Rationale

The faculty of a medical school define the types of patients and clinical conditions that medical students are required to encounter, the skills to be performed by medical students, the appropriate clinical settings for these experiences, and the expected levels of medical student responsibility.

The core clinical required rotations of the third and fourth years of medical school prepare students to practice effectively and with increasing independence as they transition to resident physicians. As such, the Clinical Curriculum Committee has determined those clinical experiences, involving specific diagnoses and clinical skills, that are essential elements required for graduation from medical school in preparation for increasing levels of responsibility.

The purpose of this logging policy is to ensure that every student participates in all the required clinical experiences, distributed throughout the core M3 and M4 clerkships. Clinical clerkship directors and the Office of Medical Education monitor the fulfillment of logging requirements in order to ensure the adequacy of patient experiences for each student and site, and make adjustments as needed.

Scope

The process of logging clinical experiences includes the development and review of required clinical experiences, identification of alternative methods to achieve these experiences if not accomplished in clinical setting, distribution of these experiences throughout the core clerkships, student documentation of the experiences, and oversight by clerkship directors, curriculum committees, and the Office of Medical Education.

Table 6.2-1 | Required Clinical Experiences

For each required clinical clerkship or clinical discipline within a longitudinal integrated clerkship, list and describe each patient type/clinical condition and required procedure/skill that medical students are required to encounter, along with the corresponding clinical setting and level of student responsibility.

<table>
<thead>
<tr>
<th>Clerkship/Clinical discipline</th>
<th>Patient type/ Clinical condition</th>
<th>Procedures/Skills</th>
<th>Clinical setting</th>
<th>Level of student responsibility*</th>
</tr>
</thead>
</table>
Stakeholders Affected by this Policy

Compliance with this policy is mandatory for all Brody School of Medicine clerkship directors and coordinators, medical students, and indicated Office of Medical Education faculty and staff.

Definitions

E*Value: Refers to the centrally managed, web-based logging system for monitoring student completion of the required clinical experiences and skills within each clinical block.

Required Clinical Experiences/Skills: The combination of clinical conditions, signs, symptoms, procedures, or skills, the level of student responsibility, required setting, acceptable alternative methods, and the distribution across the required clerkships.
Criteria for Level of Involvement of Clinical Conditions:

**Full Involvement:** Participates in patient rounds; interviews patient and completes history and physical examination; writes notes; contributes to diagnostic and/or treatment plan for patient; responsible for following patient for the course of treatment.

**Limited Involvement:** Student participates in rounds but does not perform history or physical examination primarily. Student is present for critical aspects of history and performs limited physical examination to identify abnormalities. Not responsible for notes, diagnostic or treatment plan, or continuity of care.

Criteria for Level of Involvement of Procedures/Skills

**Performed:** Student discussed the procedure with the patient and participated in obtaining consent. Student was present for and physically participated in the procedure and was responsible for interpreting data.

**Observed Only:** Student was present for the procedure; observed the entire procedure; discussed the procedure, but did not participate in performing the procedure.

**Alternative Method:** As specified by the Clinical Curriculum Committee and the Executive Curriculum Committees, a method other than a patient encounter may be used to meet a required clinical experience. These methods may include simulation, simulated task trainer, lab, workshop, or a targeted patient encounter.

**Targeted Patient Encounter:** Clinical supervisors can assist students in identifying patients with the required clinical conditions and intentionally involve the student in the patient’s care in order to facilitate learning.

**Completion of logging requirements:** Refers to evaluating a patient with the required clinical condition and logging of all required information in the E*Value system.
Multiple people contribute to the distribution, collection, and data entry.

**Student:** Responsible for entering data into E*Value in a timely fashion and monitoring progress on achievement of required clinical experiences. The student is responsible for taking the log to mid-clerkship feedback meeting for review with clerkship director and for seeking out faculty and the clerkship director if they experience difficulty in achieving logging requirements.

**Curriculum Management Specialist:** Primary contact for clerkship directors, clerkship coordinators, and students for questions related to data entry and reports. This person is responsible for generating the clerkship cohort log for required clerkship experiences’ one week before the end of the rotation and again at the end of the clerkship. This information will be communicated to the course and clerkship directors. This person will be responsible for generating spreadsheets for presentation at the Clinical and Executive Curriculum Committees.

**Clerkship Coordinator:** Responsible for instructing the students to bring a copy of patient experiences log and the mid-rotation reflection form to the mid-rotation feedback meeting. Responsible for reviewing reports and communicating with the students and clerkship directors about deficiencies one week before the end of the clerkship and at the end of the clerkship.

**Clerkship Director:** Responsible for communicating the purpose of required experiences and clerkship specific experiences in the syllabus and during the clerkship introductory session. Additionally, the Clerkship Director will require that students complete the mid-rotation feedback reflection and will bring a copy to the mid-rotation feedback session. The Clerkship Director will assist the student in identifying opportunities to participate in the care of patients with the required clinical experiences. This person is responsible for communicating with the student if the requirements have not been met and will submit a grade of “In Progress” until all clerkship requirements are submitted. Any professionalism concerns due to incomplete or late logging will be directed to the Office of Student Affairs by the Clerkship Director.

**Assistant Dean, Curriculum, Assessment, and Clinical Academic Affairs:** Responsible for implementing the process defined by the curriculum committees to annually review the required clinical experiences, the appropriate level of responsibility, and the appropriate clinical setting. This position is expected to provide aid, guidance, and resources as needed throughout these process. This person is responsible for ensuring compliance with the policies and reporting the process, required clinical experiences, and compliance to the curriculum committees.

**Curriculum Committee:** Responsible for the development of required clinical experiences, including the types of patients, clinical conditions, and skills that medical students are required to encounter, the appropriate clinical settings, the expected levels of medical student responsibility, distributions across the clerkships, and acceptable alternative experiences. The Clinical Curriculum Committee, with oversight from the Executive Curriculum Committee, is responsible for the development, oversight, and yearly review of these required clinical conditions.
Procedures for Implementation and Review

Required Clinical Experiences

To successfully complete each core clinical clerkship, a student must complete all of the required clinical experiences assigned to that clerkship with the preferred mechanism of patient encounter, or by a specified alternative method.

Student Logging of Clinical Experiences

For each core clinical clerkship, students must log at least one patient encounter or alternative method for each clerkship specific required clinical experience (condition/skill) including level of responsibility and clinical setting before the last day of the clerkship. Clerkship Director must approve the request to utilize an alternative method.

Students will update their patient log at least weekly using the centrally managed, web-based logging system, E*Value.

Each student will review his or her patient log with the clerkship director or designee during the required mid-rotation feedback session held at the midway point of the rotation. Students are required to print a copy of the log and take a copy to the mid-rotation feedback session. As needed, changes will be made to ensure that students have the opportunity to meet the required clinical experiences.

Falsifying patient encounters will constitute a violation of the student honor code and will be referred to the Office of Student Affairs for review.

If, by the end of the clerkship, the logging requirements are not completed, as evidenced by the submission of required log reports to the clerkship director, a grade of “In Progress” will be assigned to the student until the log is received.

Failure to comply with the policy and turn in documents by the specified time will result in documentation and referral to the Office of Student Affairs regarding professionalism concerns.

Central Monitoring by the Clerkship and Office of Medical Education

All Clerkships will introduce logging requirements in the clerkship orientation and the syllabus/Blackboard will identify clerkship-specific patient experience requirements.

Clerkship Directors and Clerkship Coordinators will distribute the list of required clinical experiences, along with institutional and clerkship objectives, to all faculty and residents involved in teaching.
Clerkship Directors will meet with students during the mid-rotation feedback sessions to review patient log data and to assist students in identifying additional opportunities to evaluate patients with the required clinical conditions or develop a plan to utilize an alternative method. Clerkship Director must approve the request to utilize an alternative method.

One week before the end of the required core clerkships, a compliance report will be generated by the Curriculum Management Specialist and sent to the Clerkship Director, Clerkship Coordinator, and the Assistant Dean of Curriculum, Assessment, and Clinical Academic Affairs. The Clerkship Director or Designee (Clerkship Coordinator) will contact each student with logging deficiencies to remind them of the requirements and deficiency.

At the end of the clerkship, the Curriculum Management Specialist will generate a final report of required clinical experiences. Any student not in compliance with the policy will receive a grade of “In Progress” and a professionalism concern will be submitted to the Office of Student Affairs.

Logbook data for required clinical experiences will be centrally reviewed with the curriculum committees twice a year.

Logbook data and required clinical conditions, settings, and level of student responsibility, and alternative methods will be reviewed once a year to allow the Clinical Curriculum Committee to make recommendations to the Executive Curriculum Committee for updating the list of required experiences in required clerkships or required clinical experiences to ensure learning needs are met in an evolving environment.

Schedule for Review and Update

This policy may be reviewed and revised as necessary, but at least every five years.

Related Policies

None

Applicable Laws, Regulations & Standards

LCME Element 6.2
LCME 8.6 Monitoring of Completion of Required Clinical Experiences
Appendix

A. Information to include in the syllabus and provided to students during M3 Clerkship Orientation sessions.

Information Provided to Medical Students

E*Value Patient and Procedure Logs

The list of required clinical conditions and procedural skills represents the essential experiences that students must encounter prior to graduation from Brody School of Medicine. Medical students are expected to use E*Value (http://www.e-value.net/) to document required clinical experiences, including clinical setting, level of responsibility, and appropriate alternative methods for completion. Each patient having a clinical condition or procedure on the list should be documented using the guidelines below. Timely logging is a requirement for graduation and is used for learner evaluation, clerkship evaluation, and programmatic outcomes. Additionally, LCME accreditation mandates the documentation of required clinical and procedural experiences.

Each of the required clinical experiences specifies the type of patient, clinical setting, level of student responsibility, and acceptable alternative methods to fulfill the requirement. Completion of all aspects is essential and allows us to determine appropriateness of clinical sites and learning opportunities. Students are required to log patients with whom they have had significant involvement, for example someone you have evaluated in clinic or admitted through the ED, participated in surgery or delivery, or for whom you have primary responsibility on the floor. A smaller number of clinical conditions allow for more limited involvement where you may not be the primary provider of care. These conditions are typically less frequently encountered or represent higher acuity conditions. In the inpatient setting, each patient needs to be logged only once (not on a daily basis) unless a second significant medical event occurs (e.g. PE, MI, etc.). In addition, required procedures such as IV and Foley catheter placement should be documented in the E*Value PxDx.

Note that one patient will often have multiple problems and you may log each of the problems if they are addressed during the visit. For example, one patient might have dyslipidemia, hypertension, and diabetes. If all three of those problems are addressed in that visit, you can log three different diagnoses.

You should enter each individual patient encountered and procedure performed daily for accuracy. You are expected to carry a copy of the Required Clinical Experiences pocket card and discuss your progress and any other additional requirements during your Mid-rotation Feedback Session with the clerkship director.
Logging Procedure:

- For each required clerkship, students must log at least one patient encounter or alternative method for each clerkship-specific required clinical experience (condition/skill) including level of responsibility and clinical setting before the last day of the clerkship.
- Students will update their patient log daily (weekly intervals are the minimum expectation) using the centrally managed, web-based logging system, E*Value.
- Each student will review his or her patient log with the clerkship director or designee during the required Mid-Rotation Feedback Session held at the midway point of the rotation. Students are required to print a copy of the log and take a copy to the mid-rotation feedback session. As needed, schedule adjustments will be made to ensure that students have the opportunity to meet required clinical experiences.
- Falsifying patient encounters will constitute a violation of the student honor code and will be referred to the Office of Student Affairs for review.
- If, by the end of the clerkship, the logging requirements are not completed, as evidenced by the submissions of required log reports to the clerkship director, a grade of “In Progress” will be assigned to the student until the completed log is received.
- Failure to comply with the policy and submit documents by the specified time will result in documentation and referral to the Office of Student Affairs regarding professionalism concerns.
B. Copy of Required Clinical Experiences

Clerkship Specific Clinical Experience Requirements and Definitions of level of involvement are listed below:

Criteria for Level of Involvement of Clinical Conditions:
Full Involvement: Participates in patient rounds; interviews patient and completes history and physical examination; writes notes; contributes to diagnostic and/or treatment plan for patient; responsible for following patient for the course of treatment.
Limited Involvement: Student participates in rounds but does not perform history or physical examination primarily. Student is present for critical aspects of history and performs limited physical examination to identify abnormalities. Not responsible for notes, diagnostic or treatment plan, or continuity of care.

Criteria for Level of Involvement of Procedures/Skills
Performed: Student discussed the procedure with the patient and participated in obtaining consent. Student was present for and physically participated in the procedure and was responsible for interpreting data.
Observed Only: Student was present for the procedure; observed the entire procedure; discussed the procedure, but did not participate in performing the procedure.
Required Clinical Experiences Pocket Card given to each student

<table>
<thead>
<tr>
<th>Family Medicine</th>
<th>Internal Medicine</th>
<th>OB/GYN</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Musculoskeletal complaint</strong></td>
<td>Outpatient</td>
<td></td>
</tr>
<tr>
<td><strong>Congestive heart failure/chronic</strong></td>
<td>Inpatient or Outpatient</td>
<td>Adult</td>
</tr>
<tr>
<td><strong>Coronary artery disease</strong></td>
<td>Inpatient or Outpatient</td>
<td>Adult</td>
</tr>
<tr>
<td><strong>Cough/upper respiratory infection</strong></td>
<td>Outpatient</td>
<td>Adult</td>
</tr>
<tr>
<td><strong>Diabetes/chronic</strong></td>
<td>Outpatient</td>
<td>Adult</td>
</tr>
<tr>
<td><strong>Headache</strong></td>
<td>Inpatient or Outpatient</td>
<td>Adult</td>
</tr>
<tr>
<td><strong>Hypertension/acute</strong></td>
<td>Inpatient</td>
<td>Adult</td>
</tr>
<tr>
<td><strong>Nausea/vomiting</strong></td>
<td>Inpatient or Outpatient</td>
<td>Adult</td>
</tr>
<tr>
<td><strong>Nutritional counseling</strong></td>
<td>Inpatient or Outpatient</td>
<td>Adult</td>
</tr>
<tr>
<td><strong>Rash/evaluation of</strong></td>
<td>Outpatient</td>
<td>Adult</td>
</tr>
<tr>
<td><strong>Urinary tract infection</strong></td>
<td>Inpatient or Outpatient</td>
<td>Adult</td>
</tr>
<tr>
<td><strong>Well adult visit/incl prevention</strong></td>
<td>Outpatient</td>
<td>Adult</td>
</tr>
<tr>
<td><strong>Finger stick glucose/perform &amp; interpret</strong></td>
<td>Inpatient or Outpatient</td>
<td>Adult</td>
</tr>
<tr>
<td><strong>Urinalysis/interpret</strong></td>
<td>Outpatient</td>
<td>Adult</td>
</tr>
<tr>
<td><strong>Anemia</strong></td>
<td>Inpatient</td>
<td>Adult</td>
</tr>
<tr>
<td><strong>Chest pain/acute</strong></td>
<td>Inpatient</td>
<td>Adult</td>
</tr>
<tr>
<td><strong>Congestive heart failure/acute</strong></td>
<td>Inpatient</td>
<td>Adult</td>
</tr>
<tr>
<td><strong>asthma</strong></td>
<td>Inpatient</td>
<td>Adult</td>
</tr>
<tr>
<td><strong>Hyperglycemia/acute</strong></td>
<td>Inpatient</td>
<td>Adult</td>
</tr>
<tr>
<td><strong>Fluid/electrolyte/acid-base disorders</strong></td>
<td>Inpatient</td>
<td>Adult</td>
</tr>
<tr>
<td><strong>Hemostasis/disorders of</strong></td>
<td>Inpatient or Outpatient</td>
<td>Adult</td>
</tr>
<tr>
<td><strong>Mental status/altered</strong></td>
<td>Inpatient</td>
<td>Adult</td>
</tr>
<tr>
<td><strong>Shortness of Breath/acute</strong></td>
<td>Inpatient or Outpatient</td>
<td>Adult</td>
</tr>
<tr>
<td><strong>Liver disease</strong></td>
<td>Inpatient or Outpatient</td>
<td>Adult</td>
</tr>
<tr>
<td><strong>Blood gas/interpret</strong></td>
<td>Inpatient</td>
<td>Adult</td>
</tr>
<tr>
<td><strong>Cervical labor exam</strong></td>
<td>Inpatient</td>
<td>Adult</td>
</tr>
<tr>
<td><strong>Vaginal bleeding or discharge/abnormal</strong></td>
<td>Inpatient or Outpatient</td>
<td>Adult</td>
</tr>
<tr>
<td><strong>Vaginal delivery/normal</strong></td>
<td>Inpatient</td>
<td>Adult</td>
</tr>
<tr>
<td><strong>Palliative care/end of life care</strong></td>
<td>Inpatient</td>
<td>Adult</td>
</tr>
<tr>
<td><strong>Pulse oximetry</strong></td>
<td>Inpatient</td>
<td>Adult</td>
</tr>
<tr>
<td><strong>Abdominal pain in pregnancy</strong></td>
<td>Inpatient or Outpatient</td>
<td>Pregnant</td>
</tr>
<tr>
<td><strong>Hypertension/pregnancy</strong></td>
<td>Inpatient</td>
<td>Pregnant</td>
</tr>
<tr>
<td><strong>Pregnancy/abnormal/acute</strong></td>
<td>Inpatient</td>
<td>Pregnant</td>
</tr>
<tr>
<td><strong>Wet mount/pap smear w interpretation</strong></td>
<td>Inpatient or Outpatient</td>
<td>Adult</td>
</tr>
</tbody>
</table>
### Required Clinical Experiences (6.2)

**Heading:** Competencies, Curriculum Objectives and Curriculum Design

<table>
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<tr>
<th><strong>SOP #</strong></th>
<th><strong>Version #</strong></th>
<th><strong>Implementation Date</strong></th>
<th><strong>Last Reviewed/Update Date</strong></th>
<th><strong>Approval by ECC</strong></th>
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<td>6.2.2</td>
<td>3</td>
<td>July 1, 2017</td>
<td>February 19, 2019</td>
<td>February 21, 2019</td>
</tr>
</tbody>
</table>

**Behavioral concern, pediatric**
- Inpatient or Outpatient
- Child
- Full
- Targeted patient encounter

**Developmental concern**
- Outpatient
- Child
- Full
- Targeted patient encounter

**Fever/child**
- Inpatient or Outpatient
- Child
- Full
- Targeted patient encounter

**Newborn with problem or risk**
- Inpatient or Outpatient
- Child
- Full
- Targeted patient encounter

**Pharyngitis**
- Outpatient
- Child
- Full
- Targeted patient encounter

**Respiratory distress/child**
- Inpatient or Outpatient
- Child
- Full
- Targeted patient encounter

**Well child visit/incl prevention**
- Outpatient
- Child
- Full
- Targeted patient encounter

**Suicide risk**
- Inpatient or Outpatient
- Adult
- Full
- Targeted patient encounter

**Psychiatric assessment/acute**
- Inpatient
- Adult
- Limited
- Targeted patient encounter

**Substance abuse**
- Inpatient or Outpatient
- Adult
- Limited
- Targeted patient encounter

**Violence assessment**
- Inpatient or Outpatient
- Adult
- Full
- Targeted patient encounter

**Mental status exam**
- Inpatient
- Adult
- Performed
- Targeted patient encounter

**Abdominal pain/acute**
- Inpatient or Outpatient
- Adult
- Full
- Targeted patient encounter

**Breast mass/evaluation**
- Inpatient or Outpatient
- Adult
- Full
- Targeted patient encounter

**Trauma**
- Inpatient
- Adult
- Limited
- Targeted patient encounter

**Abscess incision/drain**
- Inpatient or Outpatient
- Adult
- Observed
- Targeted patient encounter

**Digital rectal examination w hemoccult**
- Inpatient or Outpatient
- Adult
- Performed
- Targeted patient encounter

**Suture/Laceration repair**
- Inpatient or Outpatient
- Adult &/or Child
- Performed
- Simulation

**Nasogastric/oralgastric intubation**
- Inpatient
- Adult
- Performed
- Simulation

**Removal of skin staples/sutures**
- Inpatient
- Adult &/or Child
- Observed
- Targeted patient encounter

**Urethral catheterization**
- Inpatient
- Adult &/or Child
- Performed
- Targeted Patient Encounter

**Minimally invasive surgery**
- Inpatient or Outpatient
- Adult
- Limited
- Targeted patient encounter

**Neuro Chronic pain**
- Inpatient or Outpatient
- Adult
- Limited
- Targeted patient encounter

**PM&R Stroke/TIA/acute**
- Inpatient or Outpatient
- Adult
- Limited
- Targeted patient encounter

**Ventilation/bag-valve-mask**
- Inpatient
- Adult
- Performed
- Simulation

**Ultrasound**
- Inpatient or Outpatient
- Adult
- Performed
- Targeted patient encounter

**Stroke/TIA/acute**
- Inpatient or Outpatient
- Adult
- Full
- Targeted patient encounter