Class of 2026

CLERKSHIP

Site Director and Instructor Manual

THE UNIVERSITY OF ARIZONA
College of Medicine
Tucson

Table of Contents

Welcome/Introduction

Welcome to the University of Arizona College of Medicine clerkships. Whether you are an academic faculty member, a faculty community preceptor, a faculty rural preceptor, a fellow, or a resident, we thank you for your dedication to teaching our medical students. We appreciate the time and effort that you devote and are certain that you will find the following material useful. Please note that in addition to this General Clerkship Instructor Manual, each clerkship in which you teach will also provide you with a syllabus.

About the College of Medicine – Tucson

The University of Arizona College of Medicine – Tucson provides state-of-the-art programs of medical education, groundbreaking research opportunities, and leading-edge patient care. Founded on the campus of the University of Arizona in 1967 as the state's only MD degree-granting college and a resource for the people of Arizona, today the UA College of Medicine ranks among the top medical schools in the nation for research and primary care. From an initial class of just 32 students, the UA College of Medicine today has graduated more than 4,000 physicians. College of Medicine students, faculty, staff, and alumni today continues more than 50 years of service in advancing medical care and knowledge in Arizona—and around the world.

College of Medicine Leadership

Leadership
Organizational Charts

College of Medicine Academic Calendars

Academic Calendar: 2024-2025 Graphic View (COM-Tucson)
Academic Calendar: 2023-2024 Graphic View (COM-Tucson)

Educational Program Objectives

The Educational Program Objectives are based on the ACGME six core competencies: Patient Care, Medical Knowledge, Practice-based Learning and Improvement, Interpersonal and Communication Skills, Professionalism, and Systems-based Practice and Population Health. The objectives, as approved by the general faculty and the Educational Policy Committee, are important to the understanding of our medical students' educational progression throughout the four years and we ask that you be familiar with them as you teach. Educational Program Objectives can be accessed by clicking here.

Overarching Clerkship Expectations

The clerkship experiences at the University of Arizona College of Medicine Tucson campus are intended to expand students' breadth of knowledge of medicine based on the foundation of their Preclerkship training at our institution. The clerkships are full-time learning experiences and Curricular Affairs works closely with each department to identify, recruit, and maintain a wide array of sites that offer a range of individualized learning experiences around a core set of goals and specific patient encounters.

Learning experiences are unique to each individual and it is important to understand the learning process can and does occur through many avenues. Both passive (i.e. observing and/or shadowing) and active learning (i.e. hands on) serve the educational mission and provide students with the necessary skills to become a safe and effective future physician. At any given site, we have a diverse array of learners, including residents; therefore, hands on participation is often not possible. While it is unlikely that students will perform a laparoscopic appendectomy or deliver a baby without assistance, learning is occurring while holding the laparoscopic camera and by observing the birth process. Expectations on the clerkships need to be realistic considering the learning environment and the presence of other learners. Much can be gained by a positive attitude, a desire to learn, and focused observation.

Clerkship Syllabi & Required Patient/Clinical Conditions

As an instructor, please ensure you review the syllabus for the clerkship(s) in which you teach. As you review the syllabus, familiarize yourself with the clerkship's course objectives, expected learning outcomes, and the required patient cases/clinical conditions/skills that all students are expected to experience during the clerkship. Each patient case/clinical condition/skill has an associated minimum level of student responsibility (perform, assist, or observe). The syllabus provides definitions for each level of student responsibility.

Curricular Affairs Annual Policies Packet

All teaching faculty are required to annually sign a Teacher Learner Compact and to acknowledge receipt and review of the Instructor Manual and clerkship syllabus and various policies. The packet can be accessed and signed by clicking here.

Attendance and Absence

Attendance and Absence Policy for Clerkships

This policy establishes guidelines and procedures for attendance and absences during all phases of the Medical Student curriculum.

**Absence Policy
Click & Go!**

Medical Student Duty Hours Policy

Instructors, faculty, and community preceptors share a responsibility to ensure that students are not working beyond the confines of the policy.

**Duty Hours Policy
Click & Go!**

Electronic Medical Record

Electronic Medical Record Policy

This policy outlines the expectations for medical student use of Electronic Medical Record systems they interact with in the clinical setting.

**Electronic Medical
Record Policy
Click & Go!**

Faculty Policies

Clerkship Directors & Site Directors Meetings and Site Visits

Policy designating the responsibilities of clerkship directors, coordinators, and site directors/preceptors to regularly meet.

**Clerkship Site
Visits
Click & Go!**

Orientation of Faculty and Residents to Clerkships

Attending physicians and residents participating in an educational clerkship must understand the learning objectives for that clerkship, as well as the broader program objectives of the College of Medicine – Tucson curriculum. This policy states that requirement and defines processes to ensure that it is met.

Orientation Policy
Click & Go!

Faculty Instructional Development (FID) Policy

The College of Medicine takes an active approach to developing and improving teaching and assessment skills of its faculty and residents. All faculty and residents who teach medical students will be offered and encouraged to participate in faculty instructional development, as outlined in this policy.

The UA COM Faculty Instructional Development policy requires that all residents who teach medical students participate in two hours per year of training to develop or enhance their teaching and assessment skills. In the first year of residency, this training requirement is satisfied by attending the Residents as Educators Orientation in late June. Training is offered by Curricular Affairs; for more information, visit the web page for Residents as Educators.

Residents as Educators and FID Resources
Click & Go!

The "Residents as Educators (RAE) Program" provides instructional development support for all residents teaching medical students in the above discussion areas. Residents are to complete the RAE training as part of their orientation. RAE materials and information are located on the COM-T Faculty Instructional Development RAE site.

The Faculty Instructional Development Series can be accessed by clicking here.

Formative Feedback and Summative Assessment

Assessment of Student Performance

Faculty and residents are required to assess student performance. Student performance evaluations are collected via the New Innovations online system. All faculty and residents with whom students work will be requested to complete an evaluation. New Innovations uses a schedule matching system based on student rotations and dates of service that are the same for each of the faculty and residents. Some clerkships also manually match evaluations. If there are questions about how evaluations are matched, please reach out to the clerkship coordinator.

The assessment of student performance evaluation form is included as an appendix in this manual.

Mid-Clerkship Formative Feedback

A mid-clerkship assessment for each student is required. The mid-clerkship assessment will be completed by the Clerkship Director, Site Director or a designated faculty member at the student's primary clinical site using the College of Medicine – Tucson Mid-Clerkship Assessment Form. This form includes performance criteria, as well as a portion for narrative comments. The student's mid-clerkship performance must be reviewed in a one-on-one meeting with a Clinical Site Director or designee, and the student and Clinical Site Director or designee must sign the Mid-Clerkship Assessment Form as an acknowledgement of the assessment. The timing of the mid-clerkship assessment is during a specific window of dates as specified by policy and LCME.

The mid-clerkship formative feedback form is included as an appendix in this manual.

Workplace Based Assessment

Workplace Based Assessment (WBA) is a reliable, valid form of assessment in use in medical education for over ten years. WBAs are used to provide regular assessments of student progress across Entrustable Professional Activities (EPAs). The transparency in student progress in clerkship, the autonomy provided to the student in seeking their own assessments and feedback, reduction in bias in grading, and alignment with our school's competency-based education philosophy were all reasons approved at TCCS and TEPC committees to adopt WBAs for clerkship.

Students are required to be assessed on a minimum of 4 different EPAs during each clerkship. Students should only be assessed on the EPAs selected for that clerkship which is shown in Table 1. Failure to meet these WBA EPA requirements for a clerkship will result in receiving a grade of 0 and failing the clerkship.

See below for detailed information on the WBA processes.

Workplace Based Assessment Processes

This section describes how students will collect assessments and the instructor's role in the process.

A short video outlining WBA and the process can be accessed by clicking here.

Faculty Development for WBA

Training videos on giving feedback and on WBA for faculty and residents can be found on the Faculty and Instructional Development website by clicking here.

Preparing Students for WBA: A Growth Mindset

Curricular Affairs will be training learners that a key part of being successful is being able to receive feedback. In preparing for growth this year – and throughout their career - there are three skills:

1. Deliberate practice. Deliberate practice is pinpointing something specific to improve and getting feedback on it. Watch this 3 min video from Dr. Angela Ducksworth, who explains how deliberate practice works: https://www.youtube.com/watch?v=5itYr20uUtk
2. Growth mindset. Feedback is only effective if you can receive it and integrate it. Learn more about growth mindset in this 3-min orientation video: https://www.youtube.com/watch?v=_qlCa4LIabg
3. The third key step is grit. Grit is to persevere and be passionate over time; it is a quality of endurance over time. Your ability to stay engaged in your growth over time matters in clerkship – and throughout your career. Learn more about Grit from Dr. Angela Ducksworth (6 mins): https://www.youtube.com/watch?v=H14bBuluwB8

Becoming Familiar with EPAs

What are EPAs?
Entrustable Professional Activities (EPA) were published by the AAMC in 2014 as the activities all medical students should be able to perform upon entering residency, regardless of their future career specialty. EPAs provide practical approach to assessing competence in real-world settings and impact both learners and patients.

For more information, visit https://www.aamc.org/what-we-do/mission-areas/medical-education/cbme/core-epas

Which EPAs will students be assessed on?
Throughout the Clerkship Phase, students will be assessed on 8 different EPAs which are listed below.

EPA 1: Gather a History and Perform a Physical Examination
EPA 2: Prioritize a Differential Diagnosis Following a Clinical Encounter
EPA 3: Recommend and Interpret Common Diagnostic and Screening Tests
EPA 5: Document a Clinical Encounter in the Patient Record
EPA 6: Provide an Oral Presentation of a Clinical Encounter
EPA 7: Form Clinical Questions and Retrieve Evidence to Advance Patient Care
EPA 8: Give or Receive a Patient Handover to Transition Care Responsibility
EPA 9: Collaborate as a Member of an Interprofessional Team

Each clerkship has agreed to assess students on a minimum of 4 different EPAs. It is important that students are aware of the EPAs that correspond to each clerkship so that they can meet the assessment requirements. The table below outlines the EPAs that will be assessed in each clerkship.

Table 1. EPAs by Clerkship

	AMB	EMCC	FCM	Neurology	Medicine	OBGYN	Pediatrics	Psychiatry	Surgery
EPA 1	X		X	X	X	X	X	X	X
EPA 2	X	X	X	X	X	X	X	X	
EPA 3	X		X	X	X	X	X		
EPA 5	X	X	X	X	X	X	X	X	X
EPA 6	X		X	X	X	X	X	X	X
EPA 7	X	X	X		X			X	
EPA 8									X
EPA 9		X						X	

WBA EPA Requirements

Students are required to be assessed on a minimum of 4 different EPAs during each clerkship. Students should only be assessed on the EPAs selected for that clerkship which is shown in Table 1. Failure to meet these WBA EPA requirements for a clerkship will result in receiving a grade of 0 and failing the clerkship.

Grading for WBAs

A grade of "pass" is awarded for 20% of the grade when a student has completed:

- A minimum of an average of one completed WBA form per week for each week of patient interaction in the clerkship block
- A minimum of 4 different Entrustable Professional Activities (EPAs) seen by end of each clerkship block. Each clerkship director sets the specific EPAs and this must be documented and communicated to faculty and students.
- A minimum of 2 faculty members and 2 residents must complete WBA assessments for the learner where possible. If no resident is present in a clinical block or rotation (e.g. rural rotations, some community clinic rotations), then only the attending assesses the learner a minimum of two times a week.

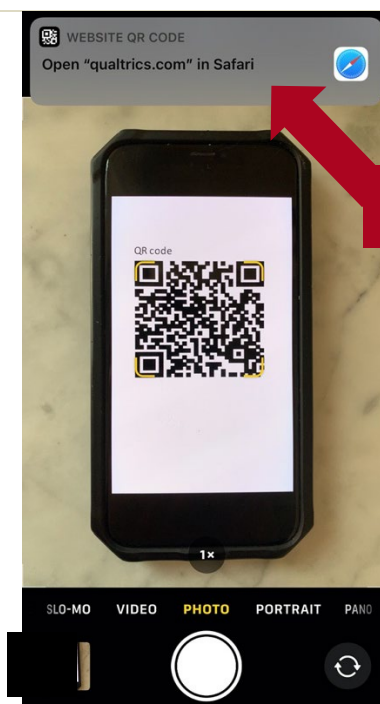Students can and are encouraged to obtain more than the required minimum number of WBAs.

What constitutes "fail" in WBA:
- Not meeting the minimum in one or more WBA requirement(s), as listed above
- Being evaluated by an individual who is <u>not</u> an attending or resident (e.g. peer, friend, family member, etc). This constitutes academic dishonesty and is subject to the consequences outlined in the Honor Code policy, including academic dismissal.

Note: Grading for WBA is "all or none". That is, students are awarded 20% for completing the minimum WBA requirements as outlined above and in the policy. If students do not meet the minimum by the end of the last day of the rotation, they are awarded 0% for this portion of the final clerkship grade. There is no remediation period.

How to Complete WBAs

1. Get the student's unique form. There are two ways:
   a. Scan the students' QR code using the photo function to scan the QR code. The student's unique assessment form will appear on their web browser.

   b. Open the email from the student. The URL to their unique assessment form will take you to the form.

2. Confirm with the student that the form has loaded on your device.

3. Take a moment to reflect on what you have in common with the student. This helps reduce unconscious bias in grading.

COLLEGE OF MEDICINE
Advancing health and wellness through education, research and patient care.

The following assessment is for:

Student photo

Wilma Wildcat

Student name

Please proceed if the information above is correct.

4. Confirm that the picture and student name on the survey is correct.

5. Ask the student which EPA they want to be assessed on. The EPA list is available on the form (page 2).

Together with the student, please select the Entrustable Professional Activity (EPA) based skill being assessed:
(This form includes only EPA's 1-3, and 5-9.)

○ EPA 1: Gather a History and Perform a Physical Examination
○ EPA 2: Prioritize a Differential Diagnosis Following a Clinical Encounter
○ EPA 3: Recommend and Interpret Common Diagnostic and Screening Tests
○ EPA 5: Document a Clinical Encounter in the Patient Record
○ EPA 6: Provide an Oral Presentation of a Clinical Encounter
○ EPA 7: Form Clinical Questions and Retrieve Evidence to Advance Patient Care
○ EPA 8: Give or Receive a Patient Handover to Transition Care Responsibility
○ EPA 9: Collaborate as a Member of an Interprofessional Team

6. Observe and/or assist the student in completing the presentation, task, or procedure.

7. Using the form, complete the assessment of the student*. You may use speech-to-text to enter in comments.

Related to the EPA being assessed:

What is the student doing well?

(These comments may be used in the student's summative evaluation/MSPE)

> Please be specific and try to limit your comments to 1 or 2 sentences. You may use speech-to-text to complete this question.

Other than reading more, what are the specific next steps the student should work on to improve t set?

(These comments are private and will not be used in the student's summative evaluation/MSPE)

> Please be specific and try to limit your comments to 1 or 2 sentences. You may use speech-to-text to complete this question.

My email address is:

Email

8. Before selecting Submit, to prevent student cheating, please enter in your email and title.

I am a:

○ Faculty

○ Resident

○ Preceptor faculty at community site

○ Fellow

9. Once submitted, a confirmation email will come to your inbox. If you receive a completed form but do not remember assessing a student, please email the Clerkship Administration team (clerkshipadmin@arizona.edu).

< Inbox

CA **Curricular Affairs**   9:27 AM
To: SIDNEYDONZELLA@email.arizona.edu >

Thanks for completing the WBA Form!

Dr. Donzella:
Thank you for completing a WBA (workplace based assessment) for one of our medical students in the Neurology clerkship.
If you have any questions about the assessment, or if you believe you have received this message in error, please contact: WBAAdmin@email.arizona.edu.

Thank you!
Curricular Affairs
UArizona College of Medicine-Tucson

*Note that the assessment is done using the Modified Ottawa Scale and that a great Year 3 student is rated "I directed them from time to time":

Modified Ottawa scale: In supervising this student, how much did you participate in the task?

1. **"I did it."** Student required complete guidance or was unprepared; I had to do most of the work myself.

2. **"I talked them through it."** Student was able to perform some tasks but required repeated directions.

3. **"I directed them from time to time."** Student demonstrated some independence and only required intermittent prompting.

4. **"I was available just in case."** Student functioned fairly independently and only needed assistance with nuances or complex situations.

WBAs and the Mid-Clerkship Formative Feedback Form

How to complete the mid-point feedback form for each clerkship

In addition to the traditional questions on the Mid-Clerkship Formative Feedback Form, questions related to the WBAs have been added to the mid-point feedback form.

Students are required to have their dashboard loaded on a device (phone, tablet, laptop, etc.) and to filter their dashboard to correspond to the appropriate clerkship. Students will show their dashboard to the evaluator so that they can accurately complete this section of the form. If the student is concerned about experiencing technical difficulties when presenting the dashboard, they can provide screenshots of the dashboard within 24 hours prior to the meeting and present the still image.

A sample of the WBA-related questions on the Mid-Clerkship Formative Feedback Form is provided below:

Workplace-based assessment: Check-In
Is the student meeting the minimum requirements of:
       At least 1 WBA submitted per week, for each week so far in the rotation? ___ Yes ___ No
       On track to be assessed on at least 4 different EPAs seen by the end of the rotation: ___ Yes ___ No
       On track to be assessed by at least 2 faculty and 2 residents by the end of the rotation: ___ Yes ___ No
Written Comments: *What clinical progress/growth is noted in the student's WBAs to date?*

WBA Handbook

For more information on WBA's, including frequently asked questions, please refer to the WBA Handbook. The handbook can be requested by emailing clerkshipadmin@arizona.edu.

Grading and Progression

Technical Standards and Technical Standards Evaluation Policy

All UA COM-T undergraduate medical students must meet the Technical Standards of the M.D. Program at all stages of the curriculum. Satisfaction of the Technical Standards is an academic requirement.

Technical Standards evaluations are used to determine if a student's academic or behavioral performance is/may be affected by impairment that includes but is not limited to medical, behavioral, or substance abuse issues. The purpose of the Fitness for Duty evaluation is to determine the student's ability to perform their academic and clinical duties responsibly and safely – meaning that the student is not a danger to patients, colleagues, self, or anyone in the learning environment or university/clinical properties.

Technical Standards Evaluation Policy

Click & Go!

Grading and Progression Policies

The grade in a clerkship is based on a student's performance in the six competencies. The final grade is a composite grade, using a formula designed by each clerkship director, the common assessment form, test scores, and other evaluation tools. The composite clerkship grade is divided into four categories: Honors, High Pass, Pass, or Fail (H, HP, P, F). The medical knowledge examination will account for 15 % of the composite grade. The composite grade for each clerkship will be determined at the departmental level.

Grading & Progression Policies

Click & Go!

University of Arizona Student Disciplinary Procedures:
Policy governing student disciplinary procedures at the University of Arizona.

Separation of Academic Assessment and Provision of Health Services to Students

Establishes policy requiring that health professionals who provide psychiatric/psychological counseling or other sensitive health services to a medical student must not be involved in the academic assessment or promotion of the medical student receiving those services, excluding exceptional circumstances. The policy can be accessed by clicking here.

New Innovations

New Innovations is an online medical education management system. The system is used by the clerkships to collect data on (1) faculty assessment of student performance, (2) student feedback on instruction, (3) student feedback on sites, and (4) student feedback on clerkships. Assessment

data contributes to the determination of student grades and feedback provides information on the effectiveness of instruction, educational experiences at sites, and the clerkships as a whole. Systematic education program data collection and a coordinated evaluation of the curriculum that includes student feedback data on clerkships is required by the Licensing Committee on Medical Education (LCME) accreditation standards. New Innovations supports the collection and compilation of this data to not only meet educational goals but also accreditation standards.

Faculty and residents with whom students have worked will be requested to complete an online evaluation through New Innovations. The Assessment of Student Performance survey can be completed by logging into New Innovations. Your Net ID serves as your username and password. An email will be automatically sent by the system as a reminder when they open as well as periodically thereafter until completed.

Your Net ID serves as your username and password.   If you do not have a Net ID, a username and password can be provided and used to access New Innovations using the following information:

Institution login:	**University of Arizona _UA** (CAPS)
Username:	Assigned username
Password:	An email will be sent to you with a random password. You will be prompted to change this the first time you log in.

THE UNIVERSITY OF ARIZONA

Log In with NetID

Login without NetID Credentials here.

Difficulty logging in?
Please contact Darlene Vanover at dvanover@email.arizona.edu.

Copyright 2018- New Innovations, Inc. | All Rights Reserved

Professionalism and Integrity

Attributes of Professional Behavior

Attributes of Professional Behavior describe behaviors that medical students are expected to develop during their education, both in the classroom and in the community in which the educational mission operates. It is subject to periodic updating and the most recent version will always be found online.

Attributes of Professional Behavior
Click & Go!

Professionalism For All at the College of Medicine

Professionalism is one of the core competencies for the community at the College of Medicine. Overview of policies governing professionalism for all College of Medicine students, staff members and faculty.

Professionalism Policies
Click & Go!k

Mistreatment

The University of Arizona College of Medicine – Tucson Professionalism Program and the College's administrators are dedicated to improving and advancing our learning environment and to reducing/eliminating behaviors toward our learners that are not conducive to their growth and professional development.

Mistreatment
Click & Go!

This policy is in addition to the University of Arizona's Non-discrimination and Anti-harassment policy, which prohibits discrimination, including harassment and retaliation, based on a protected classification, including race, color, religion, sex, national origin, age, disability, veteran status, sexual orientation, gender identity or genetic information. Any suspected violation of this policy will be referred to the Office of Institutional Equity.

Professional Conduct Comment Form

In 2013, the College of Medicine created and implemented a professionalism reporting and support mechanism. The first step was the creation of the Professionalism Program (PP). The PP members established an online comment and reporting system for both exemplary behaviors and lapses of professionalism. In addition, specific mistreatment guidelines were established.

Professional Conduct Comment Form
Click & Go!

The Professional Conduct Comment Form provides a process for faculty, residents, fellows, medical students, and staff to comment upon either exemplary professional behavior OR lapses in professional behavior demonstrated by faculty, residents, fellows, medical students, or staff in the learning environment at the University of Arizona College of Medicine, to the Professionalism Program.

Policy on Interactions with Industry/Conflict of Interest (COM)

The purpose of this policy is to establish guidelines for interactions with Industry representatives for medical staff, faculty, staff, students, and trainees of The University of Arizona College of Medicine.

Policy on Interactions with Industry/COI

Click & Go!

Office of Institutional Equity

Information for Supervisors

The University of Arizona (UA) is committed to creating a work environment that is safe, inclusive, and free of discrimination and harassment. UA's **Nondiscrimination and Anti-harassment Policy** prohibits discrimination on the basis of:

- Race
- Age
- Color
- Disability
- National Origin
- Veteran Status
- Sex
- Sexual Orientation
- Religion
- Gender Identity
- Genetic Information

Employees or agents of the University who (a) supervise other employees, graduate or undergraduate students, contractors, or agents; (b) teach or advise students or groups; or (c) have management authority related to a University-sponsored program or activity are required to:

- Promptly notifying the Office of Institutional Equity (OIE) if you are informed of or have a reasonable basis to suspect someone has violated the UA's Nondiscrimination and Anti-harassment Policy;
- Promptly notifying the Dean of Students Office if the alleged policy violator and the person who is the subject of the conduct are students; and
- Engaging in appropriate measures to prevent violations of this policy.

You can file a formal complaint of discrimination with OIE within 180 days of the most recent incident of discrimination, in accordance with our **Procedures**. You can also contact the office anonymously if you would like to receive information or ask questions.

For more information, please see the list of Policies and Procedures FAQ's.

Risk Management

Supervision of Medical Students in Clinical Learning Situations

Governs the requirement to supervise medical students in clinical situations, including definitions of the supervising physician, levels of supervision, and the procedures for such supervision.

**Supervison Policy
Click & Go!**

Student Health

Student Health and Safety

The safety and security of our students is of utmost importance. Please orient and review all relevant safety, emergency contact information, hospital codes, evacuation plans, security policies and procedures with any students assigned to your location. Emergency contact information for the student and for the facility that they are attending should be distributed to each party and maintained in a previously identified location.

Urgent/Emergent Health Care Services

**Student Safety
Click & Go!**

Preceptors should relay the following information to any student on site.

"When students who are participating in a preceptorship or a rural health professions placement located distant from Tucson requires urgent or emergency health services, their preceptors will refer the student to another member of the practice or another physician in the community or neighboring community who can competently care for the student and who has no involvement in the academic assessment or promotion of the medical students. The preceptor will retain the authority to countermand this provision if the student requires more immediate attention than would be possible through a referral for care." He/she will assure that the medical student is directed to services in a timely manner.

In the event of any emergency related to the student from the University of Arizona College of Medicine, the Office of Student Affairs should also be contacted at the appropriate campus:

Tucson
Office of Student Affairs
Dr. Richard Amini, Associate Dean, Student Affairs
Contact number is **(520) 626-6312**.

Student Safety

See the links to the College of Medicine student safety resources.

Student Occupational Exposure Policy

The medical student occupational exposure to potentially infectious agents and/or hazardous materials policy and procedures were developed to facilitate immediate evaluation and treatment in the event of any medical student exposure whether it is at a hospital setting or a rural setting.

This policy is subject to periodic updating and the most recent version will always be online.

Student Occupational Exposure Policy
Click & Go!

Non-employee incident report form Click & Go!

Disability Resources

Disability Resource Center

Disability is an aspect of diversity that is integral to our society and to the University of Arizona campus community.

Disability Resources
Click & Go!

The Disability Resource Center collaborates with students, faculty and staff to create educational environments that are usable, equitable, sustainable and inclusive of all members of the university community. However, if a student encounters academic or physical barriers on campus, DRC staff is available to partner with the student in finding good solutions or to implement reasonable accommodations. Students who are granted DRC accommodations must still meet the core technical standards as defined in the Technical Standards for Medical Students.

Accessibility and Accommodations:

It is the University's goal that learning experiences be as accessible as possible. If a student anticipates or experiences physical or academic barriers based on disability or pregnancy, please let the clerkship know immediately. Students are also welcome to contact Disability Resources (520-621-3268) to establish reasonable accommodations.

Resources

Appendix A: Clerkship Directory

Appendix B: Affiliate and Student Affairs Phone Tree

Appendix C: Student Policies (Links)

Appendix D: Forms:
- Assessment of Student Performance Evaluation
- Teacher Learner Compact
- Mid-Clerkship Formative Feedback Form
- Student Exposure Procedure Card

Appendix A: Clerkship Directory

The clerkship directory can be found by clicking here.

Appendix B: Clinical Affiliate Phone Tree

Clinical Affiliate Phone Tree

Clinical Affiliate can reach any of the individuals in the red boxes.

Clinical Affiliate

Kevin Moynahan
Vice Dean, Education
O: 520-626-6505
C: 520-425-0614

Raquel Hernández Givens,
Associate Dean, Curricular Affairs
O: 520-626-2213
C: 520-603-8017

Josie Acuna
Assistant Dean, Clinical Competency
O: 520-626-6250
C: 760-485-1330

Rich Amini
Associate Dean, Student Affairs
O: 520-626-6312
C: 443-416-5142
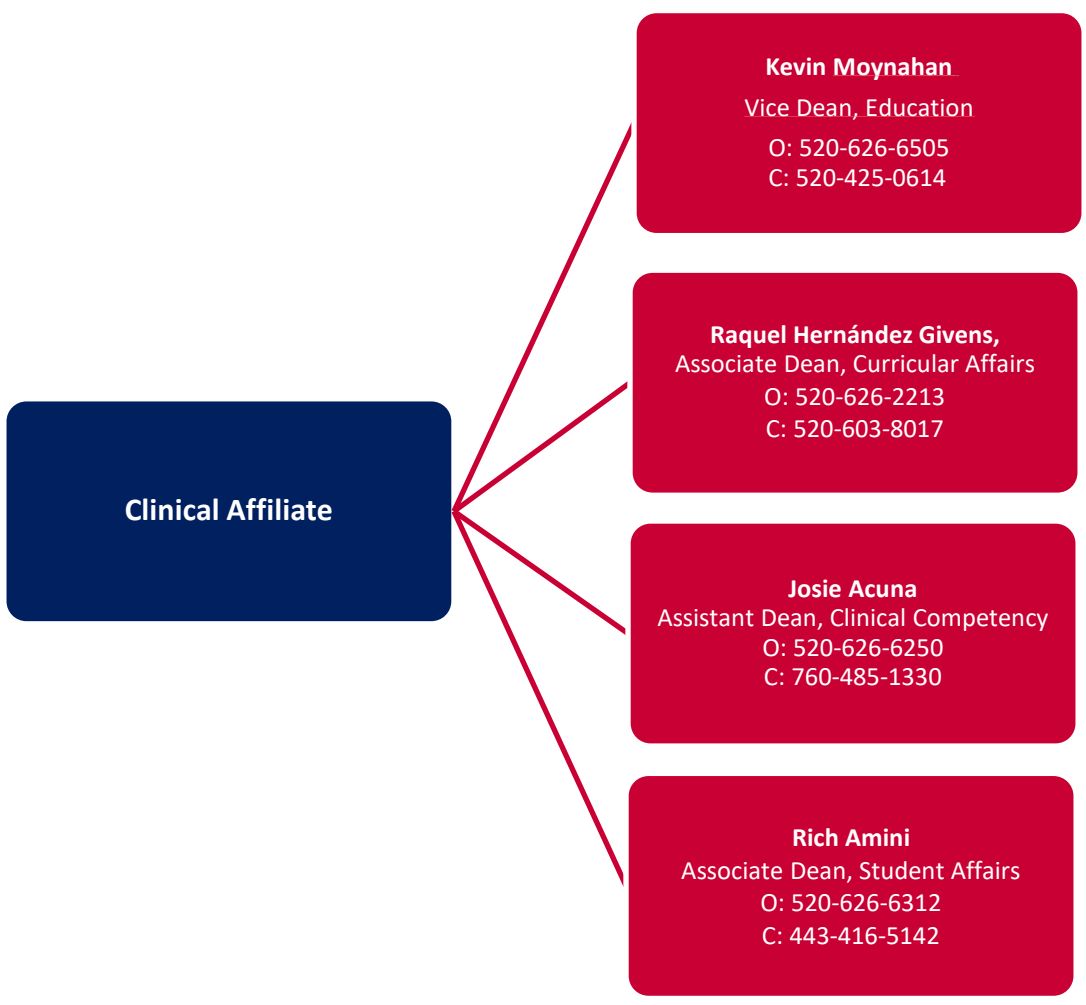
Appendix C: Student Policies (Links)

Please click on the link to take you to the policy

Attendance and Absence

Attendance and Absence Policy

Commitment to Underserved People Program Attendance Policy

Leave of Absence Policy

Medical Student Duty Hours Policy

Diversity

Office of Diversity, Equity & Inclusion - Diversity Statement

Non-Discrimination and Anti-Harassment Policy

Grading and Progression

Effects of Infectious and/or Environmental Disease or Disability on Medical Student Learning Activities

Grade Appeals

Grading and Progression Policy

Honor Code Policy and Committee Procedures and Process for Dismissal

Student Appeals Committee Procedures

Student Progress Committee Procedures and Process for Dismissal

Teacher-Learner Compact

Technical Standards for Medical Students

Graduation Requirements

Curriculum & Enrollment Policies

Policy on Curricular Change

Professionalism and Integrity

Attributes of Professional Behavior

Code of Academic Integrity

Fingerprinting and Background Checks

Interactions with Industry/Conflict of Interest

Mistreatment Guidelines

Non-Discrimination and Anti-Harassment Policy

Office of Institutional Equity

Professional Conduct Comment Form

Professional Conduct Policy

Professionalism Policies Overview

Protected Health Information and HIPAA Policy

Social Media Guidelines for Individuals

Student Code of Conduct

Student Disciplinary Procedures

Student Dress Code

Student Progress Committee Procedures and Process for Dismissal

Student Use of Electronic Medical Record Policy

Student Use of University-Sponsored Educational Material

Student Safety and Security

Active Shooter/Armed Individual

Gross Anatomy Lab Rules and Regulations

International Travel Policy

Personal Protective Equipment (PPE) Policy

Student Occupational Exposure Policy

Student Safety Information

Students with Bloodborne Pathogens Policy

Supervision of Medical Students in Clinical Learning Situations

Student Health

Immunization Requirements

Leave of Absence Policy

Mandatory Health Insurance Policy

Technology

Social Media Guidelines for Individuals

UA Life & Work Connections

Family-Friendly Spaces

Clerkship Instructional Resources

Clerkship Director and Site Director Meetings and Site Visits
Orientation of Faculty and Residents to Clerkships
Faculty Instructional Development

Appendix D: Forms

Subject Name
Class of ----
Rotation Location
Evaluation Dates

Evaluated by: **Evaluator Name**
Class of Rotation:

Class of 2026 - Assessment of Student Performance in_____Clerkship

1. **CONFLICT OF INTEREST OPT-OUT: I am unable to assess this student's performance due to a conflict of interest (e.g., I have a personal association with the student/family; I have provided health care for the student; I am the student's Society mentor.)**

- ◯   Yes, A Conflict of Interest
- ◯   No

Curricular Affairs Specific Questions

2. **How long did you work with this student?**

- ◯   Less than 1 day
- ◯   1-3 days
- ◯   4-7 days (half-week to 1 week)
- ◯   2 weeks
- ◯   3 weeks
- ◯   4 weeks or more

MEDICAL KNOWLEDGE

3. **Demonstrates the ability to apply knowledge to specific clinical situations.**

Far Below Expectations -	Below Expectations - INCONSISTENTLY	Meets Expectations - GENERALLY applies	Above Expectations - OFTEN applies basic	Far Above Expectations -	N/A

NEVER applies basic science or clinical knowledge to clinical situations.	applies basic science or clinical knowledge to clinical situations.	basic science and clinical knowledge to clinical situations.	science and clinical knowledge to clinical situations.	CONSISTENTLY applies basic science and clinical knowledge to clinical situations.	

○　　　　○　　　　○　　　　○　　　　○　　　　○

4. **Demonstrates an understanding of psychosocial influences on illness and treatment.**

Far Below Expectations - NEVER understands or recognizes the importance of Psychosocial influences in discussing individual patient care.	Below Expectations - INCONSISTENTLY understands or recognizes the importance of psychosocial influences in discussing individual patient care.	Meets Expectations - GENERALLY understands or recognizes the importance of psychosocial influences in discussing individual patient care.	Above Expectations - OFTEN understands or recognizes the importance of psychosocial influences in discussing individual patient care.	Far Above Expectations - CONSISTENTLY understands or recognizes the importance of psychosocial influences in discussing individual patient care.	N/A

○　　　　○　　　　○　　　　○　　　　○　　　　○

5. **Demonstrates critical thinking and clinical decision making.**

Far Below Expectations - NEVER uses critical thinking and clinical decision making skills. Inconsistent and varied in their thought processes on how to approach the care of patients.	Below Expectations - INCONSISTENTLY uses critical thinking and clinical decision making skills. Inconsistent and/or varied in their thought processes on how to approach the care of patients.	Meets Expectations - GENERALLY uses critical thinking and clinical decision making skills. Inconsistent and/or varied in their thought processes on how to approach the care of patients.	Above Expectations - OFTEN uses critical thinking and clinical decision making skills. Has a HIGH level of comfort in thinking through how to approach the care of patients.	Far Above Expectations - CONSISTENTLY uses critical thinking and clinical decision making skills. Has an ADVANCED level of comfort in thinking through how to approach the care of patients.	N/A

○　　　　○　　　　○　　　　○　　　　○　　　　○

6. **Exhibits an appropriate fund of knowledge and an understanding of basic pathophysiological processes.**

Far Below Expectations - NEVER understands Basic pathophysiogical processes. Lacks in an appropriate level of fund of knowledge.	Below Expectations - INCONSISTENTLY understands basic pathophysiogical processes. At times, lacks in an appropriate level of fund of knowledge.	Meets Expectations - GENERALLY understands basic pathophysiological processes. Can apply an appropriate level of fund of knowledge to clinical situations.	Above Expectations - OFTEN understands basic pathophysiological processes. Has STRONG fund of knowledge to apply to clinical situations.	Far Above Expectations - CONSISTENTLY understands basic pathophysiological processes. Has VERY STRONG fund of knowledge to apply to clinical situations.	N/A

○   ○   ○   ○   ○   ○

PATIENT CARE

7. **Conducts accurate history & physical exams (EPA 1).**

Far Below Expectations - NEVER includes important findings from H&P and organization or cohesiveness is lacking in H&P.	Below Expectations - INCONSISTENTLY includes important findings from H&P, and/or organization or cohesiveness is lacking in H&P.	Meets Expectations - GENERALLY includes important findings from H&P. The H&P is generally organized and cohesive.	Above Expectations - OFTEN includes important findings from H&P. The H&P is generally organized and cohesive.	Far Above Expectations - CONSISTENTLY includes important findings from H&P. The H&P is generally very organized and cohesive.	N/A

○   ○   ○   ○   ○   ○

8. **Develops an appropriate differential diagnosis list following a clinical encounter (EPA 2).**

Far Below Expectations - NEVER gathers or synthesizes data to inform an acceptable differential diagnosis list. Lacks MAJOR basic medical knowledge to reason through and create multiple differential diagnoses.	Below Expectations - INCONSISTENTLY gathers or synthesizes data to inform an acceptable differential diagnosis list. Lacks SOME basic medical knowledge to reason through and create multiple differential diagnoses.	Meets Expectations - GENERALLY gathers or synthesizes data to inform an ACCEPTABLE differential diagnosis list. Has ADEQUATE medical knowledge to reason through and create multiple differential diagnoses.	Above Expectations - OFTEN gathers or synthesizes data to inform a GOOD differential diagnosis list. Has a GOOD level of medical knowledge to reason effectively and create multiple differential diagnoses.	Far Above Expectations - CONSISTENTLY gathers or synthesizes data to inform a STRONG differential diagnosis list. Has a STRONG level of medical knowledge to reason effectively and create multiple differential diagnoses.	N/A

○   ○   ○   ○   ○   ○

9. **Appropriately documents a clinical encounter in the patient record (EPA 5).**

Far Below Expectations - The student's documentation of the clinical encounter in the patient record is NEVER completed and/or is disorganized.	Below Expectations - The student's documentation of the clinical encounter in the patient record is INCONSISTENTLY completed and/or is disorganized.	Meets Expectations - The student's documentation of the clinical encounter in the patient record is GENERALLY completed and/or is organized. Organizes written notes that are sufficient and clearly convey progress of patient and development of problem. (For example, note follows SOAP/ problem-oriented format).	Above Expectations - The student's documentation of the clinical encounter is OFTEN completed and/or is organized, only OCCASIONALLY needs editing/revisions.	Far Above Expectations - The student's documentation of the clinical encounter is OUTSTANDING, completed and is organized, and DO NOT need editing/revisions.	N/A

○   ○   ○   ○   ○   ○

10. Recommends common diagnostic and screening tests (EPA 3).

Far Below Expectations - NEVER able to explain the basic principles behind standard tests that were performed on assigned patients. NEVER able to explain or misinterprets findings from standard tests.	Below Expectations - INCONSISTENTLY able to explain the basic principles behind standard tests that were performed on assigned patients. INCONSISTENTLY able to explain or misinterprets findings from standard tests.	Meets Expectations - GENERALLY able to explain the basic principles behind standard tests that were performed on assigned patients. Also able to explain or interpret findings from standard tests.	Above Expectations - OFTEN able to explain the basic principles behind standard tests that were performed on assigned patients. Is able to explain the relative value of a test compared to alternatives.	Far Above Expectations - CONSISTENTLY able to explain the basic principles behind standard tests that were performed on assigned patients. Is able to explain the relative value of a test compared to alternatives. The student initiates ADVANCED conversation about additional tests that would be appropriate.	N/A
○	○	○	○	○	○

11. Recognizes when a patient needs urgent/emergent care and can initiate evaluation and management (EPA 10).

Far Below Expectations - NEVER able to recognize when a patient needs urgent/emergent care. NEVER develops or Recommends appropriate or safe treatment or management plan.	Below Expectations - INCONSISTENTLY able to recognize when a patient needs urgent/emergent care. INCONSISTENTLY develops or recommends appropriate or safe treatment or management plan.	Meets Expectations - GENERALLY knows when a patient needs urgent/emergent care and can articulate basic considerations of treatment or management plan after initial work up. (Treatment plan includes examples such as next steps for monitoring patient, therapeutics to start now, and follow-up or care).	Above Expectations - OFTEN recognizes quickly when a patient needs urgent/emergent care. Provides a plan for follow-up tests, treatment and continued care of the patient.	Far Above Expectations - CONSISTENTLY recognizes quickly when a patient needs urgent/emergent care. Provides comprehensive and ADVANCED plan for follow-up tests, treatment and continued care of the patient.	N/A
○	○	○	○	○	○

12. Provides an appropriate oral presentation of a clinical encounter (EPA 6).

Far Below Expectations - The student's presentations of the clinical encounter are NEVER complete and/or disorganized during one-on-one,	Below Expectations - The student's presentations of the clinical encounter are INCONSISTENTLY complete and/or disorganized during one-on-one, rounds,	Meets Expectations - GENERALLY, the student's presentations of the clinical encounter are complete and organized. Provides sufficient and	Above Expectations - OFTEN, The student's presentations of the clinical encounter are WELL-DONE, accurate and complete and only OCCASIONALLY	Far Above Expectations - CONSISTENTLY, the student's presentations of the clinical encounter are OUTSTANDING, accurate and	N/A
					○

rounds, team meetings.	team meetings.	organized presentation of patient findings during one-on-one, rounds, team meeting, etc.	needs editing/revisions.	complete and DOES NOT need editing/revisions.	
◯	◯	◯	◯	◯	

INTERPERSONAL & COMMUNICATION SKILLS

13. Demonstrates effective listening skills.

Far Below Expectations - NEVER asks patient and family if they have questions. Becomes distracted or inpatient when patient or family asks questions. Dismisses patient or families when they raise concerns.	Below Expectations - INCONSISTENTLY asks patient and family if they have questions. Becomes distracted or inpatient when patient or family asks questions and/or asks patient or family to repeat themselves. Dismisses patient or families when they raise concerns.	Meets Expectations - GENERALLY encourages open-ended questions and addresses questions from patient/family. Listens to other patient presentations by colleagues and residents, attendings and asks questions when appropriate. Uses appropriate non-verbal communication skills, such as looks person in the eyes, pays attention.	Above Expectations - OFTEN steps up independently (but respectfully) to actively listen to patient/family concerns. Listens and actively participates in other patient presentations by colleagues and residents. Uses excellent listening skills with patients/families/health care professionals.	Far Above Expectations - CONSISTENTLY steps up independently (but respectfully) to actively listen to patient/family concerns. Listens and actively participates in other patient presentations by colleagues and residents. Uses excellent listening skills with patients/families/health care professionals and applies information gathered from patient interactions.	N/A
◯	◯	◯	◯	◯	◯

14. Creates & sustains a therapeutically & ethically sound relationship with patients and their families.

Far Below Expectations - NEVER uses medical jargon appropriately (e.g. patient and family do not understand). Does not attempt to answer question(s) posed by patient and families.	Below Expectations - INCONSISTENTLY uses medical jargon appropriately (e.g. patient and family do not understand). Fails to appropriately answer question(s) posed by patient and families.	Meets Expectations - GENERALLY uses terminology that can be understood by patients and families. Provides patient/family with clear instructions and clear explanations for tests and procedures ordered.	Above Expectations - OCCASIONALLY verifies understanding of patient's message by summarizing or restating it to the patient. Knows how to provide CLEAR instructions and explanations to patients/families.	Far Above Expectations - CONSISTENTLY verifies understanding of patient's message by summarizing or restating it to the patient. Is able to clarify any misunderstandings and knows how to provide OUTSTANDING	N/A

				instructions and explanations to patients/families.	

○　　　　○　　　　○　　　　○　　　　○　　　　○

15. Collaborates as a member of an interprofessional team (EPA 9).

Far Below Expectations - NEVER obtains important information from and/or inform nursing, house staff, attendings of important information related to assigned patients.	Below Expectations - INCONSISTENT in obtaining important information from and/or inform nursing, house staff, attendings of important information related to assigned patients.	Meets Expectations - GENERALLY provides basic information to nurses, house staff, attendings, ancillary team care providers for patient care. Gathers and communicates pertinent and appropriate information from other health care professionals (e.g. referrals/consults, handoffs).	Above Expectations - OFTEN works and communicates as a HIGHLY functioning team member, providing and receiving information about his/her patients' care with all health care professionals (nurses, house staff, attendings, ancillary health care providers).	Far Above Expectations - CONSISTENTLY works and communicates as a OUTSTANDING functioning team member, providing and receiving information about his/her patients' care with all health care professionals (nurses, house staff, attendings, ancillary health care providers).	N/A

○　　　　○　　　　○　　　　○　　　　○　　　　○

PROFESSIONALISM

16. Demonstrates punctuality, accountability, honesty.

Far Below Expectations – The student is ALWAYS late without approval or informing supervisors. Student does not arrange to complete tasks when absent. Student is not prepared for meeting or task.	Below Expectations - The student is SOMETIMES late on several occasions without approval or informing supervisors. Student does not arrange to complete tasks when absent. Student is not prepared for meeting or task.	Meets Expectations - The student arrives ON TIME for all activities, is prepared in advance for appropriate activities, obtains appropriate approval for necessary absence or late arrival, informs appropriate supervisors and colleagues when absent or late and arranges for work to be completed regardless of absence or tardiness.	Above Expectations - OFTEN, the student STEPS UP MORE THAN USUAL to assist team or others to prepare in advance. The student arrives ON TIME for all activities. Assists team or others in starting on time, completing task on time, and being accountable for the work completed.	Far Above Expectations - CONSISTENTLY, the student GOES ABOVE AND BEYOND to assist team or others to prepare in advance. The student is always prepared and arrives ON TIME for all activities. Assists team or others in starting on time, completing task on time, and being accountable for the work completed.	N/A

○　　　　○　　　　○　　　　○　　　　○　　　　○

17. Demonstrates respect for: physicians (residents/attendings), other health care professionals (nursing, clinic, hospital personnel) & peers.

Far Below Expectations - NEVER acknowledges the effort and values of others' contributions, by exhibiting a demanding attitude or impatience with others. Frequently interrupts and acts as if s/he does not have time to wait for answer. Speaks rudely or inappropriately to others.	Below Expectations - INCONSISTENTLY acknowledges the effort and values of other's contributions, by exhibiting a demanding attitude or impatience with others. Frequently interrupts and acts as if s/he does not have time to wait for answer. Speaks rudely or inappropriately to others.	Meets Expectations - GENERALLY acknowledges the effort and values of other's contributions. Pays attention while others are talking and allows others to speak without interruption. Speaks respectfully to others. Displays appropriate body language.	Above Expectations - OFTEN the student goes out of their way to explicitly demonstrate respect to others (e.g. tells staff how s/he appreciates their assistance; compliments others on the task they accomplish).	Far Above Expectations - CONSISTENTLY the student goes out of their way to explicitly demonstrate respect to others (e.g. tells staff how s/he appreciates their assistance; compliments others on the task they accomplish).	N/A
◯	◯	◯	◯	◯	◯

18. Demonstrates respect for: patients and their families.

Far Below Expectations - NEVER acknowledges the patient and/or family, by exhibiting a demanding attitude or impatience with others. Frequently interrupts and acts as if s/he does not have time to wait for answer. Speaks rudely or inappropriately to patients/families.	Below Expectations - INCONSISTENTLY acknowledges the patient and/or family, by exhibiting a demanding attitude or impatience with others. Frequently interrupts and acts as if s/he does not have time to wait for answer. Speaks rudely or inappropriately to patients/families.	Meets Expectations - GENERALLY acknowledges the effort and values of patients and their families. Pays attention while others are talking and allows the patient/family to speak without interruption. Speaks respectfully to others. Displays appropriate body language.	Above Expectations - OFTEN the student goes out of their way to explicitly demonstrate respect to patients and families (e.g. tells the patient/family how s/he appreciates their input and patience; actively listens to patient/family concerns and questions).	Far Above Expectations - CONSISTENTLY the student goes out of their way to explicitly demonstrate respect to patients and families (e.g. tells the patient/family how s/he appreciates their input and patience; actively listens to patient/family concerns and questions).	N/A
◯	◯	◯	◯	◯	◯

PRACTICE-BASED LEARNING AND IMPROVEMENT

19. Appropriately self-assesses and incorporates feedback to improve performance.

Far Below Expectations - NEVER verbalizes areas for personal improvement, and fails to recognize mistakes or Inadequate performance. Repeats mistakes that were brought to his/her attention.	Below Expectations - INCONSISTENTLY verbalizes areas for personal improvement, and fails to recognize mistakes or inadequate performance. Acknowledges mistakes that were brought to his/her attention, but continues to repeat behavior.	Meets Expectations - GENERALLY verbalizes areas for personal improvement. Shows some areas of progressive improvement throughout rotation.	Above Expectations - OFTEN demonstrates EXTRA effort and sincerity to improve in response to subtle suggestions. Integrates feedback from SOME sources (e.g. links verbal suggestion from attending with researched topic with comment from patient to change response).	Far Above Expectations - CONSISTENTLY demonstrates CONSIDERABLE effort and sincerity to improve in response to subtle suggestions. ACTIVELY Integrates feedback from MULTIPLE sources (e.g. links verbal suggestion from attending with	N/A

| | | | Shows specific progression by the end of the rotation. | researched topic with comment from patient to change response). Demonstrates immediate improvement consistently throughout rotation. | |

○　　　　　○　　　　　○　　　　　○　　　　　○　　　　　○

20. Exhibits skills of self-directed learning and retrieve evidence to advance patient care (EPA 7).

Far Below Expectations - NEVER exhibits skills in learning on his/her own and does not research information unless directly instructed to do so.	Below Expectations - INCONSISTENTLY exhibits skills in learning on his/her own and does not research information unless directly instructed to do so.	Meets Expectations - GENERALLY defines clinical questions that he/she wants to answer, identifies areas of gaps in knowledge. Demonstrates that he/she has researched information from an issue that arose in previous day or days without needing to be directly instructed.	Above Expectations - OFTEN initiates research on his/her own and conducts some additional research. Relates research back to his/her patient care.	Far Above Expectations - CONSISTENTLY initiates research on his/her own and conducts extensive research. Relates research back to his/her patient care and generates more research at the next level.	N/A

○　　　　　○　　　　　○　　　　　○　　　　　○　　　　　○

SYSTEMS-BASED PRACTICE

21. Advocates for quality patient care and access.

Far Below Expectations - NEVER recognizes an obvious instance of poor access to care, to mention a need for improved quality patient care when an instance of insufficient care occurs with his/her patient.	Below Expectations - INCONSISTENTLY recognizes an obvious instance of poor access to care, to mention a need for improved quality patient care when an instance of insufficient care occurs with his/her patient.	Meets Expectations - GENERALLY inquires about or mentions obstacles to access to care. Recognizes when access to care is difficult and needs to be addressed. Provides instructions or plan for follow up care that address additional efforts to provide high standard of care.	Above Expectations - OFTEN acts to ensure access to care. Works with others to remove/diminish an obstacle to access. Works with other health care professionals or patient to improve quality of care.	Far Above Expectations - CONSISTENTLY and GOES ABOVE AND BEYOND to ensure access to care. Works with others to remove/diminish an obstacle to access. Works very actively with other health care professionals or patient to improve quality of care.	N/A

○　　　　　○　　　　　○　　　　　○　　　　　○　　　　　○

22. Can identify system failures (e.g. patient safety issues), actively anticipates potential errors, and contributes to a culture of safety and improvement (EPA 13).

Far Below Expectations - NEVER identifies	Below Expectations - INCONSISTENTLY identifies system	Meets Expectations - GENERALLY understands and can	Above Expectations - OFTEN can identify system failures and	Far Above Expectations - CONSISTENTLY can	N/A

system failures and potential errors. Does not understand how they have a part in contributing to a culture of safety and improvement.	failures and potential errors. Does not understand how they have a part in contributing to a culture of safety and improvement.	identify system failures, actively anticipates potential errors, and generally knows their part in contributing to a culture of safety and improvement.	how to address potential errors. Understands and knows how they have a part in contributing to a culture of safety and improvement.	identify system failures and how to address potential errors. Understands and knows thoroughly how they have a part in contributing to a culture of safety and improvement.	
○	○	○	○	○	○

SUMMARY

This section is for you to provide open-response comments on the medical students of their performance.

These comments will also help inform the clerkship director as they create an overall summary report about the student which will be included in the MSPE (Medical Student Performance Evaluation Report to the House Deans to be included in their residency application).

23. Based on all the competencies and performance of the student, how would you rate the student overall?

Far Below Expectations – The student is FAR BELOW the level equivalent to their peers at this time of their training.	Below Expectations - The student is BELOW the level equivalent to their peers at this time of their training.	Meets Expectations - The student is GENERALLY/ON PAR the level equivalent to their peers at this time of their training.	Above Expectations - The student is ABOVE the level equivalent to their peers at this time of their training.	Far Above Expectations - The student's performance FAR ABOVE the level equivalent to their peers at this time of their training.	N/A
○	○	○	○	○	○

24. Please provide comments on the overall performance of a student, such as how s/he integrates the multiple competencies and his/her strengths and weaknesses. Consider identifying 2 areas where the student performed well and 2 areas where the student needs to improve.

University of Arizona College of Medicine Teacher-Learner Compact

_____

Approved by the Educational Policy Committee 10/17/2012

I have read and agree to adhere to the principles outlined in the Teacher Learner Compact.

_____   _____
_____
Print Name   Signature   Date

Preamble

Faculty, whether employed by the University of Arizona College of Medicine or affiliated through agreements with the University as community faculty, and medical students (who for purposes of this policy also include residents and fellows and hereafter are referred to as "learners") are obligated under a variety of policies and standards, both at the College of Medicine (COM) and within the University of Arizona, to interact with one another in a professional manner. The COM is committed to ensuring that the learning environment is conducive to open communication and robust interactions between faculty and learners that promote the acquisition of knowledge and foster attitudes and skills required for the professional practice of medicine. Such activities require an environment that is free from harassment, discrimination, retaliation, or other inappropriate conduct. All faculty and learners are governed by the University of Arizona, COM, and Arizona Board of Regent policies, and are expected to adhere to them. Violations of these policies will be investigated, and disciplinary action imposed if appropriate.

Responsibilities of the College of Medicine Faculty and Administrators to Learners

Faculty members and administrators of the University of Arizona College of Medicine shall provide:

- An environment that is physically safe for learners.

- A curriculum in which education is paramount in the assignment of all tasks. In assigning tasks to learners, faculty and administrators shall keep in mind that the primary purpose of such assignments is to enhance the learner's educational experience.
- Support for the learner's professional development. This support will include a carefully planned and well-articulated curriculum. Administrators will facilitate the progress of learners through the curriculum. Faculty and administrators will support learners in their personal development as they adjust to the needs and standards of the profession.
- An understanding that each learner requires unscheduled time for self-care, social and family obligations, and recreation.
- Accurate, appropriate, and timely feedback to learners concerning their performance in the curriculum. In assessing learners, faculty and administrators will act in a manner that is consistent with the stated goals of the educational activity, which will in turn be meaningful for future medical practice. In addition, faculty will provide learners with professional and respectful feedback during and after educational and clinical activities.
- Opportunities for learners to participate in decision-making in the COM, including participation on committees that design and implement the curriculum and tools for student performance assessment in accordance with COM bylaws and other governing documents.

Responsibilities of Learners to Faculty and Administrators of the College of Medicine

Learners at the University of Arizona College of Medicine shall:

- Respect the authority of the faculty and administrators in determining the proper training environment and activities for their education.
- Meet the educational goals and objectives of the curriculum to the best of their abilities.
- Take an active role with the faculty regarding the refinement and evaluation of the curriculum.
- Support their colleagues in their professional development.
- Assume an appropriate level of responsibility on healthcare teams and execute assigned responsibilities to the best of their abilities.

MID-CLERKSHIP FORMATIVE FEEDBACK			
Student		Evaluator	
Clerkship		Site	
Dates of Rotation		Date of Feedback Session	

PAUSE BEFORE COMPLETING THIS EVALUATION AND READ BELOW

To proactively address unconscious bias, take a moment to reflect on these prompts:

- Focus on a shared, common identity between you and the trainee by asking the learner about interests and activities that you have in common
- Use examples that counter identity group stereotypes. Who does this learner remind you of that is successful?
- Take the perspective of the same identity group as the learner (e.g. "walk in their shoes")
- Consider the opposite: when data point to one conclusion, briefly look for data supporting the opposite conclusion before making a final decision

---

Teaching Supervision Duration
How long have you worked with this student? _____ (days or weeks)

Feedback to the Learner
Provide effective feedback for minimum two content areas (e.g. medical knowledge, patient care, interpersonal communication skills) that you personally observed and provide the student areas of strengths / ways to improve:

> *What makes for effective feedback? Effective feedback is descriptive and uses non-judgmental language while focusing on specific, observable behaviors (not personality based) and offers concrete suggestions for the learner to attain a higher level of performance.*
>
> - *Example 1: "Her H&Ps were organized, concise yet complete, containing expanded but appropriate differential diagnoses and accurate plans"*
> - *Example 2: "Clinical decision making is with minimal error, and he develops strong rapport with families. His next step is to advance his written work to be complete and timely"*
> - *Example 3: "(Name of Student) has a superior fund of knowledge and was able to synthesize information and she was able to formulate pointed and appropriate questions. Her clinical skills were above average. Her oral presentations were appropriately detailed and concise. She had excellent interactions with patients and families as well as the medical team."*

Medical Knowledge	Does Not Meet Expectations	Meets Expectations	Above Expectations	Did Not Observe/Not Applicable
• Exhibits appropriate knowledge and understanding of basic pathophysiological processes	O	O	O	O
• Demonstrates critical thinking and clinical decision making				
Written comments:				

Patient Care • Conducts accurate history & physical exam • Appropriately manages patient care • Works effectively with health care professionals	Does Not Meet Expectations O	Meets Expectations O	Above Expectations O	Did Not Observe/Not Applicable O
Written comments:				

Interpersonal & Communication Skills • Establishes effective therapeutic & ethical relations with patients, family and colleagues • Clearly documents & presents patient data & clinical information • Demonstrates effective listening skills	Does Not Meet Expectations O	Meets Expectations O	Above Expectations O	Did Not Observe/Not Applicable O
Written comments:				

Professionalism • Demonstrates punctuality, accountability, honesty • Shows respect for others & seeks responsibility • Demonstrates sensitivity & responsiveness to diversity, including culture, ethnicity, income	Does Not Meet Expectations O	Meets Expectations O	Above Expectations O	Did Not Observe/Not Applicable O
Written comments				

Practice-based Learning Improvement • Uses evidence-based approaches • Exhibits skills of self-directed learning • Self-assesses and incorporates feedback to improve performance	Does Not Meet Expectations O	Meets Expectations O	Above Expectations O	Did Not Observe/Not Applicable O
Written comments:				

Systems-based Practice • Advocates for quality patient care and access • Works appropriately within delivery systems, health costs • Knows role of MD in community health & prevention and applies to patient care • Applies knowledge of disease prevalence/incidence to clinical care	Does Not Meet Expectations o	Meets Expectations o	Above Expectations o	Did Not Observe/Not Applicable o

Written comments:

Workplace-based assessment: Check-In

Is the student meeting the minimum requirements of:

At least 2 WBAs submitted per week, for each week so far in the rotation? ___ Yes ___ No

On track to be assessed on at least 4 different EPAs seen by the end of the rotation: ___ Yes ___ No

On track to be assessed by at least 2 faculty and 2 residents by the end of the rotation: ___ Yes ___ No

Written Comments: *What clinical progress/growth is noted in the student's WBAs to date?*

Overall Mid-Point Evaluation Comments

Strengths: Overall, what did you observe to be the greatest strengths of this student? Provide minimum 2 specific examples.

Areas of Improvement: Provide two specific, observed behaviors where the learner could improve and develop.

Action Plan: Provide two specific examples for this student to focus on for growth and development for the remainder of the rotation

Overall Rating

Based on all criteria reviewed above, how would rate the student as this point of the clerkship:	Does Not Meet Expectations at this level in their training o	Meets Expectations at this level in their training o	Above Expectations at this level in their training o
Please explain:			

REVIEW	H&P/SOAP Notes	Patient Log	Direct Observation/CEX	Record Keeping	Other (please specify) _____
	o	o	o	o	o

For Student to Complete - Please use this space to describe the learning goal(s) that you have developed and discussed with your preceptor based on this feedback and what you will strive to work on for the remainder of this rotation, including what remains for your successful completion of WBA requirements by the end of the rotation:

By signing below, I acknowledge that we have met to discuss this Mid-Clerkship feedback:

_____   _____
Signature – Evaluator   Date   Signature – Student   Date

Student Exposure Card

Student Exposure Procedure (Card)

In the event of an exposure, students must follow the following procedure:

1. Remove soiled clothing and wash the exposed area with soap and water, ifappropriate. Administer first aid as appropriate to the exposure*
2. Immediately notify attending physician/supervisor of exposure
3. Students shall present to facility at which exposure occured for assessment (includes testing of source patient) and initial prophylactic treatment if applicable.
4. If facility is unable to do initial evaluation and obtain necessary bloodwork, patient may come to UA Campus Health Service or ASU Health Service
5. Students should present the Card to treating health care provider
6. For Blood/Body Fluid Exposures: Following the incident, the facility at which exposure occurred shall immediately make available to the affected student a copy of all the student's records relating to the treatment and follow up, and if and when available, results regarding the HIV, HBV, and HCV status of the source, to the extent permitted by law.
7. Following the incident, the student must work with their supervisor/department liaison to complete the online Non-Employee Incident Report Form, located on the UArizona Risk Management Website.
8. Within 5 days of the exposure, the student must follow up with:

TUCSON: University of Arizona Campus Health 520-621- 6493