

**It is the sole responsibility of the student to check AIMS for schedule and site updates on a daily basis!**

**Northeast Ohio Medical University  
College of Medicine**

**Family Medicine Clerkship, 40002**  
**Course Syllabus**  
**AY 2018-19**

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## **COURSE DESCRIPTION**

The Family Medicine Clerkship is a six-week clinical rotation that is designed to provide all M3 students with:

- an introduction to the basic knowledge, skills and attitudes of the discipline of family medicine that are essential to the fundamental education of all physicians,
- opportunities to apply these basic knowledge, attitudes and skills to the care they deliver to patients and families during the rotation, and
- a working knowledge of the role of the family physician in the health care delivery system.

## **COURSE ADMINISTRATION**

### **Clinical Experiential Director and Course Directors**

Dr. David Sperling is Clinical Experiential Director for the Family Medicine Clerkship, M3 Clerkships Course Director and in collaboration with Dr. Susan Labuda Schrop, M3 Clerkships Course Co-Director, provides oversight for the clerkship. In his role as Clinical Experiential Director, Dr. Sperling is responsible for ensuring that implementation of the Family Medicine Clerkship curriculum is consistent across all teaching sites.



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### **Hospital Sites and Clerkship Site Directors**

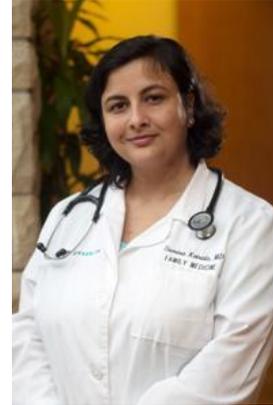
The facilities for clinical instruction for the Family Medicine Clerkship are those institutions and residency training programs that have committed themselves to the Northeast Ohio Medical University College of Medicine for participation in the undergraduate training of the NEOMED students.



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## **COURSE GOALS**

The overall goal of the Family Medicine Clerkship is the mastery of the basic core competencies that are essential for practice as a competent physician focused on the AAMC competencies. The Family Medicine Clerkship will focus on these competencies in the context of the delivery of care for patients of varying ages, from birth to geriatrics in the in- and out-patient family medicine environment regardless of the student's career focus, and include the following.

Upon completion of the six-week Family Medicine Clerkship, the student will be able to:

- I. Demonstrate basic clinical skills essential to practicing medicine effectively and use a family medicine approach to the diagnosis and management of problems commonly seen in the family medicine setting
  - collect an appropriate history
  - perform an accurate physical exam directed to the patient's problems(s)
  - generate a reasonable differential diagnosis and problem list
  - formulate a basic plan for diagnostic treatment
  - identify and prioritize a patient's problems
  - formulate a plan for a patient who presents with multiple undifferentiated problems
  - assess and manage common and acute problems
  - present a case in a clear, organized and efficient manner
  - document patient care information in the medical record
  
- II. Establish effective physician-patient relationships
  - establish rapport with a patient
  - use vocabulary appropriate for the patient
  - assess patient's understanding
  - use appropriate listening skills
  - show empathy and compassion
  - demonstrate respect for the individuality, values and rights of the patient and his/her family
  
- III. Demonstrate understanding of the principles of health promotion, disease prevention and patient education
  - describe appropriate and cost-effective screening tools and protocols for health maintenance in specific populations
  - list health risk factors for a patient based on age, gender, medical history and social history of the patient and his/her family
  - counsel patients and families about signs and serious effects of harmful personal behaviors and habits
  - list indications and schedules for immunizations in all age groups
  
- IV. Further develop his/her professional role as a physician
  - demonstrate self-directed learning and self-assessment
  - attend promptly and prepare for all activities
  - show respect for patient confidentiality

- show respect for patients, colleagues, peers and ancillary health care workers
- describe the legalities of the physician/patient relationship and the application to a student physician
- behave in a morally and ethically appropriate manner

### **Other Possible Clerkship Goals and Experiences**

During the six-week Family Medicine Clerkship, every attempt will be made to expose the student to a wide variety of clinical presentations and important clinical problems. The student may be exposed to any or all of the following; the student is responsible for the demonstration of adequate knowledge and skills in these areas if included in the clerkship experience at his/her respective family medicine center.

- techniques in basic office and laboratory procedures
- the role and responsibilities of the family physician in the process of consultation and referral
- community resources that exist to meet the needs of patients and their families
- therapies and medications considering cost, benefits and risks
- the impact of gender, life stage, cultural background and socioeconomic status on a patient's health care needs

### **STUDENT ASSIGNMENT**

Students are assigned to one of the ten hospital sites. All sites offer the benefits of a major teaching center with outstanding attending faculty. The clerkship teaching sites are commonly bound by shared learning objectives as well as a common didactic and clinical curriculum. Teaching sites are closely monitored to ensure comparability. The depth and scope of clinical encounters during the six-week clerkship are comparable among sites as evidenced by student feedback, clerkship evaluations and National Board of Medical Examiners (NBME) subject examination scores.

### **FIRST DAY REPORTING**

For first day reporting instructions, please refer to "When and Where to Report" document in the Family Medicine folder on AIMS M3 Clerkships site. You will need to bring your student ID, white coat and license plate number. Students will be notified by email of any change in reporting time or location.

### **ORIENTATION CASE ASSIGNMENT**

Before the start of this rotation, you are required to complete an online case assignment through Aquifer Family Medicine. In a welcome email, you will be assigned to case #1 or case #2. At the Site Orientation Session, you should be prepared to present and discuss your assigned case. Following are the instructions to gain access to the cases for first time users\*:

1. Go to: [https://www.meduapp.com/users/sign\\_in](https://www.meduapp.com/users/sign_in)
2. Enter your institutional e-mail under "Need to Register?" option

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## Need to Register?

Enter your institutional email

Register

3. Click “Register” button.
4. An email will be sent to you. Follow the instructions in the email to set up your account.

**\*You only need to register once with Aquifer to access Family Medicine, Internal Medicine, Pediatrics and Surgery (WISE-MD) modules. Separate registration is not required.**

### **ORIENTATION**

You are expected to report to your hospital clerkship site at the time designated in instructions on AIMS or as instructed in an email message from the site. This orientation will consist of:

- Brief introduction to the discipline of Family Medicine
- Discussion of the components and required assignments of the clerkship
- Logistics for your assigned center
- Review of the online case assignment (see above)

### **CLINICAL SKILLS EXPERIENCE PORTFOLIO**

The Family Medicine Clerkship Clinical Skills Experience Portfolio (CSEP) is an electronic checklist of clinical experiences developed for the clerkship and designed for students to use to track their progress in developing knowledge and skill in the following areas:

- Diagnoses/Symptoms/Clinical Scenarios
- Physical Examinations
- Procedures/Technical Skills
- Additional Clinical Activities
- Additional Learning Activities

**All items listed on the CSEP are required; i.e., students must document exposure to all of the listed experiences. Students are required to submit their CSEP electronically to the Clerkship Site Director for review at both the midpoint and the end of the clerkship.**

**See instructions below for accessing and entering data into CSEP:**

- Links to clerkship-specific content for each CSEP are posted on AIMS M3 Clerkship Site homepage. Follow the link for FM CSEP and enter your Banner ID number (excluding

- the @ character and initial zeros);
- Click the fields in which you wish to enter information. Please be sure to mark Patient Type, Setting and Level of Responsibility for each item;
  - click “**Submit**” when you have finished.
  - You do not need to put in your email address because you will receive a copy automatically whenever you submit.
  - To send a copy of your CSEP to your Clerkship Site Director or preceptor, enter their e-mail address at the bottom of the form.
  - You can return to the site as often as necessary throughout the rotation to update your entries. All previous entries will be preserved.

### **LEARNING STRATEGIES**

A variety of learning strategies will be used during the clerkship to help you achieve your goals. Strategies include but are not limited to:

- Clinical Experience – Inpatient and Ambulatory
- Patient Presentation-Faculty, Learner
- Peer Teaching
- Service Learning Activities
- Ward rounds
- Small group discussions
- Conferences and lectures
- Independent Learning
- Self-Directed Learning
- Case-Based Learning

### **AMBULATORY PATIENT CARE**

You are responsible for providing patient care in a variety of settings including the family medicine center, the hospital, private offices, at a patient’s home, at underserved clinics and other locations as assigned. Although times and places for patient care will vary among the clerkship sites, the process will be the same. You will see each patient alone, and then meet with a preceptor to discuss each case and your performance. The precepting session will conclude with the preceptor seeing the patient. (All patients seen by students must be seen by a physician before they leave the office.) In addition to seeing patients, you are expected to participate in office procedures, hospital admissions and therapy sessions, whenever possible.

At least half of your clerkship experience will be devoted to patient care. You will be expected to:

- accept responsibility as the main provider of care for assigned patients, under appropriate supervision, in the office and the hospital, including follow-up visits,
- read the patient’s chart and notes about patient visits or calls at night,
- interview each patient to collect the reason(s) for coming and complete a thorough history including a psychosocial systems review,
- conduct an appropriate physical examination and record findings,
- inform the patient that he/she will be seen next by the faculty preceptor,

- conduct, assist with or observe procedures, whenever possible,
- formulate a differential diagnosis,
- decide which diagnostic tests, if any, are indicated,
- consider therapeutic plans(s),
- present the case to the faculty preceptor and receive feedback on clinical skills,
- dictate or write notes in the problem-oriented medical record format or use an electronic medical record where available,
- write prescriptions, as indicated and approved by the faculty preceptor,
- document information about every patient and procedure in your logbook, and
- conduct library research regarding cases.

During this clerkship, you may have the opportunity to participate in the care of geriatric patients in a variety of settings. This experience provides you with exposure to the unique needs of older adult patients, the elements of a geriatric patient assessment (physical, cognitive, psychosocial and environmental), and the role of the family physician in care of older adults. You may also receive instruction and practice in conducting an assessment of older adults. Geriatric assessment forms and other reference materials will be available at each family medicine center.

During this clerkship, you also may be introduced to the variety of home health care needs and the role of the family physician in initiating and/or coordinating this care. If the opportunity arises, you will be expected to make a home visit as part of a home health care team or accompany a physician on a home visit.

### **CARE OF MEDICALLY UNDERSERVED PATIENTS**

Exposure to the needs of medically underserved patients is a goal of both NEOMED and this clerkship. Experience in the care of patients who are medically underserved is designed to stimulate interest and thinking about how to provide better care for people who face social and financial barriers in the changing health care delivery system.

You will have an opportunity to see patients in one of the several clinics in the community that provide care for uninsured and underinsured individuals. Physicians on staff at the clinics will precept and provide written and verbal feedback on your communication, problem solving and interpersonal skills. You will also have the opportunity to work closely with other caregivers at the clinics, such as nurses, physician assistants and nurse practitioners.

### **INPATIENT CARE**

**Overview:** You are expected to follow your own or assigned hospitalized patients and manage them with supervision, including follow-up visits. Note: Although a focus of this clerkship is on the care of ambulatory patients, it is a goal of the clerkship for students to be exposed to why and how the family physician admits patients and then manages their care during and after hospitalization.

**Rounds:** You are expected to help in the direct management of hospitalized patients in order to provide the full scope of medical care as delivered by family physicians. During your inpatient

care time, you will be included as a participant on rounds, morning report and any other patient conferences. You also may be assigned to participate in Saturday/Sunday morning rounds.

### **HOSPICE EXPERIENCE**

**Overview:** The experience consists of three to five sessions. You will be assigned to a hospice patient, visit with the patient and be responsible for discussing the patient at hospice team meetings.

**Goals:** Through the experience, students will have the opportunity to build a relationship with a patient with a terminal illness and his/her family. Students also will be able to participate in the multi-disciplinary approach to caring for a patient who has a terminally illness.

**Objectives:** Upon completion of this experience each student will have:

- established a relationship with a patient receiving hospice care via a Medicare certified hospice agency,
- an understanding of the role of the patient who is receiving hospice care as a valuable teacher of appropriate and effective end-of-life care,
- observed and participated in the function of the interdisciplinary hospice team,
- completed a thorough assessment of the patient's most troubling symptom and identify the role of each hospice team member in addressing the symptom, and
- recognized the importance of self care and self awareness in dealing with patients who have a terminal illness, and have been prepared to discuss personal and emotional responses of this experience with the hospice preceptor.

### **Resource List for Hospice Experience:**

#### **Books**

Kitchen Table Wisdom – Rachel Remen

My Grandfather's Blessings – Rachel Remen

Tuesdays with Morrie – Mitch Albom

Five People You Meet in Heaven – Mitch Albom

Too Soon to Say Goodbye – Art Buchwald

Learning to Fall – Phillip Simmone

The Four Things That Matter Most – Ira Byock

Dying Well: Peace and Possibilities at the End of Life – Ira Byock

The Death of Ivan Illyich – Leo Tolstoy

#### **Movies or Internet**

Tuesdays with Morrie – Mitch Albom (1999)

Five People You Meet in Heaven – Mitch Albom (2004)

**Assignments for Hospice Experience:** You will have assignments for each of your visits with your assigned patient. Additionally, at some time during your hospice experience, you are required to write a one- to two-page reflective essay about your experiences with and thoughts about your patient and the home visits. Turn a copy of this essay in to your hospice preceptor and

a copy in to your Clerkship Site Director, and send one copy via email to the Office of Palliative Care at NEOMED (mbs@neomed.edu).

Refer to the Hospice Experience section in the AIMS M3 Clerkships site, under Resources/Hospice Experience for further information.

### **PROCEDURES AND PROCEDURES WORKSHOPS**

**Overview:** During the rotation, you will obtain practical experience in performing common office procedures during patient care and during procedure workshops. You will document procedures during patient care in your Family Medicine Clerkship Clinical Skills Experience Portfolio (see Appendix A).

**Procedures Workshops:** You are required to attend several procedures workshops during the rotation. In some communities, teaching sites may combine for the workshop. The topics and a brief description of each follow. Instruction is individualized based on the skill/comfort level of each student. All sessions include hands-on practice with guidance and feedback from faculty. You will be graded on attendance and participation.

- **Basic Office Procedures:** Demonstration and practice of common office procedures, including injections, urinalysis, throat culture, glucose testing, etc.
- **Suturing and Laceration Repair/ Biopsy and Excision of Skin Lesions:** Introduction to principles of local/digital anesthesia and suturing with demonstration of appropriate techniques and various types of stitches. Introduction to types of biopsies (punch/excisional), indications and demonstrations of procedure; instruction in types of mole removal with mention of indications, scarring, etc.; cryotherapy instruction for lesions such as warts, keratoses, etc.
- **Eye/ENT Procedures:** Demonstration of cerumen removal, ear irrigation, and eye exam for foreign body, abrasion, etc., including lid eversion, fluorescein staining and tonometry
- **Casting and Splinting; Wrapping and Taping (optional):** Review of general principles of immobilization with attention to short arm and short leg casts and splints, as well as finger splinting and care of commonly seen sprains and strains

### **STUDENT CONFERENCES**

**General:** Clerkship students will typically meet once weekly as a group with the Clerkship Site Director (or designated faculty) to discuss common ambulatory symptoms based on recent patient encounters. These sessions provide structured time for students and a faculty leader to discuss:

- diagnosis and management of common, ambulatory problems,
- principles and processes of patient care in family medicine,
- care of a patient in the context of his/her family, and
- community health issues and resources.

You are expected to help lead the discussions and share information with your peers. These and other problem-based learning principles will be engaged to aid in the development of lifelong learning skills. You are expected to come to each conference prepared to:

- give a clinical presentation based on a recent patient encounter, including specific information on any use of alternative medicine,
- discuss clinical reasoning, differential diagnoses and decision making related to that patient and symptoms, and
- report on knowledge gained from preparatory research for the discussion.

You may be given an assignment for the next session.

### **Tips for Student Conferences:**

- Relax and enjoy the process!
- Make sure your topics are different from what the other students are presenting.
- Each presentation should be no more than 30 minutes.
- Present a patient care case that relates to your topic at the beginning of the presentation.
- Present information that is practical. How does this relate to the patient I presented? How will the information help me better assess and manage the patient and his/her problem?
- Research your area of interest and demonstrate preparation.
- Present in a creative manner. Use handouts when available. Provide a copy of articles for everyone.
- Make the presentation interesting. Address what is important/pertinent.
- Involve your audience. Keep their interest by giving them something to do.
- Define learning issues – something you want to know more about.
- Follow up on learning issues with the group.
- Ask questions of your peers when they are presenting. Be an active listener during presentations.

## **COURSE TEXTBOOKS AND INSTRUCTIONAL RESOURCES**

### **Required Textbooks and Resources**

The following text is required for the Family Medicine Clerkship:

South-Paul JE, Matheny SC, Lewis EL. (2015) CURRENT Diagnosis and Treatment in Family Medicine, 4<sup>th</sup> Edition, New York: McGraw-Hill.

### **Aquifer Family Medicine Online Cases/Independent Study**

You are required to complete a minimum of five (5) online cases through Aquifer Family Medicine, including the health maintenance case you were assigned for orientation. These cases are accessed in the same way that you completed the online case for orientation.

You are required to complete one case from each of the following topic areas:

- |                            |                                    |
|----------------------------|------------------------------------|
| • Common chronic diseases  | Complete case #6 or #8             |
| • Mental health issues     | Complete case #3 or #9             |
| • Musculoskeletal diseases | Complete case #4, #10, #11 or #25  |
| • Child health care        | Complete case #12, #21, #23 or #24 |

If applicable, your Clerkship Site Director will give you specific instructions about researching one or more of these cases in preparation for a student conference. Complete list of Aquifer Family Medicine cases is provided in the table below. **When you have completed a case, note the case and completion date on your Clinical Skills Experience Portfolio.**

<b>Aquifer Family Medicine Cases</b>		
Family Medicine 1 – 45-year-old female annual exam	Family Medicine 2 – 55-year-old male annual exam	Family Medicine 3 – 65-year-old female with insomnia
Family Medicine 4 – 19-year-old female with sports injury	Family Medicine 5 – 30-year-old female with palpitations	Family Medicine 6 – 57-year-old female presents for diabetes care visit
Family Medicine 7 – 53-year-old male with leg swelling	Family Medicine 8 – 54-year-old male with elevated blood pressure	Family Medicine 9 – 50-year-old female with palpitations
Family Medicine 10 – 45-year-old male with low back pain	Family Medicine 11 – 74-year-old female with knee pain	Family Medicine 12 – 16-year-old female with vaginal bleeding
Family Medicine 13 – 40-year-old male with a persistent cough	Family Medicine 14 – 35-year-old female with missed period	Family Medicine 15 – 42-year-old male with right upper quadrant pain
Family Medicine 16 – 68-year-old male with skin lesion	Family Medicine 17 – 55-year-old, post-menopausal female with vaginal bleeding	Family Medicine 18 – 24-year-old female with headaches
Family Medicine 19 – 39-year-old male with epigastric pain	Family Medicine 20 – 28-year-old female with abdominal pain	Family Medicine 21 – 12-year-old female with fever
Family Medicine 22 – 70-year-old male with new-onset unilateral weakness	Family Medicine 23 – 5-year-old female with sore throat	Family Medicine 24 – 4-week-old female with fussiness
Family Medicine 25 – 38-year-old male with shoulder pain	Family Medicine 26 – 55-year-old male with fatigue	Family Medicine 27 – 17-year-old male with groin pain
Family Medicine 28 – 58-year-old male with shortness of breath	Family Medicine 29 – 72-year-old male with dementia	Family Medicine 30 – 27-year-old female - Labor and delivery
Family Medicine 31 – 66-year-old female with shortness of breath	Family Medicine 32 – 33-year-old female with painful periods	Family Medicine 33 – 28-year-old female with dizziness
Pediatrics 1 – Evaluation and	Pediatrics 2 – Infant well	Pediatrics 3 - 3-year-old

care of the newborn infant	child (2, 6, and 9 months)	well-child visit
Pediatrics 4 – 8-year-old well-child check	Pediatrics 13 – 6-year-old with chronic cough	Internal Medicine 2 - 60-year-old Woman with Chest Pain
Internal Medicine 16 – 45-year-old man who is overweight		

### **Oral Health Modules**

You are required to complete one of the following three oral health modules from *Smiles for Life*, available at [www.smilesforlifeoralhealth.org](http://www.smilesforlifeoralhealth.org) (last accessed March 8, 2017):

- Child Oral Health
- Acute Dental Problems
- The Relationship of Oral to Systemic Health

Upon completion of the module, **print the certificate of completion and give it to your site director at your final evaluation meeting.**

### **Recommended Textbooks and Resources**

The following are recommended references for patient care, clerkship activities and preparation for the NBME shelf copy examination:

- RoshReview, Family Medicine (500+ NBME-style questions, available for purchase at: <https://www.roshreview.com/fm.html>; \$99 for 90 days, or \$49 for 31 days) (last accessed March 8, 2017)
- Family Practice (Kurowski/Rudy)
- Primary Care Medicine (Goroll/May/Mulley)
- Essentials of Family Medicine (Sloane/Slatt/Curtis, 2012 ed.)
- Family Medicine: Principles and Practice (Taylor)
- Fundamentals of Family Practice (Taylor)
- 20 Common Problems: Ethics in Primary Care (Sugarman)
- Pepid (on PDA)
- Blueprints of Family Medicine (Lipsky/King)
- Swanson’s Family Medicine Review: A Problem-oriented Approach (Tallia/Scherger/Dickey)
- American Board of Family Medicine website: <https://www.theabfm.org/> (last accessed March 8, 2017)
- Journal of Health Care for the Poor and Underserved
- Dr. Pestana's Surgery Notes: Top 180 Vignettes for the Surgical Wards (Kaplan Test Prep) 3rd Edition, Chapter 2-Orthopedics
- Others as directed by your Clerkship Site Director

## **FAMILY MEDICINE NBME PRACTICE SUBJECT EXAMINATION**

For the Family Medicine Clerkship, students are required to purchase and complete the practice subject examination prior to their mid-clerkship meeting with their site directors, and to prepare to share the results during the meeting. FM Practice Exam is part of Clinical Science Mastery Series and can be purchased by logging into NBME Self-Assessment Services <https://nsas.nbme.org/home> We strongly recommend taking the second practice test at least one week prior to the subject examination for self-assessment purposes and insight into how to focus study in the final week (or more) of the clerkship.

## **FAMILY MEDICINE NBME SUBJECT EXAMINATION PREPARATION TIPS**

- Begin your NBME subject examination study early and get in a regular habit of studying throughout the clerkship; the examination is too broad to rely on cramming.
- The NBME Family Medicine Modular Exam contains the following components:
  - Core exam: this exam covers a wide range of Family Medicine content, including health maintenance and common chronic care issues. 80 items.
  - Module in Musculoskeletal/Sports-related injury: This module consists of 10 items that focus on diagnosis and management of common musculoskeletal problems.
  - Module in Chronic Care: This 10-item module is designed to provide a supplement to the Core exam with additional chronic care items that emphasize continuity of care.
- Do **practice questions!** These links will take you to the NBME site that describes the content of the exam (last accessed March 7, 2017):  
[http://www.nbme.org/Schools/Subject-Exams/Subjects/clinicalsci\\_family-modular.html](http://www.nbme.org/Schools/Subject-Exams/Subjects/clinicalsci_family-modular.html)

Other practice questions: The consensus is that Pretest Family Medicine is the best source for practice questions. If you are feeling comfortable with the Pretest questions, consider signing up as a student member of the AAFP (it's free) which gives you access to 1,200 board review questions. In addition, you may consider purchasing the RoshReview item bank.

- Read about the patients you are seeing.  
The University of Illinois College of Medicine provides links to articles covering the vast majority of problems you will see during the clerkship. It is also tied to the national "Family Medicine Clerkship Curriculum" from which much of the shelf content is taken.  
<http://chicago.medicine.uic.edu/cms/One.aspx?portalId=506244&pageId=18009237> (last accessed March 7, 2017)
- Supplement this case-based reading by reviewing the following resources: **Case Files: Family Medicine, Step Up to Medicine (ambulatory section). Dr. Pestana's Surgery Notes: Top 180 Vignettes for the Surgical Wards (Kaplan Test Prep) 3rd Edition, Chapter 2-Orthopedics.**
- Do a **minimum of 5 Aquifer Family Medicine cases.**
- Based on student feedback, the ACP's Essentials for Students and the accompanying MKSAP for Students have been helpful as well as the USMLE World online question

bank.

- Consider using study tips for NBME shelf exams put together by NEOMED students in the Class of 2018 <https://1drv.ms/u/s!AlAkB8gcPGSxhmvNZO39gNF4MoZ6>

### **MINIMUM PERFORMANCE REQUIREMENTS**

To meet the minimum requirements necessary to complete the Family Medicine Clerkship satisfactorily, the student must:

- maintain a professional appearance and behavior at all times consistent with the highest standards of the profession
- perform all required activities, including but not limited to:
  - orientation case assignment
  - hospice experiences and related assignments
  - student conferences
  - Aquifer Family Medicine cases
  - Oral health module
  - Practice-based Learning and Improvement Project
- complete the Clinical Skills Experience Portfolio (CSEP) to the satisfaction of the Clerkship Site Director
- complete and present results of the NBME practice subject examination to the site director at the mid-clerkship review session
- obtain approval of the Clerkship Site Director prior to any absence
- pass the National Board of Medical Examiners (NBME) subject exam
- complete the end of clerkship evaluation (feedback) survey

Updated: 9.19.18

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