

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

**Northeast Ohio Medical University
College of Medicine**

**Surgery, 83003
Course Syllabus
AY 2021-22**

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COURSE LEADERSHIP

Dr. Drazen Petrinec is Clinical Experiential Director for the Surgery Clerkship. Dr. Susan Nofziger, Director of M3 Clinical Experiences, provides oversight for the clerkship as well. In his role as Clinical Experiential Director, Dr. Petrinec is responsible for ensuring that implementation of the Surgery Clerkship curriculum is comparable across all teaching sites.

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BASIC COURSE INFORMATION

Course Description

The Northeast Ohio Medical University College of Medicine M3 Surgery Clerkship is a five-week clinical rotation. This core curriculum is designed to develop clinical competence, foster appropriate attitudes toward professional responsibility as a physician and to introduce the student to the specialty of Surgery. The emphasis will be on the surgeon's method and approach to the care of the patient. Students will learn through direct patient care experience in inpatient, ambulatory, and

operating room settings. Learning will be supplemented by teaching rounds, small group discussions, lectures, and case-studies. Core competencies will serve as a framework for the educational experiences.

Course Enrollment Requirements

Successful completion of M1 and M2 years of study.

Trainings	Screenings	Immunizations
BLS OSHA ACLS HIPAA Responsible Conduct of Research Human Subjects Research	Criminal Background Check Toxicology Screen TB Test	Hepatitis B, MMR, Tdap, Varicella (required upon matriculation) Flu shot COVID vaccination strongly encouraged.

Clerkship Structure

- **Pre-reporting Assignment**
 In preparation for day-one orientation, students are expected to review PCC materials on Universal Precautions/Gowning/Gloving and Sterile Technique. This includes both the SIS videos and the summary card for reference. **Links to these resources can be found in CANVAS under the Surgery Clerkship “NEOMED M3 PCC 2021”.**
- **First Day Reporting**
 First day reporting information varies by clinical site. Please see OASIS for first day reporting information.
- **Orientation**
 The clerkship begins with orientation focusing on clerkship goals and objectives, student responsibilities, schedules, and assessment methods. Students will be provided information on relevant hospital policies and procedures, personnel contact information, meal allowances (if applicable) and parking. The orientation will include instruction on the risks of infection, techniques for reducing the spread of infection and site-specific hospital protocol to be followed in the event of exposure to an infectious or environment hazard or other injury and OR protocol.
- **Ambulatory experience**
 Students will spend time in outpatient clinics as well as in private offices of surgeons
- **Night Float/Evening Call**
 Call schedules may vary by clerkship teaching site. Students are not to be assigned call more than once every fourth night. Saturday and Sunday call will vary by rotation site. At the beginning of each clerkship, the Clerkship Site Director will assign call schedules and provide information regarding student responsibilities, sleeping facilities and meal reimbursements (if provided). Students on call must be available as required at all times.

In compliance with guidelines established by the Liaison Committee on Medical Education (LCME) and in accordance with the NEOMED Curriculum Contact Hours Policy, students

will not be required to work longer hours than residents.

All 5-week clerkships (FM, OBGYN, Pediatrics, Surgery and Psychiatry) will schedule **one half day of independent study time during the last week of the clerkship**. This time can be used to make up missed clinical assignments from earlier in the clerkship, complete enrichment activities, or as time to prepare for the upcoming shelf exam.

Clerkship Resources

Reading during the clerkship should include both textbooks and journal literature. Students should read about specific problems encountered with their own patients, as well as subjects of general importance in surgery. Specific reading assignments from both text and the periodic literature may be required at the discretion of the Clerkship Site Director or other designees. The recommended textbooks for the clerkship are:

Lawrence, PF, et al. (2012) Essentials of General Surgery. 5th Edition. Philadelphia: Lippincott Williams and Wilkins.

Lawrence, PF, et al. (2006) Essentials of Surgical Specialties. 3rd Edition. Philadelphia: Lippincott Williams and Wilkins. (2 Book Package)

CLERKSHIP OBJECTIVES

Clerkship educational program objectives are consistent across all seven clerkships and are aligned with [NEOMED's College of Medicine Program Objectives](#). Throughout the clerkships, students will continue to learn and refine skills, knowledge, attitudes, and professional behavior to move towards demonstrating entrustable behaviors. These competencies form the basis for the Student Performance Evaluation that is used to assess student performance in all clerkships.

Students will:

1. Gather patient information in a hypothesis-directed manner and perform an accurate physical examination, in the care of patients presenting with acute or chronic care needs related to trauma, post-operative fever or malignancy.
2. Develop a differential diagnosis with appropriate prioritization and recommended diagnostic testing for patients presenting with bodily injury or symptoms such as abdominal pain.
3. Generate an assessment and management plan and reasoning for the plan for patients presenting with life-threatening, surgical emergencies and acute or chronic care needs related to abdominal hernias and peripheral artery disease,
4. Apply medical knowledge of clinical disorders and surgical technique to provide care for patients undergoing routine technical procedures such as laceration repair, endoscopy and exploratory laparotomy while applying basic sterile technique.
5. Apply knowledge of evidence-based medicine to answer patient care related questions.
6. Demonstrate empathetic, honest, and bi-directional communication with patients and families.
7. Demonstrate clear, effective, and complete communication with the interprofessional health care team in both written and verbal forms.

8. Display professional behavior and a commitment to ethical principles including respecting patient autonomy and responding to patient needs that supersedes self-interest.
9. Formulate individual learning goals based on personal strengths and limitations, respond appropriately to feedback, and seek help when needed.
10. Identify and address potential barriers to communication with patients, families, and colleagues, including linguistic, educational, and cultural diversity, the psychosocial determinants of health, and patient/family preferences.

Clinical Skill Experience Portfolio (CSEP)

The Surgery 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

The CSEP list represents the minimum number and type of experiences required in the clerkship. The expectation is that you will participate in a broader array of clinical experiences that become available to you during your rotation. A list of [supplemental or alternative activities](#) is also available in CANVAS in the unlikely event that a student is not exposed to a particular experience. Students are required to review their CSEP with the Clerkship Site Director at both the midpoint and the end of the clerkship to review student progress and completion of items.

M3 Clerkships Clinical Skills Experience Portfolio Content		
Surgery Clerkship		
Diagnosis		
Appendicitis	Diverticulitis	Post-Operative Fever
Abdominal Pain	Hernia	Solid Organ Malignancy (e.g. breast, colon)
Cholecystitis	Peripheral Arterial Disease	Trauma
Physical Examination		
Abdominal exam		
Procedures/Technical Skills		
Abdominal Incision	Foley Catheter Placement	Sterile Technique (including prepping, draping, sterile field)
Cholecystectomy (open or laparoscopic)	Hernia Repair	Sutures/Staples Removal
Endoscopy	Intubation	
Exploratory Laparotomy	Laceration Repair/Suturing	
Additional Clinical Activities		
Document Admission Orders	Observe Informed Consent	Complete two observed H&Ps
Observe a procedural time-out		
Additional Learning Activities		
Develop and submit personal rotation goals by end of week one	Complete mid-course feedback session with site director	Complete PBLI Presentation
Review progress on personal goals midway and submit progress by end of clerkship	Complete four required WISEMD cases (Burn Management, Pediatric Hernia, Pediatric Pyloric Stenosis, Trauma Resuscitation) and others as required to ensure experience with all diagnoses listed under the "diagnosis section of the CSEP"	Review Core Educational Lecture Videos on CANVAS (as required to ensure experience with all diagnoses listed under the "diagnosis" section of the CSEP not covered by WISEMD Cases, ACS Modules, or clinical exposure)
Complete Surgery NBME subject practice examination	Review six core American College of Surgeon modules	Primary contact with at least 25 patients

LEARNING ACTIVITIES

Students will have access to lectures, either live or virtual, and the opportunity to participate in case conferences, depending on the clerkship site. Students at all sites are required to attend any lectures, conferences or Grand Rounds listed on their schedule for their site.

Instructional Methods/Learning Strategies

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

- Patient encounters (inpatient, private office, clinics, hospice centers)
- Web-based lectures
- Teaching rounds
- Small group discussions
- Conferences and lectures
- Core educational lecture videos
- Web-based clinical modules (WISE-MD - Aquifer)
- Practice-based Learning and Improvement (PBLI) Project
- Textbooks

Organized reading and study materials will be available to support learning about assigned subjects and surgical problems of assigned patients, and to prepare for comprehensive written examinations. This source material will include enumeration of concepts to be learned and specific details pertinent to these concepts. These materials will be supplemented by conferences and lectures that may include oral quiz sessions covering the assigned topics and by selective patient assignments appropriate to the curriculum plan.

The net effect of the several avenues of implementation is to provide a framework designed to help the student acquire the knowledge of selected surgical subjects, to appreciate the pathophysiology involved, to use the scientific method of problem solving, to develop proficiency in selected basic skill, and to develop a professional attitude of responsibility and empathy toward patients. A significant advantage of this overall approach is early development of the capabilities and habits which will support each medical student in a life-long study of medicine.

Web Based Lectures

Six core American College of Surgeons modules are assigned for independent study. We recommend you focus on completing these modules early in your surgery rotation. Videos can be found on the American College of Surgeons website under “Education” and “ACS/ASE Medical Student Core Curriculum.” To navigate the modules, go to <https://www.facs.org/education/program/nts-med-students> and click on the links below each module. Assigned core modules are listed below:

- Abdominal Pain
- Fluids & Electrolytes
- Gastrointestinal Hemorrhage
- Jaundice
- Nutrition
- Shock

AQUIFER WISE-MD MODULES

WISE-MD modules are intended to be a transition from didactic presentation of information above to the self-directed learning format students will need to develop and follow in a lifelong study of medicine. Students are encouraged to access the Aquifer website and to complete modules in those areas where students have had minimal clinical exposure. Students are required to complete the 4 WISE-MD Case Modules listed in bold in the table below.

Aquifer WISE-MD Case Modules (modules indicated in bold are required)		
Abdominal Aortic Aneurysms	Adrenal Adenoma	Anorectal Disease
Appendicitis	Bariatric	Bowel Obstruction
Breast Cancer	Burn Management	Carotid Stenosis

Cholecystitis	Colon Cancer	Diverticulitis
Hypercalcemia	Inguinal Hernia	Lung Cancer
Pancreatitis	Pediatric Hernia	Pediatric Pyloric Stenosis
Skin Cancer	Thyroid Nodule	Trauma Resuscitation

Aquifer WISE-MD Skills Modules		
Best Practices	Epidural Placement Technique	Foley Catheter Placement
Surgical Instruments	Suturing and Instrument Tie	Two Handed Knot Tie
Ultrasound Basic Principles	Ultrasound: ABI	Ultrasound: Abdominal Aortic Aneurysm
Ultrasound: Breast	Ultrasound: Carotid Artery	Ultrasound: Cholelithiasis / Cholecystitis
Ultrasound: E-Fast Exam	Ultrasound: For Vascular Access	Ultrasound: Thyroid
Ultrasound: Venous		

Aquifer Registration and Log-in Instructions

Following are the instructions to gain access to the cases for first time users*:

1. Go to: https://www.meduapp.com/users/sign_in
2. Enter your institutional e-mail under “Need to Register?” option

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.**

Self-Directed Educational Resources

Listed below are website links to educational resources that contain high quality materials for the

self-directed student learner:

- **TOUCH SURGERY APP – EXCELLENT app for reviewing steps of common surgical procedures in a simulated fashion prior to cases. HIGHLY RECOMMEND**
- PCC Resources on Universal Precautions/Gowning/Gloving/Sterile Technique/Draping
 - [Surgery Clerkship 101: The OR Essentials](#)
 - [Universal precautions](#)
 - [Draping sterile field](#)
 - Patient safety- “Time Out” ([WHO](#), [AORN](#) checklists)
 - Surgical Infection Society (SIS):
 - [Sterile Technique](#)
 - [SIS Videos](#)
 - [SIS summary card](#)
- American College of Surgeons ACS/ASE Medical Student Simulation-Based Surgical Skills Curriculum (you will need to register to access FREE material). Much of this material is helpful in Surgery as well as other rotations like Internal Medicine. Some suggested modules are listed below:
 - Year 1: Acute bleeding – packing and tourniquet module
 - Year 1: Abdominal examination module and videos
 - Year 1: Basic vascular examination
 - Year 1: Breast exam module
 - Year 1: Male groin exam module and video
 - Year 1: Digital rectal exam module
 - Year 2: Basic gastric tube placement
 - Year 2: Nasogastric tubes modules
 - Year 2: Surgical drains care and removal module (focus on Chest Tubes A&B)
 - Year 3: Basic stoma care module
 - Year 3: Central venous line insertion module
 - Year 3: Thoracentesis module and video
 - Year 3: Basic knot tying and suturing modules
- [American Urological Association \(AUA\) Medical Student Curriculum](#)
- [Surgery 101](#): free I-Tunes downloadable podcasts on general surgery and specialties
- YouTube video surgical technique references:
 - [Surgical Positioning, Prepping and Draping DVD](#)
 - [Introduction to Asepsis DVD Sample clip:](#)
 - [Basic Surgical Skills by the Royal College of Surgeons](#)

Additional Core Educational Lecture Videos (on CANVAS)

In order to broaden the student’s knowledge and understanding of the scope of surgical practice, a core lecture video series has been developed by the faculty that includes common topics in both general surgery as well as the specialties and subspecialties. As proactive learners, students are encouraged to set a timetable for viewing the lectures during the clerkship. The lectures are intended to help students gain insight into the practice of surgery and to prepare for their CSA and National

Board subject examination. List of available videos in Appendix A.

Practice-Based Learning and Improvement (PBLI) Project

Students are required to complete a self-directed Practice-based Learning and Improvement (PBLI) Project specific to each clerkship (except in Emergency Medicine). PBLI is important because physicians should monitor the quality of their own work, improve their work and keep up with developments in medicine. PBLI is based on the belief that physicians should be leaders in making change rather than reacting to changes made by others and the belief that positive changes in one's own practice behavior can have positive effects on large systems. Specific examples include increasing preventive care, improving chronic disease management and enhancing patient safety.

The goals of the project are to:

- investigate and evaluate patient care practices,
- appraise and assimilate scientific evidence, and
- improve patient care practices

For each clerkship (except Emergency Medicine), students will be required to:

- Formulate a focused clinical question directly related to a current patient care situation
- Complete the PPICO for the clinical question
- Conduct a literature search to answer the question
- Evaluate the literature selection for relevance to the question, and reliability and validity of the article
- Make a formal presentation of the case, clinical question, search process and findings based on the requirements of your site.

Failed Practice-Based Learning and Improvement (PBLI) project:

- Student must repeat project with new topic in same specialty discipline as the failed project.
- Student must contact the Course Director to schedule remediation presentation.

The net effect of the several avenues instruction is to provide a framework designed to help the student acquire the knowledge of selected subjects in psychiatry, to appreciate the pathophysiologic mechanisms involved, to use the scientific method of problem solving, to develop proficiency in selected basic skills and to develop a professional attitude of responsibility and empathy toward patients. A significant advantage of this overall approach is early development of the capabilities and habits which will support each medical student in a life-long study of medicine.

Student-Specified Individual Learning Goals

The Liaison Committee on Medical Education (LCME), the accrediting body for medical schools, expects that the curriculum provides opportunities for self-directed learning experiences that involve medical students' self-assessment of learning needs and the independent identification, analysis and synthesis of information relative to their learning needs. Therefore, at the beginning of each clerkship rotation, each student will identify 3-5 learning goals, as appropriate. At the end of each clerkship, students will reflect on their attainment of their self-identified goals. Students will submit their goals and a summary of the achievement of those goals via a link on [CANVAS](#), which will provide a cumulative record of their personal learning goals for the entire clerkship year. Students also will be

expected to make their site directors aware of their goals so that the clerkship learning experience may be enhanced and/or feedback provided accordingly.

Specifically, students must upload the initial goals for each clerkship by 5:00 p.m., Friday of the first week of each clerkship. At the end of the clerkship, and prior to the final assessment meeting, students must record their progress toward achievement of each goal and prepare to discuss the status with their site director.

Formative and Mid-course Feedback

The Surgery Clerkship places emphasis on providing students with continuous feedback on their knowledge, skills, and attitudes. Your final grade report form will reflect the feedback provided to you throughout the rotation. Mid-rotation and end-of-rotation communication will be scheduled during the clerkship for you to:

- discuss your performance based on the assessment forms completed by faculty during the week of the rotation and a self-assessment of your performance,
- review clinical progress via your Clinical Skills Experience Portfolio,
- plan activities for the week to match your learning objectives and individual learning goals, and
- address any problems or concerns.

CANVAS and OASIS

The online learning and collaboration system, CANVAS, will be used in M3 to post clerkship educational materials including, but not limited to, course and clerkship syllabi, clerkship materials and core curriculum lecture videos. The web address for CANVAS is: <https://neomed.instructure.com/>. It is the sole responsibility of the student to check for updates daily. Grades, CSEP submittal, and schedules will be accessible through OASIS. The web address for OASIS is <https://neomed.oasisscheduling.com/>. Your Office 365 credentials are used to login to both systems.

COURSE GRADING AND ASSESSMENT

Assignment/ Assessment	Grade Criteria	Type of Feedback	Date Scheduled/Due
Student Performance Evaluation	Behavioral anchors for each rating in each competency and formula for final rating/grade.	Rubric with Narrative Feedback	Feedback is recorded throughout the clerkship via student evaluation forms. The Clinical Grade will be generated at the conclusion of the course by the clerkship site director submitted to for final review and grade assignment to the Clinical Experience Director.
Clinical Skills Experience Portfolio (CSEP)	Satisfactory completion required	Checklist of required activities	Mid-course and end of rotation meeting with Site Director
Practice-Based Learning and Improvement Project (PBLI)	Satisfactory completion required	Checklist of required items	Completion by the last Friday of the course
National Board of Medical Examiners (NBME) subject exam	-See Table below	Numerical score and Fail, Pass or Pass with Commendation	Last day of the course

National Board of Medical Examiners Subject Examination

The National Board of Medical Examiners (NBME) subject examination is the final written examination for each clerkship except Emergency Medicine. It will be administered at the NEOMED Rootstown Campus, virtually by NEOMED or at designated Prometric Center in Toledo and Columbus area the last day of each clerkship. For additional details, see academic policy titled “[Administration of Examinations at Remote Sites](#)” in the Compass. Reporting time and location for each examination administered on NEOMED’s campus is posted on AIMS. Following is a summary of expected performance. The subject examination score is an equated percent correct score that represents mastery of the content domain assessed by the examination. Cut lines are based on the most recent recommendations of the National Board of Medical Examiners. Hofstee Compromise recommended passing score is used for minimum passing score. Minimum Pass with Commendation score is set at the 70th percentile nationally within Hofstee Compromise range of acceptable minimum honors scores. [NBME content examples](#) for each clerkship can be accessed through this [link](#).

Subject Examination	Failing Range	Passing Range	Pass with Commendation
Family Medicine Clerkship	≤ 60	61-79	≥ 80
Internal Medicine Clerkship	≤ 58	59-79	≥ 80
Obstetrics/Gynecology Clerkship	≤ 63	64-81	≥ 82
Pediatrics Clerkship	≤ 58	59-82	≥ 83
Psychiatry Clerkship	≤ 68	69-85	≥ 86
Surgery Clerkship	≤ 59	60-78	≥ 79

Surgery NBME Practice Subject Examination

For the Surgery Clerkship, **students are required to purchase and complete the practice subject examination 5 weeks into the 10-week study period.** Please email your site directors the results of your practice examination once you have taken it. The Surgery Practice Exam is part of Clinical Science Mastery Series and can be purchased by logging into NBME Self-Assessment Services <https://www.nbme.org/taking-assessment/self-assessments>. We strongly recommend taking a 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.

Consider using study tips for NBME shelf exams put together by NEOMED students in the Class of 2018 <https://1drv.ms/u/s!AIAk8gcPGSxhmvNZO39gNF4MoZ6>

Final Clerkship Grade Categories

Evaluation of student performance is expressed as one of the following permanent grades: Honors, High Pass, Pass or Fail. Academic Incomplete or Incomplete are temporary grades assigned by the Clerkship Site Director, which indicate work in the course is incomplete. This grade may be the result of excused absences or academic deficiencies identified in a clerkship or NBME assessment. If the Incomplete is not completed within the stated time frame (not to exceed one calendar year), the “Incomplete” will become a Fail grade. Students can view assessment data on OASIS. ***Please refer to [COM Grade Categories Policy](#) for further detail.**

Final Clerkship Grade Category	Clinical Performance Grade	National Board of Medical Examiners (NBME) Grade
Honors (H) (only applicable to clerkships that require a NBME subject exam)	“Pass with commendations” (provided there are no individual ratings of “below expectations” for any of the individual objectives)	“Pass with commendations”
High Pass (HP)	“Pass with commendations” (provided there are no individual ratings of “below expectations” for any of the individual objectives)	Pass the NBME subject exam on first attempt
	“Pass” (provided there are no individual ratings of “below expectations” for any of the	Pass with commendations

	individual objectives)	
Pass (P)	Pass	Pass
	Pass	NBME subject exam not required
Fail (F)	Fail	Pass
	Pass	Fail*
	Fail	NBME subject exam not required
Incomplete (I) or Academic Incomplete (AI)	*Temporary grade indicating that work in the course is incomplete. This grade may be the result of excused absences or academic deficiencies identified in a clerkship or NBME assessment.	

Grade Dispute

Grade Dispute guidelines are set forth [in NEOMED’s College of Medicine policy Grade Dispute](#). A Grade Dispute is a formal request to change a Final Grade based on: 1) arithmetic, procedural or clerical error, 2) arbitrariness and capriciousness or 3) prejudice. Only Final Grades may be disputed. If a student disagrees with his/her Final Grade for a clerkship, the student must first discuss the matter with the Clerkship Site Director assigning the grade **within five (5) working days** of posting of the Final Grade Report Form, as well as notify, in writing M3-M4GradeDispute@neomed.edu regarding the intent. Please refer to the policy for additional details on grade disputes.

Course Remediation

Guidelines specified in the *Compass* will be followed. Remediation is a privilege. Students are not guaranteed the opportunity to remediate. Student professionalism, for example, or lack thereof, may be factored into the decision to offer remediation.

“Below Expectations” rating in four or more individual items on the Student Performance Evaluation Form (SPEF):

- Student must repeat clerkship in its entirety including the subject exam. The highest grade for a repeated clerkship is “Pass”.
- Repetition of clerkship will be scheduled by the College of Medicine /and Enrollment Services.
- *Exception: Aggregate professionalism or performance concerns may result in referral to the Committee on Academic and Professional Progress (CAPP) rather than remediation.

CAPP Standards for Unsatisfactory Performance and Academic Action:

CAPP standards in the *Compass* are not limited to but include the following for referral to CAPP:

- Aggregate performance and/or professionalism concerns
- Failure of multiple subject exams
- Failure of any remediation
- Failure of a repeated clerkship

COURSE POLICIES & PROCEDURE

Students are responsible for:

- Knowing where they are supposed to be at all times.
- Asking for guidance if unsure (not knowing expectations is not acceptable).
- Performing according to the articulated guidelines – study them, know them and perform.
- Owning their education.

- Defining their learning agenda each day.
- Following all Hospital Institutional Policies as instructed

Students should refer to the NEOMED Policy Portal for a full list of Clerkship Course Policies (<https://www.neomed.edu/policies/>) and the NEOMED Compass, 2021-2022, for further details.

Policy	Description	Additional Information
<u>Attendance and Time Off Clerkships</u>	<u>Attendance guidelines</u> for all sessions are set forth in NEOMED’s policy Attendance at Instructional Sessions	<ul style="list-style-type: none"> • Absences must be discussed your site director and an <u>Absence Notification Form</u> must be submitted to NEOMED after a make-up plan is discussed. • Request to present at a <u>professional conference</u> or fulfill a professional obligation should be completed online at least 6 weeks in advance. • <u>Religious Holiday Observation</u> requests should be submitted for the first half of the year by July 1st and by November 1st for those holidays falling after January.
<u>Curriculum Contact Hours</u>	In compliance with guidelines established by the Liaison Committee on Medical Education (LCME) and in accordance with the NEOMED Curriculum Contact Hours Policy, students will not be required to work longer hours than residents.	
<u>Clinical Supervision & Safety</u>	Students should be appropriately supervised in learning situations that involve patient care and the activities supervised should be within the scope of practice of the supervising health care professional	<ul style="list-style-type: none"> • Follow OSHA guidelines and appropriate patient safety procedures (handwashing, mask, gloves) as directed by the clinical site. • If you are in doubt, err on the side of caution by taking a chaperone (fellow student, attending, nurse or security).
<u>Mistreatment</u>	Any issues or concerns regarding the clerkship, house staff, personnel, patient availability, etc., should be addressed to the Clerkship Site Director. Any issues or concerns regarding the course, course faculty and staff, etc., should be addressed to the CED of Associate Dean of Experiential Education.	<ul style="list-style-type: none"> • Issues or concerns should be addressed as quickly as possible to foster early resolution. • Concerns regarding misconduct also may be reported confidentially or anonymously using the <u>Inappropriate Behavior Reporting Form</u>. • Students who feel they have been harassed or discriminated against should discuss the matter with their

		Associate Dean of Experiential Education, the Director of Student Wellness and Counseling, or the Chief Student Affairs Officer.
<u>Professionalism</u>	NEOMED students sign and are held to the “ Expectations of Student Conduct and Professional Behavior ” and must abide by all student policies contained within <i>The Compass</i> . Failure to do so may result in referral and review by either CAPP or the Student Conduct Council.	<ul style="list-style-type: none"> Hospitals and their academic departments reserve the right to determine appropriate attire for their sites and may impose additional requirements.

Appendices

Appendix A

In order to broaden the student's knowledge and understanding of the scope of surgical practice, a core lecture video series has been developed by the faculty that includes common topics in both general surgery as well as the specialties and subspecialties. As proactive learners, students are encouraged to set a timetable for viewing the lectures during the clerkship. The lectures are intended to help students gain insight into the practice of surgery and to prepare for their CSA and National Board subject examination.

Surgery Clerkship – Core Educational Lecture Videos	
Hernias	Rashid A. Abdu, M.D.
Acute Abdominal Pain	D. James Smith, M.D.
Acute and Perioperative Pain Management	Kyle D. Tipton, M.D.
Aneurysms	Jason R. Delatore, M.D.
Bariatric Surgery	John G. Zografakis, M.D.
Cardiac Disease	John C. Cardone, M.D.
Central Venous Catheter Complications Parts I to III	Guest Presenter
Diagnosis and Management of Benign Breast Disease	Nancy L. Gantt, M.D.
Diagnosis and Management of Malignant Breast Disease	Nancy L. Gantt, M.D.
Diseases of the Genitourinary System	Mark A. Memo, D.O.
Evolution of Laparoscopic Surgery	Michael S. Kavic, M.D.
Fire Prevention in the OR	Guest Presenter
Fractures – The Fundamentals	Thomas S. Boniface, M.D.
General Urologic Problems	Daniel J. Ricchiuti, M.D.
Gastrointestinal (GI) Bleeding	Costas H. Kefalas, M.D.
Hepatobiliary Disease	Brian T. Jones, M.D.
Non-Melanoma Skin Cancers	Michael K. Obeng, M.D.
Parenteral Nutrition	Vincent W. Vanek, M.D.

Peripheral Arterial Occlusive Disease	Drazen P. Petrinec, M.D.
Practice Based Learning and Improvement Project	John D. Sutton, M.D.
Pulmonary Embolism	Robert DeMarco, M.D.
Introduction to Asepsis and Sterile Technique	Guest Presenter
Shock	William F. Fallon, M.D.
Thyroid and Parathyroid Surgery	Mark C. Horattas, M.D.
Writing Brief Operative Notes and Surgical Orders	David N. Linz, M.D.