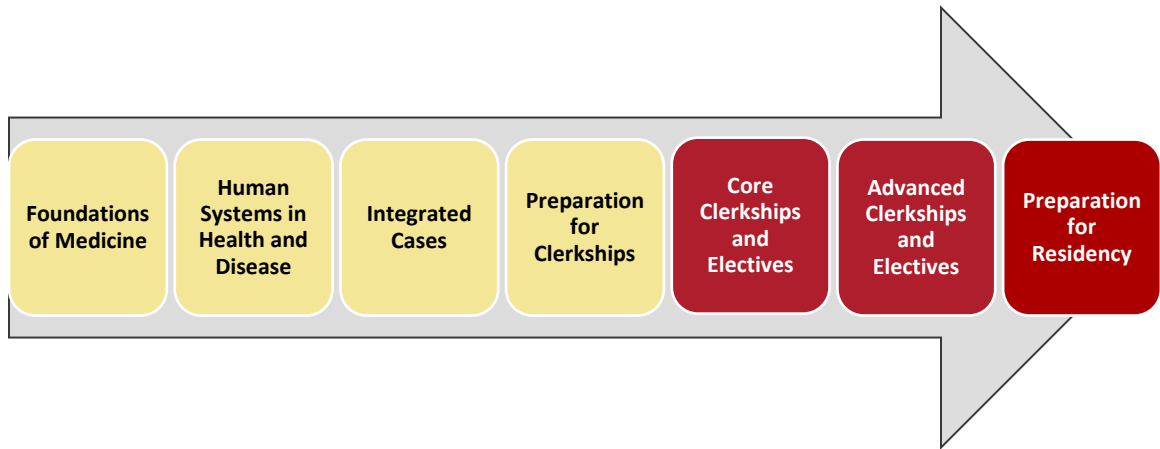


MEDICINE



BMS 6801 Pre-clerkship Preparation Boot Camp



Florida State University
College of Medicine

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Overview

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 www.mededportal.com/ collaborative/resource/887), 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:** writing orders and prescriptions, interpretation of tests such as ultrasound and 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:** alternative documentation formats (complete History and Physical, SOAP notes, structured patient hand off, specialty-specific documentation), oral presentation, obtaining informed consent
4. **Patient Safety:** sterile technique, structured patient hand off, rapid cycle quality improvement ("plan, do, check")

Learning Objectives

Detailed learning objectives are provided for each activity.

The global course objectives 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, using a variety of formats including SOAP notes, complete history and physical, requests for consultations, admission orders, and prescriptions, using vocabulary specific to clinical disciplines (e.g., obstetrics, pediatrics, surgery, etc.).
4. Demonstrate the basic health care Team skills necessary for patient safety and quality care, including interprofessional interactions and obtaining informed consent.

Course Format

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

The focus is on what the student can do, not just what he or she knows. Activities include simulation scenarios, video analysis, interpretation of imaging and laboratory test results, hands-on practice with models, equipment, and simulators, performance practice, exercises writing orders and prescriptions, and documentation. Certification in Advanced Cardiovascular Life Support (ACLS) is a required component of the course. 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. Students will be introduced to responsibility for the care of patients through simulation activities across this course. To pass this course students are required to complete assignments as listed below.

Students are *encouraged* to practice lifelong learning skills and to *read* about the cases and conditions they encounter during the course by using the EBM resources provided through the FSU COM library. In addition, faculty may post journal articles of interest on Canvas.

Faculty will observe and verify that each student has met novice level competency standards in the performance of activities related to four Core EPAs for Entering Residency:

- EPA 4 Enter patient orders / prescriptions
- EPA 11 Obtain informed consent

- EPA 12 Perform general procedures (e.g. venipuncture, IV access, etc.)
- EPA 13 Identify system failures, contribute to culture of safety

Assignments:

Students must check the Canvas site for announcements twice each day, at 8 am and 1 pm, for patient care tasks. Unless otherwise stated, all tasks must be completed by close of business the same day, i.e., no later than 6PM.

The grid below details the activities students must complete during Pre-Clerkship Preparation Boot Camp.

EPA #	Activity	Documentation	Due Date
3	Interpret EKG	Assignments through Canvas	Instruction in assignment
3	X-ray interpretation	Assignments through Canvas	Instruction in assignment
4	Prescriptions	Assignments through Canvas	Instruction in assignment
5	Pediatric SOAP note	Assignment t through Canvas	11:59 PM EST after CLC encounter
5	H&P, complete	Assignment through Canvas	11:59 PM EST after CLC encounter
6	Oral presentation of clinical case	Dyad check list CLC and Video submitted on Canvas	
11	Informed consent counseling	CLC Documentation	
12	Venipuncture	CLC Documentation	
12	IV placement	CLC Documentation	
12	CPR	CLC Documentation	
12	Bag and mask ventilation	CLC Documentation	
12	Foley placement	CLC Documentation	
12	Lumbar puncture	CLC Documentation	
13	Admission of errors	N/A	
13	Infection control precautions: gown, glove	N/A	
13	Hepa mask	N/A	
	PubMed and Social Media	Assignment t through Canvas	11:59 PM EST Sunday after session

Evaluation Methods

Direct observation by clinical faculty will be an important method of student evaluation. This will be augmented by review of completed assignments. **Students are required to access and, if indicated, respond to feedback on submitted assignments.**

Student e-Portfolio

Students are encouraged to add completed assignments to their [Student ePortfolio](#) for future reference on clinical rotations. You may find useful as reference your work on:

- Prescriptions
- SOAP notes
- Full H&P (history and physical)
- Admission orders
- CXR interpretation
- EKG interpretation

Scheduled Hours

The course is four weeks in duration and will consist of simulated patient care including CLC patient encounters and simulator task training, small groups, lectures, conferences, and reading assignments. Consistent with all clerkships, the course adheres to ACGME rules that limit the work week to no more than 80 hours. The ACGME guidelines allow a maximum 24 hours continuous clinical experience, with an additional 4 hours permitted for transition of patient care (with no new patients) or for student education. There is no after-hour call during this course. For future reference during your clerkships, after a 24 hour call, the student must have 14 hours off before returning to work.

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).

Two essential Professional behaviors that will become a part of your everyday life are founded on respect for patients:

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.

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 for [men](#) and for [women](#) are detailed at the end of this document and can always be found on the course Canvas site.

Learning Objectives

	Education Program Objectives	Course Objectives	Means of Assessment
1	PATIENT CARE: Provide patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health		
1.2	Perform all medical, diagnostic, and surgical procedures considered essential for the area of practice	Demonstrate the ability to perform all required procedures. [EPA-12]	Faculty observation in skills sessions
1.3	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	Recognize the structure, importance, purpose of the H&P as a comprehensive assessment/ plan. Identify clinical reasoning as a component of the History & Physical. Identify the elements of history that are unique to the pediatric patient. Describe the approach to the pediatric examination that differs from an adult patient. Plot growth parameters on age and sex appropriate charts.	H&P and Pediatric SOAP note
1.4	Interpret laboratory data, imaging studies, and other tests required for the area of practice	Interpret and report the results of basic clinical tests (e.g., EKG, CBC). [EPA-3] Interpret x-rays, images or other laboratory tests. [EPA-3]	EKG, X-ray assignments
1.5	Counsel and educate patients and their families	Develop one healthcare evidence based topic	Pub Med/Social

	to empower them to participate in their care, showing consideration for their perspective throughout treatment	that is suitable for social media.	Media Project
1.7	Develop and carry out patient management plans	<p>Identify the components of medication prescriptions</p> <p>Describe enhanced requirements for prescribing controlled substances</p> <p>Identify errors in sample prescriptions</p> <p>Compose prescriptions in written formats</p> <p>Attend to patient-specific factors such as age, weight, allergies and co-morbid conditions when writing prescriptions.</p> <p>Enter patient orders and prescriptions. [EPA-4]</p>	Rx writing assignments
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		
2.2	Apply established and emerging bio-physical scientific principles fundamental to health care for patients and populations	Explain the underlying principles of evaluative tests.	EKG, X-ray, and Rx writing exercises
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		
2.5	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	<p>Give at least three examples of cultural dynamics that can either help or hinder the interaction between patients and health professionals.</p> <p>Define and give examples of the central concepts presented in this CRASH-course (Culture, Respect, Assess, Affirm, Sensitivity, Self-Awareness, and Humility).</p> <p>Demonstrate behaviors that show respect for individuals from at least two cultural groups other than their own.</p> <p>Name two or three issues which require “hot-button” sensitivity when dealing with individuals of another culture.</p> <p>Describe self-awareness of at least two personal values or perceptions of other people’s behaviors which might be culturally-derived.</p> <p>Define two “next-steps” that the participant could take to bring the CRASH principles home or to teach them to others.</p>	Reflection
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	Apply increased self-knowledge achieved during Boot Camp to starting clerkships	End of course reflection
3.2	Set learning and improvement goals	<p>Describe the expert-performance approach.</p> <p>Construct a mental representation of a clinical skill.</p>	Deliberate practice session
3.3	Identify and perform learning activities that address one’s gaps in knowledge, skills or attitudes	<p>Discover one area of unconscious bias and reflect on how that bias impacts one’s perception, behavior, and interaction with others.</p> <p>Use reflection to gain self-awareness and practice synthesizing concepts that may impact interpersonal relationships including the patient-provider interaction.</p> <p>Identify an opportunity to mitigate the impact of unconscious bias.</p>	Reflection

3.4	Systematically analyze practice using quality improvement methods, and implement changes with the goal of practice improvement	Apply a SWOT Analysis to one area of personal/academic development.	SWOT exercise
3.6	Locate, appraise, and assimilate evidence from scientific studies related to patients' health problems	Develop one healthcare evidence based topic that is suitable for social media.	Pub Med/Social Media Project
3.8	Participate in the education of patients, families, students, trainees, peers and other health professionals	Develop one healthcare evidence based topic that is suitable for social media.	Pub Med/Social Media Project
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		
4.2	Communicate effectively with colleagues within one's profession or specialty, other health professionals, and health related agencies	Identify and organize appropriate information to be communicated in different situations. Demonstrate the ability to organize information in oral presentations. [EPA-6]	Oral presentation to faculty
4.5	Maintain comprehensive, timely, and legible medical records	Document clinical encounter. [EPA-5]	
5	PROFESSIONALISM: Demonstrate a commitment to carrying out professional responsibilities and an adherence to ethical principles		
5.1	Demonstrate compassion, integrity, and respect for others	Demonstrate professional behavior in all interactions with peers, patients, and faculty	
5.4	Demonstrate accountability to patients, society and the profession	Complete all required activities in a timely fashion.	
5.6	Demonstrate a commitment to ethical principles pertaining to provision or withholding of care, confidentiality, informed consent, and business practices, including compliance with relevant laws, policies, and regulations	Demonstrate the ability to obtain informed consent. [EPA-11] Maintain confidentiality for patient information.	
6	SYSTEMS-BASED PRACTICE: Demonstrate an awareness of and responsiveness to the larger context and system of health care, as well as the ability to call effectively on other resources in the system to provide optimal health care		
6.5	Work in interprofessional teams to enhance patient safety and improve patient care quality	Explain a "no blame" environment and a focus on systems-based change, and how the implementation of these practices contributes to patient safety and quality care. [EPA-13]	
6.6	Participate in identifying system errors and implementing potential systems solutions	Develop an awareness of the ease at which medical errors occur. Identify some components of system based care, for example providers, organizations, processes, and equipment. Evaluate the causes and prevention of error by performing a root cause analysis with a fishbone diagram as a novice. Understand the principles of clear patient communication and demonstrate the components of open disclosure with apology	Analysis exercise Role play
7	INTERPROFESSIONAL COLLABORATION: Demonstrate the ability to engage in an interprofessional team in a manner that optimizes safe, effective patient- and population-centered care		
7.1	Work 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	Demonstrate the basic health care Team skills necessary for patient safety and quality care	
7.2	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	Identify team members' roles and the responsibilities associated with each role. Establish and maintain a climate of mutual respect, dignity, integrity, and trust. Understand one's own roles and personal limits as an individual provider. Know to seek help from the other members of the team to optimize health care delivery.	
8	PERSONAL AND PROFESSIONAL DEVELOPMENT: Demonstrate the qualities required to sustain lifelong personal and professional growth		

8.1	Develop the ability to use self-awareness of knowledge, skills and emotional limitations to engage in appropriate help-seeking behaviors	Demonstrate self-awareness of limitations and need to ask for help.	Faculty observation; self-assessment
8.2	Demonstrate healthy coping mechanisms to respond to stress	Discuss resilience and burnout, and practice assessing signs of personal burnout. Practice at least one evidence-based strategy that can help prevent burnout.	Personal health improvement plan
9	FSU COM MISSION: Demonstrate responsiveness to community needs – especially elder, rural, minority and underserved populations		
9.1	Describe the social determinants of health, and identify how they create opportunities for and barriers to wellness for underserved populations.	Identify the impact of racial and ethnic disparities in healthcare	

Required Materials (All required texts are available as ebooks through the [COM library](#))

Other materials required for clinical sessions

- a. Clinical examination equipment: Each student must purchase and/or have available the following 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. Opportunities to purchase this equipment at a discount will be provided prior to orientation. Bring your examination equipment with you to each CLC session.
- 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.

Grading System

Assessment Methods

Examinations

Formative and summative assessment exercises will be required throughout the block.

Written exams

ACLS certification includes a written examination which must be passed with a score **≥80%**.

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 (**Preclerkship 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.
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** (see [Student Handbook](#)) and may result in receiving a grade of fail for the course.

Course Evaluation

Students will have the opportunity to provide constructive feedback through evaluation forms completed throughout the semester. Evaluations will include both content and facilitation/teaching. Feedback is encouraged at all times on all components of the course and will assist the block directors in providing a timely continuous quality improvement.

Policies

Americans with Disabilities Act

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 Student Disability Resource Center to determine whether they might be eligible to receive accommodations needed in order 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.

[The Office of Student Counseling Services](#)

Medical Science Research Building, 2301

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

Students with disabilities needing academic accommodation should:

- (1) register with and provide documentation to the Student Disability Resource Center; and
- (2) bring a letter to the instructor indicating the need for accommodation and what type.

Please note that instructors are not allowed to provide classroom accommodation to a student until appropriate verification from the Student Disability Resource Center 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:

[Student Disability Resource Center](#)

874 Traditions Way

108 Student Services Building

Florida State University

Tallahassee, FL 32306-4167

Voice: (850) 644-9566 TDD: (850) 644-8504

sdrc@admin.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 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 pages 28-29 of [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 (for example, Small Group session) may be considered as an issue of Professionalism. Any unexcused absence may require completion of the Performance Improvement Plan (see Grading section, above).

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 [Ms. Danforth](#) 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 [Ms. Danforth](#) **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 [Ms. Danforth](#) 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 [Ms. Danforth](#) 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**, 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 physicians. Examples of these norms in Tallahassee are: no jeans, seductive, revealing or tight-fitting clothes, sheer or see-through fabrics, strapless, low-necked or midriff-baring clothes, shorts, sweats, hats, or open-toed shoes.

For men, professional attire consists of slacks, a collared shirt and dress or casual shoes (no sport shoes or sandals). Ties may be either required or forbidden in some clinical situations.

For women, professional attire consists of slacks or a conservative length dress or skirt with a blouse or sweater. Skirt edge should rise no higher than 2" above the top of the knee during all clinical care and training maneuvers and should not be tight-fitting. Heels more than 3" in height are never appropriate in clinical settings.

For both men and women, a white lab coat is required. On those occasions when students are examining each other, you will be informed of the appropriate apparel for that session.

Professional appearance: Long hair must be pulled back and secured. Facial hair must be neatly groomed. If possible, all tattoos should be covered by clothing. No visible body piercing except a single piercing in each ear. No large earrings or loose jewelry. Fingernails must be trimmed. If nail polish is worn, it should not be a distracting color. No strong perfume or other scented products. In compliance with OSHA regulations, closed-toed shoes are required in all clinical settings—including the CLC.

The established "norms" of certain clinical settings may modify these standards for professional attire, but any variations in professional attire must be approved by the student's supervisor. Consult your supervisor to clarify expectations for student attire in any ambiguous or new situations.