

# OSU-CHS Selective Clerkships

## Rural Medical Track Syllabus

CLME 9805 Required Selective I  
CLME 9325 Required Selective II  
CLME 9335 Required Selective III  
CLME 9835 Optional Selective IV

### I. General Description

- A. Selective clerkships, are 4 week rotations with selected faculty, to gain practical experience in a hospital, residency, clinic or setting.
- B. In most cases, the student will accompany the assigned physician (preceptor, attending, or resident) in the hospital residency or clinical setting with assignment of patient responsibilities. Includes experiences such as patient rounds, surgical assistance, labor and delivery, hospital staff and committee meetings, hospital emergency room calls, community and public health functions and reading assignments in addition to clinical experience. Learning opportunities will be provided in the form of observation, discussion, and graduated degrees of performance under supervision, at the discretion of the assigned preceptor, based on his/her assessment of the student's readiness and the nature of the particular practice setting. Required materials are assigned. The student may be required to attend events, lectures, journal club, grand rounds, watch videos, participate in department or school events, participate in research or give presentations of regular or special assigned readings at the request of the preceptor, the department or the school.
- C. At some Selective sites, complementary housing is provided. This varies from site to site. Some sites require pre-rotation paperwork or refundable deposits. No housing is available at sites close to Oklahoma City or Tulsa. More information about the housing at specific sites is available from Regional Coordinators.

### II. Contact Information

- A. RH Program Manager (OKC): Nicole Neilson, M.S. (918-401-0073)  
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- B. Rural Medical Education Director: Vicky Pace, M.Ed.,(918-584-4332)  
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- C. Course Coordinator: Duane Koehler, D.O., Assistant to the Associate Dean of Rural Health
- D. Regional Coordinators:  
Northcentral (Stillwater): Alex Jones, M.S. (918-401-0799)[alex.l.jones@okstate.edu](mailto:alex.l.jones@okstate.edu)  
Northeast (Tahlequah): Xan Bryant, M.B.A. (918-401-0074)[xan.bryant@okstate.edu](mailto:xan.bryant@okstate.edu)  
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Southwest (Lawton): Brenda Brantley (918-401-0403)[brenda.brantley@okstate.edu](mailto:brenda.brantley@okstate.edu)  
Northwest (Enid): TBA
- E. Telemedicine Helpdesk: [telemed@okstate.edu](mailto:telemed@okstate.edu)
- F. Location:  
Center for Rural Health Office Location (Phoenix Building): 1111 West 17th Street  
Phoenix Building Office Hours: Monday – Friday, 8:00 am to 5:00 pm

Badge needed for entry. OSU Holidays are observed.

### **III. Selectives and Electives**

- A. Selectives are rotations with specialist for Rural Medical Track students. Scheduling of rotations, site evaluations and grades for the Selectives are all handled by the Department of Rural Health.
- B. Electives at Selective sites are based on availability, signed by the preceptor in advance of the starting date, and approved by the Department of Clinical Education. Required rotations at Selective sites take precedence over elective rotation requests. To be approved, elective rotations must be applied for by submitting a written application for rotation change to Clinical Education, no less than 30 days before the first day of the rotation or the length of time in advance that onboarding paperwork is due. Housing for Electives at rural sites is based on availability. Approval of Elective rotations, site evaluations and grades for the Electives are all handled by the Department of Clinical Education. Objectives for the Elective rotation should be established and understood between student and the preceptor on or before the first day of the rotation.

### **IV. Prerequisites**

- A. Successful completion of the first four semesters of the prescribed eight semester courses of study (OMS1 and OMSII).
- B. Selectives can be taken anytime during 3<sup>rd</sup> or 4<sup>th</sup> year with approval of the Center for Rural Health. Pros for Africa and Study Rotation can be scheduled as a Selective with preapproval of Department of Clinical Education and the Center for Rural Health.

### **V. Course Learning Objectives**

- A. Gain specialized medical knowledge through the clinical experience.
- B. Prepare for the increased knowledge and skill level needed in specialty areas that the rural primary care physician could benefit from to better serve the rural population.
- C. Gain a more in-depth understanding of the relationship between the rural primary care physician and the specialist.
- D. Provide the opportunity to gain experience in identified, specific areas of need or interest
- E. Participate in hands-on training alongside specialist at a residency or hospital site in Oklahoma for purpose of evaluating the specialty for decision making and residency selection
- F. Gain insight into medical knowledge and skill level needed for residency
- G. Audition, demonstrating skills and character, for the purpose of possible residency placement
- H. Preview how different specialties function within the rural medical community
- I. Gain a more in-depth understanding of the relationship between the residency program, the hospital and the community
- J. Develop decision-making and cognitive skills related to patient care
- K. Provide the student the opportunity to develop additional clinical psychomotor skills by performing routine basic procedures in a supervised setting
- L. Observe, evaluate, and participate in discussions and medical care of patients, at the discretion and under the immediate supervision of an assigned physician
- M. Apply didactic general medicine principles
- N. Develop & expand clinical psychomotor skills

- O. Participate in daily patient rounds and conferences
- P. Perform clinical workups of patients admitted to hospital (supervised/critiqued)
- Q. Review reading/case presentations
- R. Attend/participate in formal clinical presentations by hospital staff and guest presenters
- S. Receive performance feedback from site supervising physician and attending
- T. Evaluate, diagnose and manage general medical maladies
- U. Perform specific, assigned medical/surgical case responsibilities
- V. Perform general medicine assignments
- W. Obtain a complete and accurate history and physical examination
- X. Keep adequate and up-to-date medical records
- Y. Identify patient problems utilizing the SOAP format
- Z. Provide patient case presentation to attending physician with appropriate management strategy
- AA. Propose a plan for management of patient, for review by the attending
  1. Properly indicate the need to perform laboratory or radiographic tests
  2. Determine appropriate physical activity to be permitted by patient
  3. Determine type & caloric content of patient's diet
  4. Determine and recommend appropriate therapeutic measures
  5. Determine requirement for special precautions or consultation
- BB. Follow the patient, at appropriate intervals, recommending modification of original plan when necessary & recording in SOAP format
- CC. Determine appropriate time of patient discharge or release from hospital
- DD. Propose a method for patient follow-up
- EE. Maintain a humane approach, recognizing fears and anxieties of patient and family - understand the impact of patient's background and environmental relationships to his/her illness or trauma
- FF. Apply appropriate Osteopathic Principles and Practice for diagnosis and treatment of hospitalized patient
- GG. Develop familiarity with a variety of clinical procedures through observation and assistance.
- HH. Develop manual proficiency in clinical procedures through actual supervised performance
- II. Define and be aware of the availability of various clinical procedures and consider available procedures as aids in diagnosis
- JJ. Focus on specialty medicine in a rural setting
- KK. Observation and/or supervised experience in a specialty setting with assignment of patient responsibilities.
- LL. Observation and/or supervised experience in the evaluation, diagnosis and management of common medical disorders in the patient.
- MM. Development of the concepts of diagnosis and management, decision making skills, cognitive skills and psychomotor skills by providing the student direct involvement and experience in a specialty setting.
- NN. Observe, evaluate, and participate in discussions and medical care of patients, at the discretion and under the immediate supervision of an assigned physician
- OO. Development and expansion of clinical skills, including interviewing, examination and diagnostic and therapeutic procedures, as available and appropriate, in the

practice setting of the particular clerkship preceptor and assigned physicians.

## VI. Student Responsibilities

- A. Students are required to contact their assigned Regional Coordinator and preceptor at least 2 week prior to the beginning of the rotation to coordinate the daily schedule and other pertinent aspects of the rotation. Students should provide the preceptor with a CV prior to arrival.
- B. If housing is provided, students are required to contact the housing contact at least 2 weeks prior to arrival for more information. Contact regional coordinators as soon as possible if they will NOT be utilizing provided housing for any reason. This decreases unnecessary costs to the site and helps maintain these benefits for future students.
- C. Students are required to bring passwords for library resources and current references for Family Medicine, Internal Medicine and Obstetrics/Gynecology with them.
- D. Review LCMS+ to become familiar with the site and review course syllabus and instructions prior to beginning the rotation.
- E. Please verify with the specialist before the start of the rotation for proper attire. Dress appropriately at all times, utilize College approved identification, and identify yourself as a non-graduate medical student, not as a medical graduate or a licensed physician. When not in scrubs, men are expected to wear a dress shirt and trousers and women are expected to wear slacks or a dress.
- F. Meet with your preceptor or assigned representative for a site orientation. Be prepared to discuss your clinical strengths and weakness relative to the rotation objectives. Provide CV if you have not already.
- G. Exhibit professionalism and behave in an ethical manner at all times.
- H. Demonstrate a desire to exceed expectations, show interest in learning, treat everyone (physicians, hospital/clinic staff, patients, coordinators, etc.) with respect, accept and apply constructive feedback and ask for ways to improve.
- I. Demonstrate reliability and dependability by arriving prior to the start time. If you are unable to arrive prior to the expected start time, you must contact the preceptor **and the Regional Coordinator**. Make-up work is at the discretion of the Preceptor and the Course Coordinator.
- J. Prepare for and participate in course activities, engage in active learning through participation, attend orientations and didactics, participate in discussions based on reading assignments and turn in assignments on time to receive full credit.
- K. Communicate respectfully, disruptive or disrespectful behavior will not be tolerated and could result in a "needs improvement" assigned score on the non-cognitive evaluation.
- L. Provide appropriate patient care under the supervision of the physicians.
- M. Contact your Regional Coordinator and preceptor if you have problems or concerns.
- N. Meet with your preceptor midway and at the end of the rotation for verbal evaluations of your clinical performance and areas to improve. You are responsible for scheduling these meetings.
- O. If there is a reasonable explanation for a delay in reporting (e.g., auto accident, illness, or similar reason), the student is to contact the preceptor and the Regional Coordinator immediately.
- P. **If a student is absent for any reason (or multiple reasons) or will be missing a required event (orientation, required conference/meeting, etc.) he/she is**

required to complete an **Exception to the Rotation Application with the preceptor's signature and submit it to the Regional Coordinator for the Course Coordinator's approval.** This includes but is not limited to, preceptor vacations, student auditions/interviews, school events and personal request. If approved, make-up may be required. Leaving site without notice could result in a "needs improvement" assigned score on the non-cognitive evaluation.

#### **VII. Course Assignments**

- A. Attend a lecture from a Conference or watch a recorded lecture from Primary Care Updates, Emergency Medicine or Grand Rounds and complete the Video Evaluation. Links located on LCMS+
- B. Students should document everything they see and do while on the rotation on the Patient Encounter Tracking (PET) on LCMS+. Complete in LCMS+ with date and level for each procedure observed, assisted, or performed during rotation and have physician initial off on each. Students get 1 point for each observed, 2 points for each assisted and 3 points for each observed. At least 3 **different** procedure/skills are required. Minimum of 25 total points are needed. The procedure/skills component is 10% of the final grade.
- C. Students are required to submit an online course evaluation for each course. Course evaluations will be made available online through LCMS+ and are due at the end of the rotation.
- D. All paperwork should be uploaded to LCMS+ within 7 days of the end of the rotation. If forms are not received within 7 days of the end of the rotation, the student's grade may decrease up to one letter grade. A grade of "I" (incomplete) may be issued until all the paperwork has been received.
- E. Students are required to review any material assigned by the site preceptor as part of their rotation requirements. Materials assigned for review are to be completed prior to the end of the rotation. Failure to review the assigned materials could result in a "needs improvement" assigned score on the non-cognitive evaluation.
- F. Failure to complete assignments could result in a "needs improvement" assigned score on the non-cognitive evaluation.
- G. See clerkship handbook for other requirements and the clerkship calendar.**

#### **VII. Evaluations**

- A. Satisfactory or Unsatisfactory grades are assigned for Selective I Clerkships by the Department of Rural Health. Grades will be calculated based on the Student Performance Evaluation score (80%), Lecture or Video Evaluation (10%), and the Patient Encounter Tracking (PET) (10%). The Site Evaluation is a requirement to pass and should be completed immediately upon completion of the rotation. In addition, a grade of satisfactory or needs improvement will be assigned based on non-cognitive evaluation criteria.
- B. Student Performance Evaluation must be passed with a 70% or higher to pass this course.
- C. Grade of "I" (Incomplete) may be assigned if a student is unable to complete the course requirement of approved 100% attendance, the Course Coordinator recommends an extension of the student's Clerkship and sets forth reasoning for the recommended extension, or the student fails to submit the required paperwork and can provide justification for an extension.
- D. If assignments are not submitted by noon two weeks after the last day of the course, the student could be assigned a "needs improvement" non-cognitive grade.

E. Grading System

S	70-100%	Satisfactory	Pass
U	0-69%	Unsatisfactory	Needs Improvement
I	Missing Assignments	Incomplete	Must meet with Course Coordinator

**VIII. Grievance**

- A. Grievance of a rotation, rotation evaluation or examination grade for Selective I would start with the Selective I clerkship course coordinator. Any such problems with regard to electives would start with the Department of Clinical Education.

**IX. Title IX**

- A. Title IX Information, including confidential and non-confidential reporting options, can be found at <http://1is2manychs.okstate.edu>