

INTRODUCTION
TO
CLINICAL PRACTICE 2

Syllabus

UNIVERSITY OF FLORIDA

College of Medicine

Department of Community Health
and Family Medicine

CLASS OF 2024

November 15-19, 2021

**COORDINATED BY
UNIVERSITY OF FLORIDA
AREA HEALTH EDUCATION CENTERS PROGRAM**

**Course Guide
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I. GENERAL OVERVIEW

A. DESCRIPTION OF COURSE

Introduction to Clinical Practice 2 is a one week clinical immersion course that takes place during the winter semester of the second year. As part of the integrated curriculum, this course is designed to give students the opportunity to further develop the clinical skills they are learning. This course is a joint effort between the University of Florida Area Health Education Center (AHEC) and the College of Medicine. The primary learning activity of the preceptorship is the students clinical experience working directly with a primary care physician or specialist.

B. ADMINISTRATIVE STRUCTURE

Course Director: **Diane Howell, MD** **Office: (352) 273-8580**
Course Director, ICP
Assistant Professor
diane.howell@peds.ufl.edu

Course Coordinator: **Kathleen Freeman** **Office: (352) 273-8580**
Office of Medical Education **Fax: (352) 273-7899**
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preceptorship@health.ufl.edu

Teaching Faculty: Over 120 physicians act as preceptors for this course. Most preceptors are part of the STH-UF and STH-Jax sites., Some additional preceptors are located in the Gainesville community and the student's home towns.

C. OVERVIEW OF COURSE CONTENT

Students will spend one week working with a primary care physician or specialist. The daily activities of each student will be determined by the specialty and scope of practice of the preceptor, and will be somewhat variable. Students are expected to participate in all aspects of the preceptor's practice, including clinic and hospital duties, hospital conferences, medically related presentations, home visits, procedures etc.

D. EDUCATIONAL PHILOSOPHY

"Introduction to Clinical Practice," an innovative course added to the curriculum in 1992, was spawned from comments of many students who desired earlier clinical exposure in order to balance and enhance the basic science curriculum. The course has been very successful by exposing students to strong physician role models demonstrating the relevance of basic science to the clinical practice of medicine, and providing a glimpse of the contemporary practice of medicine in community and academic settings.

The foremost educational goal of the College of Medicine is to provide each student with a general professional education. This course plays an important part in helping students reach this goal by providing an in-depth immersion experience. During Introduction to Clinical Practice 2, the students will have numerous opportunities to practice history-taking skills, perform physical exams, present patients and develop differential diagnoses.

By exposing students to strong physician role models early in their education, we believe that they will be better focused and more highly motivated to become caring, competent physicians in whatever area of medicine they choose.

E. COURSE TIMETABLE

CLERKSHIP	November 15-29, 2021
Day 1	Communicate / Remind Attending of learning objectives. Establish expectations for hours of work, dress code and other logistics. Begin Preceptorship experience
Days 2 - 4	Continue preceptorship experience. Identify a patient case you would like to write up as a SOAP Note, H&P or Case Report.
Final Day	Continue preceptorship experience. Review final evaluation with student. Students complete Course evaluation. Students are to have turned in 1 SOAP note (or Full H&P) or Case Report to CANVAS.
POST CLERKSHIP	Final evaluation of student and Patient Write-Up filed within two weeks of clerkship's last day. These are due Nov 28 th by 11:59 PM.

F. OBJECTIVES and LEARNING ACTIVITIES

Course Goal

The primary goal of the course is to provide an early clinical experience in medical school, which will allow students to experience general practice in a community setting with a strong primary care role model, or specialty care experience in either the community or tertiary care setting. In either setting, students will be able to practice their recently acquired interviewing and physical exam skills and learn to function in their role as medical professionals.

Course Objectives

This course will provide an opportunity for students to develop the following competencies:

Core Disciplines - Competencies unique to the course

Competency: Patient Care

Objective 1A: Students will demonstrate the ability to obtain a focused history and perform physical exams.

Activities: Practice in the preceptorship setting.

Evaluation: By listening to students' presentations of patient histories, preceptors will directly assess each student's competency in history taking. Preceptors should also directly observe each student's history taking ability and physical exams at least twice.

Objective 1B: Students will become engaged in all aspects of their preceptors practice and take advantage of opportunities to participate in all aspects of community life.

Activities: Participation during the preceptorship.

Evaluation: By direct observation of student involvement, preceptors will assess each student's achievement of this objective.

Competency: Interpersonal & Communications Skills

Objective 1C: Students will practice patient presentations.
Activities: Participation during the preceptorship.
Evaluation: By direct observation of student involvement, preceptors will assess each student's achievement of this objective.

Competency: Medical Knowledge

Objective 1D: Students will begin to develop differential diagnosis skills
Activities: Participation during the preceptorship.
Evaluation: By direct observation of student involvement, preceptors will assess each student's achievement of this objective.

Human relationships and communication

Objective 2: Students will demonstrate knowledge about psychological, social, and economic factors and cultural diversity as they pertain to health care, and demonstrate evidence of inquiry into familial and other support systems.
Activities: Practice and instruction obtained during the preceptorship
Evaluation: By direct observation and by listening to students' presentations of patient histories, preceptors will directly assess each student's knowledge of psychological, social and economic factors and their ability to inquire about them when pertinent.

Competency: Communication & Interpersonal Skills

Objective 3: Students will effectively engage the patient and family in verbal communication.
Activities: Practice obtained during the preceptorship.
Evaluation: By listening to students' presentations of patient histories and evaluation the quality and accuracy of information, preceptors will be able to indirectly assess each student's ability to engage in effective verbal communication. Preceptors will also directly observe each student communicating with patients during the preceptorship.

Professional behavior

Competency: Professionalism

Objective 4: Students will demonstrate respect for patients, families, and members of the health care team; be truthful and honest with colleagues; communicate an attitude of empathy and caring; place patient's well-being over self-interest (altruism) and be dedicated to patient care; show ability to resolve conflicts between personal moral convictions and patient's choices; preserve patient confidentiality; and show appropriate self-assessment and willingness to admit mistakes.
Activities: Practice during the preceptorship
Evaluation: Via direct observation of each student's behavior during the preceptorship, preceptors will assess their achievement of this objective.

G. COURSE MECHANICS

1. Preceptor Selection

Preceptors will be selected from primary care and specialties. Selections will be made by the course directors and all participants will receive training specific to the course objectives. Students who wish to return to their hometown may arrange their own preceptorship, subject to approval by the course director.

2. Preceptor Assignment

A complete list of preceptors including location, specialty, and housing arrangements will be made available to the second year class prior to the course. A lottery will be utilized by all students to establish the choice sequence. Students will be matched based on their choice sequence. Preceptors must agree to accept the specific student assigned to them. If the preceptor rejects an assignment, alternate arrangements will be made for the student from a list of reserve preceptors.

3. Housing

Students selecting to stay in the Gainesville area or within a 1 hour drive from Gainesville, or those selecting to do a home-based rotation will not be provided housing. The student will also have the option of arranging his/her own housing if desired. **No housing subsidy will be available if students arrange their own housing.**

4. Liability Insurance

Students will be provided \$200,000 per occurrence protection by the University of Florida JHMHC Self Insurance Trust Fund. This is the usual coverage for any approved clinical educational experience. Preceptors should be aware that the student is an unlicensed individual, not authorized to practice medicine. Custom and usage have established that students do observe and “practice” under the supervision of fully licensed physicians, legally authorized to practice medicine. The ultimate responsibility for the medical activities of students always rests on the shoulders of the teacher-preceptor.

At the same time, it should be recognized that there is very little risk under the usual conditions of a teaching environment. To our knowledge, there are no cases in which a suit has been brought against a University of Florida medical student or against a precepting physician for the activities of a student/preceptor under his/her supervision on an outside rotation.

H. EVALUATION OF STUDENT PROGRESS AND PERFORMANCE

Formative Feedback

Preceptors are encouraged to provide students with verbal, regular, informal feedback on their performance and suggestions for improvement. The course does not require the completion of any written formative feedback evaluation.

Summative Feedback

Preceptors are required to complete a written summative evaluation of the student at the end of the preceptorship.

Student Grades

Students will be graded on a pass-fail basis. Grades will be determined by:

1. The preceptor evaluation of student performance and competencies as follows: patient care, medical knowledge, professionalism, and interpersonal & communication skills.
2. Completion of all online course assignments:
 - course and preceptor evaluations
 - SOAP note or Full H&P or Case Report

I. STUDENT RESPONSIBILITIES

Establish a collegial relationship with your preceptor

Students are asked to call or email their preceptors and introduce themselves prior to the Preceptorship experience. We hope that the Preceptorship will be a rewarding experience for both the preceptor and the student. The preceptor should be able to answer most questions that arise during the rotation.

Complete the learning objectives of the course

The basic responsibility for addressing course objectives rests with the student. The preceptor's role is to act as a resource and provide or suggest the appropriate patient care experiences in the preceptor's office, the hospital, nursing home, or other health care facilities in his/her community. We expect the student will ask the preceptor's advice and follow his/her directions on the optimal means for accumulating the necessary clinical and community experiences. It is most important to remember that we hold the student responsible for accomplishing the objectives and exercises. The preceptor's role is as a clinical teacher and supervisor.

Learning Specialist

Students who perform two standard deviations below the mean for the course overall are required to meet with the Learning Specialist Mr. Jim Gorske (jgorske@ufl.edu). Failure to meet with the Learning Specialist within two weeks of the end of the course will result in an appearance before the Academic Status Committee.

Integrate into the usual work pattern of the practice

During the first day of the Preceptorship, the preceptor and the student should determine the program specifics (e.g., hours of hospital rounds, clinic hours, call responsibilities, dress code, etc.). We suggest that the student assume the preceptor's schedule unless it is extremely inconvenient or logistically impractical.

Provide a high level of patient care congruent with your level of training, and ask for the preceptor's supervision and consultation whenever necessary

We expect students to ask for their preceptors' supervision and consultation as they participate in patient care activities. Because students are not licensed physicians, the preceptor must see every patient at some point during the office visit and countersign all prescriptions and medical record entries written by the student.

Practice safety in clinical environment

Clinical experiences by their nature involve students in a variety of settings, locations and communities, as well as with a variety of patients/clients. Students are expected to exercise good judgment and reasonable caution in ensuring their own safety during clinical experiences (e.g., lock car doors, travel with classmates when possible, be aware of security services). Patient care areas may have the potential for exposure to hazardous substances such as radioactive materials. Students who require protection beyond those of all staff are to notify faculty prior to any clinical assignments. If at any time students believe the clinical setting is unsafe, students should take appropriate steps to protect themselves and their patients, including leaving the setting if necessary. Contact the course instructor or any college administrator immediately so that appropriate arrangements can be made.

Complete one SOAP note or full H&P or Case Report

Students are asked to complete one SOAP note or Full H&P or Case Report to be turned into Canvas for review by the course director. Students are encouraged to review their note with their attending.

Be a Good Representative of the College of Medicine

Please remember that you are a guest in the community where you complete your preceptorship. It is essential that you follow the guidelines for housing and the student-preceptor relationship described on the pages of this Handbook. AHEC Coordinators and the UF College of Medicine maintain strong, ongoing relationships with community preceptors. It is expected that you will work toward this goal as well.

J. PRECEPTOR RESPONSIBILITIES

Allow your student to perform histories on their own.

This is a course requirement that every student **must** meet. If you anticipate that it will be difficult for your student to perform independent histories, please notify Dr. Diane Howell right away (at one of numbers immediately below).

Allow your student to perform Physical Exams on their own or supervised.

Students have practiced exam skills with standardized patients and one of the course objectives is for students to further develop these skills during their preceptorship.

Have students present patients to you and give feedback on the presentations

This is the final preceptorship before clinical rotations and presentations are an essential skill to begin to develop.

Help students develop a differential diagnosis for the cases you see.

Again, this is the final preceptorship before clinical rotations and developing a differential diagnosis is an essential skill to begin to develop.

Communicate freely with the preceptorship staff

The Preceptorship staff welcomes contact concerning student progress and is available to offer general assistance or answer any questions you might have. We can be reached at **(352) 273-8580** or preceptorship@health.ufl.edu. The course director, Dr. Diane Howell, can be emailed at diane.howell@peds.ufl.edu.

Maintain a collegial relationship with the medical student

The students are anticipating an enjoyable clinical educational experience in your practice. This will be enhanced when a collegial relationship can be established between you and your student. We connect students and preceptors/departments by email prior to the start of the week and encourage contact before the scheduled rotation time to encourage introductions and to arrange a meeting time and place for the first day.

Provide opportunities for supervised clinical experience

The Preceptorship is a clinical rotation and should include as much student-patient interaction as possible. Before beginning the Preceptorship, UF students have been taught how to obtain a focused history and how to perform portions of the physical exam. Each student has practiced these skills and received feedback on performance. However, as attendings, you will need to monitor each student's clinical skills and arrange patient care responsibilities at appropriate levels. We suggest that you observe the student with several patients to assure yourself that the student has acceptable skills before allowing him/her to see patients without your direct observation. A minimal expectation is that the preceptor allows students to conduct some patient interviews on their own. Because the student is not a licensed physician, you have the responsibility for countersigning every medical record entry and prescription written by the student. In addition, you should see the patient during some part of the medical visit. Many preceptors elect not to allow students at this level to make entries into the patient's permanent record, while others encourage it.

Inform patients that they are being seen by a supervised University of Florida medical student

Please take a minute to introduce the student to your patients and to establish an informed consent system that best meets the needs of the patient population, yourself, and the student. Patients are usually receptive when medical students contribute to their care.

Provide an orientation to the community and life outside the clinic

The preceptorship is intended to provide students with further training in the context of a community. In order to understand how a physician is responsible to a community, the student needs to make an effort to understand local health needs, the existing delivery system, the available resources, and your relationship with the community.

When convenient, please invite the student to share experiences that you would consider integral to the life of a physician in the community. These activities can include night calls, evening rounds, meetings at local clubs, school boards, CME activities, etc.

Observe the student's performance

There is no substitute for direct observation of students. You are able to provide much more meaningful feedback if it is coupled with knowledge gained from observation. It is difficult to take time to do this and you may not be able to do it often, but it is a critical element in the learning process. We suggest that you devise a mechanism in your schedule that allows you to directly observe the student performing a task at least once daily. At a minimum, direct observation should occur at least once during the week of the preceptorship.

Provide the student with constructive feedback: the essential ingredient for learning

People learn when they are told specific behaviors they have done that are "good" and behaviors that "need improvement." Feedback should be given as descriptions of specific behaviors with both positive and negative statements. Feedback needs to be given in a private setting, not in front of patients or staff. Ideally, feedback should be given within minutes of the observed behavior (e.g. "That was a very good history you just obtained." or "Be sure to always ask about non-prescription medications, too.") Summative feedback should be given on a weekly basis (e.g. "Your history taking really improved this week. The main areas for improvement now are ____")

Perform a careful evaluation of clinical performance

Your official evaluation of the student, using the Evaluation of the Student Performance Form shown in the appendices, is very important. It will serve as a major factor in our determination of the student's grade for the entire Preceptorship. Your specific comments regarding the student's strengths and areas needing improvement, written on the evaluation form, are invaluable. We will also pass along feedback to you and your department (if applicable) that is provided by students.

II. APPENDICES

SAMPLE EVALUATION FORMS

Introduction to Clinical Practice
University of Florida
College of Medicine

Introduction to Clinical Practice Preceptorship
November 15-19, 2021

Final Student Evaluation Form

Student Name: _____ Preceptor Name: _____ Department: _____

1: Professionalism

Satisfactory Unsatisfactory Not Applicable

2: Patient Care

Satisfactory Unsatisfactory Not Applicable

3: Medical Knowledge

Satisfactory Unsatisfactory Not Applicable

4: Interpersonal and Communication Skills

Satisfactory Unsatisfactory Not Applicable

Evaluator's comments on the student evaluation. Please comment on the student's strengths and any recommended areas of improvement.

Preceptors, please return this student evaluation to the Preceptorship by email by Friday, November 26, 2021.

Students, if you receive a copy of the evaluation please submit to Canvas by Sunday, November 28, 2021 at 5PM.

**Email: preceptorship@health.ufl.edu
Phone: 352-273-8580**

III. FINAL THOUGHTS

1. Planning and preparation are essential to a good preceptorship experience for both the student and the preceptor.
2. Get off to a good beginning. Nothing is more important than getting started on the right foot. Remember: "You never get a second chance to make a good first impression."
3. Students love frequent feedback, an opportunity to learn new knowledge from a "real world" physician, and plenty of hands-on clinical experience.
4. Documentation is critical. A good final impression may be life changing. Provide the student with a sit-down final interview and document your findings by mailing in the Preceptor Final Evaluation of Student form.
5. Remember, "To teach is to learn again." That's why physicians give of their time and serve as preceptors. Thank you!

IV. ATTENDANCE POLICY FOR REQUIRED EDUCATIONAL ACTIVITIES

Students are allotted the following breaks: Thanksgiving and a winter break (see the academic calendar for details). Thanksgiving break starts at the conclusion of clinical/academic responsibilities on Wednesday, and ends at the beginning of clinical/academic responsibilities on Monday. Third and fourth year students on scheduled clerkships and electives are **NOT** automatically off on official one day holidays listed on the academic calendar.

Clerkship directors, at their discretion may permit students a holiday (example: on Labor Day, outpatient clinics are closed, and a clerkship director may give the students assigned there the day off).

RELIGIOUS HOLIDAYS

The COM recognizes that there are other holidays, both religious and secular, which are of importance to some individuals and groups. Students who wish to observe these holidays must inform the director before the course or clerkship begins, if applicable. The director may provide the student with an alternative arrangement to make-up the day(s) missed, on-call assignments, and examinations and other projects. The timing of make-up work is at the discretion of the course/clerkship director and may fall during vacation periods. Missed days which cannot be completed before the course end date will result in a grade of "Incomplete". Students shall not be penalized due to absence from class or other scheduled academic activity because of religious observances.

If a faculty member is informed of, or is aware, that a significant number of students are likely to be absent from class because of a religious observance, a major examination or other academic event should not be scheduled at that time.

A student who is to be excused from class for a religious holy day is not required to provide a second party certification of the reasons for the absence. A student who believes that he or she has been unreasonably denied an education benefit due to religious beliefs or practices may seek redress through the student grievance procedure, see <http://regulations.ufl.edu/wp-content/uploads/2013/03/4012.pdf>.

UNEXPECTED ABSENCES

In the case of an unexpected, single day absence due to illness, the student **MUST** notify the responsible faculty/mentor or senior resident (when on a clinical service) and the Course/Clerkship Administrator. If the student is unable to contact the Course/Clerkship Administrator, he/she should notify the staff in the Office of Student Affairs

and Registration. If the absence is of greater duration than a single day, the staff in the Office of Student Affairs and Registration (352-273-7971) **MUST** be notified, in addition to the course director or supervising attending and Clerkship Administrator.

PLANNED ABSENCES

In the case of planned absences to attend meetings or family events such as a wedding or funeral, the student must contact the Course/Clerkship Administrator as far in advance as possible to discuss the requests and obtain the permission of the Course/Clerkship Director to be absent from assigned responsibilities. If permission is obtained for the planned absence, the student must notify the Office of Medical Education (UFMedEd@ahc.ufl.edu) of the approved dates for the absence.

ABSENCES FOR HEALTH SERVICES

Students are encouraged to maintain their own personal health throughout medical school. This includes their dental, mental and/or physical health. Ideally, students will make every effort to schedule these appointments at dates/times that do not conflict with required education activities. When this is not possible, students must submit their request for an excused absence to the relevant course/clerkship director(s). Upon approval, the director will notify the student of makeup requirements and due date, if appropriate. Additionally, students will not be penalized for absence from class or other scheduled academic activities for medical reasons. This applies to absences for acute illnesses as well as to absences due to regularly scheduled ongoing treatment for dental, mental or physical health. For any questions and/or concerns regarding this policy, students are to consult the Associate Dean for Medical Education or Student Affairs.

ABSENCES DURING JACKSONVILLE CLINICAL ROTATION

If the absence occurs while in Jacksonville on a clinical rotation, the Office of Education Affairs (904-549-5128) in Jacksonville **MUST** be notified in addition to the OME in Gainesville and the clerkship administrator in Jacksonville (904-244-5626).

STUDENT EMERGENCY PREPAREDNESS

During emergency conditions student safety is a priority.

- College of Medicine educational programs follow the University of Florida policies and procedures regarding the scheduling/cancelling of classes and operations. Adjustments in curriculum delivery will be made depending on the nature and extent of the emergency.
- Students on clinical rotations will be contacted by the clerkship directors regarding clinical operations. If clinical operations are open, students are expected to contact their faculty supervisor to confirm their attendance on inpatient clinical services and outpatient clinics to support patient care.

Students should check e-mail for safety announcement updates from the College of Medicine and University of Florida.

Additional information regarding UF emergency preparedness can be found at the following links.

- <https://emergency.ufl.edu/emergency-management-plans/>
- https://emergency.ufl.edu/wp-content/uploads/2013/08/UF-Basic-Plan_03042014.pdf

PANDEMIC EXPECTATIONS

The University of Florida College of Medicine faculty and the UF Health staff are an important part of the response to the current pandemic. Faculty, residents, fellows, and staff who are unable or unwilling to resume their clinical duties are required to take paid time off in the form of vacation or sick leave as long as they have the time available,

or contact your HR representative regarding other leave options. University of Florida College of Medicine students are part of the healthcare team during clinical rotations, preceptorships, and patient experiences associated with required and elective courses. As members of the healthcare team, students are expected to provide care to all patients within our healthcare system at a level appropriate to their training and with supervision. Students should expect to have appropriate personal protective equipment available based on infection control recommendations in order to safely care for patients. Students will not be expected to care for patients with active SARS-CoV-19, however, they will not be prevented from doing so.

In the event that a student believes they should be exempted from certain clinical duties because of a high risk medical condition, the student will have to work with the Disability Resource Center (DRC) to identify appropriate accommodations. The request for accommodations will then be reviewed by the College of Medicine to ensure the goals and objectives of the clinical curriculum can be met.

In the event that a student is unable to perform the duties that are required to meet the goals and objectives of the course or clerkship, a leave of absence will be required. If the prolonged absence is due to a medical condition that will result in an absence greater than 6 weeks, the student should apply for a medical leave of absence. If a student is unwilling to work in the clinical setting because of concern for their own safety, then they should apply for a personal leave of absence. Please refer to the student handbook for more information about leaves of absence. <https://osa.med.ufl.edu/files/2014/04/Policies-and-Procedures-Handbook.pdf>

ACKNOWLEDGEMENTS

Adapted from materials provided by the University of Nevada College of Medicine:

The Student Learning Plan, p. 14 and 15

We would particularly like to acknowledge the invaluable assistance of Jamie Anderson of the Nevada AHEC who helped us develop our course in many ways.