
• Education Director evaluation of assignments  
• End of clerkship exam  
• Faculty observation  
• Oral presentation |
| Demonstrate core knowledge and basic skill in the delivery of routine prenatal care, including: 1) diagnosing of pregnancy; 2) discussing the rationale behind initial and subsequent laboratory assessment of the pregnant patient; 3) discussing the appropriate use of diagnostic ultrasonography during pregnancy; 4) identifying women at high risk throughout the pregnancy; 5) recognizing and offering assistance for the common concerns of the pregnant woman; and, 6) recognizing the common complications of pregnancy. | 2.0, 3.2                             | 1, 2, 3                                  | • Clerkship Director observation  
• End of clerkship exam  
• Faculty observation  
• Online modules  
• Patient documentation |
<p>| Demonstrate core knowledge and basic skill in the delivery of care of the woman in labor, including: 1) diagnosing labor; 2) | 2.0, 3.3, 7.1, 7.2                  | 1, 2, 3, 10                              | • Clerkship Director observation |</p>
<table>
<thead>
<tr>
<th>Activity</th>
<th>Required Competencies</th>
<th>Assessment Tools</th>
</tr>
</thead>
</table>
| Demonstrating the ability to diagnose ruptured membranes; determining cervical dilatation; monitoring the progress of labor utilizing Friedman's curve; interpreting basic patterns on a fetal monitoring strip; assisting/performing at least 3 vaginal deliveries; assisting/performing at least 3 perineal repairs; and, assisting/observing at least one operative delivery. | 2.0, 3.4 1, 2, 4 | • Education Director evaluation of assignments  
• End of clerkship exam  
• Faculty observation  
• Patient documentation |
| Demonstrating core knowledge and basic skill in the delivery of routine post-partum care, including: 1) encouraging successful breastfeeding and recognizing common breastfeeding problems; 2) recognizing the symptoms and signs of an uncomplicated post-partum course; 3) identifying common post-partum conditions/complications; and, 4) assisting the patient with choosing appropriate post-partum contraception. | 2.0, 3.5 2, 12 | • Clerkship Director observation  
• End of clerkship exam  
• Faculty observation  
• Patient documentation |
| Demonstrating core knowledge and basic skill in the delivery of pre-operative and post-operative care, including: 1) demonstrating appropriate scrubbing and sterile technique; 2) demonstrating basic skills as an operative assistant; 3) performing surgical-associated procedures (dressing changes, suture/staple removal, catheter care, etc.); and, 4) identifying common post-operative complications in OB/GYN. | 2.0, 3.6 1, 3, 5 | • Clerkship Director observation  
• End of clerkship exam  
• Faculty observation  
• Patient documentation |
| Demonstrating basic patient education skills when informing and educating patients about common health concerns. | 2.1 3, 5, 11 | • Clerkship Director observation  
• Education Director evaluation of assignments  
• Faculty observation  
• Patient documentation |
| Demonstrating basic counseling skills when addressing the following issues with patients: 1) contraception choices; 2) lactation/breastfeeding; 3) osteoporosis prevention; 4) preconception recommendations; 5) prevention of sexually transmitted infections; and, 6) smoking cessation. | 2.2 3 | • Faculty observation  
• Patient documentation |
| Demonstrating shared decision-making techniques when negotiating and communicating patient management plans. | 2.3 3 | • Faculty observation |
| Demonstrating core knowledge and basic skill in the delivery of preconception care: Every fertile patient; every visit. | 3.1 1 | • Clerkship Director observation  
• End of clerkship exam  
• Faculty observation  
• Patient documentation |
| Assessing knowledge and creating a self-improvement plan that demonstrates a commitment to self-directed learning. | 3.2, 3.3 | • Education Director evaluation of assignments  
• Faculty observation |
| Demonstrating knowledge of the ethical conflicts that arise in the practice of obstetrics and gynecology, self-awareness of personal bias re: the ethical conflicts that arise in the practice of obstetrics and gynecology, and is able to be both respectful and helpful to patients who hold different ethical beliefs. | 4.1, 4.2 9 | • Clerkship Director observation  
• End of clerkship exam  
• Faculty observation  
• Patient documentation |
| Demonstrating effective communication and teamwork skills with other health professionals (IPE). | 4.4 9 | • Clerkship Director observation |
Work collaboratively with other health care professionals as a team member when caring for maternity and surgical patients.

4.3, 7.1, 7.2 9

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.

4.3, 6.6, 7.1, 7.2, 7.4 9, 13

### 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 [FSUCOM Student Handbook](#) for details of the attendance policy, a notice of absences, and remediation. Students must use the [absence request form](#) that is 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 students' 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](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 academic standards of the course while empowering the student to meet 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 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](mailto:oas@fsu.edu), [https://dsst.fsu.edu/oas](https://dsst.fsu.edu/oas/).

#### College of Medicine Student Disability Resources

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 Student Counseling Services and the FSU Office of Accessibility Services to determine whether they might be eligible to receive 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 the medical degree.

Clinical and Educational Work Hours Policy
The FSU College of Medicine uses the Accreditation Council for Graduate Medical Education requirements regarding clinical experience and education as a guideline for our policy. Our goal is to provide a structure that promotes a culture of patient safety and student education, and also facilitates personal-professional balance and well-being for the student.

- Clinical experience and scheduled educational activities must be limited to no more than 80 hours per week, when averaged over a 4-week period.
- 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 this 4-hour period. After a 24-hour period 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.
- 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.

Documentation of time spent on clinical experience and education
Students must use ETS to document by self-report their daily 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 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 hours include reading about patient conditions and procedures, self-directed study for clerkships/courses, work completed for assignments, learning modules and assigned reading.

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 he/she is 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 FSUCOM Student Handbook and report incidents of mistreatment as soon as possible.