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**Pediatric Core Clerkship Manual**

**Academic Year 2023-2024**

**Clerkship Leadership and Staff**

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# Introduction

Welcome to the Pediatric Clerkship. We hope that you will find the following six weeks of Pediatric medicine an educational and rewarding experience that will expand your professional knowledge and insight into the first several years of life when critical growth and development occurs. Regardless of your future path in medicine, understanding how childhood illness and family environment influences lifelong health will inform your practice. Your experience during the Pediatric clerkship will be directly proportional to the energy and interest that you invest. You must attend all assigned educational experiences and conferences. It is also imperative to become an interactive and integral member of your team. We hope that you will recognize the gratifying and profound contributions that you can make to the children and families for whom you provide care. **Please note that you are responsible for knowing and following the** [Keck School of Medicine Student Policies](http://medweb.usc.edu/policies) <http://medweb.usc.edu/policies/>.

# Pediatric Clerkship Goals

1. Explore a broad range of topics in pediatric medicine including but not limited to the most common preventable morbidities in childhood, health supervision visits, and normal growth variants in healthy children.
2. Appreciate the pediatrician's role and responsibility in advocating for the needs of children and adolescents (both individuals and populations) at hospital, community, and societal levels.
3. Develop skills to establish rapport with children at various stages of development and age.
4. Develop life-long learning skills to identify personal strengths, weaknesses, and goals--in general and within specific patient encounters and to solicit, accept, and act on feedback.
5. Develop an appreciation for the cultural, ethnic, and socioeconomic influences as well as family and community influences on the child in health and disease.
6. Recognize individual patient and family psycho/social/cultural backgrounds and integrate this knowledge into patient care and education.
7. Reflect on healthcare disparities and challenges in accessing healthcare for underserved communities and discuss these factors when caring for patients.
8. Consider ethical issues pertaining to the care of pediatric patients and examine these more deeply as it pertains to real-life clinical situations.

Pediatric Clerkship Objectives

# The clerkship objectives support achievement of the KSOM Educational Program Objectives: <https://medstudent.usc.edu/academics/ksom-educational-program-objectives/>.

# By the end of this clerkship, students will be able to do the following in simulated, virtual, or in-person clinical settings:

1. Demonstrate foundational basic science and clinical knowledge of a broad range of medical problems relating to pediatric patients.
2. Perform an age-appropriate history and physical examination that incorporates developmental assessment in the pediatric patient.
3. Generate an age-appropriate differential diagnosis and problem list based on a history and physical examination.
4. Integrate knowledge of common pediatric conditions into patient assessment, diagnosis and management.
5. Exhibit documentation skills appropriate to the clinical situation.
6. Present organized and complete verbal presentations for initial admissions, daily progress summaries and outpatient visits.
7. Propose accurate and adequate admission and daily orders for a hospitalized patient.
8. Recall typical growth and development patterns in the pediatric population and recognize abnormalities in these processes.
9. Communicate and work effectively as a member of the healthcare team.
10. Communicate effectively with pediatric patients and their parents or caregivers.

# Clerkship Structure

The six-week Pediatric clerkship is divided into two segments, each three weeks long – Inpatient and Outpatient. The clinical curriculum addresses issues unique to childhood and adolescence by focusing on the health and well-being of the developing human, emphasizing growth and development, principles of health supervision, and recognition and treatment of common health problems. Additionally, the clerkship accentuates the importance of the interaction of family, community, and society on the complete health of the patient. The role of the pediatrician in prevention of disease and injury, and the importance of collaboration between the pediatrician, other health professions, and the family is emphasized. As one of the core clerkships during medical school, Pediatrics teaches the knowledge, skills, and attitudes paramount to the development of a competent and compassionate physician.

**IMPORTANT:** Every patient seen must be discussed with the Attending/Faculty/Community Preceptor prior to disposition of the patient. In addition, all charts, orders, and letters **must be countersigned in the system** by the supervising faculty per the policy of the clinical site. Please refer to the [Medical Student Supervision Policy](https://medstudent.usc.edu/home/faculty-staff-information/keck-school-of-medicine-medical-student-supervision-policy/) for more information.

1. **Days Off / Wellness Day**

Students will have an average of 7 days off during the rotation including a study day on the Thursday of week 6. Additionally, students will have the second Friday of their assigned outpatient block off for wellness. Scheduling days off is site specific. Please address any concerns to the Clerkship/Site Director and Coordinator.

1. **Inpatient Experience**

During the Inpatient experience students will be assigned to a ward at one of the acute care pediatric settings. Students will participate in daily patient care, team tasks and ward activities.

**Students are expected to:**

* + Clarify team expectations on the first day with the attending faculty/resident
  + Perform histories and physical exams on assigned patients and record the results in the patient record per policy of the individual site/health care setting
  + Propose appropriate orders and write daily progress notes (problem-oriented or system-based)
  + Acquire details surrounding the patients’ histories, physicals, labs, assessments/differentials, and plans
  + Present assigned patients on ward rounds or as assigned by the faculty attending/resident
  + Actively seek opportunities to participate in patient care activities with their assigned team
  + Collaborate and communicate with team members/other health professionals
  + Communicate with assigned patients and the patients’ families within the scope of the role of student physician

**The Team:** A ward team usually consists of an attending physician, senior resident (PGY-3) and/or (PGY-2), and at least one intern (PGY-1). Other team structures include an attending physician and 2 senior residents, or an attending only service. Each ward team has a different balance of experience and personalities, and the expectations and responsibilities expected of students on the team may vary somewhat. There are several different settings on the ward, and each student needs to adapt to different areas of focus.

**Pre-Rounds:** This is the time before morning hand off and work/attending rounds. You will collect data on your patients that the team will use to make management decisions. Allow approximately 20-30 minutes per patient to gather and organize the information. **The Pre-Rounds Checklist and Tip sheet is available on Elentra**

**Faculty:** The primary instructors for the students on a day-to-day basis are the attending and senior residents (PGY 2 and PGY 3). At each site, students will participate in inpatient rounds with an attending, with or without a senior resident. Attendance is required at all pediatric rounds or other learning experiences as designated by the individual site.

**Inpatient Schedule and Hours:**

Schedule – there is a call schedule that is unique to each clerkship site; look it over carefully. You are responsible for following your schedule.

**Mid-Rotation Feedback** Mid-Rotation feedback enables students to assess their progress to date and to develop goals for growth and improvement over the remainder of the rotation. It also helps to ensure that the students can learn from and improve from practice; the supervising faculty/residents and the students must participate in a mid-rotation feedback exercise. The student will first complete a self-evaluation, provide comments, and identify learning goals they would like to accomplish before the end of the clerkship. Students are responsible for giving the attending the feedback form and arranging a time to receive individual feedback. This form needs to be turned into the coordinator at your inpatient site and the Medical Student Educator via e-mail, on the 2nd Wednesday of your inpatient rotation for review. If there are areas identified that need to be focused on, this gives the team/faculty/MSE time to help arrange appropriate clinical opportunities. Feedback form can be signed by attendings or residents.

1. **Outpatient Experience**

Ambulatory and community sites provide a broad range of patient experiences in general Pediatrics. Students are assigned to a variety of experiences including newborn services, a focused sub-specialty week, and well child care. (Please refer to the Outpatient Clinical Schedule). Attendance is required at assigned pediatric rounds, noon conferences, and assigned teaching sessions, some of which may occur in a virtual platform.

**Students are expected to:**

* Obtain histories and perform complete or focused physical examinations on selected general pediatric patients as assigned by the faculty.
* Clinically assess and present patients to the resident/faculty/attending physician assigned to the clinical area (e.g., well child, specialty clinic, emergency department, nursery)
* Perform procedures on patients under supervision of the faculty/attending physicians
* Attend all virtual or in-person conferences and seminars as assigned to their schedule

1. **Tips for Success (Inpatient and Outpatient)**
   * Be on time.
   * Be enthusiastic and receptive to teaching.
   * Be available to assist at all times.
   * Confirm expectations of you on Day One from the attending, residents and intern – each may be slightly different.
   * Listen to how interns and residents give oral presentations.
   * Solicit feedback in order to refine your H&Ps and presentations.
   * Incorporate feedback into daily practice.
   * Practice presentations with a peer and/or your intern before work rounds.
   * Read about all the patients/illnesses on service, not just your patients.
   * Examine as many patients as possible, especially those with interesting findings such as a murmur.
   * Don’t be afraid to say “I don’t know, but I’ll find the answer as soon as possible and get back to you.”

# Clerkship Site Descriptions

Students will be assigned to work at different clinical sites, and due to the unique nature of each healthcare system may have slightly different patient care and clinical learning experiences. The flexibility of scheduling allows each site to meet the curricular objectives and permits the institution to provide patient care experiences to meet the expected competencies. Clerkship site descriptions can be viewed at the following website: <https://medstudent.usc.edu/clerkship-sites-directory/>.

# Clerkship Learning Activities

The following descriptions explain the learning activities that you will engage in during the clerkship:

1. Workplace-Based Learning
   1. Active participation in all assigned rounds, procedures, and activities relating to the care of patients within your scope of responsibility
   2. Bedside teaching in the newborn nursery allowing the opportunity to perform physical examinations on well newborns and gain appreciation for gestational maturity assessment.
   3. Additional site-specific learning opportunities include:
      1. Faculty-led small group sessions on a variety of pertinent pediatric topics
      2. Grand rounds, noon conference, and other Department of Pediatrics didactics
2. Classroom/Web-Based Learning

# 

# Required Assignments

There are assigned sessions during the rotation that will provide you with an opportunity to develop the critical problem-solving skills to evaluate pediatric patients. While patients are the focus of your clinical education, you must independently learn to become knowledgeable about many disease processes you may not see during the pediatric rotation.

**IMPORTANT:** For any and all assignments, do not include any identifiable patient information to protect patient and family privacy and ensure HIPAA compliance.

**IMPORTANT:** For Complete Instructions and Rubrics, you should refer to the **Assignments folder in** Elentra and look for the assignment specific folder. You are responsible for reviewing the complete instructions and asking for clarification in a timely manner.

1. **Aquifer Pediatrics Cases**

Aquifer Cases are comprehensive, interactive virtual patient cases designed to assist you in covering the pediatric core content. You are to complete 10 cases. Cases #2 and #25 are required and you may choose additional cases. **Please refer to the Aquifer Cases Guidelines in the Assignments section in Elentra for details.**

3. **Required Clinical Experiences**

There are 10 required cases for each student during the pediatric clerkship. The cases are:

* \*1 respiratory illness case
* \*2 healthy newborn case
* \*3 adolescent HEADSS exam
* \*4 well-child visit for a child 0-5 years of age
* \*5 well-child visit for a child 6-18 years of age
* \*6 encounter with immunizations and vaccine counseling
* \*7 fever case
* \*8 developmental delay case
* \*9 neonatal jaundice case
* \*10 abdominal pain case

**\*Denotes a Required Clinical Experience that is “OSCE-eligible”. The end of clerkship OSCE cases will be derived from these RCEs.**

If you see one child who fits more than one of the case specifications (i.e., adolescent with fever and abdominal pain on whom you do a HEADSS exam or a child with a congenital disorder and developmental delay), you may use that experience to check off multiple cases. If you are unable to see any of these cases in the clinical setting, you MUST complete one of the Aquifer cases listed per each required clinical encounter case you are missing:

|  |  |
| --- | --- |
| **Required Clinical Experience** | **Corresponding Aquifer Case(s)** |
| Respiratory illness case | Case 14 |
| Healthy newborn case | Case 1 |
| Adolescent HEADDS exam | Case 5 |
| Well child 0-5 years of age visit | Case 3 |
| Well child 6-18 years of age visit | Case 5 |
| Child with fever | Case 10 OR 11 |
| Child with developmental delay | Case 28 |
| Neonatal jaundice | Case 8 |
| Child with abdominal pain | Case 27 |
| Encounter with immunizations and vaccine counseling | Case 4 |

1. **Small Group Learning Sessions**

Small groups of students (6-10) will actively participate in small-group learning sessions conducted by faculty, either virtually or in-person. These interactive sessions are designed to generate thoughtful discussion and improve clinical decision-making skills. Small group sessions will cover a variety of topics including core pediatric health care issues. **Attendance is mandatory** and participation is an essential component of these interactive sessions.

# Learning Resources

Students are expected to reference the required text and recommended journals throughout the 6-week clerkship. The curriculum is based on the competency guidelines according to COMSEP (Council on Medical Student Education in Pediatrics)**.** Many of the diseases/problems will be encountered through actual patient contact. Other disease processes may be discussed in pediatric teaching rounds or mentor sessions.

1. **Required Educational Resources**

The core curriculum topics and expected competencies are included in the clerkship syllabus. The required text is the [AAP’s Pediatrics for Medical Students, available online through the USC library](https://uosc.primo.exlibrisgroup.com/discovery/fulldisplay?docid=alma991042552675903731&context=L&vid=01USC_INST:01USC&search_scope=MyInst_and_CI&tab=Everything&lang=en) (use the Clerkship Collections link located under “View Online”).

Additionally, the [Bright Futures Pocket Guide](https://brightfutures.aap.org/Bright%20Futures%20Documents/BF4_POCKETGUIDE.pdf) is a required educational resource. This Pocket Guide serves as a standard for how pediatricians in the ambulatory setting approach the well child visit for children of all ages. Please have this available when you are in the primary care clinics. Please see below for more information about Bright Futures.

1. Recommended Educational Resources
   1. **The Health Supervision Curriculum**

One of the goals of the Clerkship is to provide students with opportunities to develop an approach to health supervision of children and adolescents, which includes disease and injury prevention. Health maintenance and prevention is one of the most important aspects of primary care in Pediatrics and is referred to as “health supervision.” In Pediatrics, health supervision, disease prevention, and health care promotion are components that are considered not only in providing well child care, but at every encounter with a child and family-sick or well child. Although many children you admit will be sick, there are always issues to address related to physiologic and psychosocial “wellness.”

The American Academy of Pediatrics (AAP) published practice guidelines regarding health supervision for children and adolescents. As published in Bright Futures, 3rd Edition:

*principles, strategies, and tools…to improve the health and well‐being of all children through culturally appropriate interventions that address the current and emerging health promotion needs at the family, clinical practice, community, health system, and policy levels.*

Bright Futures is a national health promotion and disease prevention initiative that addresses children’s health needs in the context of family and community. In addition to use in pediatric practice, many states implement Bright Futures principles, guidelines and tools to strengthen the connections between state and local programs, pediatric primary care, families, and local communities. All resources are available on the website. To understand this further, visit Bright Futures from the American Academic of Pediatrics (AAP).

**Access Here:** <https://www.aap.org/en/practice-management/bright-futures/bright-futures-materials-and-tools/bright-futures-guidelines-and-pocket-guide/>

* 1. **Access Pediatrics:**

*Access Pediatrics* from McGraw-Hill is an integrated online resource that provides medical students, surgical residents, and practicing pediatricians with a broad range of content that covers the entire span of pediatric practice, from neonatology through adolescent medicine. It is organized around a set of Core Topics developed by an advisory board of renowned pediatricians. Online access includes Pediatric Animations and Procedural Videos, Pediatrics Q&A and Pre-Test, Clerkship Resources: Case Files, and an updated eBook collection which includes:

* Color Atlas of Pediatric Dermatology
* CURRENT Diagnosis & Treatment: Pediatrics
* Current Procedures: Pediatrics
* Neonatology: Management, Procedures, On-Call Problems, Diseases, and Drugs
* Pediatric Emergency Medicine: a comprehensive study guide
* Pediatric Practice: Endocrinology
* Pediatric Practice: Infectious Disease
* Pediatric Practice: Neurology
* Pediatric Practice: Sports Medicine
* Rudolph’s Pediatrics
* Texas Children’s Hospital Handbook of Pediatrics and Neonatology

**Note:** You will need to complete a free registration to access the *Self-Assessment* tools and create *Cases & My Care Plans* to save images.

**Access Here:** <http://accesspediatrics.mhmedical.com.libproxy2.usc.edu/>

* 1. **Recommended Journals**

In addition to several specialty journals, the recommended reference for reviewing pediatric core content areas in preparation for the NBME Subject Exam is the American Academy of Pediatrics (AAP) journal – Pediatrics in Review. You may search the journal by topic using Medline, PubMed@USC, or any other web-based database.

**Access Here:** [http://pedsinreview.aappublications.org.](http://pedsinreview.aappublications.org/)

* 1. **Additional Recommended Resources**

The required textbook, computers, and printers are available for the students at each clinical site. In addition, there are several online resources specific to pediatrics and recommended by COMSEP. While these are not required, students may find the following sites helpful in providing additional education:

* 1. PedsCases.com – contains podcasts and videos on a wide variety of pediatric topics
  2. PedsRap: [www.hippoed.com/peds/rap](http://www.hippoed.com/peds/rap) - a monthly podcast on pediatric diagnoses
  3. OnlineMedEd: <https://onlinemeded.org/spa/pediatrics> - 25 video lessons on topics from newborns to adolescence
  4. Peds Emergency Medicine Playbook: pemplaybook.org/podcast – video lectures on typical pediatric ED cases
  5. MEDSKL: <https://medskl.com/course/detail/pediatrics> - online content with short audio pieces on pediatric issues

1. **Secure Storage and Study Space**

At LAC, the Pediatric Resident Workroom can be used for secure storage and on-site study space.

# Student Assessment

**Evaluation and Grading**

All clerkship activities, assignments, and evaluations are required and must be completed before you receive your final grade:

|  |  |
| --- | --- |
| **Graded Component** | **Weight** |
| 1. Clinical Performance – Inpatient (completed by your faculty/resident) | 45% |
| 1. Clinical Performance – Outpatient (completed by your faculty/resident) | 10% |
| 1. NBME Pediatrics Subject Exam   Note: minimum score required to pass exam = 65. | 25% |
| 1. OSCE | 15% |
|  |  |
| 1. Administrative professionalism (one point will be given for each of the following):  * Logging ALL Required Clinical Encounter cases per clerkship stated deadline. * Completing ALL administrative tasks (e.g. evaluations, mid-clerkship feedback form) of clerkship on time. * Completing ALL assignments on time and to satisfaction, including ethics case and Aquifer cases. * Being present at ALL required activities of the clerkship (and present and attentive on Zoom lectures). * Responding to all communications from the clerkship leadership within 48 hours. | 5% |
| 1. Other: 2. Aquifer cases 3. All Required Clinical Encounter reports/logs 4. Mid-Rotation Feedback/Goals 5. Ethics case | Satisfactory completion required  ü  ü  ü  ü |

The final clerkship grade is determined by your overall score, rounded to the nearest whole number, and students must also achieve a minimum NBME score for a final grade of Pass, High Pass or Honors:

|  |  |  |
| --- | --- | --- |
| **Pediatrics** | | |
|  | **Overall Score cut off for each grade** | **Minimum NBME Subject Exam Score for Grade of Pass, High Pass or Honors** |
| **Honors** | 93+ | **61** |
| **High Pass** | 74 - 92 |
| **Pass** | 66 - 73 |
| **Fail** | 65 or below |  |

**Eligibility Criteria for Inpatient Resident and/or Faculty Supervisors to Submit an Evaluation of Student Performance:** All attendings and residents who work with a student for a minimum of 3 calendar days. If a student worked with multiple attendings and/or senior residents, eachfor less than 3 days, a summative evaluation for that time period may be collected. At least one attending evaluation is required for each student to generate a grade on the inpatient services. KSOM health professionals who provide health and psychiatric/psychological services to a medical student cannot be involved in the academic assessment or promotion of the medical student receiving those services. Please see the [Supervision of Student Performance by Healthcare Providers](https://medstudent.usc.edu/home/faculty-staff-information/assessment-and-supervision-of-student-performance-by-healthcare-providers/) policy for more information.

**OSCE and NBME Subject Exam Logistics:** The Pediatrics Clerkship OSCE will take place on Monday during Week 6 of the rotation. The OSCE will consist of two stations that focus on primary care skills used in Pediatrics. Each station will consist of a 15-minute standardized patient encounter followed by a 10-minute post-encounter exercise. Detailed instructions will be provided to you the week before the OSCE. The NBME subject exam will be administered on Friday of Week 6 of the rotation.

**Passing the Clerkship:** To receive a passing grade (Pass, High Pass, or Honor) for the clerkship, students must demonstrate minimum competence based on their 1) overall clerkship performance; 2) the NBME subject exam performance; 3) the satisfactory completion of all required activities; and 4) the absence of unprofessional behaviors as outlined in the student handbook. Note: Unexcused absence or other unprofessional conduct will preclude a final grade of Honors regardless of overall performance score.

1. Students who do not pass the NBME subject exam on their first attempt will be ineligible for Honors.
2. Students who pass the retake exam (second attempt) are ineligible for Honors and will receive a grade of Pass (P) or High Pass (HP) based on their overall performance.
3. Students who fail the retake exam (second attempt) will continue to have a grade of Incomplete (I) noted on their transcript for that clerkship and will be required to sit for a second retake (third attempt) of the NBME subject exam.
4. Students who pass the second retake exam (third attempt) are ineligible for a grade of HP or Honors and will receive a grade of “Pass” for the clerkship.
5. Students who fail the second retake exam (third attempt) will receive a grade of “Fail” (F) for the clerkship and must repeat the clerkship.

**Fail:** A grade of fail may be given in the following situations: 1) failure to demonstrate minimum competence based on overall clerkship performance, 2) inability to pass the NBME on three attempts, 3) any unprofessional behavior as outlined in the student handbook, 4) failure to resolve a grade of incomplete.

**Incomplete:** Not a final grade, but a designation that is used if a student has been excused from meeting a clerkship deadline. Designations of **“Incomplete”** will be assigned to any student who does not complete any required component of the clerkship. Designations of **“Incomplete”** will be assigned to any student who has not achieved the minimum NBME Subject Exam score set for passing the clerkship on their first and second attempts.

**Final Summative Clerkship Evaluation:** Clerkship Directors write the final summative clerkship evaluation. Medical students may review the results of all individual evaluation elements of a course or clerkship (e.g. student performance evaluations completed by individual faculty/residents, OSCEs, subject examinations) after the completion of any course or clerkship.

# EHR Access and Emergency Protocols

**Electronic Health Record Access**

If you have questions or issues with access to the electronic health record system at Keck Hospital or LAC+USC, please contact the Office of Student Affairs at [medstuaf@usc.edu](mailto:medstuaf@usc.edu) or 323-442-2553.

**Emergency Procedures**

**Contact Student Affairs**

If you have an urgent issue that requires assistance, you may contact the Office of Student Affairs for assistance at 323-442-2553. You can call this number after hours and be connected to the Dean on call.

**Clerkship Director/MSE/Site Director/Coordinator**

You can also reach out to the Clerkship Director, Medical Student Educator or Site Director for assistance.

**Needlestick and Exposure Protocol**

Call **During Business Hours:** [**213-740-9355**](tel:2137409355) **(WELL);** **After Hours:** (323) 442-7900. Please leave a voicemail. There is a provider available 24/7 who will return your call. More information can be found at <https://engemannshc.usc.edu/bloodborne-pathogen-exposure/>.

**Additional information on emergency procedures can be found at:**

[**https://medstudent.usc.edu/emergency/**](https://medstudent.usc.edu/emergency/)

**Policies**

**Code of Professional Behavior**

Students are expected to adhere to the Code of Professional Behavior in all settings by demonstrating honesty and integrity, responsibility, reliability, and accountability as well as respect for all patients, peers, faculty, and staff. For a detailed description of various dimensions of professionalism, please review: <https://medstudent.usc.edu/home/faculty-staff-information/keck-school-of-medicine-code-of-professional-behavior-and-professional-behavior-expectations/>

**Clerkship Evaluation**

We rely on your thoughtful and constructive feedback to continually improve the curricula and instruction. Completing evaluations is a professional expectation of medical students’ professional responsibility. Please refer to the [Evaluation Completion Policy](https://medstudent.usc.edu/home/faculty-staff-information/keck-school-of-medicine-md-student-student-evaluation-completion-policy/).

**Grade Appeals**

Information about appealing a grade or evaluation can be found in the [Evaluation and Grade Appeal Policy](https://medstudent.usc.edu/home/faculty-staff-information/keck-school-of-medicine-md-student-evaluation-and-grade-appeal-policy/). Evaluation and grade appeals have timelines and requirements.

**HIPAA Privacy Regulation**

Please note that HIPAA privacy regulations are always in effect in all clinical settings. Individual practitioners (including medical students) are held personally responsible for violations of HIPAA regulations which may result in financial and other penalties. You have previously completed a HIPAA training on Trojan Learn and have access to the training modules if you wish to review them. You can also find additional information by visiting <https://ooc.usc.edu/data-privacy/health-information/hipaa-privacy-regulations/>

# Medical Student Supervision Policy

Students must have an identified faculty supervisor at all times. Students may be directly or indirectly supervised by faculty members and/or residents and, when indirectly supervised, direct supervision must be immediately available at all times by a faculty member or resident. Please review the [Medical Student Supervision Policy](https://medstudent.usc.edu/home/faculty-staff-information/keck-school-of-medicine-medical-student-supervision-policy/) for more information.

# Medical Student Time Requirements

Student hours include the following limits: a maximum of 28 consecutive hours in the hospital and a maximum of 80 hours per week averaged over four weeks. Students receive at least one day off per week. Refer to your individual calendar. Please review [the Medical Student Time Requirements for Clinical and Education Activities Policy](https://medstudent.usc.edu/home/faculty-staff-information/keck-school-of-medicine-medical-student-time-requirements-for-clinical-and-educational-activities-policy/) for more information.

**Code of Conduct in Faculty-Student Relationship**

The faculty code of conduct includes language about the standard of conduct in the faculty-student relationship:

<https://policy.usc.edu/wp-content/uploads/2022/10/Faculty-Handbook-2022.pdf>

**Assessment and Supervision of Student Performance by Healthcare Providers**

KSOM health professionals who provide health and psychiatric/psychological services to a medical student cannot be involved in the academic assessment or promotion of the medical student receiving those services: <https://medstudent.usc.edu/faculty-staff-information/assessment-and-supervision-of-student-performance-by-healthcare-providers/>

**Attendance**

It is the responsibility of the student to communicate with the curriculum office regarding absences from required events that result from anticipated conflicts or personal emergencies or unforeseen events. Please review the KSOM attendance policy for more details: <https://medstudent.usc.edu/home/faculty-staff-information/keck-school-of-medicine-medical-student-attendance-expectations-and-absence-request-policy/>

**Requesting Time Off**

Students requesting an excused absence for one or more missed classes, or who need to seek a leave of absence, are instructed to submit the appropriate form, which can be found here: <https://medstudent.usc.edu/forms/>

**Access to Health Care Services**

Students are excused from classes or clinical activities to access needed healthcare services. Please review the [Students Needing Access to Healthcare Policy](https://medstudent.usc.edu/home/faculty-staff-information/keck-school-of-medicine-md-program-policy-on-students-needing-access-to-healthcare-services/).

**Computer-based Exam Administration**

Students are required to bring fully charged laptops and chargers to participate in all pre-clerkship course examinations that are administered electronically. No additional items (cell phones, purses, notes, etc.) are allowed in the examination area and their presence in the examination area might result in a grade of fail for the course. For more information on the administration of computer-based examinations, please refer to: <https://medstudent.usc.edu/home/faculty-staff-information/keck-school-of-medicine-md-student-policy-on-computer-based-written-examination-administration/>

**Mistreatment**

The Keck School of Medicine (KSOM) is committed to maintaining and promoting a respectful learning environment for all members of the Keck community. KSOM has as zero tolerance policy for mistreatment. For more details on what constitutes mistreatment and strategies to combat/address it, please review: <https://medstudent.usc.edu/home/faculty-staff-information/keck-school-of-medicine-md-student-professional-behavior-and-mistreatment-policy/>

**Diversity**

The Keck School of Medicine (KSOM) is committed to creating a culture that promotes and celebrates diversity and inclusion at all levels of the institution. For more details, please review <https://medstudent.usc.edu/home/faculty-staff-information/diversity-policy/>

**Dress Code**

The Keck School of Medicine (KSOM) dress code policy discussion can be found here:

<https://medstudent.usc.edu/home/faculty-staff-information/keck-school-of-medicine-md-student-dress-code-policy/>

**Grading Policy**

The Keck School of Medicine (KSOM) grading policy discussion can be found here:

<https://medstudent.usc.edu/home/faculty-staff-information/keck-school-of-medicine-md-student-grading-policy/>

# Office of Student Accessibility Services (OSAS)

# OSAS provides support services and accommodations necessary to enable students with disabilities to develop their maximum potential by making their education accessible, while having the dignity to work independently. For more information, please review <https://osas.usc.edu/> or contact Dr. Ranna Nash at Keck Learning and Academic Support Services (KLASS) at [Ranna.Nash@med.usc.edu](mailto:Ranna.Nash@med.usc.edu).

**Emergency Procedures and Preparedness**

The Keck School of Medicine has emergency procedures and a preparedness plan. Visit this site to find out more, including whom to reach in an emergency:<https://medstudent.usc.edu/emergency/>

**Right to Inspect Student Records**

According to the Family Educational Rights and Privacy Act (FERPA), students have a right to inspect their educational records within 45 days of the request and to request corrections. For information on the review and challenge of student records, as well as general information about FERPA, visit: <https://arr.usc.edu/students/ferpa/>

**Wellness Day Policy**

Wellness days are mandatory and are incorporated into clerkship schedules to provide students with an opportunity to attend to their personal wellbeing. Students are released from clinical duties one full day for each 6-week clerkship and 1/2 day for each 4-week clerkship. The timing of wellness days can be found here <https://medstudent.usc.edu/clerkship-sites-directory/>.