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

Course Director

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Donna Hill, MD
Shermeeka Hogans-Mathews, MD
Ramiz Kseri, MD
Ken O'Dell, MD
Steve Quintero, MD
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George Rust, MD
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CLC Program Coordinator
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Course Goals

The [Pre-clerkship Preparation Boot Camp](#) is the final capstone to the pre-clerkship curriculum. Having taken USMLE Step 1 and while awaiting their scores, students prepare to begin their core clinical rotations by acquiring and practicing essential clinical procedures and skills. These clinical skills not only help prepare the student to participate meaningfully in patient care but, importantly, are a step toward mastering competencies foundational to the [Core Entrustable Professional Activities for Entering Residency](#). The 13 Core EPAs are nationally-defined (Association of American Medical Colleges), competency-based descriptions of patient-care activities every medical school graduate should be expected to be able to perform without direct supervision on the first day of residency. Emphasis is placed on the importance of honesty and self-awareness of limitations in maintaining patient safety. Skills to be developed fall into several categories:

1. **Medical knowledge and Clinical skills / procedures**: interpretation of tests such as EKG, CPR, venipuncture, starting an IV line, bag-mask ventilation, lumbar puncture, Foley catheters, accurate use of medical devices / instruments names
2. **Interprofessional interactions**: working in interprofessional Teams, understanding roles and responsibilities of Team members, understanding OR staff roles
3. **Communications**: documentation formats including SOAP notes and oral presentation
4. **Patient Safety**: sterile technique, significance of structured patient hand-off

Course Goals

The global course goals are:

1. Attain certification in Advanced Cardiac Life Support (ACLS).
2. Demonstrate readiness for clerkship rotations through competence in basic skills for patient encounters, including hand washing, sterile technique and other infection control measures, and common clinical procedures.
3. Demonstrate the ability to communicate clinical information accurately and concisely, verbally and in writing.
4. Demonstrate the basic health care team skills necessary for patient safety and quality care, including interprofessional interactions.

Course Format

Attendance and professional dress appropriate to the clinical care environment are required for all sessions.

Pre-Clerkship Boot Camp (PCBC) is a competency-based experience designed to prepare students to participate actively in the management of patients with common clinical presentations encountered in the practice of general medicine. Students will have the opportunity to improve their basic clinical skills, learn new procedures and examination techniques, and assess the effectiveness of their clinical communications. The emphasis is on what the student can do, not just what they know. Activities include simulation scenarios, video analysis, interpretation of imaging and laboratory test results, hands-on practice with models, equipment, and simulators, and delivering oral presentations. Students are encouraged to practice lifelong learning skills and to read about the cases and procedures they encounter during the course by using the EBM resources posted on Canvas and provided through the FSU COM library.

To pass this course students are required to be prepared, prompt, and actively participate in each required session. In addition, they must complete the procedures and assignments listed below, as well as obtain certification in Advanced Cardiovascular Life Support (ACLS).

Procedures:

Faculty will observe and verify that each student has met [novice level](#) competency standards in the performance of activities related to Core Entrustable Professional Activities (EPA) for Entering Residency 12- Perform General Procedures of a Physician:

- Basic cardiopulmonary resuscitation (CPR)
- Placement of a Foley catheter
- Bag-mask ventilation (BMV)
- Lumbar Puncture
- Sterile technique
- IM injection
- Venipuncture
- Suturing
- Insertion of an intravenous line
- Informed consent

Assignments:

Assignments aligned with the content covered in lectures and skills sessions are posted and submitted on Canvas.
**Professionalism**

Medicine is a Profession, which means it entails unique responsibilities and obligations as well as unique privileges. "Professional identity formation" is an objective as important as learning the sounds and anatomy of the heart, but requires a different set of learning skills. Important among those are reflection, self- and peer assessment, deliberate practice, and learning for mastery (not grades).

Below are some professional behaviors that will become a part of your everyday life. They are founded on respect for patients, those who accompany them, other professional disciplines, and to our duty as outlined in the [Physician Charter on Professionalism](#).

**Confidentiality:** Patients — including Standardized Patients — deserve to be treated with respect. Respect for patients includes keeping all patient information confidential. Patient information may be shared with other health care professionals that have a legitimate, professional "need to know," or with specific family members, friends, or others that have permission from the patient for access to the information.

Be especially conscientious about discussions of patients in public places. Even when patient names are not used, the discussion may reveal the patient's identity to others who overhear the discussion. Rather than risk a violation of patient confidentiality, discuss patients only in a private setting and only with individuals who have a legitimate need to know.

Be careful to keep all patient notes, reports and materials confidential. Patient records, should be returned to faculty, destroyed, or kept in a secure place.

Similarly, your classmates deserve to be treated with respect. Information learned about your classmates and their families while in class is considered confidential. You are not free to disclose this material to others without the specific consent of the person.

Violation of confidentiality may result in a Report of Concern for Unprofessional Behavior [see Student Handbook](#) and may be referred to the Student Evaluation and Promotion Committee (SEPC). Egregious unprofessional behavior of any variety may result in suspension of the student, a failing grade for the course, and/or referral to SEPC.

**Accountability:** This implies a timely, conscientious, earnest approach to care for our patients. Students are expected to display a sensitivity to those they care for and in how they do so. This is a learnable skill and mindset which is no less important than technical knowledge or the development of other clinical skills. Students are expected to self-reflect on their progress in professional identity formation. If they or others identify shortcomings, the student must take ownership of these issues and work with faculty and other providers towards improvement and mastery. It is important for the student to demonstrate respect for their profession and towards those who play a role in their learning including patients, staff, and others. The student's behaviors can and often do impact trust, compliance, and eventually outcomes.

**Students will dress professionally for the clinical care environment every day.** When practicing skills stations, with simulated bodily fluids, students are encouraged to wear clean scrubs for the duration of the learning activity. Students are required to carry the Protocol for Blood Borne Pathogen Exposure (e.g. needlestick) card with them at all times.

**Professional Attire:** Medical students, faculty and staff are all ambassadors and representatives of the College of Medicine and of the medical profession. Appearance and behavior should at all times demonstrate respect for the profession and for our patients. The needs of patients must always come first, and any barriers to meeting those needs (including attire, appearance and grooming) must be removed.

Professional attire should be worn in settings where students interact with people from outside the COM, and particularly when interacting with Standardized Patients (SPs) in the CLC, on a "house visit," or when in a preceptor's office or clinic, a hospital or nursing facility. Professional attire should also be worn when patients, guests, or visitors are present in large or small group sessions.

Specific standards for professional attire are detailed at the end of this document.

### Course Objectives mapped to Education Program Objectives (EPO)

<table>
<thead>
<tr>
<th>Course Objectives</th>
<th>EPOs</th>
<th>Means of Assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>PCBC 1 Define professional identity, protected health information (PHI), and the responsibilities of a medical trainee to demonstrate professional attitudes and behaviors in all interactions with faculty, staff, peers, and patients and to identify resources available and when to use them in the face of breeches in professional conduct.</td>
<td>5.1, 5.2, 5.3, 5.4, 8.2</td>
<td>Faculty observation</td>
</tr>
</tbody>
</table>
PCBC 2 | Demonstrate proficiency organizing and communicating information in oral presentations. | 4.2 | Oral presentation
--- | --- | --- | ---
PCBC 3 | Describe the basic physical properties and imaging characteristics of ultrasound, and identify opportunities, advantages, and limitations for its point-of-care use related to the abdomen, heart, lung, and DVT | 1.1, 1.4, 2.3 | Clinical skills checklist
PCBC 4 | Demonstrate knowledge and basic proficiency to perform all required skills and procedures: scrubbing, LP, venipuncture, IV, Foley, suturing, IM injection, and informed consent. | 1.1 | Clinical skills checklist
PCBC 5 | Interpret and report the results of basic laboratory studies, chest x-rays, EKGs, and US images. | 1.4, 2.3 | Quizzes; ACLS
PCBC 6 | Explain the underlying principles of evaluative tests. | 2.3 | ACLS

**Required Materials (All required texts are available as ebooks through the COM library)**

Other materials required for clinical sessions:

a. Clinical examination equipment: stethoscope with diaphragm, bell and pediatric option, oto/ophthalmoscope, #128 and #512 tuning forks, penlight, reflex hammer, Rosenbaum eye chart and a sphygmomanometer with pediatric, adult, and large adult sized cuffs.
b. Also bring the following to each session in the CLC:
   - A watch capable of measuring seconds
   - A pen for writing (blue or black ink)
   - The student’s personal mobile device loaded with the appropriate medical software/applications.

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**Grading System**

**Assessment Methods**

Formative and summative assessment exercises will be required throughout the block. Engagement and intentional participation in all activities, including peer feedback on assignments, is expected.

**Quizzes**

Throughout Week 2 there will be daily faculty-written quizzes on CXR and EKG interpretation. These quizzes, delivered on Canvas, will be timed and proctored. Immediately after, the faculty will review the correct answer choices. An average score of ≥ 80.0% is required to pass the course.

**Clinical Skills Checklist**

A score of ≥ 80.0% on the skills checklist is required to pass the course. Students who do not achieve a score of 80.0% or higher on the initial attempt will be provided with directive feedback and required to return to reattempt to demonstrate proficiency.

**Written exams**

ACLS certification includes a written examination which must be passed with a score ≥84%.

**Grading**

The FSU COM has adopted a pass/fail grading system which is used in the curriculum for the first and second years (See Student Handbook). To achieve a grade of Pass in BMS 6801 (Pre-clerkship Preparation Boot Camp) a student must meet all of the following requirements:

1. Attendance and satisfactory participation in all required activities. Unexcused absence from an activity for which attendance is required may require remediation as determined by the course directors. Multiple unexcused absences from required activities will be considered a Professionalism concern and may result in a Report of Concern for Unprofessional Behavior (see Student Handbook) and referral of the student to the Student Evaluation and Promotions Committee.
2. Satisfactory completion of all assignments, as determined by the course directors, and the post-course evaluation.
3. Successful completion of ACLS training and certification.
4. Demonstration of the attitudes and behaviors of Medical Professionalism in all aspects of the course. Professionalism concerns may generate a Report of Concern for Unprofessional Behavior and may result in receiving a grade of fail for the course.
Course Evaluation

Students are required to complete and submit the post-course evaluation.

- Evaluations are delivered on-line through Qualtrics surveys comprised of radio-button questions and free response text.
- Students will receive an email directly from Qualtrics which allows tracking of completion of the survey INDEPENDENT from survey responses. **Survey responses are both anonymous and confidential.** No responses are associated with student identity.
- Failure to complete the survey will be considered Unsatisfactory Professionalism and will result in a grade of IR or Fail.

Additional feedback is encouraged at all times on all components of the course and will assist the course directors in providing timely and continuous quality improvement. Feedback through email or meetings with faculty is always welcome.

**Detailed Schedule - AY2023-2024**

<table>
<thead>
<tr>
<th>Week 1</th>
<th>Morning</th>
<th>Afternoon</th>
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</thead>
<tbody>
<tr>
<td>Monday</td>
<td>Auditorium 8:30 Orientation 9:00 Introduction to ultrasound 10:00 MSK ultrasound 11:00 DVT ultrasound</td>
<td>CLC 1:00 – 5:00 US – MSK and DVT Ophthalmology</td>
</tr>
<tr>
<td>Tuesday</td>
<td>Auditorium 8:00 Professionalism expectations 9:30 Mistreatment reporting 10:30 Cardiac ultrasound</td>
<td>CLC 1:00 – 5:00 US – MSK and DVT Ophthalmology</td>
</tr>
<tr>
<td>Wednesday</td>
<td>Auditorium 8:00 Note writing workshop 9:00 Oral presentation workshop</td>
<td>CLC 1:00 – 5:00 US – Cardiac Echo Suturing</td>
</tr>
<tr>
<td>Thursday</td>
<td>Auditorium 8:00 Cardiac X-Ray 9:30 EKG 11:00 Labs</td>
<td>CLC 1:00 – 5:00 US – Cardiac Echo Suturing</td>
</tr>
<tr>
<td>Friday</td>
<td>CLC 8:00 Physical exam check off</td>
<td>CLC 1:00 Physical exam check off</td>
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<table>
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<tr>
<th>Week 2</th>
<th>Morning</th>
<th>Afternoon</th>
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</thead>
<tbody>
<tr>
<td>Monday</td>
<td>Auditorium 8:00 Abdomen ultrasound 9:00 QUIZ 9:30 Quiz review 10:00 Lung ultrasound 11:30 Informed consent</td>
<td>CLC 1:00 – 5:00 US – Lung Scrubbing Venipuncture/IV Foley catheter</td>
</tr>
<tr>
<td>Tuesday</td>
<td>Auditorium 8:00 Time management 10:00 Abdomen ultrasound 11:00 QUIZ 11:30 Quiz review</td>
<td>CLC 1:00 – 5:00 US – Lung Scrubbing Venipuncture/IV Foley catheter</td>
</tr>
<tr>
<td>Wednesday</td>
<td>CLC 8:00 – 12:00 Abdomen US LP with IC</td>
<td>Auditorium 1:00 Mixed image review 2:00 QUIZ 2:30 Quiz review 3:00 Mixed image review</td>
</tr>
<tr>
<td>Thursday</td>
<td>CLC 8:00 – 12:00 Abdomen US LP with IC</td>
<td>Auditorium 1:00 Mixed image review 2:00 QUIZ</td>
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<tr>
<td></td>
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<td>2:30 Quiz review</td>
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<tr>
<td>Friday</td>
<td>Auditorium</td>
<td>CLC 1:00 – 5:00</td>
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<tr>
<td></td>
<td>8:00 QUIZ</td>
<td>US open practice</td>
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<tr>
<td></td>
<td>8:30 Quiz review</td>
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<tr>
<td></td>
<td>9:00 Gold Humanism panel</td>
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<td></td>
<td>10:30 Resident panel</td>
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</table>

### Week 3

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<tr>
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<th>8:00, 10:00. 12:30, 2:30 start times (add 5 minutes Prep before start time)</th>
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</thead>
<tbody>
<tr>
<td>Monday</td>
<td>8:00, 10:00. 12:30, 2:30 start times (add 5 minutes Prep before start time)</td>
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<tr>
<td>Tuesday</td>
<td>8:00, 10:00. 12:30, 2:30 start times (add 5 minutes Prep before start time)</td>
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<tr>
<td>Wednesday</td>
<td>8:00, 10:00. 12:30, 2:30 start times (add 5 minutes Prep before start time)</td>
<td></td>
</tr>
<tr>
<td>Thursday</td>
<td>8:00, 10:00. 12:30 (add 5 minutes Prep before start time)</td>
<td></td>
</tr>
<tr>
<td>Friday</td>
<td>Physical exam check off remediation</td>
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</tbody>
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## Policies

### 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. 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 in order to train and function effectively as a physician.

**The Office of Student Counseling Services**

Medical Science Research Building, 2301

Phone: (850) 645-8256  Fax: (850) 645-9452

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
Voice: (850) 644-8566  TDD: (850) 644-8504
oas@fsu.edu

### Academic Honor Code

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/Academics/Academic-Honor-Policy)

**Attendance Policy**

**University Attendance Policy:**
Excused absences include documented illness, deaths in the family and other documented crises, call to active military duty or jury duty, religious holy days, and official University activities. These absences will be accommodated in a way that does not arbitrarily penalize students who have a valid written excuse. Consideration will also be given to students whose dependent children experience serious illness.

The College of Medicine has detailed attendance policies as they relate to each cohort and events that conflict with course schedules. See the FSUCOM Student Handbook for details of attendance policy, notice of absences and remediation.

Unexcused absence from a scheduled examination or quiz may result in a score of zero (0 %) being assigned for that assessment. Unexcused absence from an activity for which attendance is required may be considered as an issue of Professionalism.

**Academic Success**

Your academic success is a top priority for Florida State University. University resources to help you succeed include tutoring centers, computer labs, counseling and health services, and services for designated groups, such as veterans and students with disabilities. The following information is not exhaustive, so please check with your advisor or the Department of Student Support and Transitions to learn more.

**Confidential campus resources:**

Various centers and programs are available to assist students with navigating stressors that might impact academic success. These include the following:

**Victim Advocate Program**

University Center A, Rm. 4100  
(850) 644-7161  
Available 24/7/365|Office Hours: M-F 8-5  
https://dsst.fsu.edu/vap

**Counseling and Psychological Services (CAPS)**

Florida State University’s Counseling and Psychological Services (CAPS) primary mission is to address psychological needs and personal concerns, which may interfere with students’ academic progress, social development, and emotional well-being. The following in-person and virtual (tele-mental health) services are available to all enrolled students residing in the state of Florida:

1. Individual therapy  
2. Group therapy  
3. Crisis Intervention  
4. Psychoeducational and outreach programming  
5. After hours crisis-hotline  
6. Access to community providers for specialized treatment

Call 850-644-TALK (8255) for more information on how to initiate services.

Counseling and Psychological Services  
250 Askew Student Life Center  
942 Learning Way  
(850) 644-TALK (8255)  
Walk-in and Appointment Hours: M-F 8 am – 4 pm  
https://counseling.fsu.edu/

**University Health Services**

Services at UHS are available to all enrolled students residing in Florida:  
The mission of University Health Services (UHS) is to promote and improve the overall health and well-being of FSU students. UHS provides a coordinated continuum of care through prevention, intervention, and treatment. Services include general medical care, priority care, gynecological services, physicsals, allergy injection clinic, immunizations, diagnostic imaging, physical therapy, and a medical response unit. The Center for Health Advocacy and Wellness (CHAW) assists students in their academic success through individual, group, and population-based health and wellness initiatives. Topics include wellness, alcohol and other drugs, hazing prevention, nutrition and body image, sexual health, and power based personal violence prevention. For more information, go to uhs.fsu.edu.
Clinical Learning Center (CLC) Specific Absence Policy

**CLC scheduled activities**

Students with a legitimate reason to miss a scheduled session in the CLC must request an approved absence through Student Affairs through the online link. Students with approved absences will be allowed to reschedule or participate in a make-up session. Unapproved absences may not be rescheduled or made up. Repeated unapproved absences may result in a failing grade for the course and a Report of Concern for Unprofessional Behavior.

If you know you will be absent from a scheduled CLC session, please complete the absence approval request at least two weeks in advance. For absences that are approved at least two weeks in advance, a change in CLC schedule assignment will be arranged.

One method for addressing a planned and approved absence is to identify a classmate willing to exchange scheduled sessions with you. In this situation, both students (the student with the approved absence and the willing classmate) should send a request via email to CLC Team at least two weeks in advance. Students will be notified re: approval of these requests. Please note: Sending a request is NOT equivalent to receiving approval.

Unplanned but excusable absences from CLC sessions are absences due to circumstances beyond the student’s control. Examples include student illness and/or family death. When such a situation occurs, please contact CLC Team as soon as possible, to inform her that you will not be present. Then, submit an absence request to Student Affairs through the online link. Student Affairs will classify the absence as excused or unexcused.

If the absence qualifies as an “excused” absence, the student must contact CLC Team to develop a plan to make up the missed session. These sessions may require the presence of an SP and a TA or CLC faculty member. Any excused absence will not impact the student’s grade.

Unexcused absences generally involve circumstances within the student’s control. Examples of unexcused absences include the student who forgets about a scheduled CLC session, the student who skips the session to study, and/or any absence where an able student fails to contact Student Affairs and CLC Team to inform them that the student will not be present for the session.

If the absence is unexcused, the clinical block director will discuss the situation with the student. Any further unexcused absences will result in the notification of Student Affairs, a Report of Concern for Unprofessional Behavior, and referral of the student to the Student Evaluation and Promotions Committee. Students with unexcused absence(s) will still be responsible for the missed material in future OSCE’s and written examinations.

**Professional Attire**

Professional attire consists of clothes consistent with community norms for health care providers. The COM CLC simulates the health care environment. Length and fit of all attire is to be in accordance with that acceptable for providers in a professional healthcare environment; oversized, undersized, tight-fitting, seductive, and/or revealing clothing is not acceptable.

**Fit**

Make sure your clothing fits properly.

Tight fitting clothes may hinder your range of motion and prevent you from reaching, bending, twisting, kneeling or squatting. You need to ensure you’re able to perform any physical exam or patient care activity without limitations. This also applies to loose fitting clothes as they also may interfere with patient care. When it comes to jewelry, wear a minimal amount. Jewelry can harbor microorganisms, contributing to the spread of disease. Large or loose jewelry can also get tangled or pulled on, possibly causing injuries to the patient or the provider.

**Exposure and Safety**

Make sure you’re conscientious about which parts of your clothing, skin, or hair are exposed to the environment and visible to, and/or touching your patients and colleagues.

For example, open-toed shoes are prohibited by OSHA regulations in clinical settings and places like the anatomy lab where bodily fluids or sharp objects may contact one’s body. This is also true for hair. If you have long hair, make sure it’s pulled back and secured so it won’t touch surfaces or the patients. Artificial nails are prohibited by CDC recommendation as they are more likely to harbor gram-negative pathogens, even after handwashing.

**Modesty**
Make sure you're dressed in a way that maintains appropriate boundaries and makes you, the patient, and staff feel safe.

Aside from work-related exposure described above, clothing that reveals a lot of skin may make your patient uncomfortable for a variety of reasons (culture, religion, values, etc). Clothing that reveals arms, legs, midriff or chest areas may also pose a safety risk for the student in terms of harassment; some patients may erroneously misinterpret revealing clothing as an invitation to flirt or pursue the student.

Presentation

Remember: you are a representative of the FSU COM and the profession.

This means neatly groomed hair, including facial hair, ironed clothing AND white coat. Refrain from using cologne or hygiene products with strong fragrances as they may trigger medical conditions (e.g. asthma, migraines). Nails should be trimmed to not extend past finger’s edge to avoid causing pain with palpation and other maneuvers.

Suggested clothing

- Slacks or skirt and a collared shirt, blouse, or sweater.
- Length for dress/skirt edge should be no higher than 2" above the top of the knee-cap (patella) as garments move higher during examinations and sitting down.
- Ties may be either required or forbidden in some clinical situations.
- Footwear: dress or closed-toe shoes (no sandals, no open-toe footwear).
- Recommended flat or low heel height (no more than 2”).
- Body art should be covered, and visible piercings should be removed while on duty.
  - Ear piercings are allowed but are limited to two per ear. This is a common hospital policy that we are following to get you used to it.
- Neutral tones for nail polish.

Unacceptable attire includes, but is not limited to, the following:

- Jeans of any style or color, denim material or "denim look" material
- Sheer or see-through fabrics
- Gym attire including shorts, leggings, yoga pants, sports bras, tank tops unless otherwise specified for a given activity (see below).

The established "norms" of certain clinical settings may modify these standards for professional attire, but any variations in professional attire must be approved in advance by the student's supervisor.

For curricular activities where guests or patients are present: Expectation is business casual with a white coat on.

On those occasions when students examine each other, you will be informed of the appropriate apparel for that session. Consult your supervisor to clarify expectations for student attire in any ambiguous or new situations.
**FSU COM Education Program Objectives**

<table>
<thead>
<tr>
<th></th>
<th>PATIENT CARE: Provide patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.1</td>
<td>Perform all medical, diagnostic, and surgical procedures considered essential for the area of practice</td>
</tr>
<tr>
<td>1.2</td>
<td>Gather essential and accurate information about patients and their condition through history-taking, physical examination, and the use of laboratory data, imaging and other tests</td>
</tr>
<tr>
<td>1.3</td>
<td>Organize and prioritize responsibilities to provide care that is safe, effective, and efficient</td>
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<tr>
<td>1.4</td>
<td>Interpret laboratory data, imaging studies, and other tests required for the area of practice</td>
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<tr>
<td>1.5</td>
<td>Make informed decisions about diagnostic and therapeutic interventions based on patient information and preferences, up-to-date scientific evidence, and clinical judgment</td>
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<tr>
<td>1.6</td>
<td>Develop and carry out patient management plans</td>
</tr>
<tr>
<td>1.7</td>
<td>Counsel and educate patients and their families to empower them to participate in their care, showing consideration for their perspective throughout treatment</td>
</tr>
<tr>
<td>1.8</td>
<td>Provide appropriate referral of patients including ensuring continuity of care throughout transitions between providers or settings, and following up on patient progress and outcomes</td>
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<tr>
<td>1.9</td>
<td>Provide health care services to patients, families, and communities aimed at preventing health problems or maintaining health</td>
</tr>
<tr>
<td>1.10</td>
<td>Provide appropriate role modeling</td>
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| 2 | KNOWLEDGE FOR PRACTICE: Demonstrate knowledge of established and evolving biomedical, clinical, epidemiological and social-behavioral sciences, as well as the application of this knowledge to patient care |
| 2.1 | Demonstrate an investigatory and analytic approach to clinical situations |
| 2.2 | Apply established and emerging bio-physical scientific principles fundamental to health care for patients and populations |
| 2.3 | Apply established and emerging principles of clinical sciences to diagnostic and therapeutic decision-making, clinical problem-solving, and other aspects of evidence-based health care |
| 2.4 | Apply principles of epidemiological sciences to the identification of health problems, risk factors, treatment strategies, resources, and disease prevention/health promotion efforts for patients and populations |
| 2.5 | Apply principles of social-behavioral sciences to provision of patient care, including assessment of the impact of psychosocial-cultural influences on health, disease, care-seeking, care-compliance, barriers to and attitudes toward care |
| 2.6 | Contribute to the creation, dissemination, application, and translation of new health care knowledge and practices |

| 3 | PRACTICE-BASED LEARNING AND IMPROVEMENT: Demonstrate the ability to investigate and evaluate their care of patients, to appraise and assimilate scientific evidence, and to continuously improve patient care based on constant self-evaluation and life-long learning |
| 3.1 | Identify strengths, deficiencies, and limits in one’s knowledge and expertise |
| 3.2 | Set learning and improvement goals |
| 3.3 | Identify and perform learning activities that address one’s gaps in knowledge, skills or attitudes |
| 3.4 | Systematically analyze practice using quality improvement methods, and implement changes with the goal of practice improvement |
| 3.5 | Incorporate feedback into daily practice |
| 3.6 | Locate, appraise, and assimilate evidence from scientific studies related to patients’ health problems |
| 3.7 | Use information technology to optimize learning |
| 3.8 | Participate in the education of patients, families, students, trainees, peers and other health professionals |
| 3.9 | Use information technology to obtain and utilize information about individual patients, populations of patients being served or communities from which patients are drawn to improve care |
| 3.10 | Continually identify, analyze, and implement new knowledge, guidelines, standards, technologies, products, or services that have been demonstrated to improve outcomes |

<p>| 4 | Interpersonal and Communication Skills: Demonstrate interpersonal and communication skills that result in the effective exchange of information and collaboration with patients, their families, and health professionals |
| 4.1 | Communicate effectively with patients, families, and the public, as appropriate, across a broad range of socioeconomic and cultural backgrounds |
| 4.2 | Communicate effectively with colleagues within one’s profession or specialty, other health professionals, and health related agencies |
| 4.3 | Work effectively with others as a member or leader of a health care team or other professional group |
| 4.4 | Act in a consultative role to other health professionals |
| 4.5 | Maintain comprehensive, timely, and legible medical records |
| 4.6 | Demonstrate sensitivity, honesty, and compassion in difficult conversations about issues such as death, end- |</p>
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<thead>
<tr>
<th>4.7</th>
<th>Demonstrate insight and understanding about emotions and human responses to emotions that allow one to develop and manage interpersonal interactions</th>
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<tbody>
<tr>
<td>5.1</td>
<td>Demonstrate compassion, integrity, and respect for others</td>
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<td>5.2</td>
<td>Demonstrate responsiveness to patient needs that supersedes self-interest</td>
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<td>5.3</td>
<td>Demonstrate respect for patient privacy and autonomy</td>
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<td>5.4</td>
<td>Demonstrate accountability to patients, society and the profession</td>
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<tr>
<td>5.5</td>
<td>Demonstrate sensitivity and responsiveness to a diverse patient population, including but not limited to diversity in gender, age, culture, race, religion, disabilities, and sexual orientation</td>
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<tr>
<td>5.6</td>
<td>Demonstrate a commitment to ethical principles pertaining to provision or withholding of care, confidentiality, informed consent, and business practices, including compliance with relevant laws, policies, and regulations</td>
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<tr>
<td>6.1</td>
<td>Work effectively in various health care delivery settings and systems relevant to their clinical specialty</td>
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<tr>
<td>6.2</td>
<td>Coordinate patient care within the health care system relevant to their clinical specialty</td>
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<tr>
<td>6.3</td>
<td>Incorporate considerations of cost awareness and risk-benefit analysis in patient and/or population-based care</td>
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<tr>
<td>6.4</td>
<td>Advocate for quality patient care and optimal patient care systems</td>
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<tr>
<td>6.5</td>
<td>Participate in identifying system errors and implementing potential systems solutions</td>
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<tr>
<td>6.6</td>
<td>Work in interprofessional teams to enhance patient safety and improve patient care quality</td>
</tr>
<tr>
<td>7.1</td>
<td>Work in cooperation with other professionals to establish and maintain a climate of respect, dignity, diversity, ethical integrity, and trust in order to enhance team functioning and serve the needs of patients, families, and populations</td>
</tr>
<tr>
<td>7.2</td>
<td>Utilize and enhance one’s own expertise by understanding and engaging the unique and diverse knowledge, skills, and abilities of other professionals to enhance team performance and maximize the quality of patient care</td>
</tr>
<tr>
<td>7.3</td>
<td>Exchange relevant information effectively with patients, families, communities, and other health professionals in a respectful, responsive, and responsible manner, considering varied perspectives and ensuring common understanding of, agreement with, and adherence to care decisions for optimal outcomes</td>
</tr>
<tr>
<td>7.4</td>
<td>Participate in and engage other members of interprofessional patient care teams in the establishment, development, leadership, and continuous enhancement of the team in order to provide care that is safe, timely, efficient, effective, and equitable</td>
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<tr>
<td>8.1</td>
<td>Develop the ability to use self-awareness of knowledge, skills and emotional limitations to engage in appropriate help-seeking behaviors</td>
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<td>8.2</td>
<td>Demonstrate healthy coping mechanisms to respond to stress</td>
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<td>8.3</td>
<td>Manage conflict between personal and professional responsibilities</td>
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<td>8.4</td>
<td>Practice flexibility and maturity in adjusting to change with the capacity to alter behavior</td>
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<tr>
<td>8.5</td>
<td>Demonstrate trustworthiness that makes colleagues feel secure when one is responsible for the care of patients</td>
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<tr>
<td>8.6</td>
<td>Provide leadership skills that enhance team functioning, the learning environment, and/or the health care delivery system</td>
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<td>8.7</td>
<td>Demonstrate self-confidence that puts patients, families, and members of the health care team at ease</td>
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<td>8.8</td>
<td>Recognize that ambiguity is part of clinical health care and respond by utilizing appropriate resources in dealing with uncertainty</td>
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<tr>
<td>9.1</td>
<td>Describe the social determinants of health, and identify how they create opportunities for and barriers to wellness for underserved populations.</td>
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<tr>
<td>9.2</td>
<td>Identify community resources and the ways physicians can partner with them to improve individual and population health and address social determinants of health.</td>
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<tr>
<td>9.3</td>
<td>Discuss the process and components of community health assessment.</td>
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<tr>
<td>9.4</td>
<td>Illustrate how community health assessment is used to identify the health needs and issues of a given population and inform decision making to improve population health status.</td>
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