Class of 2020

PHASE III CLERKSHIP CATALOG

2019-2020
OMSA CONTACT INFORMATION
The information in this handbook is subject to change at any time. For the most up to date information, or if you have questions regarding any policy or requirement in this handbook, please contact the Office of Medical Student Affairs.

Office Contact:
Office of Medical Student Affairs
Reginald Heber Fitz Hall, room 107
HSC-OMSA@salud.unm.edu
Phone: 505-272-3414
Fax: 505-272-8239

Faculty:
Sheila Hickey, MD
Associate Dean of Students
SHickey@salud.unm.edu
Teresa Vigil, MD
Assistant Dean of Students
TVigil@salud.unm.edu

OMSA Staff:
Davette D. Sandoval
Manager, Student Success
d delaosandoval@salud.unm.edu
Catherine Abuhilu
Program Specialist, Learning Communities
CatWood@salud.unm.edu
Chamonix Berry
Program Coordinator, Phase III
CBerry@salud.unm.edu
Rebecca Lloyd
Program Coordinator, Events
RLloyd@salud.unm.edu
Andrea Jones
Program Coordinator, Compliance
AmaJones@salud.unm.edu
Casey Trent
Administrative Assistant III
CaTrent@salud.unm.edu

Financial Aid Staff:
Eddie Salazar
Financial Aid Manager
EDSalazar1@salud.unm.edu
Leslie Gast
Financial Aid Officer
LGast@salud.unm.edu
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INTRODUCTION
The purpose of the Phase III medical curriculum at the University of New Mexico School of Medicine is to provide opportunities for students to:

- Further develop their skills and knowledge of patient care
- Broaden their understanding of medicine and its specialties
- Explore fields in which they may wish to pursue careers
- Remediate deficiencies in medically relevant skills, knowledge, and behaviors

This catalog contains descriptive information about graduation requirements, courses, and clerkships available to Phase III students. The variety of learning experiences includes hospital, clinic, community, and laboratory environments. The information has been condensed in this listing. Further information may be obtained by contacting the faculty evaluator. All departments and individuals offering Phase III courses have been queried regarding prerequisites, which are listed with each description in this catalog.

Students are not restricted to the courses contained in this catalog and are encouraged to initiate educational experiences here at UNM or at other institutions. For information about requesting Phase III credit for rotations not listed in this catalog, please refer to the “Phase III Non-Catalog Educational Experiences” section.

PROMOTION TO PHASE III
To be eligible for consideration for promotion to Phase III, a student must fulfill all of the following promotion requirements:

- Achieve a grade of Satisfactory in all seven Phase II clerkships
- Achieve a grade of Credit for Continuity Clinic and Performance Assessments
- Adhere to ethical and professional standards of behavior

Please review the entire policy on “Student Promotion and Awarding the MD Degree” in the UNM SOM MD Student Handbook or on the UNM OMSA webpage.

Phase III courses are for students who have completed Phase I and II. Except in very unusual circumstances, all required Phase II Clerkships must be taken at the UNM SOM. Phase I and Phase II students who wish to take any Phase III Clerkship must have prior approval. **If approved, Phase I and Phase II students may only receive 4 weeks of Phase III credit prior to promotion to Phase III.** Students who do not take USMLE Step 1 by the published deadline may be permitted to take one non-clinical Phase III elective at the UNM SOM (pending availability and approval) *after* taking Step 1. Please contact OMSA for more information.

Students must have completed all course prerequisites established by departments or individuals offering Phase III electives. Prerequisites for Sub-I, ICU, and Medicine in New Mexico courses include completion of all Phase II Clerkships. Exceptions to these guidelines are rarely approved.

AWARDING OF THE MD DEGREE
To be eligible for consideration by the faculty for award of the MD degree, a student must fulfill all of the following requirements:

- Achieve a grade of satisfactory or above in all Phase III rotations
- Successfully complete the research requirement
- Record passing scores for USMLE Step 1, Step 2 CK, and Step 2 CS
- Adhere to ethical and professional standards of behavior
POLICIES ON PHASE III CLERKSHIPS

Any first attempt “Fail” grade in a Phase III course must be successfully remediated prior to initiating another Phase III course. For more information, please refer to the “Policy on Student Promotion and Awarding the MD Degree” in its entirety on the UNM OMSA Website: https://som.unm.edu/education/md/omsa/student-promotion-and-policies.html

- The Committee on Student Promotions and Evaluation (CSPE) may require students to take and pass specifically designated Phase III Clerkships to remediate deficiencies in knowledge, skills, or behavior important to the practice of medicine.
- Study away from UNM SOM is considered a privilege and may be denied by CSPE if the committee deems such activities are not in the best interest of the student’s education.
- To receive credit for a Phase III educational experience at another medical facility, students must follow the procedures outlined in this handbook. Failure to do so will result in “No Credit” received.
- A student who has had academic difficulty may be prohibited from taking Phase III clerkships away from the UNM SOM campus.
- Students are not permitted to receive monetary compensation for courses taken to meet graduation requirements. Special circumstances permit exceptions for clerkships taken outside the Albuquerque area. In some cases, research electives or other rotations may be approved by CSPE for credit as well as monetary compensation. Any exception must be approved by the Office of Undergraduate Medical Education and CSPE prior to taking the course.

PHASE III SCHEDULING

PHASE II CLERKSHIP RESCHEDULING
Most Phase III clerkships have prerequisites stating that all or specific Phase II Clerkships must be completed. Students who were approved to postpone or “float” one or more clerkships during Phase II will be scheduled for those Phase II courses prior to starting Phase III clerkships unless approved by the Clerkship Director(s). Students will be scheduled based on availability after the incoming Phase II students have been scheduled and in consultation with the Clerkship Directors and CSPE. The Office of Medical Student Affairs will notify students of Phase II assignments. Students requesting to take these rotations in blocks other than 1 and 2 must complete the Phase III Scheduling Exception Form, provided by OMSA.

PHASE III SCHEDULING
Students submit preferences for their Phase III schedules using the Phase III Scheduling Request Worksheet. Upon obtaining Match Advisor consultation and approval signatures from the Associate or Assistant Dean of Students, the form is then submitted to OMSA. Students can requests all courses except those that require specific departmental approval prior to course registration. These courses are identified in this catalog and require that a signed course change request (add/drop) form be submitted to OMSA after the initial auto-generated schedules are assigned to all students. Students should keep the following in mind when requesting courses:

- Phase II prerequisites stated in the Clerkship Catalog must be met
- Dates for early and regular Match application and interviewing schedules
- CLNS 605: Comprehensive Ambulatory Care is offered ONLY during certain blocks
- “Concurrent” scheduling is NOT permitted. Students may only be registered for and complete one course per block, regardless of the schedule/time commitments of the course.
- The Phase II Class Rankings that appear in the Medical Student Performance Evaluation (also known as the Dean’s Letter) are based on a census date that will fall in mid-July. Only Phase II grades that have been received by that date will be calculated into the rankings. This includes any re-takes of failed shelf exams.
While every effort is made to accommodate students’ stated preferences, departmental needs, and limitations take precedence. In developing schedules, the Office of Medical Student Affairs considers these priorities. By necessity, elective courses must be planned around required clerkships. Each department establishes a maximum number of students accepted for each rotation, and UNM students are given priority over visiting students from other schools during the initial Phase III scheduling period.

The Office of Medical Student Affairs maintains the official schedule for all Phase III students. Changes to a student’s official schedule may only be made with approval from the department in which a course is offered. Only courses listed on the student’s official schedule may be used in determining the completion of degree requirements.
### Class of 2020 Phase III Block Schedule
(April 24, 2019 – May 26, 2020)

<table>
<thead>
<tr>
<th>BLOCK</th>
<th>DATES</th>
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</thead>
<tbody>
<tr>
<td>1</td>
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<tr>
<td>2</td>
<td>05/27 – 06/23/19</td>
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<tr>
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<td>04/27-05/24/20</td>
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</table>
PHASE III COURSE REQUIREMENTS

Students may complete more rotations than required but not less than the 8 minimum courses.

<table>
<thead>
<tr>
<th>COURSE</th>
<th>REQUIREMENTS</th>
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<tbody>
<tr>
<td>Intensive Care Unit (5 options)</td>
<td>4 weeks</td>
</tr>
<tr>
<td>Sub-Internship (25 options)</td>
<td>4 weeks</td>
</tr>
<tr>
<td>Comprehensive Ambulatory Care – CLNS 605</td>
<td>4 weeks</td>
</tr>
<tr>
<td>Medicine in New Mexico – CLNS 910</td>
<td>4 weeks</td>
</tr>
<tr>
<td>4 Electives (clinical, non-clinical, domestic away, international away)</td>
<td>4 weeks each for a total of 16 weeks</td>
</tr>
<tr>
<td><strong>Total Required</strong></td>
<td><strong>32 weeks</strong></td>
</tr>
</tbody>
</table>

COMPREHENSIVE AMBULATORY CARE

Students are required to complete the four-week Comprehensive Ambulatory Care rotation (CLNS 605). Students will be contacted by the Preceptorship Office to determine preferences. This course is offered ONLY 6 times throughout the year and has a cap of 16 students per block.

MEDICINE IN NEW MEXICO

Students are required to complete the four-week Medicine in New Mexico rotation (CLNS 910). Students will be contacted by the Preceptorship Office to determine clinic and preceptorship preferences. This course is offered only 10 times throughout the year and has a cap of 12 students per block.

ELECTIVE CREDIT

A minimum of 16 weeks in Phase III must be scheduled for elective credit. All courses listed in the catalog are approved for elective credit. Non-Catalog courses at UNM or other institutions must be approved in advance by CSPE for elective credit.

An elective is defined by CSPE as an educational activity related to medical science. To receive elective credit, the experience must meet the following criteria:

- It must be approved in advance by the appropriate UNM Department Chair/Director, the Office of Medical Student Affairs, the Office of Undergraduate Medical Education, and CSPE.
- It must be a medically relevant education experience rather than a job, and the student must have an adequate/appropriate background so that the experience is of educational value.
- The performance of the student in the experience must be evaluated and reported to the Office of Medical Student Affairs at UNM SOM.

All of the above criteria must be met before consideration will be given to awarding an elective credit for a Non-Catalog elective at UNM or other institutions. Any request must be accompanied by a course description (a description can often be found in the host institution's course catalog or website). See “Phase III Non-Catalog Educational Experiences” section for more information.

ELECTIVE CREDIT FOR RESEARCH

Students may receive elective credit in Phase III to complete the required scholarly activity requirement introduced in Phase I. Students may apply a total of three research electives toward graduation: Research Elective I – CLNS 901, Research Elective II – CLNS 902, Research Elective III – CLNS 903. All research courses must be added to a student’s schedule via the Research Add/Drop Form.
PHASE III NON-CATALOG EDUCATIONAL EXPERIENCES

Students are not restricted to the courses listed in this catalog and are encouraged to initiate educational experiences here at UNM or at other institutions.

Visiting Student Learning Opportunities: The AAMC VSLO application service (commonly referred to as VSAS) enables medical students to pursue learning opportunities in locations away from their home institutions. VSLO/VsAS is used by LCME accredited medical schools as a way to receive, review, approve, and schedule away rotations. The Office of Medical Student Affairs grants access to students and helps facilitate the application process using this system.

OMSA will consider away rotations scheduled in VSAS as “pre-approved” for credit when they meet the following criteria:

- It is at an LCME-accredited institution
- It is 4-weeks in length
- The student is using it for “Elective” credit only
- It is NOT an international rotation

If the rotation does not meet the criteria above - ex: the rotation is for less than 4 weeks or you wish to have the away rotation satisfy a Sub-Internship or ICU requirement, you must follow the instructions listed under the appropriate section below (Non-VSAS Away Rotations, Credit for Sub-I and ICU, International Clerkships) in order to receive credit. Please note: All VSLO/VsAS rotations must be added to a student’s schedule using the VSAS Add/Drop form BEFORE the rotation begins.

NON-VSAS AWAY ROTATIONS

All non-catalog away rotations (electives that do not use VSLO/VsAS for application processing) must have the prior approval of CSPE. Requests must be submitted to OMSA at least 45 days in advance of the start of the rotation. To request approval for a non-catalog experience, the student must:

- Complete Section I and II of the Phase III Credit Request form (available from OMSA)
- Obtain a written description of the course, either from a course catalog or affiliated website
- If applicable, complete a Sub-I/ICU Credit Request form (available from OMSA) to accompany the Phase III Credit Request Form
- Present the Phase III Credit Request Form, course description, and (if applicable) the Sub-I/ICU Credit Request Form to the appropriate UNM SOM Department Clerkship Director/Chair for review and approval signature. UNM departments must approve and sign these forms to ensure that the away rotation satisfies our basic course requirements for each specialty
- Submit the request with departmental signature and all other documents to the Office of Medical Student Affairs at least 45 days prior to the start of the rotation. The request is reviewed by OMSA, UME, and is forwarded to CSPE for final consideration and approval

Any student who takes a non-catalog course without the required prior approval of CSPE will not receive credit for the course, regardless of the grade given by the course instructor. Please also keep in mind that UNM SOM does not provide malpractice insurance coverage for a non-catalog course that has not been pre-approved by CSPE.

Following CSPE’s review, the student is notified via email of CSPE’s decision regarding the request. The student is also responsible for providing the faculty evaluator at the host institution with the appropriate evaluation form to receive the grade or credit.

Credit for a course will not be given until a completed UNM SOM evaluation form with a passing grade is received in the Office of Medical Student Affairs.

In the event of a cancelled or dropped rotation, students are responsible for meeting the requirements set forth by the host institution (ex: cancellation deadlines, fees, etc.) Students must also ensure that the course is removed from the UNM SOM schedule by contacting OMSA.
CREDIT FOR SUB-INTERNSHIPS AND ICUS
A student may use a course at another institution to meet the Sub-I or ICU credit requirement. This is rare and students are encouraged to complete the Sub-I and ICU at UNM. In order to receive Sub-I or ICU credit, programs must fulfill the following requirements:

- The student must act as a sub-intern, assuming primary responsibility for overall care in an inpatient setting
- Full-time physician supervision must be provided on site or by telephone
- The experience must include initial or early patient contact, history and physical examination, formulation of problem list, diagnostic plan, therapeutic plan, writing orders, patient follow up, progress notes and discharge notes
- In clerkships requiring on-call activity, the student’s activity must be in rotation with intern schedules (including night and weekend call)
- No rotation may be less than four weeks. Travel or absences for pursuit of residency positions is not allowed during these clerkships, except with written permission of the service

Students wishing to receive Sub-I or ICU credit for an away rotation must complete the following:

- Students must complete the Phase III Credit Request Form (available from OMSA).
- Students must complete the Sub-I/ICU Credit Request Form (available from OMSA).
- Students must have the faculty evaluator from the host institution sign the Sub-I/ICU Credit Request Form prior to submitting it to CSPE.
- Retroactive requests for credit will not be considered by CSPE.

INTERNATIONAL CLERKSHIPS
During Phase III, students may choose to participate in an international clerkship, which must meet the following criteria to be approved by CSPE for academic credit:

- Level of participation in the elective must be active and meaningful
  - Experiences that are predominantly observational or passive may not be approved
  - Clinical care includes direct participation in care giving and decision-making
  - Participation in research project involving a meaningful role
- Supervision with regard to educational goals and responsibilities must be active to ensure the quality of the experience, critical assessment, and feedback on strengths and weaknesses of the student.
- An individual at the clerkship site must be responsible for monitoring the student’s learning objectives, ensuring the quality of the experience, and providing a written evaluation of the student’s performance. Evaluation must address the required levels of participation of the student’s clinical experience or project, gathering of information, critical management of information and setting of priorities, intervention or implementation, and the ability to evaluate outcomes.

A student seeking CSPE approval to participate in an international clerkship must follow the same procedures for requesting Phase III Credit from CSPE and meet the following requirements:

- Student must be in good academic standing
- Student must submit a written report describing the experience to CSPE
- Student must have appropriate language skills
- Proposed educational activities must not violate applicable laws and regulations
- Student is responsible for financing

The University of New Mexico places the highest priority on protecting students’ health and safety when traveling outside of the US as part of University programs. Therefore, students planning to travel outside of the country must register their international travel with the UNM Global Education Office. Registration can be completed online here: https://studyabroad.unm.edu/section/independent-study-abroadacademic-travel-registration (con’t on next page)
Students will register for “Independent Travel” and work with the Global Education Office to:

- Complete and submit the Conditions of Travel form
- Purchasing the following insurance policies as applicable:
  - TRAVMED
  - Health Insurance which includes medical evacuation and repatriation of remains
- Submit a travel itinerary and emergency contact form
- Obtain health and safety information for travelers from the US State Department
- Submit a copy of your passport

**NON-UNM VISITING MEDICAL STUDENTS**

The UNM SOM welcomes visiting medical students to participate in senior year elective clerkships. Clerkships for non-UNM visiting students are coordinated by the Office of Medical Student Affairs.

The UNM SOM participates in the Visiting Student Learning Opportunities (VSLO – also referred to as VSAS) application system. All domestic and international visiting elective applications must submitted using VSLO.

For current application processes, please contact the Office of Medical Student Affairs via email at HSC-MDVisiting@salud.unm.edu or by phone at 505-272-3414.
### Courses Offered by Block

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<thead>
<tr>
<th>CLNS#</th>
<th>Course Name</th>
<th>BLOCK#</th>
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<tbody>
<tr>
<td></td>
<td><strong>ANESTHESIOLOGY</strong></td>
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</tr>
<tr>
<td>801</td>
<td>Elective - Anesthesiology &amp; Critical Care UNMH</td>
<td>1 2 3 4 5 6 7 8 9 10 11 12 13</td>
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<tr>
<td>805</td>
<td>Elective - Obstetric Anesthesia</td>
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<tr>
<td>806</td>
<td>Elective - Anesthesiology &amp; Critical Care SRMC</td>
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<tr>
<td></td>
<td><strong>DERMATOLOGY</strong></td>
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<tr>
<td>810</td>
<td>Elective - Clinical Dermatology at UNMH &amp; VAMC</td>
<td>1 2 3 4 5 6 7 8 9 10 11 12 13</td>
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<tr>
<td></td>
<td><strong>EMERGENCY MEDICINE</strong></td>
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<tr>
<td>689</td>
<td>Elective - Pediatric Emergency Medicine</td>
<td>1 2 3 4 5 6 7 8 9 10 11 12 13</td>
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<tr>
<td>821</td>
<td>Elective - Emergency Medicine at UNMH</td>
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<tr>
<td>823</td>
<td>Elective - Emergency Medical Services</td>
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<td>824</td>
<td>Elective - Toxicology</td>
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<td>825</td>
<td>Elective - Wilderness Medicine</td>
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<td>834</td>
<td>Elective - Emergency Ultrasound at UNMH</td>
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<td>835</td>
<td>Elective - Evolutionary Medicine</td>
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<td><strong>FAMILY MEDICINE</strong></td>
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<tr>
<td>777</td>
<td>Sub-I - Family Practice at UNMH</td>
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<tr>
<td>780</td>
<td>Elective - Health Care for the Homeless</td>
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<td>781</td>
<td>Sub-I - FM Maternal Child Health</td>
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<td>787</td>
<td>Elective - Writing &amp; Healing</td>
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<td>788</td>
<td>Sub-I - Family Medicine in Northern NM</td>
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<td>789</td>
<td>Sub-I - Family Medicine in Southern NM</td>
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<td><strong>INTERNAL MEDICINE</strong></td>
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<tr>
<td>603</td>
<td>Elective - Hematology Oncology Clinic</td>
<td>1 2 3 4 5 6 7 8 9 10 11 12 13</td>
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<tr>
<td>604</td>
<td>Elective - Infectious Disease - Inpatient</td>
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<tr>
<td>606</td>
<td>Sub-I - Internal Medicine at UNMH</td>
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<td>610</td>
<td>Elective - Gastroenterology</td>
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<td>Elective - Arthritis &amp; Rheumatic Diseases</td>
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<td>Elective - Adult Endocrinology &amp; Metabolism</td>
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<td>620</td>
<td>Sub-I - Internal Medicine at VAMC</td>
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<td>622</td>
<td>Elective - Medicine Intensive Care Unit (MICU)</td>
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<td>Elective - Internal Medicine Boot Camp</td>
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<td><strong>NEUROLOGY</strong></td>
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<td>Sub-I - Neurology at UNMH</td>
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<td>704</td>
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<td><strong>NEUROSURGERY</strong></td>
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<td>703</td>
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### Courses Offered by Block

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<td>REQUIRED – Medicine in New Mexico</td>
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<td>Elective – Advanced Clinical Reasoning</td>
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<td>950W</td>
<td>Elective – Quality Improvement Practicum</td>
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<td>Elective – Creating Medical Educations for the Future</td>
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<td>903</td>
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Goals and Unique Aspects:
The rotation provides the student with an understanding of perioperative medicine and the fundamentals of anesthesia. Students will have opportunities to develop and practice airway management skills and vascular access techniques throughout the rotation.

Objectives:
Students will gain an understanding of the effect of physiology, pathology, and pharmacology on the care of a patient throughout the perioperative period, from pre-operative assessment, through intraoperative management, to post-anesthesia care. Students will gain proficiency in essential anesthesia manual skills including airway management and vessel cannulation. Throughout the rotation, the students will be granted increasing independence in patient management, and will acquire insight into management of an operating room as well as the career path of anesthesiology.

Responsibilities:
The students will observe and participate in all aspects of patient care: pre-operative to post-operative. The students will work with an anesthesia provider daily to take care of multiple patients. The students will maintain a physical presence in the operating room for the entirety of the case in the majority of procedures in which they participate. The students will spend time in the UNM Hospital Main Operating Room, the BBRP (Pediatric) Operating Room, the OSIS Operating Room, in Obstetrics, as well as a half-day in the Chronic Pain Clinic. Students will keep a daily log of cases and procedures attempted. Students participate in weekly BATCAVE simulation experiences, attend weekly student-specific lectures and discussions, participate in the weekly resident lecture series and Grand Rounds, take advantage of any workshops being offered in the Department, hand in a rotation assignment, and develop a short final case presentation. At the end of the rotation, students will evaluate their experience on the rotation.

Supervision and Training:
The students have daily teaching by Anesthesiology attendings and residents. Additionally, lectures, discussions, and simulations are scheduled. The students also engage in a semi-independent Learning Issue development and literature review. Reading assignments from a textbook provided by the department help develop a foundation of anesthesia understanding. The students are expected to join the resident lecture series.

Evaluation:
The final grade for the rotation will consist of performance on 1. Daily intraoperative teaching sessions, 2. Lecture/Discussions and Simulation, 3. Rotation assignment, 4. A multiple choice and mock essay question test, and 5. A final project/presentation. A grade of “Outstanding” will be reserved for the top 10% of students.
DEPARTMENT OF ANESTHESIOLOGY

Obstetric Anesthesia

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<th>Duration: 4 weeks</th>
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<tr>
<td>Faculty Evaluator(s)</td>
<td>Eva Szabo, MD</td>
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| Prerequisites: | Yes | All Phase II Clerkships |

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<tr>
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<tr>
<td>Clerkship Contact</td>
<td>Tara Calderone</td>
<td><a href="mailto:TnCalderone@salud.unm.edu">TnCalderone@salud.unm.edu</a></td>
<td>505-272-3119</td>
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<tr>
<td>Prior Approval Required</td>
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Goals and Unique Aspects:

Objectives:
By the end of the rotation, the student will be able to discuss the effect of the normal physiologic changes of pregnancy on the anesthetic care of a parturient throughout the peripartum period. Focus is on formulating a plan for labor analgesia and for relief and prevention of pain during and following obstetrical and surgical procedures with emphasis on Cesarean delivery. The student will also have the opportunity to perform neuraxial anesthesia (subarachnoid block and epidural block) if deemed appropriate by the supervising attending.

Responsibilities:
The rotation takes place on the Labor and Delivery Unit. The student will observe and participate in all aspects of anesthesia care of the parturients from preoperative consultation and assessment to postoperative (or post-procedure) follow-up. The student will also attend the departmental didactic lecture series and Grand Rounds presentations and complete one case presentation project or, alternatively, prepare one presentation on an obstetrical anesthesia topic. The student will have daily direct teaching by the attending and the resident both in the operating room and the labor suite. There is no night call requirement.

Supervision and Training:
The student will work closely with the attending/resident obstetric anesthesia team. The student will perform pre- and postoperative assessment and present it to a senior resident or the attending. Any direct hands-on activity will be closely supervised by a senior resident or the attending anesthesiologist.

Evaluation:
The student will be evaluated by the rotation director based on input from the attendings and residents with whom the student had the most contact during the rotation. 50% - clinical observation, 25% - evaluation from staff, 25% - case presentation. Criteria for “outstanding” grade: “outstanding” in clinical observation and “outstanding” in one of the other two categories and at least a “good” in the third category.
DEPARTMENT OF ANESTHESIOLOGY
Anesthesiology & Critical Care Medicine at SRMC

Course Number | CLNS 806 | Duration: 4 weeks
--- | --- | ---
Credit Type | Clinical Elective | ---

| Block Number | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 |
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X = Offered in Block | X | X | X | X | X | X | X | X | X | X | X | X | X |

# of Students per Block | 1 | ---
Faculty Evaluator(s) | Andrea Sandoval, MD | ---
Prerequisites: | Yes | All Phase II Clerkships |

Accepts Visiting Students | Yes | Domestic MD and Domestic DO* |
Accepts Off-Cycle Date requests | No | *DO applicants MUST provide USMLE Report |

Add/Drop Policy | Add: 30 Days | Drop: 30 Days | Other: | --- |
Clerkship Contact: | Tara Calderone | TnCalderone@salud.unm.edu | 505-272-3119 | --- |

Goals and Unique Aspects:
The rotation seeks to provide the student with an understanding of perioperative medicine and the fundamentals of anesthesia. This student will also have opportunities to practice airway management skills and vascular access techniques. Sandoval Regional Medical Center offers a unique opportunity to UNM medical students to learn. The clinical pace is additionally less hectic than at the main hospital, affording greater opportunities for discussion between attendings and students in a more relaxed atmosphere.

Objectives:
Student will learn the fundamentals of perioperative medicine through preoperative evaluation, intraoperative care (monitoring, pharmacology of anesthetic and analgesic agents, management of common intraoperative anesthetic problems), and post-operative care, including post-operative pain management techniques. Students develop familiarity with basic airway management techniques and obtain a basic understanding of operating room patient flow.

Responsibilities:
Student observes and participates in all aspects of patient care, pre-operative to post-operative. Student works with an anesthesia provider daily and will be assigned to the cases in a single operating suite. The coordinator, or his designee, will pick a room that has maximum educational value for the student on the previous day. The student will be expected to review the patient records and read about the anesthetic care of patients undergoing the scheduled procedures the night before. Student will also complete a case presentation project.

 Supervision and Training:
Supervision will be provided by one of the full-time anesthesiologists at SRMC. All are on the full-time faculty of the School of Medicine and are Board Certified/eligible in Anesthesiology: Ashleigh Dixon, MD; Neelema Sinha, MD; Francisco Buendia, MD; Hilary Ford, MD, David Siegel, MD and Hong Lee, MD.

Evaluation:
At the conclusion of each rotation, all of the faculty will evaluate the student in writing and coordinator will submit a synopsis of the evaluations on the appropriate UNM forms for the student's records. To obtain a grade of "outstanding," the student should demonstrate advanced reading and preparation for each assigned case. They should evidence a marked increase in their fund of knowledge in anesthesiology throughout the clerkship. While technical facility is desirable, it is not required other than a demonstration of motivation to learn. Grading criteria will include attendance, knowledge acquisition, communication skills, and case presentation quality.
Goals and Unique Aspects:
Opportunity to work in dermatology clinics at UNMH, UNM Comprehensive Cancer Center, and VAMC as well as participate in didactic sessions with faculty and residents.

Objectives:
Emphasis placed on the diagnosis and treatment of the most common skin diseases and on cutaneous manifestations of systemic diseases.

Responsibilities:
Clinical: Most days are spent in clinics. Student must attend all clinics and conferences as directed by Faculty Evaluator. No night or weekend responsibilities.

Supervision and Training:
Amount and type: full-time faculty will supervise all teaching clinics. Students will rotate through general dermatology, cutaneous oncology, pediatric dermatology, and Mohs during this four-week rotation. Didactic content: Students will participate in Grand Rounds and Journal Clubs on Friday mornings. They will also have the opportunity to participate in resident didactics on Wednesday afternoons. The American Academy of Dermatology Basic Dermatology Curriculum Modules will provide a foundation of knowledge that will help students be successful during their rotation.

Evaluation:
All faculty evaluate the student and the Faculty Evaluator summarizes the evaluations. Evaluation is based on end of course presentation (25%), clinical evaluations (50%), and an examination (25%). The examination is based on the AAD Basic Dermatology Curriculum. Students are expected to attend all clinics and conferences as directed by the Faculty Evaluator. Any absences must be approved by the Clerkship Director and more than three days must be approved by the Associate Dean of Students per the UNM Phase III attendance policy. Presentation: 5 minutes duration on an interesting rare case or a new treatment of a common disease entity. If a student wishes, there are many opportunities to complete a case report or other similar publication with mentorship from faculty. If this is a goal for the student, please communicate with the program director prior to starting the rotation.
DEPARTMENT OF EMERGENCY MEDICINE
Pediatric Emergency Medicine

Course Number | CLNS 689 | Duration: 4 weeks
--- | --- | ---
Credit Type | Clinical Elective | ---

Block Number | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13
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X = Offered in Block | X | X | X | X | X | X | X | X | X | X | X | X | X

# of Students per Block | 1 | ---

Faculty Evaluator(s) | Rachel Tuuri, MD | ---

Prerequisites: | Yes | All Phase II Clerkships

Accepts Visiting Students | Yes | Domestic MD and Domestic DO

Accepts Off-Cycle Date requests | No | ---

Add/Drop Policy | Add: 30 Days | Drop: 30 Days | Other:

Clerkship Contact: | Ryan Van Otten | Ryanottcn@salud.unm.edu | 505-272-6524

Goals and Unique Aspects:
To become more comfortable with the general care of the acutely ill or injured child.

Objectives:
Familiarize the student with general suturing and splinting procedures, and the approach to the child in the acutely ill or injured.

Responsibilities:
Required shift work: Typically 13-18 shifts. Day shifts (7a-3p), afternoon shifts (12-8p), late evening shifts (8p-4a), and overnight shifts (11p-7a). Students will be assigned 3 – 5 sessions of each different shift type. For example, if a student has done three of 7a-3p, five of 8p-4a and five of a 12p-8p; then they will be doing four 11p-7a shifts the next week. The following block, the student most likely would do one 7a-3p, four 12p-8p, five 8p-4a, and three 11p-7a. The distribution of shifts also depends on student requests and the number of people working at PED. Interview dates and travel can also determine the duration of their rotation. Research: Many on-going clinical studies in Peds ER.

Supervision and Training:
Amount and type: Faculty always on site. Patient presentations to faculty or senior house officer with faculty direct supervision by faculty.

Evaluation:
Clinical observation. Criteria for outstanding grade: Any supervising faculty can nominate the student for Outstanding. In general, the student must be hardworking, enthusiastic, a team player, and provide his/her patients with outstanding and comprehensive care.

Additional Information:
This rotation adheres to a strict add/drop policy. No changes are allowed less than 14 days prior to the rotation start date. This includes requesting to drop the rotation.
DEPARTMENT OF EMERGENCY MEDICINE
Emergency Medicine at UNMH

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Prerequisites: Yes All Phase II Clerkships

Accepts Visiting Students: Yes Domestic MD and Domestic DO

Accepts Off-Cycle Date requests: Yes - with department permission

Add/Drop Policy: Add: 30 Days Drop: 30 Days Other: 

Clerkship Contact: Ryan Van Otten ryanotten@salud.unm.edu 505-272-6524

Prior Approval Required: No

Goals and Unique Aspects:
To learn about the specialty of Emergency Medicine and gain proficiency in the evaluation and treatment of common emergency conditions. Emergency Medicine deals with patients and diseases of varying severity in an outpatient setting with rapid problem analysis, treatment, and disposition based on limited data.

Objectives:
Create a complete differential diagnosis and plan of management for common and life-threatening chief complaints. Learn effective multi-tasking of patients. Develop proficiency in basic procedures such as wound care, splinting, lumbar puncture, venipuncture and bedside ultrasound. Continued exposure to a variety of normal and abnormal physical exam findings. Develop the thought process necessary to identify patients with occult diseases that are potentially catastrophic. Understand the role of the Emergency Medicine Physician in the delivery of health care, and the role of the Emergency Medicine Department in overall hospital functioning. Recognize your own limitations and the need for consultation.

Responsibilities:
Didactic: Four hours per week of dedicated student conference time, and the opportunity to attend an additional five hours per week of resident conference, if the student chooses. Written responses to questions related to Emergency Medicine, three interesting patient write-ups and reading assignments from various sources. Reading material will be provided. Skills: Ultrasound, EKGs, wound care and suturing, splinting, and patient simulation. Additional procedures are learned and performed in the ED. Clinical: Function as a sub-intern under the direct supervision of the ED attendings and teaching residents. Shift load is about 14-15 eight hour shifts per rotation plus four hours of conference per week.

Supervision and Training:

Evaluation:
Student is provided feedback and evaluated at the end of each shift by the faculty and residents. These evaluations are summarized at the end of the rotation and are the bulk of the grade. Additional data from performance and participation in the student conferences is considered. Criteria for outstanding grade: An O is given to about 10-15% of students and recognizes superior performance in all areas of the rotation. Areas of evaluation include interpersonal skills, data collection, data synthesis and procedural skills.

Additional Information:
This rotation adheres to a strict add/drop policy. No changes are allowed less than 30 days prior to the rotation start date. This includes requesting to drop the rotation.
**DEPARTMENT OF EMERGENCY MEDICINE**  
**Emergency Medical Services (EMS)**

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# of Students per Block: 1

**Faculty Evaluator(s):** Dorothy Habrat, DO

**Prerequisites:** Yes All Phase II Clerkships

**Accepts Visiting Students:** Yes Domestic MD and Domestic DO

**Accepts Off-Cycle Date requests:** No

**Add/Drop Policy:** Add: 30 Days Drop: 30 Days Other:

**Clerkship Contact:** Ryan Van Otten ryanotten@salud.unm.edu 505-272-6524

**Prior Approval Required:** YES - Must submit Add Form after Phase III schedules are released

**Goals and Unique Aspects:**
During the EMS elective month, students will receive direct observation of patient care in the pre-hospital setting. This will enhance the appreciation of the clinical care provided by EMS professionals in the field. It will highlight the challenges and limitations of the pre-hospital and inter-facility environments. Students will also understand the differences in the level of education and training of EMTs and Paramedics and will get a unique insight into the socio-economic impacts and limitations on patient's health and how it may contribute to presentation to the Emergency Department.

**Objectives:**
Observe and participate in clinical care in the pre-hospital environment. Educational experience in the classroom, simulation lab, and field environment. Direct observation of EMS Medical Direction.

**Responsibilities:**
Observational - Basic and Advanced Life Support procedures during real 911 response in the community setting. Patient care provided on scene and en route to hospital. Clinical - Variable based on call volume. Patient assessment, 12 Lead ECG and rhythm analysis, Pt contact tracking. Weekly journaling. Research - Potential involvement in Resident, Fellow, or Staff level research projects, based on availability. Teaching - Presentation of clinical care summaries to Medical Director. Presentation of case or current article related to current EMS practices (10-15 min max). Miscellaneous - ~60+ contact hours. Mandatory weekly meeting with EMS faculty. EMS Journal Club. Ambulance ride-alongs (36 hours). EMS Medical Director rides. No night call. No subintern requirements. City, county, or state-level meeting as applicable.

**Supervision and Training:**
Jenna White, MD - daily coordination and contact. EMS Consortium Faculty, EMS Fellows. Faculty evaluation and direction coordinated in weekly meetings. Didactic content: assigned readings and texts.

**Evaluation:**
Based on review of experience, clinical reports, and direct observation. Criteria for outstanding grade: Meet the minimum objectives with outstanding preparation and presentation of teaching cases, participation in EMS activities and thorough assessment of EMS clinical cases and care provided.

**Additional Information:**
*Prior approval is required. Once approved by department, submit add/drop request to OMSA. Program requires prior scheduling and paperwork for ambulance ride-alongs (4-6 weeks prior). Rotation adheres to a strict add/drop policy. No changes allowed less than 14 days prior to the rotation start date. This includes drop requests.*
DEPARTMENT OF EMERGENCY MEDICINE
Toxicology

Goals and Unique Aspects:
Meet minimum objectives with outstanding preparation and presentation of teaching cases, participation in Poison Center and Medical Toxicology Service activities, and thorough assessment and review of medical toxicology clinical cases and care.

Objectives:
Enable the student to integrate basic pharmacology with clinical care of the acutely exposed, poisoned, or envenomated patient.

Responsibilities:

** An email is sent every morning directing rotators to either the location of bedside consults or directing them to report to the poison center for case review and rounds. Please provide an email address and cell phone number (for backup texts if necessary) prior to the start of the rotation.

Supervision and Training:
Amount and type: Daily teaching rounds by Drs. Seifert, Warrick, and Smolinske and Poison Center pharmacists. Didactic content: directed readings in toxicology are provided.

Evaluation:
Based on clinical observation. Criteria for outstanding grade: Participate in patient care opportunities, interact in teaching sessions, demonstrate good grasp of toxicology fundamentals in directed readings, complete short project evaluating selected questions in toxicology.

Additional Information:
Prior approval is required. Once approved by department, submit add/drop request to OMSA. This rotation adheres to a strict add/drop policy. No students will be accommodated during blocks 3 or 9. Although a rotation is not prohibited during the following times, be aware that Poison Center educational activities are suspended during the following:
- Fall North American Congress of Clinical Toxicology (NACCT) meeting. Dates variable; check website at www.clintox.org
- Poison Center Mid-Year Meeting. Dates variable, typically February or March; call Poison Center for details.
- Educational activities may be limited during Thanksgiving week.
DEPARTMENT OF EMERGENCY MEDICINE
Wilderness Medicine

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# of Students per Block | 20 |

Faculty Evaluator(s) | Aaron Reilly, MD & Jason Williams |

Prerequisites: | Yes | All Phase II Clerkships |

Accepts Visiting Students | Yes | Domestic MD, Domestic DO, and International |

Accepts Off-Cycle Date requests | No |

Add/Drop Policy | Add: 30 Days | Drop: 45 Days |

Clerkship Contact: | Ryan Van Otten | ryanotten@salud.unm.edu | 505-272-6524 |

Prior Approval Required: No

Goals and Unique Aspects:
Learn wilderness preparedness, emergency procedures and treatment, strengthen leadership, teamwork and communication skills.

Objectives:
Learn the Wilderness Medicine core curriculum as developed by the Wilderness Medical Society. Core curriculum includes, but is not limited to: high altitude illness, environmental emergencies (head, cold), medical kit development, orthopaedic injury management in the field, wound care, plant toxicology, bites and stings, travel medicine (infectious disease), search and rescue, patient assessment and field management.

Responsibilities:
Observational: All skills are observational and hands-on. Clinical: Students work through scenarios of wilderness emergency medicine in outdoor setting. Teaching: Wilderness medicine topics are presented in a tutorial setting using cases as the starting point: Didactic and hands on teaching. Required: Eight hours a week in outdoor field work: skill stations, practical scenarios. Sixteen hours a week in group sessions: four hours didactic lectures, eight hours tutorial working through relevant cases, four hours skills. Field trips are required.

Supervision and Training:
Amount and type: Direct supervision by faculty facilitators and ED attendings. Emergency Medicine residents and community experts may present some didactic sessions. Didactic content: Auerbach Wilderness and Environmental Medicine text, cases, and lectures.

Evaluation:
Based on clinical observations, tutorial and scenario/skills assessment. Criteria for outstanding grade: Outstanding performance (top 10%).

Additional Information:
This rotation is only offered once per year. Contact the department for more details. Several field trips throughout New Mexico. This rotation adheres to a strict add/drop policy. No changes are allowed less than 14 days prior to the rotation start date. This includes requesting to drop the rotation. *This elective requires a $925 course fee. This includes an initial non-refundable course deposit of $250 (due no later than July 31, 2019). The remaining balance of $675 is due no later than Dec 1, 2019. For students who must cancel the elective, a refund of the $675 payment will only be issued if the student cancels before the 45 day prior to the start of the course.
**DEPARTMENT OF EMERGENCY MEDICINE**

**Emergency Ultrasound at UNMH**

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<th>Faculty Evaluator(s)</th>
<th>Tamara Barrett, MBA, RDMS, Wendy Hanna, MD, and Amanda Medoro, MD</th>
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<tr>
<th>Prerequisites:</th>
<th>All Phase II Clerkships. MSIV applicants must have completed at least one EM rotation</th>
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<td>Clerkship Contact:</td>
<td>Ryan Van Otten</td>
<td><a href="mailto:ryanotten@salud.unm.edu">ryanotten@salud.unm.edu</a></td>
<td>505-272-6524</td>
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<td>Prior Approval Required:</td>
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**Goals and Unique Aspects:**
Emergency Ultrasound is a non-clinical elective that integrates emergency medicine knowledge with technical bedside ultrasound skills. Didactics are in an asynchronous online format, with online modules. Hands-on scanning will be with rotation preceptor, EM residents, and EM faculty in the Emergency Department. Students will have plenty of opportunity for primary hands-on scanning, as well as small group scanning participation.

**Objectives:**
Describe the basics of ultrasound physics, ultrasound equipment and image/control modification to maximize image quality. Describe the utilization and application of clinician-performed limited bedside ultrasound and its differences from comprehensive ultrasound studies. List the indications, scanning protocols, and limited emergency diagnostic possibilities for the common EUS applications. Integrate existing clinical knowledge into use of bedside ultrasound. Recognize normal and abnormal sonographic anatomy.

**Responsibilities:**
Students are expected to do outside reading and study, to document scans they perform, to attend all weekly small-group lectures and clip review sessions (5 hours/week), come to scheduled shifts with the rotation preceptor which may be weekday, weekend, day, eve or night shifts (4 hours / week), and additional hands-on scanning (11 hours/week). The MSIV traditionally presents an US exam in which they participated with accompanying research on the pathology and recommendations for treatment, etc. during the final clip review session. There are also weekly EM Conference lectures and/or small-group sessions offered for EM residents that students are welcome and encouraged to attend and participate in.

**Supervision and Training:**

**Evaluation:**
Pre-rotation quiz. Student evaluation of EUS Elective and faculty. Faculty and resident evaluation of student. All evaluations submitted by faculty they have worked with and rotating residents, scores will be averaged. A score of 4.0 and above (out of 5.0) is needed for an outstanding in the clinical area. Post-rotation quiz: score of 70% or better or 15% improvement needed to pass. Final grade: 50% from clinical evaluations, 30% from participation in didactic sessions, 20% from projects.

**Additional Information:**
Prior approval is required. Once approved by department, submit add/drop request to OMSA. This rotation adheres to a strict add/drop policy. No changes are allowed less than 30 days prior to the rotation start date. This includes requesting to drop the rotation.
DEPARTMENT OF EMERGENCY MEDICINE
Evolutionary Medicine

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| Faculty Evaluator(s) | Joe Alcock, MD |

| Prerequisites: | Yes | All Phase II Clerkships |

Accepts Visiting Students: Yes
Accepts Off-Cycle Date requests: No

Add/Drop Policy: Add: 30 Days, Drop: 30 Days, Other:

Clerkship Contact: Ryan Van Otten
ryanotten@salud.unm.edu 505-272-6524

Prior Approval Required: No

Goals and Unique Aspects:
Evolutionary Biology has important implications for the medical concepts of health, "normal" physiology, and illness. The last 15 years have seen increased exchange of information between the two fields of study. For instance, medicine has embraced evolutionary concepts that relate to pathogen resistance to antibiotics. We will explore how natural selection influences pathogen-host interactions, human genetics, immunology, development, cancer, and diseases of senescence.

Objectives:
Understand basic concepts of evolutionary biology as they relate to disease and health; Discuss natural selection, antibiotic resistance and emerging diseases and implications for public health; Understand how gene-environment mismatch contributes to diseases of western civilization; Recognize how some disease symptoms represent host defenses and others are pathogen virulence factors; Describe how common genetic polymorphisms such as sickle cell trait and Factor V Leiden can result from natural selection; Understand how viruses can cause cancer and how selective processes contribute to carcinogenesis; Learn how genetic conflicts contribute to reproductive diseases. Gain insight into evolutionary hypotheses of human menopause and morning sickness; recognize the link between diet, obesity, diabetes, and evolution. This is a lecture, tutorial, and discussion based course. Students are expected to attend daily lectures, interactive case-based discussions, and presentations given by guest lecturers and other students. Students should have opportunities to pursue in-depth study of evolutionary medicine topics and present these to the faculty and students.

Responsibilities:

Supervision and Training:

Evaluation:
Direct teaching by clerkship faculty and guest lecturers. Students will be expected to attend all lectures. Students should complete assigned readings prior to that day's lecture and contribute to discussions. Each week, following lectures and discussions, students will be asked to complete a written summary of that week's topic. As a one-time assignment, students will be asked to evaluate the strengths and weaknesses of journal articles in evolutionary medicine. For this "Journal Club", each student will be assigned a journal article to present to the group and provide commentary. Finally, each student will make a presentation during the last week of the course. Students should choose an area that interests them and produce a brief talk (PowerPoint or equivalent) to present to the group. Participation (35%), Journal Club (10%), Weekly Writing Project (20%), Final Presentation (35%)

Additional Information:
This rotation adheres to a strict add/drop policy. No changes are allowed less than 14 days prior to the rotation start date. This includes requesting to drop the rotation. This course is only offered during the blocks starting August (5), September (6), October (7), November (8), December (9).

Partial Reading List
DEPARTMENT OF FAMILY & COMMUNITY MEDICINE
Family Practice Sub-Internship at UNMH

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Faculty Evaluator(s): Attendings, Chief Residents
Prerequisites: Yes All Phase II Clerkships
Accepts Visiting Students: Yes Domestic MD and Domestic DO
Accepts Off-Cycle Date requests: Yes - with department permission
Add/Drop Policy: Add: 45 Days Drop: 45 Days Other:
Clerkship Contact: Dolores Garcia dlsgarcia@salud.unm.edu (505) 272-8291 Nicole Baca nkbaca@salud.unm.edu (505) 272-6607
Prior Approval Required: No

Goals and Unique Aspects:
In-depth experience in providing inpatient care from a Family Medicine perspective.

Objectives:
Increase skill level in caring for hospitalized patients through increased responsibility in a supervised environment. Work in multi-disciplinary teams as you focus on both the environmental and social determinants of health, as well as learn more about current standards of inpatient care.

Responsibilities:
Observational: Attend Resident School on Wednesdays, 1:00 PM - 4:00 PM.
Clinical: Morning rounds, responsibility for a variable amount of patients depending on complexity, census, and student comfort. No night call. Will be one or two weeks on with the night float team. Average day: 7:00 AM - 5:30 PM. Students participate in discharge planning, consultations, diagnostic procedures, and may make home visits to discharged patients.
Teaching: Teaching patients self-care, compliance with prescribed regimens, and prevention of deleterious habits. Responsible for adding to the academic teaching environment on inpatient rounds.

Supervision and Training:
Amount and type: Close supervision and teaching by attending faculty and chief resident. Didactic content: Resident School, daily morning reports, daily noon lectures.

Evaluation:
Criteria for Outstanding grade: Quality of care provided and degree of responsibility shown for patients, as well as ability to incorporate feedback for improvement and professionalism displayed.

Additional Information:
45 day add/drop policy strictly enforced.
DEPARTMENT OF FAMILY & COMMUNITY MEDICINE

Health Care for the Homeless

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<tr>
<td>Clerkship Contact:</td>
<td>Jennifer Montoya</td>
<td><a href="mailto:jmontoya@salud.unm.edu">jmontoya@salud.unm.edu</a></td>
<td>505-272-1622</td>
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Goals and Unique Aspects:
To provide health care for Albuquerque’s homeless population in a multidisciplinary setting. Many unusual and advanced presentations of disease, often complicated by problems of poverty, isolation, addiction, and mental illness.

Objectives:
1. Assess and treat the usual illnesses seen in the clinic using unique treatment strategies.
2. Participate as a clinical team member.
3. Evaluate, diagnose and treat psychiatric and substance use disorders.
4. Appreciate social determinants of health that can create barriers to resources.
5. Participate in community outreach teams, needle exchange, etc.
6. Gain information regarding accessible social services and resources.
7. Learn effective communication techniques for empathic care to vulnerable population.

Responsibilities:
Clinical:
1. Participate as a valued clinical team member.
2. Evaluate, diagnose and treat psychiatric and substance use disorders.
3. Participate in community outreach teams, needle exchange, etc.
4. Timely attendance with open mind ready to learn.
5. Open to seeing multiple facets of care including behavioral health, social services, harm reduction, community art studio.
Teaching: Practitioners continually discuss patients with each other, providing both teaching and learning opportunities.

Supervision and Training:
Amount and Type: Team of Family Practice physicians and nurse practitioners always available. Didactic Content: Informal patient-related discussions and reading.

Evaluation:
Criteria for Outstanding Grade: Based on evaluator’s assessment and nurse practitioners’ input. Student must work at intern level while in clinic.

Additional Information:
This course is only offered during certain blocks. Please contact Clerkship for more information.
DEPARTMENT OF FAMILY & COMMUNITY MEDICINE
Family Medicine Maternal Child Health Sub-Internship

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<tr>
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<td>Faculty Evaluator(s)</td>
<td>Jennifer Phillips, MD and Lawrence Leeman, MD, MPH</td>
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<tr>
<th>Clerkship Contact:</th>
<th>Andrea Baca</th>
<th><a href="mailto:Drea07@salud.unm.edu">Drea07@salud.unm.edu</a></th>
<th>505-272-9304</th>
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</table>

Prior Approval Required: No

Goals and Unique Aspects:
To understand and participate in the care of women and children in the context of Family Medicine.

Objectives:
The student will: participate in the care of pregnant women, infants and children in the model of family-centered maternity care; participate in the range of reproductive services provided by family physicians including contraceptive counseling, emergency contraception, IUD insertion and removal, vasectomy, first trimester dating ultrasounds, pregnancy options counseling, and medical and surgical abortion services; participate in the range of pregnancy care including preconception counseling, prenatal care, first trimester dating ultrasound, labor and delivery, cesarean sections, postnatal care in the setting of family medicine where care of the mother and baby is performed together. Participate in the care of newborn infants and children with family physicians, who care for pregnant women in prenatal care and labor and delivery, as well as in the care of newborn infants and children as they grow and develop. Participate in the care of children in the family setting, including normal growth and development and adjustment of the family to the arrival of new children. Participate in the care of at-risk pregnant mothers, newborns and children in a multi-disciplinary and comprehensive setting (The Milagro and FOCUS Clinics and the Family Practice Center). Be able to compare and contrast family-centered maternity care with that of the care of the mother by one set of providers and the infants and children by a different set of providers.

Responsibilities:
Clinical: Participation in deliveries, pelvic exam. Research: Possible participation in project. Required: Student will work nights on the MCH service for one week. Student will function as a sub-intern. Direct care including H&P, procedure, patient education, and follow-up of patient.

Supervision and Training:
Amount and type: Direct supervision by senior faculty. Didactic content: Participate in Monday AM family planning talks, Tuesday AM MCH teaching, and Wednesday PM Family Medicine Resident School.

Evaluation:
Clinical performance and procedural skills. Criteria for outstanding grade: Participation, demonstration of proficiency with history and physicals, documentation of progress notes, triage notes, creating a differential and some procedural skills.
DEPARTMENT OF FAMILY & COMMUNITY MEDICINE
Writing and Healing

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<tr>
<td>Faculty Evaluator(s)</td>
<td>Pamela Arenella, MD</td>
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Goals and Unique Aspects:
To enhance “reflectiveness” as a means to better understand self and patients’ experiences. To engage key issues in medicine through the writings of others. To enhance written communication skills.

Objectives:
Write regularly each week. Complete a piece of writing (narrative, poetry, fiction). Read and discuss assigned books and articles. Fine tune your ability to give and receive feedback about writing.

Responsibilities:
Observational: Yourself and your patients.

Supervision and Training:
Two-hour class meetings will be held twice weekly with fellow students and course director. A 1:1 meeting with Pamela Arenella, MD can be arranged during the 4 weeks if desired.

Evaluation:
On the basis of oral discussion of the readings, and on completion of writing assignments. Criteria for Outstanding Grade: Thoughtful response, daily engagement with the writing process, completion of assigned exercises, a completed piece of writing.

Additional Information:
Writing is a means for expression and communication, a tool for learning and discovery, and a way to meaningfully engage. Readings and writing exercises introduce the student to basic writing techniques and literary forms (personal narratives, poetry, fiction, essays). Readings and writing exercises help develop a greater awareness of self and patients by expanding the ability to articulate experiences and ideas. Enhanced self-knowledge, in turn, sharpens the capacity of empathic knowledge and care of patients. The course is an opportunity to address the “art of medicine” through directed work on the craft of writing, and through a literary examination of the writer/physician as a reflective practitioner. The student is expected to use the clerkship to delve deeply into the writing process by making a daily commitment to writing and reading.
DEPARTMENT OF FAMILY & COMMUNITY MEDICINE
Family Medicine Sub-Internship in Northern NM

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<tr>
<td>Faculty Evaluator(s)</td>
<td>Mac Bowen, M.D. Associate Program Director, Faculty Attendants</td>
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Accepts Visiting Students | No |
Accepts Off-Cycle Date requests | No |
Add/Drop Policy | Add: 45 Days | Drop: 45 Days | Other: |
Clerkship Contact: | Gary Logsdon | gary.logsdon@stvin.org | 505-913-5596 |
Prior Approval Required: No

Goals and Unique Aspects:
The goal for sub-internship rotation should be for a medical student to ease into the role of an intern, and that means starting to take a more active role in the care of patients. Sub-interns should be able to carry 3 to 4 patients, serving as the functional intern for those patients. Upper level residents and/or the attending will co-follow the sub-I’s patients. Students are expected to abide by the same duty hours that are used by interns. The attending will always be available for supervision.

Objectives:
Increase skill level in caring for outpatient and hospitalized patients though increased responsibility in a supervised environment. Demonstrate knowledge about current standards of inpatient care including OB, pediatrics, and adult medicine.

Responsibilities:
This rotation allows for patient care in both the inpatient and outpatient setting. Monday through Friday mornings and some full days will be spent on the inpatient service caring for pediatric and obstetrical patients. Overnight sign out starts at 8AM. Students will have the opportunity to see pregnant patients in triage and make management decision on whether to admit or discharge them. Patient care will include labor management, deliveries, newborn care, assisting in C-sections, and post-partum care. Students will also admit pediatric patients from the ED and round on newborns. Our focus is family-centered care. Students will have the opportunity to interact with midwives, pediatricians, obstetricians, social workers, lactation consultants, and of course our FM attendings. The supervising FM faculty come from a variety of backgrounds and work settings such as private practice, our hospital- based Family Medicine Center, and La Familia Medical Center (FQHC). The outpatient experience will take place at our hospital- based FMC and at La Familia Medical Center. Students will have the opportunity to see a diverse student population. The problems we see are interesting and provide great learning opportunities. The outpatient experience allows some flexibility to do some “full- spectrum” FM work.

Supervision and Training:
Close supervision and teaching by attending faculty and senior resident and intern. The sub-intern will participate in didactics with the residents. The didactics are as follows: Wednesday - Problem-Oriented Learning Session / noon conference and afternoon rotating learning sessions: journal club, diabetes and OB presentations, behavioral health, clinical guidelines and hands on teaching workshops (procedures, geriatrics, suturing, splinting and casting, etc). Friday - morning reports, case-based learning session attended by residents, FM, geriatrics, surgery, pediatric and internal medicine providers

Evaluation:
Assessment by attending faculty resident physicians. Criteria for Outstanding grade: Quality of care provided and degree of responsibility shown for patients, as well as ability to incorporate feedback for improvement and
professionalism displayed. Grade given will be based on the PRIME scale: professionalism, reporter, interpreter, manager, educator.
DEPARTMENT OF FAMILY & COMMUNITY MEDICINE
Family Medicine Sub-Internship in Southern NM

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<tr>
<td>Clerkship Contact:</td>
<td>Donna Madrid</td>
<td><a href="mailto:Donna.madrid@lpnt.net">Donna.madrid@lpnt.net</a></td>
<td>575-521-5385</td>
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Goals and Unique Aspects:
This experience will allow the student to ease into the role of an intern, and that means starting to take a more active role in the care of inpatients with more responsibility. More concretely, sub-interns should be able to carry 3-4 patients, serving as the functional intern for those patients. Usually the upper-level resident will co-follow the sub-I’s patients, answering questions and helping along the way, but sometimes the interns will help as well. Students will work six 12-hour shifts (6AM to 6PM) along with the interns.

Objectives:
Increase skill level in caring for hospitalized patients through increased responsibility in a supervised environment. Demonstrate knowledge about current standards of patient care.

Responsibilities:
This is a 4-week Sub-I, 6 days per week, 12 hours per day. Students do have the option to substitute some night float shifts. There is also an option to spend 2 of the 4 weeks on Family Medicine OB/Peds team. Students are expected to dictate H&Ps, write daily progress notes, and update hand-off lists. Expect to manage 3-4 patients.

Supervision and Training:
Close supervision and teaching by attending faculty and chief resident. Didactic content: board review Tuesday 5:50-6:30, educational sessions Wednesday 12-5PM

Evaluation:
Assessment by attending faculty resident physicians. Criteria for outstanding grade: Quality of care provided and degree of responsibility shown for patients, as well as ability to incorporate feedback for improvement and professionalism displayed. Standard Phase III evaluation form will be used and grade given will be based on the PRIME scale: professionalism, reporter, interpreter, manager, and educator.
# DEPARTMENT OF GLOBAL HEALTH
## International Rotations

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| Accepts Visiting Students | No |
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<tr>
<td>Clerkship Contact:</td>
<td>Megan Bateman</td>
<td><a href="mailto:MegBateman@salud.unm.edu">MegBateman@salud.unm.edu</a></td>
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### Course Offerings:
Students have the option to participate in various international rotations including:
- CLNS 896 – International non-clinical rotation (usually a language immersion in a medical setting)
- CLNS 897 – International Clinical Rotation

### How to register:
1) **PLEASE CONTACT OMSA AT LEAST 6 MONTHS PRIOR TO THE PLANNED ROTATION. INTERNATIONAL GUIDELINES ARE ALWAYS CHANGING.**

2) An add/drop form and Phase III Credit Request form must be signed by Dr. Christina Beato and the appropriate department head respectively. Forms must be submitted to OMSA before CLNS 896 or 897 will be added to the student's schedule.

3) **Student must register for “Independent Travel” with the Global Education Office and work to:**
   - Complete and submit the Conditions of Travel form
   - Purchase the following travel policies (as applicable):
     - TRAVMED
     - Health Insurance
   - Submit a travel itinerary and emergency contact form
   - Obtain health and safety information for travels from the US State Department
   - Submit a Copy of your Passport

[https://studyabroad.unm.edu/section/independent-study-abroad-academic-travel-registration](https://studyabroad.unm.edu/section/independent-study-abroad-academic-travel-registration)
DEPARTMENT OF INTERNAL MEDICINE
Hematology Oncology Clinic

Goals and Unique Aspects:
An opportunity to deal with complex diseases and issues in an outpatient and inpatient setting. Allows in-depth study of clinical and laboratory aspects of hematology and oncology.

Objectives:
Plan the work-up and management of patients with abnormal blood counts or those with established diseases of the hematopoietic system. Also, the student should be able to discuss and recommend treatment options for patients with different types of cancer. Understand the role of experimental protocols in the clinical research programs in oncology. The student should feel comfortable dealing with patients and families in the setting of catastrophic illness.

Responsibilities:
Observational: Procedures (bone marrow biopsy and aspirate, intrathecal chemotherapy, intravenous chemotherapy); interaction with patients, especially those involving discussion of life and death issues.
Clinical: Work-up of patients in clinic and for hospital consultations. Each work-up is discussed with the attending. Follow up of patients in the hospital and clinic on a regular basis. In the hospital, the role is that of a consultant working with the primary care giving team. No weekend call, but weekend rounds as needed.
Research: No laboratory research. Many patients are on clinical research protocols and the student is involved in discussion of the protocol studies.
Teaching: The student is not expected to take any teaching responsibilities.

Supervision and Training:
Amount and Type: Direct contact with attending and fellow. Teaching of clinical nature is usually “one-on-one.”
Didactic Content: Weekly conferences within the division, tumor boards, hematopathology conference and protocol meetings. Daily rounds with attending.

Evaluation:
Evaluation: Criteria for Outstanding Grade: On the basis of interest and ability to understand the general concepts and principle of managing patients with hematology oncology problems.

Course Number | CLNS 603 | Duration: 4 weeks
Credit Type | Clinical Elective

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# of Students per Block: 1

Faculty Evaluator(s): Dulcinea Quintana, MD and Ian Rabinowitz, MD

Prerequisites: Yes All Phase II Clerkships

Accepts Visiting Students: Yes Domestic MD

Accepts Off-Cycle Date Requests: No

Add/Drop Policy: Add: 45 Days Drop: 45 Days Other:

Clerkship Contact: Allie Lara HSC: IMClerkshipStaff@salud.unm.edu 505-272-6617

Prior Approval Required: No


**Infectious Disease - Inpatient**

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**Goals and Unique Aspects:**
Hospital-based infectious diseases is one of the most dynamic fields of medicine. Global epidemics of emerging pathogens such as multi-drug resistant gram-negative bacteria, MRSA, clostridium difficile and deadly viruses such as Ebola and new agents of respiratory disease have changed the face of infectious diseases practice.

**Objectives:**
The clinical elective in ID at UNMH aims to: 1.) Provide comprehensive experience in management of complex patients with infectious syndromes. 2.) Provide experience in diagnosis, evaluation and treatment of patients with both community-acquired and nosocomial infections. 3.) Provide clinical perspectives on the interface between microbial pathogenesis and host susceptibility as a determinant of infectious disease outcomes. 4.) Provide unique perspectives on patterns of infectious disease in immunosuppressed populations. 5.) Provide training in the continuum of care between inpatient and outpatient infectious diseases practice. 6.) Provide training in critical elements of hospital epidemiology and antimicrobial stewardship. 7.) Provide board overviews of the nexus between hospital-based infectious diseases practice and trends in public and global health.

**Responsibilities:**
Observational: Attendance/participation in a variety of rounds, conferences, etc. Clinical: Student averages 5-7 new consults per week. Average stay: Rotation is roughly from 8am-5pm, Monday through Friday, no weekends or holidays.

**Supervision and Training:**
Amount and Type: Student will shadow the internal medicine resident(s), Infectious Disease fellow(s) and inpatient attending during this rotation. Attendings will round with the team at least once daily. Students must present all new consults to the attending.
Didactic Content: Wednesday Morning Microbiology Rounds (at Tricore), Thursday Morning Conference, Internal Medicine Grand Rounds, other unscheduled consultations and conferences.

**Evaluation:**
Criteria for Outstanding Grade: Evaluations are based entirely on direct observations by faculty of the student’s role in care of his/her patients. An “Outstanding” requires performance at the level of an intern in caring for patients and in team participation. See CDIM document “Sub-intern Categories.”
**DEPARTMENT OF INTERNAL MEDICINE**  
Internal Medicine Sub-Internship at UNMH

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**Goals and Unique Aspects:**
To provide interested students with additional experience in the care of hospitalized adult patients under close supervision of the ward resident and attending. Subinterns have the opportunity to increase autonomy, improve efficiency, and teach Phase II students on their teams.

**Objectives:**
Students will progressively contribute to the care of 5-7 assigned patients at a time on an inpatient internal medicine service over a four-week rotation. By the second week, subinterns should be able to present a differential diagnosis and management plan for each new admission. During the last week of the rotation, students should be able to write admission orders AND educate patients on their conditions and discharge plan with minimal prompting.

**Responsibilities:**
Clinical: Subinterns will make rounds on assigned patients, document patient encounters and give oral presentations to attending physicians and senior residents. Subinterns will develop skills in transitions of care by completing discharge summaries. Average stay: 10-12 hour days of patient care and conferences. *The rotation extends from Monday to Sunday. Students will have 4 days off during the rotation, averaging one day off per week.*

**Supervision and Training:**
Amount and Type: Student “lives” with the ward residents and interns during this rotation. Attending physicians round with the team at least once per day. Didactic Content: Internal Medicine Grand Rounds weekly, Thursday school, afternoon report, mortality conferences.

**Evaluation:**
Criteria for Outstanding Grade: Evaluations are based on direct observations by senior residents and faculty of the student’s role in care of his/her patients. An “Outstanding” requires performance at the level of an intern in caring for patients and in team participation.

**Additional Information:** *Please note that students are not given additional days off for interviews on this rotation. Accommodations related to days off are not guaranteed. Requests should be made through email to Dr. Mary Lacy at melacy@salud.unm.edu. Student must not have a floated Phase II clerkship scheduled directly after the SUB-I due to potential overlap on call days. Student must give at least 45 days’ notice prior to dropping the rotation. Student may be transferred to SUB-I at VA at the discretion of the clerkship.*
## DEPARTMENT OF INTERNAL MEDICINE  
**Gastroenterology**

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### Faculty Evaluator(s)
Christopher Chang, MD

### Prerequisites:
Yes All Phase II Clerkships

### Accepts Visiting Students:
Yes Domestic MD

### Accepts Off-Cycle Date requests:
No

### Add/Drop Policy:
Add: 45 Days  Drop: 45 Days  Other:

### Clerkship Contact:
Allie Lara  HSC-IMClerkshipStaff@salud.unm.edu  505-272-6617

### Prior Approval Required:
No

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### Goals and Unique Aspects:
To expose the student to clinical consultative gastroenterology.

### Objectives:
Take a competent history and physical exam for patients with chief complaints of a GI nature. Gain a detailed knowledge of GI anatomy, physiology, and pathophysiology. Develop clinical skills, including first-hand observation of GI procedures, and participation in the process of taking diagnostic and therapeutic decisions critical to good patient care.

### Responsibilities:
Observational: Student may elect to observe some GI diagnostic and therapeutic procedures. Clinical: Student becomes a member of the GI consult team. He/she sees patient consultations, as well as sees patients in two or three clinics per week. Research: Interested students are encouraged to use this time to identify research interests. The student does, however, present and discuss cases daily, during routine ward rounds at both UNMH and VAMC. Students may attend outpatient GI & Hepatology clinics.

### Supervision and Training:
Amount and Type: Attendings makes rounds daily. Students present cases, formulate diagnosis, and plan management under attending and fellow supervision. Didactic Content: The student is expected to work with consult daily attend all conferences, a list of which can be obtained from the contact person at UNMH.

### Evaluation:
Criteria for Outstanding Grade: The student is evaluated subjectively by the supervising attending according to the evaluation used by the UNM-SOM. “Outstanding” is awarded to students in the top 5% of those participating in this elective.

### Additional Information:
The student is assigned to UNMH or the VAMC as needed by the teams.
DEPARTMENT OF INTERNAL MEDICINE
Nephrology

Course Number: CLNS 611  Duration: 4 weeks
Credit Type: Clinical Elective

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Faculty Evaluator(s): Shan Chen, MD

Goals and Unique Aspects:
Provide students with experience in outpatient nephrology including hypertension, acid-base, and electrolyte disorders. Also gain experience in managing end stage renal disease maintained on dialysis and renal transplantation.

Objectives:
Learn ethical, economic and social aspects of end stage renal disease. Learn quality assurance and management in end stage renal disease. Learn acid-base, hypertension, and fluid-electrolyte. Learn the process of chronic kidney disease and appropriate interventions.

Responsibilities:

Supervision and Teaching:
Amount and Type: Daily rounds with Nephrology faculty and fellows. Didactic Content: Formal curriculum lectures, case discussions, research conferences, journal club.

Evaluation:
Criteria for Outstanding Grade: Excellence in performance, active participation in didactic sessions.

Additional Information:
Not available 12/10/18-1/6/19 (block 9). 45 day add/drop policy strictly enforced. Weekly rounds on dialysis patients occur at DCI Albuquerque (Indian School and University) with fellow on UNM service.
DEPARTMENT OF INTERNAL MEDICINE
Cardiovascular Elective at UNMH

Goals and Unique Aspects:
Enhance skills in the evaluation and management of common cardiovascular disorders in the in and outpatient settings. Enhance knowledge of pathophysiology and management of common cardiovascular disorders

Objectives:
1) Accurately diagnose heart disease through detailed history and physical exams
2) Be able to read routine EKGs.
3) Know basic principles of diagnosis of arrhythmias, CHF, chest pain syndromes.
4) Understand normal CV physiology and how pathophysiologic states result in heart disease.

Responsibilities:
Observational: Participate in all CV conferences.
Clinical: Rounds 1-2 times daily, including one to two weekends as a rule. See patients in consultation and follow patients on General Medicine, Surgery, Family Medicine services, and intensive care units under supervision of a faculty, fellow, or house staff.

Supervision and Training:
Amount and Type: Daily, direct contact with faculty and fellow
Didactic Content: Weekly conferences, “chalk talks” with fellows, residents, and faculty. Every week there are two special conferences, Tuesday and Thursday at 8AM (one hour). These are small group conferences where ECGs are discussed in small groups of 2-4 residents and students. In addition to ECGs, other subjects, as desired by the students or residents, are also discussed.

Evaluation:
Criteria for Outstanding Grade: Exceptional performance and knowledge.

Additional Information:
The rotation provides a valuable opportunity to serve as a consultant (rather than primary physician) for those services requesting help with the diagnosis and management of cardiovascular conditions. This rotation is available throughout the year.
DEPARTMENT OF INTERNAL MEDICINE
Arthritis and Rheumatic Diseases

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| # of Students per Block | 3+ |

| Faculty Evaluator(s) | Monthida Fangtham, MD, N. Suzanne Emil, MD, and Kimberly Reiter, MD, Roderick Fields, MD, Wilmer Sibbitt, MD, and Frank O’Sullivan |

| Prerequisites: | Yes | All Phase II Clerkships |

| Accepts Visiting Students | Yes | Domestic MD |

| Accepts Off-Cycle Date requests | No |

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| Clerkship Contact: | Allie Lara | HSC-IMClerkshipStaff@salud.unm.edu | 505-272-6617 |

| Prior Approval Required: | No |

Goals and Unique Aspects:
The diagnosis and treatment of the rheumatic diseases primarily in an outpatient setting to which medical students usually do not have exposure.

Objectives:
1) To be able to do a rheumatologic history and exam
2) To interpret relevant lab results
3) To learn joint injection technique
4) To be able to diagnose and treat the most common rheumatologic problems
5) To recognize complexity of rheumatoid therapy

Responsibilities:
Observational: Observe the varied manifestation of the rheumatic diseases.
Clinical: Approximately 20 hours of outpatient clinics, 5 hours of inpatient (consultation) contact.
No night or weekend call
Research: Optional

Supervision and Training:
Amount and Type: Constant supervision in inpatient and outpatient settings
Didactic Content: A complete review of the Primer of Rheumatic Disease, a complete examination of the arthritis slide collection and weekly x-ray clinical records.

Evaluation:
Criteria for Outstanding Grade: Assessment by observation.

Additional Information:
45 add/drop policy strictly enforces. All rotators will receive an email with the Rheumatology curriculum and power point presentation. All rotators must contact Unit Administrator for brief orientation PRIOR to beginning rotation. Visiting students require prior approval by Division Chief. Contact DoIM for information on dates of availability.
DEPARTMENT OF INTERNAL MEDICINE
Adult Endocrinology, Diabetes, and Metabolism

Course Number: CLNS 616
Credit Type: Clinical Elective
Duration: 4 weeks

Block Number
1 2 3 4 5 6 7 8 9 10 11 12 13
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# of Students per Block: 1
Faculty Evaluator(s): Christina Lovato, MD
Prerequisites: Yes All Phase II Clerkships

Accepts Visiting Students: Yes Domestic MD and Domestic DO
Accepts Off-Cycle Date Requests: Yes - with department permission

Add/Drop Policy
Add: 30 Days Drop: 30 Days Other:

Clerkship Contact: Allie Lara
HSC: IMClerkshipStaff@salud.unm.edu
505-272-6617

Goals and Unique Aspects:
To introduce the student to endocrinology.

Objectives:
Think critically about patient problems related to the endocrine system. Be able to manage common endocrine problems. Interpret laboratory tests and imaging related to various endocrine conditions.

Responsibilities:
Observational: Perform endocrine-oriented history and physical examination. Work with the endocrine fellow or resident in Endocrine Clinic and/or on the inpatient Endocrine Consult Service. Clinical: Make therapeutic decisions with attending supervision, attend endocrine clinics at UNMH and/or VAMC (as directed). In addition, students will be expected to see patients on the inpatient Endocrine Consult Service.

Supervision and Training:
Amount and Type: Present patient history, physical examination, and management plans to the attending in Endocrine clinic and/or the inpatient Endocrine Consult Service. Didactic Content: Attendance of weekly case conference is strongly encouraged. Case conference occurs on Thursdays from 8-9 am in room 1735 in Domenici North. Endo School is also held on Thursdays from 9 am-12pm in room 1735 in Domenici North. Endo School consists of didactic lectures on various endocrine conditions and given by the UNM Endocrinology faculty. Attendance is strongly encouraged. Reading will be suggested for various endocrine conditions to advance learning. Recommended endocrine textbooks include Greenspan's Basic and Clinical Endocrinology as well as Harrison's Endocrinology. Program is generally structured to students’ needs.

Evaluation:
Criteria for Outstanding Grade: Depends on participation at clinics, amount of reading done, quality of patient case presentations during clinic, and quality of clinic notes.

Additional Information:
30-day add/drop policy is strictly enforced. Please contact Keith Drummond for any leave requests during the rotation. Dr. Christina Lovato can also be contacted with any questions at clovato@salud.unm.edu
DEPARTMENT OF INTERNAL MEDICINE

Sleep Disorders Center

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# of Students per Block: 2

Faculty Evaluator(s): Frank Ralls, MD

Prerequisites: Yes All Phase II Clerkships

Accepts Visiting Students: Yes

Accepts Off-Cycle Date requests: No

Add/Drop Policy: Add: 45 Days Drop: 45 Days Other:

Clerkship Contact: Allie Lara HSC-IMClerkshipStaff@salud.unm.edu 505-272-6617

Prior Approval Required: No

**Goals and Unique Aspects:**

To give the student a thorough introduction to sleep medicine so that he/she recognizes the multi-disciplinary nature of this new field of patient care and evaluate for career planning.

**Objectives:**

Learn to evaluate the major sleep complaints. Learn to use diagnostic technology. Relate basic science of sleep to clinical disorders.

**Responsibilities:**

Observational: Sleep disorder patients. Clinical: Evaluate new and follow-up patients. Interpret sleep studies. Research: Several projects related to insomnia, sleep apnea, and restless leg syndrome. Teaching: One Power Point lecture to local sleep faculty. Required: Spend one or two “partial nights” in the sleep lab (8:00pm to 2:00am) to observe how polysomnograms are performed.

**Supervision and Training:**

Amount and type: Direct faculty and fellow contact in five half-day clinics per week. Learning to read polysomnographic records of sleep disorders twice per week. Didactic content: Assorted readings from texts, case conference, journal club.

**Evaluation:**

Clinical observations. Criteria for outstanding grade: Prepare and conduct a one-half hour conference on a sleep disorder topic. Demonstrate ability to evaluate and treat patients with sleep apnea and patients with insomnia. Read and discuss with faculty the pertinent literature of sleep medicine.
DEPARTMENT OF INTERNAL MEDICINE
Internal Medicine Sub-Internship at VAMC

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<td>Allie Lara</td>
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**Goals and Unique Aspects:**
To provide interested students with additional experience in the care of hospitalized adult patients under close supervision of the ward resident and attending. Subinterns have the opportunity to increase autonomy, improve efficiency, and teach Phase II students on their teams.

**Objectives:**
Students will progressively contribute to the care of 5-7 assigned patients at a time on an inpatient internal medicine service over a four-week rotation. By the second week, subinterns should be able to present a differential diagnosis and management plan for each new admission. During the last week of the rotation, students should be able to write admission orders AND educate patients on their conditions and discharge plan with minimal prompting.

**Responsibilities:**
Clinical: Sub-interns will make rounds on assigned patients, document patient encounters and give oral presentations to attending physicians and senior residents. Students will provide the main communication with nurses, case managers, and consultants throughout day. Sub-interns will develop dictation skills by performing discharge summaries. Average stay: 10-12 hour days of patient care and conferences. Average one day off per week.

**Supervision and Training:**
Amount and Type: Student “lives” with the ward residents and interns during this rotation. Attending physicians round with the team at least once per day. Didactic Content: Internal Medicine Grand Rounds weekly, Thursday school, morning report, mortality conferences.

**Evaluation:**
Criteria for Outstanding Grade: Evaluations are based entirely on direct observations by senior residents and faculty of the student’s role in care of his/her patients. An “Outstanding” requires performance at the level of an intern in caring for patients and in team participation. See CDIM document “Subintern Categories.”
### DEPARTMENT OF INTERNAL MEDICINE

#### Medicine Intensive Care Unit

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### Goals and Unique Aspects:
To provide interested students with additional experience in the care of hospitalized adult patients under close supervision of the ward resident and attending. Subinterns have the opportunity to increase autonomy and improve efficiency.

### Objectives:
Students will progressively contribute to the care of up to 3 assigned patients at a time on an inpatient internal medicine service over a four week rotation. By the second week, subinterns should be able to present a differential diagnosis and management plan for each new admission. During the last week of the rotation, students should be able to write admission orders AND educate patients on their conditions and discharge plan with minimal prompting.

### Responsibilities:
Clinical: Sub-interns will make rounds on assigned patients, document patient encounters and give oral presentations to attending physicians and senior residents. Students will provide the main communication with nurses, case managers, and consultants throughout day. Sub-interns will develop dictation skills by performing discharge summaries. Average stay: 10-12 hour days of patient care and conferences. Average one day off per week.

### Supervision and Training:
Amount and Type: Student “lives” with the ward residents and interns during this rotation. Attending physicians round with the team at least once per day. Didactic Content: Internal Medicine Grand Rounds weekly and mortality conferences.

### Evaluation:
Criteria for Outstanding Grade: Evaluations are based entirely on direct observations by senior residents and faculty of the student’s role in care of his/her patients. An “Outstanding” requires performance at the level of an intern in caring for patients and in team participation. See CDIM document “Subintern Categories.”
## DEPARTMENT OF INTERNAL MEDICINE
### Infectious Disease - Outpatient

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<td>Clerkship Contact:</td>
<td>Allie Lara HSC: <a href="mailto:IMClerkshipStaff@salud.unm.edu">IMClerkshipStaff@salud.unm.edu</a> 505-272-6617</td>
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<td>Prior Approval Required:</td>
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### Goals and Unique Aspects:
To study infectious diseases in outpatient settings.

### Objectives:
Understand basic pathophysiology, natural history, and management of HIV. Assess risks for HIV transmission and counsel patients on risk reduction. Understand ethical, social, psychological, legal aspects of HIV and importance of ancillary services in managing HIV (model for management of serious chronic illness). Understand safe, effective outpatient use of parenteral antibiotics. Recognize epidemiology and clinical presentation of STD and how they are controlled in collaboration with public health. Observe outpatient management of tuberculosis and cystic fibrosis. Integrate knowledge of pathophysiology, clinical presentation, management, and social aspects of these diseases.

### Responsibilities:
Observational: Participate in clinical care of outpatients in various settings. Clinical: Interview, examine, and assess clinic patients and discus with attending faculty. Required: Attend clinics in HIV, STD, Tuberculosis, Outpatient Parenteral Antibiotic Therapy, Cystic Fibrosis, and other clinical experiences, plus infectious disease conferences, and outside reading. Schedule is planned by student and faculty coordinator. No night or weekend call.

### Supervision and Training:
Amount and type: Direct by faculty physicians in clinics. Some teaching by ancillary staff. Didactic content: Packet of readings and resources provided. The student is expected to do further reading and discuss with faculty.

### Evaluation:
Faculty observation of student’s clinical skills, self-education, synthesis of reading and clinical experience, and progress towards goals identified with faculty coordinator.

### Additional Information:
Some clinics are off-campus (within 2 miles of UNMH and VAH). The Office of Education must check with faculty coordinator to be sure slot is available. Trainee must work with faculty coordinator to arrange schedule in advance. Students may not add the course less than 4 weeks before rotation.
DEPARTMENT OF INTERNAL MEDICINE

Project ECHO: UNM HSC Interprofessional Chronic Complex Disease

**Course Number**: CLNS 627  
**Duration**: 4 weeks

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**# of Students per Block**: 2

**Faculty Evaluator(s)**: Michelle Iandiorio, MD

**Prerequisites**:  
- Yes: All Phase II Clerkships

**Accepts Visiting Students**: Yes  
- Domestic MD and Domestic DO

**Accepts Off-Cycle Date requests**: Yes - with department permission

**Add/Drop Policy**:  
- Add: 30 Days
- Drop: 30 Days
- Other:

**Clerkship Contact**:  
- Allie Lara  
- Michelle Iandiorio, MD  
- [HSC-IMClerkshipStaff@salud.unm.edu](mailto:HSC-IMClerkshipStaff@salud.unm.edu)  
- [miandiorio@salud.unm.edu](mailto:miandiorio@salud.unm.edu)  
- 505-272-6617  
- 505-272-4903

**Prior Approval Required**: YES - Must submit Add Form after Phase III schedules are released

**Goals and Unique Aspects**:  
This rotation, which includes students from SOM, COP, and CON, will provide clinic-based experiences and virtual teleECHO session-based experiences in which students can learn how interprofessional team-based care can lead to optimal patient care for those living with chronic complex disease.

**Objectives**:  
1) Participate as part of an interprofessional healthcare team in shared patient-centered problem solving.  
2) Demonstrate deepened knowledge and skills associated with two common chronic complex diseases.  
   (Medical Knowledge)  
3) Identify strengths and challenges associated with interprofessional team-based care experience.  
   (Systems Based Practice)

**Responsibilities**:  
Monday-Friday participation. Students will be assigned to participate in two teleECHO clinics each week; these clinics will be paired with assigned UNM-based in-person clinic with a related clinical focus. Students will have direct patient care activities and will work in an interdisciplinary team to develop patient management plans. This will include teaching the other team members about interprofessional and chronic disease learning issues topics that students identify and applying this knowledge to patient management plan. This is an outpatient clinic activity only with no admitting or call responsibilities.

**Supervision and Training**:  
Michelle Iandiorio, MD, will ensure that students complete their requirements and that faculty submit evaluations of their students. She will ensure that students receive adequate supervision at their individual office-based clinics. Each student will be supervised by a direct clinical supervisor at the ambulatory clinic to which students are assigned. Dr. Iandiorio will coordinate with representatives from the different UNM HSC schools to ensure that each 4-week rotation includes students from the various professions for at least 50% of rotation activities. UNM HSC students from each health professional discipline participating in this rotation will have a discipline-specific mentor for the rotation. This will ensure that appropriate supervision is available.

**Evaluation**:  
Students will complete a portfolio and present aspects of it to their student team and rotation preceptor throughout the rotation. The portfolio will be evaluated by the main course facilitator. This portfolio will include the following:  
1) Patient write-ups presented to teams
2) Written reflections on aspects of chronic disease and the role of interprofessional teams, professionalism associated with management of patients with chronic complex disease
3) Learning issues presented to teams
4) Clinic mentor evaluation forms
5) Facilitator-completed evaluation forms for each structured team group work session. Assessment will be based on observed communication skills and teamwork in addition to clinical reasoning and application of knowledge.
6) Student evaluation of the rotation.

Additional Information:
Prior approval is required. Once approved by department, submit add/drop request to OMSA.
DEPARTMENT OF INTERNAL MEDICINE
Radiation Oncology

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Goals and Unique Aspects:
Introduction to radiation oncology and cancer patient care.

Objectives:
Basic introduction to radiation oncology, physics and biology and involvement in patient care

Responsibilities:
Observational: Teletherapy, brachytherapy, consultations, daily management of radiation patients. Clinical: Involved in consultations, and presents to attending. Involved in patient education on radiation therapy and side effects.

Supervision and Training:
Amount and type: One-on-one teaching by clinical professor with direct feedback. Didactic Content: Some readings required. No didactic lectures.

Evaluation:
Evaluation is based on clinical performance, patient care, and attitude toward the specialty and the staff. Criteria for outstanding grade: Must demonstrate great enthusiasm and work beyond the expected level.

Additional Information:
Prior approval is required. Once approved by department, submit add/drop request to OMSA. Students may go to other cancer centers for observation of special procedures within Albuquerque.
DEPARTMENT OF INTERNAL MEDICINE
Palliative Care and Hospice

Goals and Unique Aspects:
An elective for students interested in gaining further experience in the palliative approach to the care of patients with serious illness. Depending on preceptor availability and student interest, experiences in palliative care consultation in the hospital or home setting, and/or hospice care in the inpatient unit or home setting may be available. Student may see patients with illnesses anywhere along the trajectory of a serious illness, from the time of diagnosis to the end of life. Students will participate in the care provided by an interdisciplinary team, which is focused on evaluating and treating the many types of suffering that patients and their families may experience. Topics covered may include: communication skills; prognostication; assisting a patient/family in expressing the goals of medical care and evaluating treatment options based on those goals; assessing and treating symptoms such as pain, shortness of breath, nausea and vomiting, agitation/confusion, anxiety, depression, anorexia/cachexia, and fatigue; assisting a patient in performing advanced care planning; and issues in end of life care.

Objectives:
1) Improve understating of the basic tenets of palliative care.
2) Describe when referral to palliative or hospice services is appropriate.
3) Describe the concept and explain the importance of interdisciplinary care in palliative and/or hospice care.
4) Improve skill in assessing and developing a management plan for common types of suffering (physical, psychological, social, and spiritual)
5) Describe how patient and family factors, such as culture, religion, spirituality, age, and socioeconomic status may affect the care preferences and experiences of patients/families coping with serious or life threatening illness.
6) Improve patient-centered communication skills pertinent to discussions of a patient’s understanding of their disease, prognosis, values and treatment preferences, and the suffering related to their experiences.

Responsibilities:
It is expected that most direct patient care will be provided with a palliative or hospice practitioner. Students will not be responsible for “pre-rounding” or documenting patient encounters or treatment plans. Students will be prompt, professionally dressed, and polite to all providers and patients/families with whom they interact. Students will have an “open” and non-judgmental attitude toward the variety of experiences, values and care preferences that patients and families express.

Supervision and Training:
Students will be supervised by physicians specializing in Hospice and Palliative Care (HPC). At times, students may see patients with advanced practice nurses, RN’s, social workers, or chaplains specializing in HPs.

Evaluation:
To receive a grade of outstanding students must actively engage with preceptors in patient care activities, attend interdisciplinary team meetings, and complete pre/post-test assessments, patient logs, reflective exercises, and online educational modules.

Additional Information:
Depending on the duration of the rotation, students may work with providers at a number of different community organizations that provide hospice and palliative care services.
DEPARTMENT OF INTERNAL MEDICINE
Culinary Medicine

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<th>Clerkship Contact:</th>
<th>Amy Robinson, MD</th>
<th><a href="mailto:ARobinson@salud.unm.edu">ARobinson@salud.unm.edu</a></th>
<th>505-277-3935</th>
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Goals and Unique Aspects:
The Culinary Medicine elective will be a hands-on approach to teaching basic culinary skills to medical students in addition to providing basic and clinical science behind nutrition related chronic diseases. The curriculum includes six modules. The six topics include:

(1) Introduction to Culinary Medicine
(2) Dietary Sodium and Hypertension
(3) Fats
(4) Weight Management
(5) Food Allergy and Intolerance
(6) Diet and Neurocognition.

The clinical component will consist of 8 hours per rotation at a UNM affiliated hospital and an Outpatient Clinic in collaboration with a Registered Dietitian Nutritionist (RDN). The clinical component will allow the student to observe nutrition assessments and diet education with a RDN. The Lab component will teach students basic culinary skills and nutrition principles that can be translated to practice. The online modules focus on the basic sciences: physiology, biochemistry and metabolism reinforced with comprehensive assessment tools.

Objectives:
- Learn basics of kitchen safety and knife skills.
- Comprehend the basics of the Mediterranean diet, with focus on the diet fundamentals, utilizing data to show proven health benefits.
- Identify evidence-based research on the implications of consuming the Mediterranean diet.
- Review literature on weight loss among various fad diets in order to bring focus to the quality and the concept of moderation, rather than the quantity, of foods.
- Review the basic concepts of the Dietary Approach to Stop Hypertension (DASH) Diet, focusing on the differences in the DASH versus Mediterranean diet.
- Understand the importance of physicians playing a role to nurture healthy lifestyles and alleviate diet-related illness.
- Explore the social and philosophical impacts on eating habits such as cost, availability, and education, and understand the importance of relating to the audience/patient in these terms.
- Review the impact of high sodium diets and its prevalence in the American diet.
- Understand how to build flavor using natural tastes within foods and without added salt.
- Understand the research implications of Dietary Approach to Stop Hypertension (DASH) Diet and the potential impact on hypertension.
• Identify the research-supported aspects of the DASH diet that are responsible for improved cardiovascular health.
• Understand the physiological impact of the DASH and reduced-sodium diets on cardiovascular health.
• Be able to communicate effective motivational practices and nutritional recommendations to patients looking to improve health through general lifestyle change.
• Recognize the role of portion control in controlling caloric intake.
• Give examples of and utilize ideal portion sizes when preparing food.
• Recognize the impact of energy density for weight loss and management.
• Evaluate the effect of dietary fats (total fat, trans-fat, saturated fat, monounsaturated fats) on health.
• Discuss the concepts and philosophies of Lifestyle Medicine
• Discuss current understanding of the connections among the human gut microbiome with health, diet and disease
• Identify strategies and reasons to increase intake of plant-based foods.

Responsibilities:
Participation in all teaching kitchen labs, small group and clinical sessions and completion of modules, journal club discussions, presentations and the Lifestyle Medicine assignment. Require attendance at Field trips that will include a day long visit to a local farm to observe cheese making processes and to the Roadrunner Food Bank to learn about the resources for clients provided by this organization.

Supervision and Training:
Students will be supervised during the 4 hour Lab portion (Mondays) of the course by a UNM Nutrition Program faculty member. During the clinical component, each medical student will be mentored by a RDN at a UNM affiliated hospital or clinic. Medical students will be supervised by a physician faculty member. Each medical student will observe an RDN for a total of 8 hours; 4 hours in the hospital setting and 4 hours in the outpatient or clinic setting. Schedules will be determined by individual medical students and the RDN. During the clinical rotations, students will observe the RDN in conducting comprehensive nutritional assessments and medical nutrition therapy recommendations on inpatients and outpatients. Inpatient rotations may include Renal, Cardiac, Diabetes, critically ill and nutrition support (enteral and parenteral) patients. Outpatient rotations will include weight management, diabetes, cardiac, and food intolerance. Students will also have the opportunity to understand the roles of an RDN and how to refer to a RDN in the community setting. In addition, each medical student will observe and assist with the education of patients regarding diabetic, low sodium, low calorie, and cardiac diets.

Evaluation:
Weekly seminars (6 hours/week, 3 hours each day on Wednesday, Thursday, and/or Friday afternoons) will include clinical case studies that incorporate material from the clinical rotations, labs and online modules. Seminars will also incorporate small group discussions and critical evaluation/discussion of current primary research articles that are related to the weekly modules and students will have the opportunity to critically review the research. Small group discussions will be facilitated by Nutrition Program and Medical School faculty. Small group discussions will also allow students to share and reflect upon their individual clinical experiences. Each student will also provide a 15-minute presentation on a trending nutrition topic using the evidence-based literature. A student led Journal Club will allow students to explore and discuss current published research on health and diet. There will be 1-2 quizzes for each online module and 1 quiz/week based on the lab portion of the course. An 80% grade on quizzes will indicate a passing grade.

Additional Information:
The Culinary Medicine 4th year elective course will offer an innovative, integrated approach to nutrition education for medical students. The curriculum is focused on the significant role that food choices and nutrition play in preventing and managing obesity and associated diseases in America and will help future physicians understand the impact of food on the health of their patients. The RDN interaction will also teach medical students how to refer to an RDN once they are practicing in the community. Bringing basic science curriculum together with clinical education, the curriculum will offer a more complete view of how future physicians can incorporate dietary intervention strategies into their practice of medicine. Through hands-on cooking classes, medical students learn the practical aspects of lifestyle change necessary to help them guide their patients to healthier choices. Students will also be introduced to the concept of Lifestyle Medicine and will incorporate 1-2 goals and discuss the impact on their personal and professional lives. *Please note there is a $69 course fee.
DEPARTMENT OF INTERNAL MEDICINE

Alternative & Complementary Medicine

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<td>Surya Pierce, MD and Dan Shank, MD</td>
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<td>Clerkship Contact:</td>
<td>Allie Lara HSC: <a href="mailto:IMClerkshipStaff@salud.unm.edu">IMClerkshipStaff@salud.unm.edu</a> 505-272-6617</td>
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Goals and Unique Aspects:
1) Encourage communication skills in advising patients about Integrative Medicine practices
2) Promote cultural competency regarding Integrative Medicine practices
3) Provide knowledge about the role of interdisciplinary health care teams including referral processes to Integrative Medicine practitioners in the present health care system
4) Provide basic knowledge of the language and domains of Integrative Medicine
5) Teach critical thinking skills in assessing evidence regarding Integrative Medicine practices

Objectives:
Patient Care:
1) Learn to expand the medical history to include other integrative therapies that the patients may be using
2) Begin to develop a cognitive base in Integrative Medicine to be able to counsel patients regarding the scientific evidence for or against integrative therapies they have selected or are considering, particularly for chronic disease management
3) Expand awareness of viewing the patient from a “whole person” framework, be able to recognize possible areas for use of other modalities, and suggest use in specific diseases
4) Learn to develop a therapeutic relationship that is patient-centered and includes respect for cultural and spiritual values

Knowledge:
1) Facilitate a common understanding of the definitions of commonly used terms and distinctions between Integrative Medicine and Complementary and Alternative Medicine (CAM)
2) Recognize main therapies being used by the general public and acquire familiarity with the five core areas of Complementary and Integrative Health as defined by NCCIH
3) Understand the trends and present scope of use of integrative therapies among patients and the importance of being able to discuss these therapies knowledgeably with patients
4) Understand the evidence and proper use of mind-body techniques as applied to patient care as well to the student’s own health
5) Broaden knowledge base in nutrition and understand the clinical implications for nutrition in disease prevention and health promotion
6) Learn about specific integrative modalities through lectures, reading, using on-line computer modules, and learning tools in the resource library
7) Learn about specific modalities through clinical observations with integrative medicine providers
Communication Skills:
1) Learn to create an open climate for discussion with patients on their use or potential use of integrative modalities
2) Encourage awareness of listening and being “mindfully present” with patients, as a key component in the interaction with patients and a tool to patient empowerment.

Practice Based Learning Environment:
1) Learn about reliable sources of information to evaluate claims and be able to research integrative therapies one may encounter in the clinical setting
2) Develop skills to use and assess data-bases with evidence-based information regarding integrative therapies and interpret the evidence for safety, efficacy, and clinical appropriateness of therapies
3) Promote cultural competency regarding Integrative Medicine and other therapeutic modalities.

Professionalism:
1) Develop awareness of the importance of self-care both for physician well-being and as a model to promote self-care in patients
2) Learn the difference between a disease-oriented vs. wellness-oriented paradigm of patient care
3) Encourage students to implement a personalized self-care program by: developing a healthy lifestyle, fostering behaviors that help balance personal goals and professional responsibilities, learning to recognize and respond to personal stress and fatigue that might interfere with professional duties
4) Demonstrate respect for and the ability to collaborate with qualified and licensed integrative and alternative practitioners.

Systems-Based Practice:
1) Understand valid credentialing issues regarding CIM practitioners and appropriate referral process to other CIM practitioners
2) Provide the opportunity to collaborate, create a network of resources, and become part of a supportive interactive community
3) Learn to verify credentials, practice standards (scope of practice), and establish a method for follow-up and feedback.

Responsibilities:
Clinical time will be spent shadowing Integrative and CIM practitioners of a variety of modalities in clinic or in the community which may include: Chiropractic, Myofascial Therapy, Botanicals, Mind/Body, Nutrition, Traditional Chinese Medicine, Energy Medicine, Hypnotherapy and others. Observation and attendance at nutrition classes, compounding pharmacy, Ayurvedic institute, organic garden, Native American healing, and other activities as deemed appropriate by student and preceptor. Research and present two supplements or herbs. Research and present Integrative Medicine approach to one clinical condition. Complete CFL intake form, Nutrition Self-Assessment and Wellness survey. Complete Wheel of Life and contemplate student’s own wellness behaviors and changes needed

Supervision and Training:
Student will shadow Integrative and CAM practitioners at the Center for Life clinic. Student will complete assignments within their rotation period and will meet with Faculty evaluator towards end of rotation to present and obtain feedback.

Evaluation:
Presentations are oral and informal. Constructive feedback will be provided.
**DEPARTMENT OF INTERNAL MEDICINE**

**Pulmonary Medicine**

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<td>Faculty Evaluator(s)</td>
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<td>Allie Lara</td>
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**Goals and Unique Aspects:**
Introduces the student to inpatient and outpatient pulmonary medicine; experiences are offered in a variety of settings including wards and outpatient clinics for chest diseases, sleep disorders, lung cancer and allergic diseases. Opportunity also to participate in clinics held throughout the state for miners. A concentrated experience with adults with pulmonary disorders can be achieved.

**Objectives:**
Evaluate and manage patients with the most prevalent respiratory disorders. Appropriately utilize pulmonary diagnostic procedures. Interpret routine pulmonary function tests. Gain experience in evaluating chest X-rays and CT scans.

**Responsibilities:**
Observational: Opportunity to observe procedures including bronchoscopy, thoracentesis, and pleural biopsy. Clinical: Extensive patient contact. The student may attend four outpatient clinics weekly. Evaluate inpatient consultations. Participation in daily rounds in the MICU is optional. Approximately six hours per day is spent in direct patient-related activities. The student shares weekend call with the resident or fellow, two weekends per rotation. Research: Diverse opportunities for research available in ongoing programs in epidemiology, immunology, and sleep disorders.

**Supervision and Teaching:**
Amount and Type: The supervision is direct and intense. The fellow reviews all work-ups and all cases are presented to the attending in both inpatient and outpatient settings. Didactic Content: A syllabus is given to each student and additional materials relevant to specific cases are supplied. A weekly case conference covers unusual and informative patients and additional weekly seminar addresses particular subjects in depth.

**Evaluation:**
Criteria for Outstanding Grade: Awarded largely based on assessment by the attending. The quality of the clinical performance receives the predominant weighting, but conference participation is also considered.

**Additional Information:** 45 day add/drop policy strictly enforced.
The University of New Mexico School of Medicine

DEPARTMENT OF INTERNAL MEDICINE
Internal Medicine Boot Camp

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<tr>
<td>Clerkship Contact:</td>
<td>Sarah Burns, DO, MS</td>
<td><a href="mailto:sjburns@salud.unm.edu">sjburns@salud.unm.edu</a></td>
<td>505-925-0674</td>
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Goals and Unique Aspects:
This course is designed to prepare fourth year medical students for preliminary or categorical residencies in internal medicine. Through reading, didactics, and peer education students will have the opportunity to hone skills that will help them to transition successfully into residency. The planned topics will include answering pages, EKG interpretation, radiology, advanced communication skills, common outpatient medicine topics, common inpatient medicine topics, procedural skill training, BATCAVE simulation training, time management and wellness.

Objectives:
By the end of this course, students will be able to:
1) Facilitate the transition to internship by developing medical knowledge, practicing skills and evolving attitudes necessary to be an effective internal medicine intern.
2) Develop confidence in approaching common issues faced by interns.
3) Prepare for both professional and personal challenges of internship.

Responsibilities:
Attendance at a minimum of 75% of all sessions. Participation in peer lead teaching opportunities. Observation and practice of procedures, diagnostic skills and communication skills. Participation in mock paging program. Frequent feedback.

Observational: Simulation of common inpatient and outpatient procedures. BLS and ACLS training. Mock paging program participation. Advanced communication skills training.
Clinical: No direct patient care.
Research: None.
Teaching: Peer teaching required.

Supervision and Training:
Supervision will occur by course faculty and recruited faculty who volunteer to teach the particular course sections.

Evaluation:
The final grade will be Pass/Fail. A passing grade will require:
1) attendance at 75% of didactic and small group sessions,
2) delivery of all assigned student-directed learning sessions,
3) participation in active learning activities, and
4) completion of pre and post-test surveys.
DEPARTMENT OF NEUROLOGY
Neurology Sub-Internship at UNMH

Course Number: CLNS 701  
Credit Type: Sub-Internship  
Duration: 4 weeks

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Faculty Evaluator(s): Seema Bansal, MD, Tarun Girotra, MD

Prerequisites: Yes  
All Phase II Clerkships

Accepts Visiting Students: Yes  
Domestic MD and Domestic DO

Accepts Off-Cycle Date requests: No

Add/Drop Policy: Add: 45 Days  
Drop: 45 Days  
Other:

Clerkship Contact: Alexis Gonzalez  
AleGonzalez@salud.unm.edu  
505-272-4014

Goals and Unique Aspects:
At the completion of this rotation, the student should be prepared to begin work as a neurology resident by having skills necessary to assess patients, present on rounds, and function as effective team members. Students should become comfortable with the neurologic history and exam as well as creating a comprehensive differential diagnosis and use appropriate test results to refine the differential and/or create a specific diagnosis and comprehensive management plan.

Objectives:
1) Perform a thorough neurologic history  
2) Perform thorough neurologic examination  
3) Specify common and significant neurologic disorders  
4) Formulate a comprehensive differential diagnosis based on history, exam, and localization  
5) Create a comprehensive management plan for common and significant neurologic disorders  
6) Educate inpatient team members in patient presentations on rounds  
7) Apply principles of evidence-based medicine to patient care  
8) Demonstrate effective communication with patients and their families from diverse backgrounds  
9) Demonstrate professional demeanor and behavior

Responsibilities:
As part of the Neurology team, the student will work with senior neurology residents and attending Neurology faculty in the work up and management of patients in the inpatient setting. Students will be responsible for managing (under the supervision of the senior resident and attending) up to five inpatients with neurologic diseases and attending one teaching neurology outpatient clinic per week, if requested by student. Students will be expected to attend all regularly scheduled conferences for neurology residents.

Supervision and Training:
Students will typically be assigned to one service (inpatient, consult, or cerebrovascular) for their four week rotation unless the student would like to try two different rotations for two weeks each, if the student desires and if there is sufficient room on the teams which the student would like to join. Students will be taught and supervised by the senior ward neurology resident, the inpatient neurology attending and the attending Neurology faculty. Teaching conferences for residents occur several times per week, and the student will be expected to attend these. At daily attending rounds, the student will present his/her patients to the staff neurologist and discuss the diagnosis, work up and management. Students will be expected to read about common neurologic diseases and the diseases of their patients and educate the team on their choices to justify the management plan. Along with the child neurology team (residents and attendings) the student will be involved in the teaching of the Phase II clerkship. When available, the student may be able to perform a lumbar puncture under direct supervision.
Evaluation: Grading will be based on the student’s performance with regards to the objectives.
DEPARTMENT OF NEUROLOGY
Child Neurology Sub-Internship at UNM

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Accepts Off-Cycle Date requests: No

Add/Drop Policy:
Add: 45 Days
Drop: 45 Days
Other:

Clerkship Contact:
Alexis Gonzalez
AleGonzalez@salud.unm.edu
505-272-4014

Prior Approval Required: No

Goals and Unique Aspects:
At the completion of this rotation, the student should be prepared to begin work as a child neurology resident by having skills necessary to assess patients, present on rounds, and function as effective team members. Students should become comfortable with the neurologic history and exam as well as creating a comprehensive differential diagnosis and use appropriate test results to refine the differential and/or create a specific diagnosis and comprehensive management plan.

Objectives:
1) Perform a thorough neurologic history
2) Perform a thorough neurologic examination
3) Specify common and significant neurologic disorders
4) Formulate a comprehensive differential diagnosis based on history, exam, and localization
5) Create a comprehensive management plan for common and significant neurologic disorders
6) Educate inpatient team members in patient presentations on rounds
7) Apply principles of evidence-based medicine to patient care
8) Demonstrate effective communication with patients and their families from diverse backgrounds
9) Demonstrate professional demeanor and behavior

Responsibilities:
The student are integrated into the child neurology inpatient/consult team (including the supervising attending, the child neurology resident, an adult neurology resident, and phase II students). The student will be responsible for seeing and presenting up to five inpatients per day, attend 2-3 afternoon child neurology clinics/week, and attend all teaching conferences for the child neurology residents.
Along with the child neurology team (residents and attendings) the student will be involved in the teaching of the Phase II clerkship students on the service. If available, the student may be able to perform a lumbar puncture under direct supervision. No night or weekend call is expected.

Supervision and Training:
Students will be taught and supervised by the child and adult neurology residents, the inpatient Child Neurology attending and the clinic attending child neurologist.

Evaluation:
Grading will be based on the student’s performance with regards to the objectives.
DEPARTMENT OF NEUROSURGERY
Neurosurgery Sub-Internship at UNMH

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Prerequisites: Yes All Phase II Clerkships

Accepts Visiting Students: Yes Domestic MD, Domestic DO, and International
Accepts Off-Cycle Date Requests: Yes – with department permission

Add/Drop Policy: Add: 30 Days Drop: 30 Days Other: |

Clerkship Contact: Kristen Broesder Carlos Abeyta kbroesder@salud.unm.edu jabeitia@salud.unm.edu 505-272-0621

Prior Approval Required: No

Goals and Unique Aspects:
To learn the neurological exam, management of head and spinal cord injuries, management of common outpatient neurosurgical problems, and interpretation of neuro-imaging studies.

Objectives:
To perform a detailed neurological exam and be able to formulate a working diagnosis and treatment plan.

Responsibilities:
Observational: Work-up admissions, present cases on rounds, select one topic for review and presentation.
Clinical: Admit one to two patients per day, participate in night call, be an integral part of the care team.
Research: Students may elect to become involved in neurosurgical research.
Teaching: Examination of inpatients presented to chief resident and outpatients presented to attending. Required: Mandatory weekday attendance on surgery and in clinics, Journal Club and Friday conferences.

Supervision and Training:
Amount and type: Direct supervision by attendings and residents.
Didactic content: Daily rounds; conferences twice per week.

Evaluation:
Evaluation by Howard Yonas, MD. Criteria for outstanding grade: Based on performance and review of a topic. Quality of work-ups, ability to sustain work level, performance in operating room and oral presentation.

Additional Information:
Student obtain a great deal of practical exposure, assisting on complex cases, suturing and other procedures appropriate to interests and capabilities.
DEPARTMENT OF NEUROSURGERY
Neuroscience Intensive Care Unit

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<td>Robert Alunday, MD</td>
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</tr>
<tr>
<td>Clerkship Contact:</td>
<td>Kristen Broesder</td>
<td><a href="mailto:kbroesder@salud.unm.edu">kbroesder@salud.unm.edu</a></td>
</tr>
<tr>
<td>Carlos Abeyta</td>
<td><a href="mailto:iabeyta@salud.unm.edu">iabeyta@salud.unm.edu</a></td>
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<td>Prior Approval Required:</td>
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Goals and Unique Aspects:

Objectives:
1) Learn the basics of managing a critically ill patient with multisystem disease.
2) Learn how to apply this to acute neurologic injury.
3) Learn the care of acute neurology and neurosurgery patients.
4) Learn common ICU procedures.

Responsibilities:
The student will rotate in the NSI and make daily rounds with the attending staff and team. The student will be treated as a subintern and be responsible for a subset of these patients. The student will learn to perform common ICU procedures under the supervision of the attending staff. The student will attend neuroscience grand rounds, neuroradiology conference, neurosurgery AM conferences. The student will also attend the Monday and Tuesday noon critical lectures in the TSI and have afternoon lectures by the NSI staff Tuesday and Thursday afternoons. There will be no night call. Students will be encouraged to participate in ongoing research in the NSI.

Supervision and Training:
The neuro ICU attendings will be primarily responsible for the students and will be assisted by ED, Neurosurgery and neurology residents rotating through the ICU as well as the neurosurgery attending.

Evaluation:
The students will be assessed by the neuro ICU staff, faculty and residents using standard UNM forms in accordance with the PRIME criteria. An outstanding student should demonstrate excellent clinical skills, outstanding fund of knowledge, self-education and interpersonal relationship.
The University of New Mexico School of Medicine 2019-2020 Phase III Clerkship Catalog

DEPARTMENT OF OBSTETRICS AND GYNECOLOGY
Ambulatory Gynecology

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<td>Faculty Evaluator(s)</td>
<td>Kathleen Kennedy, MD</td>
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<tbody>
<tr>
<td>Clerkship Contact</td>
<td>Lynette Eisenbeck</td>
<td><a href="mailto:LHeroux@salud.unm.edu">LHeroux@salud.unm.edu</a></td>
<td>505-272-6883</td>
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Goals and Unique Aspects:
Increase knowledge of ambulatory gynecology.

Objectives:
Increase depth of knowledge of ambulatory gynecology and procedures; continue to develop skills in diagnosis and management.

Responsibilities:

Supervision and Training:
Amount and type: Supervised by faculty and residents.

Evaluation:
Clinical observations of knowledge and improvement of skills. Criteria for outstanding grade: Outstanding clinical evaluations and a brief oral presentation.
DEPARTMENT OF OBSTETRICS AND GYNECOLOGY
Gynecologic Oncology Sub-Internship

Course Number: CLNS 653
Credit Type: Sub-Internship
Duration: 4 weeks

Goals and Unique Aspects:
This rotation will provide its student the unique opportunity of comprehensive care for the Gynecologic Cancer patient. This student will actively participate in techniques of diagnosis and cancer treatment, including surgical management, radiation therapy, chemotherapy, and palliative care. In addition, the student will learn techniques in delivering bad news and end of life transitioning. In addition, risk assessment and cancer prevention strategies will be taught.

Objectives:
The primary objective is to learn globally about the field of Gyn-Oncology and the common sense approach to caring for women with gynecologic malignancies. At the end of the rotation, the student should be able to understand the primary principles of cancer care, goals of therapy, and quality of life issues related to therapy and compassionate care to the dying patient. Students should also understand the general facts about the main gynecologic malignancies including ovarian, cervical, and endometrial cancer and understand risk factors, screening modalities, prevention modalities, diagnostic workup, and general basics for treating these malignancies.

Responsibilities:
This is a rigorous but rewarding clinical rotation. The student will act at the sub-intern level under the direct supervision of senior residents and the faculty. The student is expected to participate as a full member of the Gyn-Oncology team and will have increasing technical experiences as the rotation and individual competency progresses. The student will be assigned inpatients and will be expected to make daily rounds, collect data and interpret and formulate treatment plans. In addition, students will experience outpatient services and will be taught techniques such as diagnostic colposcopy, tumor biopsies, and proper preoperative workup of the patient with an anticipated gynecologic malignancy. Call: Once weekly (Thursday or Friday). Some weekend rounding experience is strongly suggested.

Supervision and Training:
Amount and type: The student will be supervised at all times by either a resident and/or faculty Gyn-Oncologist. All invasive procedures including pelvic exams, biopsies or any technical procedures will be directly supervised by senior resident or faculty physicians. All treatment plans will be discussed with the team; orders and notes will be written by the student and co-signed by the resident and/or faculty. Didactic Content: Most of the didactics occur during the day-to-day operation of the service. These will include daily ward rounds, clinic sessions, weekly tumor board conferences, Friday morning grand rounds, and monthly M & M conferences. Students may be asked to present a topic for review and would discuss the aspects for a surgical case either prior to or while in the operating room. This strongly suggests the pelvic anatomy be reviewed prior to this course. We anticipate the learning curve to rise exponentially.
**Evaluation:**
Student will be evaluated by residents and faculty. Similar to the criteria for resident evaluation, this is based on observational assessment. The student should strive to excel on all aspects including knowledge based technical skills, data recovery and analysis, teamwork, communication skills, understanding of anatomy and general principles of oncology.

**Additional Information:**
Recommended for students seriously considering OB/GYN residency.
Visiting Students - Must apply through VSAS. Visiting MD students: USMLE scores - Passed on 1st attempt with minimum score of 220 (subject to change)
DEPARTMENT OF OBSTETRICS AND GYNECOLOGY
Maternal Fetal Medicine Sub-Internship at UNMH

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<th>Course Number</th>
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<td>Faculty Evaluator(s)</td>
<td>Evan Taber, MD</td>
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<td>Prerequisites:</td>
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<td>Clerkship Contact:</td>
<td>Lynette Eisenbeck</td>
<td><a href="mailto:LHeroux@salud.unm.edu">LHeroux@salud.unm.edu</a></td>
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<td>Prior Approval Required:</td>
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Goals and Unique Aspects:
Acquaint the student with diagnostic and therapeutic modalities and decision strategies in the management of complicated pregnancies.

Objectives:
Achieve a substantial level of competence in identifying and managing high-risk pregnancies.

Responsibilities:
Clinical: Function as sub-intern for Perinatal High Risk Service. Responsible for high-risk obstetrics patients both in-house and in the clinic during the day. Expect to see a variety of low and high-risk patients. Attending rounds are at 7:00 AM. On average, the student performs at least three work-ups of inpatients per week. Research: For students with special interests, the opportunity to participate in ongoing clinical research of the Maternal Fetal Medicine Division can be made available. Call: Once weekly (Thursday or Friday).

Supervision and Training:
Amount and Type: All pelvic exams are supervised, all fetal tracings reviewed, and all management plans reviewed and evaluated. Didactic Content: MFM rounds daily. Attend/participate in all high-risk clinic conference. Friday morning Grand Rounds and M & M Conferences. Required reading includes parts of Williams Obstetrics and articles appropriate to patients on the service. Students present topics and make patient presentations during daily rounds.

Evaluation:
Grading is based upon clinical performance.

Additional Information:
The UNM High Risk Obstetrics Services see a tremendous variety of obstetric complications, ranging from preterm labor and ruptured membranes, to serious, life threatening maternal and fetal complications, including severe fetal anomalies, maternal health problems from heart disease to leukemia to myasthenia gravis, and a substantial volume of Class C through R diabetics and complex, severe pre-eclampsia. This referral service treats a substantial proportion of all of the high-risk pregnancies in the state of New Mexico. Recommended for students seriously considering OB/GYN residency. Visiting Students – Must apply through VSAS. Visiting MD students: USMLE scores – Passed on 1st attempt with minimum score of 220 (subject to change).
DEPARTMENT OF OBSTETRICS AND GYNECOLOGY
Ob-Gyn Family Planning

Goals and Unique Aspects:
This is a 4-week course focusing on family planning care within the Ob/Gyn department. Will include clinical care within the Center for Reproductive Health and the OSIS. Students will gain knowledge and clinical experience in the following areas: contraception counseling, pregnancy options and counseling, first and second trimester dating ultrasounds, first trimester abortion, observe second trimester abortions, manage pregnancy of unknown location/miscarriage/ectopic management/“beta book,” emergency contraception, sterilization including laparoscopic and hysteroscopic approaches, and routine outpatient gynecologic care.

Objectives:
To gain knowledge/learn about the following:
1. pregnancy options counseling,
2. first and second trimester abortion procedures,
3. contraceptive counseling and methods available,
4. complications of elective abortion and their management,
5. improve pelvic examination skills including how to accurately size/date a pregnant uterus,
6. how to do a paracervical block and gain familiarity with conscious sedation for outpatient gynecological procedures,
7. how to manage pregnancy of unknown location/miscarriage/ectopic pregnancy,
8. counseling about permanent female sterilization,
9. outpatient provision of sterilization

Responsibilities:
The student will act at the sub-intern level under direct supervision of residents and faculty. The student is expected to participate as a full member of the family planning team. Responsibilities include: Attend all assigned clinics at the CRH, attend and participate in any procedures at the OSIS on Thursdays. Co-managed the bHCG book with the family planning R1. Will practice gynecological procedures such as 1st trimester abortion, IUD placement, pap testing, and pelvic exams. Observational: will observe first and second trimester abortion care and nexplanon placement. Didactics: will attend grand rounds on Fridays. Additional teaching as available by residents and faculty. Will participate in Family Planning journal club if it falls within the rotation. The student will also prepare a short presentation on family planning topic to Family Planning faculty, residents, and medical students.

Supervision and Training:
Supervised by faculty and residents.

Evaluation:
Clinical observations by residents and faculty of knowledge and improvement of skills. Will especially consider communications skills and patient care. Students will also be evaluated on their presentation of a family planning topic to faculty.

**Additional Information:**
*Prior approval is required. Once approved by department, submit add/drop request to OMSA.* Recommended for students interested in family planning training and considering OB/GYN or Family Practice residency. Visiting student applications: Please provide a short (less than one page) introduction and describe why you would like to participate in this rotation.
DEPARTMENT OF OBSTETRICS AND GYNECOLOGY
Benign Gynecology Sub-Internship at UNMH

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# of Students per Block: 1

Faculty Evaluator(s): Kathleen Kennedy, MD

Prerequisites: Yes All Phase II Clerkships

Accepts Visiting Students: Yes Domestic MD

Accepts Off-Cycle Date Requests: No

Add/Drop Policy: Add: 45 Days Drop: 45 Days Other:

Clerkship Contact: Lynette Eisenbeck LHeroux@salud.unm.edu 505-272-6883

Prior Approval Required: No

Goals and Unique Aspects:
This is a 4-week course focusing on benign gynecology inpatient, surgical, and ambulatory care. It includes clinical care at the Eubank clinic, main hospital, main OR, and OSIS.

Objectives:
Increase depth of knowledge of benign gynecology, procedures and surgeries; continue to develop skills in diagnosis and management.

Responsibilities:
The student will act at the sub-intern level under direct supervision of senior residents and faculty. The student is expected to participate as a full member of the benign gynecology team. Responsibilities include: being assigned inpatients, making daily rounds and presentations, formulating treatment plans, writing orders (with co-signature), and managing and coordinating all aspects of the patient’s care during the hospitalization with assistance from residents and faculty. The student will see patients in the outpatient clinic 2-3 full days a week. Additionally, the student will participate in benign gynecology operations and procedures two full days a week. Observational: Problems and procedures in ambulatory gynecology, gynecologic surgery. Clinical: Inpatient and outpatient evaluation and examinations; perform pelvic exams, wet preps, cultures, Pap tests, and gynecology procedures under supervision.

Research: May participate in ongoing department research. Teaching: By faculty and residents. Conferences: Colposcopy; Grand Rounds – Friday AM; M&M. Required: All gynecology clinics, OR, and conferences. Inpatient rounds daily with some weekend rounding Saturday and Sunday. Call: Once weekly (Thursday or Friday).

Supervision and Training:
Amount and Type: Supervised by faculty and residents. Didactic Content: Weekly colposcopy conferences, Friday PM didactic sessions.

Evaluation:
Clinical Observations of knowledge and improvement of skills. Criteria for outstanding grade: Outstanding clinical evaluations and a brief oral presentation.

Additional Information:
Recommended for students seriously considering OB/GYN residency. Visiting Students – Must apply through VSAS. MD students: USMLE scores - Passed on 1st attempt with minimum score of 220 (subject to change).
## DEPARTMENT OF OBSTETRICS AND GYNECOLOGY

### Urogynecology Sub-Internship

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<td><strong>Faculty Evaluator(s)</strong></td>
<td>Peter Jeppson, MD, Yuko Komesu, MD, Gena Dunivan, MD, Sara Cichowski, MD, and Cara Ninivaggio, MD</td>
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<td>Lynette Eisenbeck</td>
<td><a href="mailto:LHeroux@salud.unm.edu">LHeroux@salud.unm.edu</a></td>
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### Goals and Unique Aspects:

A sub-internship in the UNM Female Pelvic Medicine & Reconstructive surgery (FPMRS) rotation, colloquially referred to as Urogynecology, provides instruction in the overall practice of FPMRS in a University/Academic setting that functions as the safety net hospital for patients throughout the state of New Mexico and surrounding areas. This rotation includes educational experiences in both surgical and nonsurgical treatment of female pelvic floor disorders, with time spent in the clinical setting and the operating room. Educational experiences on this rotation also include urodynamics, office based procedures (such as cystoscopy, intravesical injections, pessary fittings, neuromodulator programming and trigger point injections), as well as providing consultative advice to pessary and physical therapy providers. This rotation will provide a broad overview to the knowledge and skills needed to develop competence in the evaluation, diagnosis, and management of patients with pelvic floor dysfunction.

### Objectives:
The objectives for this FPMRS sub-internship are based on the ACGME core competencies and are as follows:

1. **Medical Knowledge:** Upon completion of the one month elective, the student will demonstrate the following:
   a. General overview of the most common symptoms associated with pelvic organ prolapse, urinary incontinence, and defecatory disorders and explain the relationship between symptoms and anatomy
   b. Increased understanding for the medical and surgical management of patients with pelvic organ prolapse, urogenital disorders, and colorectal disorders
   c. Increased understanding of the anatomic relationships and pathophysiology of pelvic organ prolapse, urogenital disorders, and colorectal disorders including:
      d. Pelvic anatomy: genital, urinary, colorectal, and musculoskeletal elements, including the vascular and nerve supply to each of the pelvic organs and structures
      e. The anatomy of the anterior abdominal wall
      f. Evaluating and treating urinary tract infections
      g. General understanding of painful bladder syndrome/interstitial cystitis

2. **Patient Care:**
   a. General overview of initial skills in assessing patients across the spectrum of pelvic medicine to include pelvic organ prolapse, urogenital disorders, and colorectal disorders to include an appropriate physical examination and initial tests in such patients
   b. Elicit a comprehensive medical history, including a directed history that identifies all pelvic floor disorders, their type and severity
   c. Past medical, obstetrical and surgical histories

The University of New Mexico School of Medicine reserves the right to make changes to any of the policies, procedures, codes, standards, requirements, or services included in this handbook as it deems necessary, with changes applicable to all students in attendance at the SOM Doctor of Medicine program. Please visit the OMSA website to obtain a copy of the most current 2019-2020 Phase III Clerkship Catalog.
d. Perform a focused pelvic floor examination, including assessment of uterovaginal support, pelvic muscle strength, neurologic status, and uterine and ovarian size and including quantification of pelvic organ prolapse

e. For intraoperative care:
   i. Participate in appropriate preoperative time out, including discussion of the surgical plan with the operating room team
   ii. Help properly position the patient for the procedure to minimize compression and stretch neuromuscular injuries
   iii. Discuss appropriate antibiotics and deep vein thrombosis prophylaxis.

3. Practice-based Learning: students are expected to:
   a. Gain exposure to the use and interpretation of disease-specific and global health questionnaires to evaluate the impact of pelvic floor disorders on quality of life
   b. Utilize feedback to improve daily practice
   c. Incorporate the use of information technology to locate scientific studies from the Urogynecology literature to enhance learning and improve patient care

4. Interpersonal and Communication Skills: Students are expected to:
   a. Develop rapport with Urogynecology patients and their families
   b. Communicate with patients and their families in a compassionate and culturally sensitive way
   c. Use effective listening skills to elicit and then provide information to patients and families
   d. Work effectively with others as a member of the Urogynecology healthcare team
   e. Interact and communicate appropriately with other healthcare providers

5. Professionalism: Students are expected to:
   a. Demonstrate respect, compassion, and integrity in interactions with patients, families, and other healthcare providers
   b. Demonstrate a commitment to ethical principles including but not limited to confidentiality of patient information
   c. Demonstrate sensitivity and responsiveness to patient's culture, age, gender, and disabilities
   d. Take responsibility for his/her actions
   e. Understand and know her/her abilities and only practice within the scope of those abilities

Responsibilities:

Supervision and Training:
Students will be supervised by several members of the FPMRS team: attendings (Rogers, Komesu, Dunivan, Jeppson, Cichowski), fellows (students will spend time with three FPMRS fellows), residents (a second and fourth year UNM Ob Gyn resident rotate through Urogynecology on 2 month blocks)

Evaluation:
Goals and objectives are evaluated through direct faculty observation with specific verbal feedback. Written and verbal surgical evaluations are completed at the end of each operating room day; verbal feedback is given weekly on progress in the clinical setting. In addition, evaluations from faculty are completed after each rotation.

Additional Information:
Visiting MD students: USMLE scores – Passed on 1st attempt with minimum score of 220 (subject to change)
DEPARTMENT OF ORTHOPAEDICS
General Orthopaedic Surgery Sub-Internship

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<tr>
<td>Clerkship Contact:</td>
<td>Joni Roberts</td>
<td><a href="mailto:jroberts@salud.unm.edu">jroberts@salud.unm.edu</a></td>
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Goals and Unique Aspects:
To participate as an active member of the surgical team, delivering care to patients with musculoskeletal problems, especially trauma.

Objectives:
Learn to dramatically influence outcome of patients with musculoskeletal disease states by direct operative and non-operative intervention. Perform procedures, with appropriate supervision, which help patients improve their health.

Responsibilities:
Observational: While contributing at a student level, observe higher levels of care giving (residents, attendings) in clinic, wards, and operating room. Required: Night call, conference attendance, rounds, clinic and operating room assistance. Optional: Clinical research (case report of interesting case).

Supervision and Training:
Amount and Type: Instruction directly by role model; principal role on ward. Didactic Content: Attend all department conferences.

Evaluation:
Consensus subjective conclusion of team attendings and residents. Written exam possible. Criteria for Outstanding Grade: Demonstrate knowledge of anatomy and clinical skills; demonstrate excellent acquisition of basic orthopaedic musculoskeletal diagnostic and therapeutic knowledge. Actively and effectively participate in surgical team (rounds, wards clinics, operating room). Excellence in conference participation, to include presentation of cases of patients with musculoskeletal pathology, which demonstrate extensive knowledge of the condition and treatment alternatives.
DEPARTMENT OF ORTHOPAEDICS
Orthopaedic Trauma Sub-Internship

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Goals and Unique Aspects:
Learn the appropriate anatomy, physiology, and exam skills needed to participate in the care of orthopaedic trauma patients, including multiple trauma and isolated fractures.

Objectives:
Learn initial management of patients with acute traumatic injury including history, physicals, resuscitation, and treatment of open and closed fractures, soft tissue injury, casting techniques, and introductory reduction techniques.

Responsibilities:
Observational: Observe and participate in all aspects patient care including emergency room and trauma call, inpatient and postoperative care, outpatient clinics and surgical interventions. Clinical: Participate in inpatient daily rounds; assist with and observe surgery two days per week. Various Orthopaedic subspecialty clinics three days per week. Research: May participate in ongoing research projects. Teaching: Present cases at formal Orthopaedic Department conferences. Case presentation to the attending physician in clinic and intraoperative teaching are provided. Required: Act as sub-intern, assuming primary responsibility for patients, both inpatient and ambulatory set-tings, include early patient contact, history and physical examinations, problem lists and diagnostic/therapeutic plans. Participate in perioperative and postoperative management of patients, including following patient to operating room, evaluating patients and writing notes on rounds twice a day, and following patient progress during follow-up visits. Overnight call required every third night. Under supervision of an attending physician and/or resident at all times. Optional: Opportunity to see patients in all orthopaedic subspecialties at UNMH, Carrie Tingley Hospital, and VAMC.

Supervision and Training:
Evaluation:
Multifactorial by attending physicians and chief residents. Areas evaluated are knowledge of musculoskeletal anatomy; ability to obtain focused history and physical exam; complete medical documentation and interpretation of radiographs and other tests; ability to give accurate; concise, presentations to senior level residents and attendings and participate as member of surgical team on rounds, wards, clinics, and operating room. All criteria evaluated equally; primary emphasis placed on physical examination of the musculoskeletal system.

Criteria for Outstanding Grade: Consistently prepared for surgical cases with excellent knowledge of relevant surgical anatomy, indications and contraindications for surgery and rational for surgical interventions; regularly provide evidence of ability to integrate information from resident conferences, selected readings and current literature, clinical patient encounters and surgical cases; demonstrate evidence based, logical treatment based on texts and current literature; demonstrate comprehension of both natural disease course and methods of treatment.
of common clinical conditions; make effective and complete clinical case presentations at the preoperative or resident conference; demonstrate superior skills in physical examination of the musculoskeletal system including special tests related to patients encountered on the service.
DEPARTMENT OF ORTHOPAEDICS
Orthopaedic Spine Clinical Experience

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<td>Andrew Paterson, MD</td>
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<td>Joni Roberts</td>
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Goals and Unique Aspects:
To instruct medical students, particularly those interested in family practice, in evaluation, diagnosis and care of spine injured patients.

Objectives:
To teach interested students to approach a “spine” patient.

Responsibilities:
Observational: Learn to do “low back” history and physical. Learn to evaluate X-rays, CT and MRI scans. Research: Optional. Teaching: Present an informal talk on an assigned spine topic appropriate for his/her level. Required: Basic knowledge of anatomy and neurophysiology. Optional: Assist in surgery of spine pathology on Tuesdays and Wednesdays.

Supervision and Teaching:
Amount and Type: Tuesday: observe spine surgery; Wednesday a.m.: surgery, orthopaedics teaching classes; Wednesday pm: spine surgery; Thursday: clinic all day; Friday: clinic in a.m. Didactic Content: Teaching in peripatetic fashion.

Evaluation:
Criteria for Outstanding Grade: Demonstrate a grasp of evaluating a low back patient for pathology.
**DEPARTMENT OF ORTHOPAEDICS**

**Sports Medicine**

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| Add/Drop Policy | Add: 30 Days Drop: 30 Days Other: |
|-----------------|----------------------------------|-----------------|
| Clerkship Contact: | Sandra Peters sjpeters@salud.unm.edu 505-925-4488 |

**Goals and Unique Aspects:**
Student is introduced to the primary care sports medicine system through broad based exposure to a variety of sports medicine settings at the University of New Mexico and in the Albuquerque community. Goals include understanding the multifaceted make-up of a complete sports medicine system, obtaining skills and understanding concerning the care of the competitive and recreational athlete, both in organized and individual settings, and understanding the role of exercise in the promotion of health and the treatment of disease. This is NOT a surgical rotation.

**Objectives:**
Objectives include defining a community sports system, proficiency in examination of the shoulder, knee and ankle along with the ability to give a limited diagnosis, explain principles of rehabilitation in the injured athlete, understanding the concept of prevention of sports injuries and understanding the principles of exercise evaluation and exercise prescription in the “well adult.”

**Responsibilities:**
Scholarly/Creative Work: Research and write a 3-5 page review of an area of interest in sports medicine utilizing at least five resources, or develop a patient education handout. Observational: Outpatient Sports Medicine Clinic, physical therapy, high school training room, and attend appropriate, indicated surgeries and athletic events. Clinical: Examine patients in outpatient clinics. Present case to attending. Assist with and complete medical record. Assist in initial evaluation of injured athlete in high school training room.

**Supervision and Training:**
Amount and type: Supervision by faculty at all levels of patient contact, including hands-on training and direct observation. Didactic Content: Video tapes of selected joint exams and sports medicine topics. Recommended textbook lists with selected readings. Recommended articles.

**Evaluation:**
Criteria for outstanding grade: Attendance at clinical and other sites of teaching on a regular and timely basis. Appropriate progression of knowledge and hands-on ability and skills with patients. Evaluation of research paper.

**Additional Information:**
Prior approval is required. Once approved by department, submit add/drop request to OMSA. Student is expected to develop a personal exercise program during this rotation.

*APPROVAL REQUIRED*
DEPARTMENT OF PATHOLOGY
Anatomic Pathology at VAMC

Course Number: CLNS 870
Duration: 4 weeks
Credit Type: Clinical Elective

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Facilitator(s): Julie Harrington, MD

Prerequisites: Yes, All Phase II Clerkships

Accepts Visiting Students: No
Accepts Off-Cycle Date Requests: No

Add/Drop Policy: Add: 30 Days, Drop: 30 Days, Other:

Clerkship Contact: Teresa Quintana, tquintana@salud.unm.edu, 505-272-0590

Prior Approval Required: YES - Must submit Add Form after Phase III schedules are released

Goals and Unique Aspects:
Gain familiarity with dissection, processing, and microscopic examination of surgical tissue specimens. The student may rotate through two different sections of the pathology laboratory in blocks of 2 weeks or remain on anatomic pathology the entire month.

Objectives:
Interpret tissue specimens grossly and microscopically in light of clinical history. Perform frozen sections. Formulate a meaningful, communicative written report interpreting tissue findings with clinical relevance.

Responsibilities:

Supervision and Teaching:
Amount and type: Abundant, direct supervision. Didactic content: Thursday morning pathology resident didactic conferences heal at UNMH. Other conferences may be assigned by the anatomic pathology faculty.

Evaluation:
Criteria for outstanding grade: Progress in evaluation of specimens, understanding of clinical-pathological correlations and formulation of reports.

Additional Information:
Prior approval is required. Once approved by department, submit add/drop request to OMSA. Please see the contact information above. Veterans’ Administration Medical Center is located at 1501 San Pedro SE. Report to Department of Pathology Services. 256-1711 ext. 2355.
Goals and Unique Aspects:
The Medical Student Anatomic Pathology Rotation exposes students to the two core disciplines of UNMH Anatomic Pathology: surgical pathology and cytopathology. Time spent on this rotation will be evenly distributed between these two specialties. In Surgical Pathology, training will begin in the UNMH Gross Room, where students will participate in the triage/dissection of surgical specimens, as well as observe real-time, intraoperative consultations (including frozen sections). Students will then experience the continuity of seeing these specimens via glass slides the next day, where they will join Pathology residents in “preview” sessions, formulating preliminary diagnoses prior to the final case sign-out with Pathology attending at the multi-head teaching microscope. In Cytopathology, students will follow a similar preview/sign-out cycle of cytology cases with residents/attendings.

Objectives:
The Department of Pathology at UNMH is responsible for attracting, educating, and training the next generation of pathologists for the healthcare system.

Prior Approval Required: *APPROVAL REQUIRED*

Course Number | CLNS 872 | Duration: 4 weeks
Credit Type | Clinical Elective

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<td><a href="mailto:tquintana@salud.unm.edu">tquintana@salud.unm.edu</a></td>
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The University of New Mexico School of Medicine 2019-2020 Phase III Clerkship Catalog

The University of New Mexico School of Medicine reserves the right to make changes to any of the policies, procedures, codes, standards, requirements, or services included in this handbook as it deems necessary, with changes applicable to all students in attendance at the SOM Doctor of Medicine program. Please visit the OMSA website to obtain a copy of the most current 2019-2020 Phase III Clerkship Catalog.
Supervision and Teaching:
In the UNMH Gross Room (surgical pathology), students will be under the direct supervision of Pathology attendings or Pathologist Assistants during any handling of surgical specimens. Students will not directly perform or handle specimens for intraoperative consultations. Glass slide preview of surgical/cytology cases is not supervised, although residents/attendings will be available for immediate consultation. Case sign-out of surgical/cytology cases is supervised/performed by Pathology attendings. On the cytopathology service, students will be under the direct supervision of Pathology residents or Pathology attendings during the handling of cytology specimens. Students will not perform fine needle aspiration biopsies on live patients.

Evaluation:
1) Participation and performance during the Surgical Pathology case review and sign-out process, as assessed by the attending faculty (40% of final grade).
2) Participation and performance during the Cytopathology case review and sign-out process, as assessed by the attending faculty (40% of final grade).
3) Performance in the supervised dissection of simple surgical pathology specimen, and the concurrent submission of a thorough and accurate gross dictation for the cases (10% of final grade).
4) Performance of a successful practice, ultrasound-guided fine needle aspiration biopsy using the Phantom apparatus (10% of final grade).

Additional Information:
Prior approval is required. Once approved by department, submit add/drop request to OMSA. Students will have full access to the resident library of Pathology textbooks for the duration of their rotation. In addition, they will be assigned specific readings based on the cases encountered during daily workflow.
**DEPARTMENT OF PATHOLOGY**

**Forensic Pathology**

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<td>Teresa Quintana</td>
<td><a href="mailto:tquintana@salud.unm.edu">tquintana@salud.unm.edu</a></td>
<td>505-272-0590</td>
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**Goals and Unique Aspects:**

The goals for this rotation include understanding the many roles of forensic and autopsy pathology in the hospital and community settings. The rotation affords the student the opportunity to review normal anatomy, observe evisceration and organ dissection techniques, learn how different organ systems are affected by common disease processes, and understand the process and importance of death certification and medicolegal death investigation. This rotation is based in the state of the art New Mexico Scientific Laboratories Building which houses the Office of the Medical Investigator. In addition to being one of the most well-established medical examiner offices and forensic pathology training programs in the country, the OMI operates at the cutting edge of forensic medicine by maintaining its own CT and MR scanners and a close relationship to the Department of Radiology for evaluation of injuries and other pathologies in the postmortem setting. Students will have the opportunity to correlate autopsy pathology with the imaging findings and learn about the use of adjunct radiology in forensic autopsy diagnosis.

**Objectives:**

By the end of this rotation, the medical student will be able to do the following as assessed by daily interactions in morning and afternoon report, the morgue, and other conferences with faculty, residents, and fellows:

1) Explain which cases do or do not fall under the jurisdiction of the OMI and which of those cases require a medicolegal autopsy
2) Begin to formulate a differential diagnosis list and plan for a work-up of an apparent natural death
3) Suggest appropriate scenarios for usage of ancillary studies (radiology, toxicology, etc.)
4) Summarize the differences between a medicolegal and hospital autopsy with particular attention to the issue of consent
5) Define and distinguish between cause, manner, and mechanism of death
6) Compose cause and manner of death statements for natural deaths
7) Describe the basic process of an autopsy

**Responsibilities:**

Observational: Student attends and participates in daily morning report and observes autopsies subsequently performed. When appropriate, the student may visit scenes of death or accompany faculty to courtroom proceedings. Student attends afternoon report and may present the findings from the case observed. Student has the opportunity for increasing participation in the dissection of an autopsy case.
Required: Student is present daily from 8:00am-5:00pm in the Office of the Medical Investigator, unless specifically excused by the supervising pathologist.

Supervision and Teaching:
Amount and type: Close one-on-one supervision and instruction by the faculty, fellows in forensic pathology, and residents in anatomic pathology. Direct supervision is relatively constant in the autopsy suite, where the student spends approximately half the time. The other half is devoted to directed reading (primarily in forensic pathology) and other activities.
Didactic Content: Required to attend morning and afternoon report, biweekly forensic pathology educational sessions, unknown slide conferences, consensus/difficult case conference, journal club, and neuropathology rounds. Staff reviews microscopic slides of selected cases with the student.

Evaluation:
Evaluation will be based on performance in the autopsy room, participation during morning and afternoon report, quality of verbal and written reports, participation in conferences, and application of new knowledge from readings and experience at the OMI. To receive an “outstanding” grade, the student must be evaluated as superior by faculty and give a 15-minute presentation on a topic of their choice, based upon an autopsy that was observed/ performed during the rotation, during the last week. The presentation should be reviewed beforehand with the attending in charge of the particular autopsy case.

Additional Information:
Prior approval is required. Once approved by department, submit add/drop request to OMSA.
Suggested reading:
-- Dolinak, Matshes and Lew Forensic Pathology, Principles and Practice; Elsevier
-- Robbins & Cotran Pathologic Basis of Disease; Saunders
Goals and Unique Aspects:
The Hematopathology elective is intended for senior medical students who are interested in deepening their knowledge of normal and abnormal hematologic processes. The student will become an integral member of the diagnostic hematopathology team tasked with reviewing and interpreting peripheral blood smears, bone marrow biopsies, lymph nodes and tissue samples, and body fluids. The students will be responsible for all aspects of their assigned case interpretations, including correlation between clinical history, CBC data, and microscopic findings, and they will generate interpretive diagnostic reports to be entered into the medical record. At the completion of the elective, the student will have a thorough grounding in the basics of blood and bone marrow interpretation. This elective will be useful for all students who expect to routinely interpret CBC abnormalities in their future practice, and it will be especially attractive to those with interest in hematology and/or pathology.

Objectives:
By the completion of this rotation, the student will:
1. Construct a complete differential diagnosis for routine cases of anemia (especially iron deficiency anemia, anemia of chronic disease, and megaloblastic anemia) and make a definitive diagnosis in cases of anemia using peripheral blood smear morphology, CBC data, clinical history, and other laboratory findings.
2. Perform an accurate differential count on a normal peripheral blood smear.
3. Discriminate between a blast and a reactive leukocyte.
4. Specify common causes of neutrophilia, neutropenia, and thrombocytopenia.
5. Compose accurate, timely, and complete diagnostic reports for peripheral blood smears with minimal faculty guidance.
6. Describe the process of flow cytometric analysis, and identify features of chronic lymphocytic leukemia, acute myeloid leukemia, and acute lymphoblastic leukemia based on patterns of expression of CD19, CD3, CD4, CD5, CD8, CD10, surface immunoglobulin, CD34, and CD33.
7. Summarize the principle of immunohistochemistry and recognize the utility of key antigens (CD20, CD3, and CD34) in tissue diagnosis of hematologic neoplasms.
8. Produce an extended summary report of an interesting case that shows evidence of an integrated diagnostic approach, to include findings related to clinical history, morphology, flow cytometry, and genetics.

Responsibilities:
The student will assume responsibility for the diagnosis of peripheral blood smears submitted to the lab for review by the hematopathology service. The student will gather clinical information from the electronic medical record and/or direct discussion with the clinical team; perform a morphologic review to identify key diagnostic findings; verify the CBC data; and synthesize the available information to create a preliminary diagnostic impression. After presenting the case to and reviewing the case with the attending faculty member, the student will prepare a written report to be reviewed by the faculty member and entered into the patient’s medical record. The student
will communicate the findings to the clinical team in selected cases. According to student interest and ability, students may also assume similar responsibility for selected flow cytometric studies and bone marrow biopsies in the final two weeks of the elective.

**Supervision and Teaching:**
All cases are reviewed as a team that will include the attending faculty member, a hematopathology fellow, and a pathology resident, as well as the rotating medical student. All aspects of the cases will be reviewed together. The faculty member will review and edit the student’s diagnostic reports for accuracy.

**Evaluation:**
The student will be assessed according to the following criteria:
1. Participation and performance during the case review and sign-out process, as assessed by the attending faculty according to a pre-established rubric (50% of final grade)
2. Submission of an exemplary diagnostic patient report, authored by the student, assessed for completeness and accuracy according to a pre-established rubric (10% of final grade)
3. Performance on an end-of-rotation multiple choice question exam based on specific learning objectives (20% of final grade)
4. Creation of a 1,000 word educational write-up of an interesting case, to be assessed according to a pre-established rubric (20% of final grade)

**Additional Information:**
Specific resources will be provided.
DEPARTMENT OF PATHOLOGY
Molecular Pathology and Histocompatibility

Course Number | CLNS 950S | Duration: 4 weeks
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Credit Type | Clinical Elective | ---

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Faculty Evaluator(s) | Devon Chabot-Richards, MD and Mohammad Vasef, MD
Prerequisites: | Yes | All Phase II Clerkships
Accepts Visiting Students | No | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
Accepts Off-Cycle Date requests | No | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
Add/Drop Policy | Add: 30 Days | Drop: 30 Days | Other: | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
Clerkship Contact: | Teresa Quintana | tquintana@salud.unm.edu | 505-272-0590 | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
Prior Approval Required: | No | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |

**Goals and Unique Aspects:**
*Note: Students taking this rotation will spend 2 weeks on Molecular Pathology and 2 weeks on Histocompatibility.*
The Molecular Pathology course will introduce students to the role of molecular testing in patient care. Students will be exposed to a variety of methods of molecular testing in areas including solid tumor and hemato logic oncology and inherited diseases. They will learn the role of the molecular pathologist in test utilization, interpretation, and reporting. This rotation is appropriate for students interested in pathology as well as other specialties that order molecular tests and apply them to patient care such as hematology and oncology and primary care specialties, among others.
The rotation in Histocompatibility (HLA) will equip the student with an overview of the role of this laboratory and the testing it performs, in the workup of the various types of patients and clients it serves. The student will learn the essential administrative, clinical, and technical aspects of solid organ and bone marrow transplantation, disease susceptibility testing, and transfusion support for platelet refractory patients, along with engraftment monitoring for bone marrow transplantation. The student will become familiar with quality assurance, quality control, quality improvement, and ethical issues as they relate to Histocompatibility. The student will become familiar with the various regulatory agencies and requirements that influence this unit of the laboratory.

**Objectives:**
Molecular:
1) Define assay performance characteristics including clinical and analytic sensitivity, accuracy, precision, reportable range of test results, limitations, and reference values where appropriate.
2) Attempt to choose applicable molecular tests in different patient scenarios.
3) Determine how molecular test results affect patient care in different patient scenarios. Discriminate between germline and somatic targets of testing.
4) Discuss the ethical considerations in molecular testing including informed consent, incidental and secondary findings, and the role of genetic counselors in navigating these areas.

HLA:
1) Explain the HLA nomenclature.
2) Describe the organization and polymorphism of the human major histocompatibility complex (MHC), including HLA class I, II, and III genes.
3) Describe the basic function, protein structure, and cell expression of HLA class I and class II gene products.
4) Explain the levels of HLA matching required for solid organ and hematopoietic stem cell transplantation.
5) Given HLA typings for a donor and recipient, provide an interpretation of matching for graft versus host (GVH) and host verses graft (HVG).
6) Describe the clinical presentations and basic mechanisms of solid organ rejection. 7.Explain serology-based and DNA-based HLA typing techniques.
7) Describe the testing platforms used to detect the presence of HLA antibody in a patient’s serum.
8) Given a pre-transplant serum sample, determine which HLA specificities should be: (a) entered into UNOS as avoids, (b) monitored for crossmatch reactivity, and (c) expected to give a negative crossmatch.
9) Given a post-transplant serum sample, determine if the recipient may be at risk for antibody-mediated rejection.
10) Given an HLA typing, provide a risk interpretation for HLA-related diseasesusceptibility.
11) Demonstrate familiarity with standards for histocompatibility and reporting set forth by United Network for Organ Sharing (UNOS), American Society of Histocompatibility and Immunogenetics (ASHI), National Marrow Donor Program (NMDP), and the College of American Pathologists (CAP).
12) Describe the HLA testing algorithm and interpret test results for risk of rejection for solid organ transplantation, including living and deceased donor workups.
13) Describe the HLA test algorithm used for hematopoietic stem cell/bone marrow transplantation, including related and unrelated donors workups; and determine risk of GVHD and HVDG.
14) Interpret chimerism testing results to determine success of engraftment/disease relapse after an allogeneic HSC transplant.
15) Explain the algorithm used to evaluate patients that are refractory to platelet transfusions.
16) Briefly explain quality control, quality assurance, and quality improvement initiatives for histocompatibility laboratory services.
17) Describe the basic operation of a regional organ procurement organization (OPO) and its relationship with the histocompatibility laboratory.
18) Describe some of the major ethical issues in tissue and organ transplantation (e.g., confidentiality, informed consent, living-related and -unrelated organ donation, etc.).

Responsibilities:
Students will shadow molecular technologists in the laboratory. They will read about the diseases and testing they observe during the rotation. They will work with the pathology residents and fellows to interpret test results. They will attend sign-out with the molecular directors. They will attend appropriate meetings as determined by the molecular directors.
The student is expected to:
(1) complete assigned readings and assignments,
(2) interact with HLA directors, HLA supervisor, and HLA bench techs,
(3) attend scheduled meetings with clients,
(4) participate in scheduled CE offerings,
(5) using a provided checklist, tract completion of HLA learning activities, and
(6) notify director of unscheduled absence.

Supervision and Teaching:
The molecular director on service will oversee the student with feedback from the molecular technologists and supervisor as well as pathology residents and fellows. The HLA Director will oversee, guide, and critique the student, incorporating feedback from the HLA Supervisor and bench techs. The student will interact with (a) the HLA Director during case sign-outs and didactics, (b) the HLA Supervisor during case and topic discussions, and (c) bench techs during assay set-up, data analysis, and resulting.

Evaluation:
The molecular director will assess the student based on their interactions during sign out with input from the pathology residents and fellows and molecular technologists. Grading will be based on completion of reading assignments and case discussions. Assessment entails oral case discussions, written submission of independent case studies, and multiple-choice quizzes presented and assessed by the HLA Director.

Additional Information:
The HLA Laboratory Director will meet with the medical student at the beginning of the rotation to discuss objectives and provide a general orientation to the section. Periodically the Laboratory Director will meet with the student to discuss the student's progress toward meeting objectives, and will make suggestions for improvement if problems are noted.
DEPARTMENT OF PATHOLOGY
Transfusion Medicine and Coagulation

Course Number:  CLNS 950T  
Duration: 4 weeks

Credit Type:  Clinical Elective

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Goals and Unique Aspects:
This course will provide senior medical students with a foundation in clinical and laboratory transfusion medicine and coagulation. The intent of the course is to prepare the student for residency responsibilities in transfusion, focusing on practical topics including:

1) understanding appropriate therapeutic use of blood components for different patient populations
2) necessary steps in ordering and administering blood components
3) recognizing the risks and benefits of transfusion, and
4) recognizing, diagnosing, and managing adverse events related to transfusion.

The student will also have the opportunity to participate in the Therapeutic Apheresis service, learning about apheresis technology and use of therapeutic apheresis in a variety of clinical settings. This rotation provides a foundation in transfusion and hemostasis necessary for virtually all specialties, but will be of particular interest for those students interested in anesthesia, hematology/oncology, surgery, obstetrics, or pathology.

Objectives:
1) Describe the steps for routine pre-transfusion compatibility testing, including ABO/Rh typing, RBC crossmatching, RBC antibody screens and antibody identification (assessment: direct observation, written reports, directed discussion).
2) Identify the composition and transfusion indications for the following four blood components: RBCs, plasma, platelets and cryoprecipitate (assessment: direct observation, directed discussion).
3) Specify the indications for the following blood component modifications: leukoreduction, irradiation, washing, and volume reduction (assessment: direct observation, directed discussion).
4) Interpret the results of the following coagulation screening tests, and discuss potential transfusion therapies based on their results: prothrombin time, partial thromboplastin time, platelet count, fibrinogen levels, ROTEM (assessment: direct observation, written reports, directed discussion).
5) Identify the presentation of acute transfusion reactions, and be able to distinguish between these causes based on clinical presentation and laboratory evaluation (assessment: direct observation, written reports, directed discussion).
6) Summarize the principles of apheresis technology, including anticoagulation, centrifugation, and appropriate fluid replacement for various clinical indications.
7) Demonstrate knowledge of indications for therapeutic apheresis.

Responsibilities:
Students will perform as junior housestaff on this rotation, with duties to include real-time consultation for blood component approval, clinical and laboratory evaluation of transfusion reactions, coagulation consultation for massive transfusion protocols, and report generation for immunohematology studies and ROTEM panels that will...
be entered in the patient’s record. The student will also be provided with opportunities to perform histories and physical examinations on therapeutic apheresis patients and develop therapeutic plans for these patients (including writing progress notes, ordering and interpreting laboratory studies). According to student interest and abilities, there is additional opportunity for participation in the Special Coagulation laboratory at TriCore, which would involve evaluation of coagulation test utilization, test interpretation, and report generation, and clinicopathologic correlation of laboratory findings with the patient’s history and presentation. At the end of the rotation, the student will deliver a 30 minute presentation on either a review of a current topic in transfusion/hemostasis/apheresis or an in depth patient history review.

**Supervision and Teaching:**
Medical students will be on service with an attending transfusion service physician, who will provide direct supervision. In most rotations, the student will often be on service with residents and/or a transfusion medicine fellow as well. The attending transfusion medicine physician will review and edit the student’s diagnostic reports and patient progress notes for accuracy.

**Evaluation:**
The students will be assessed according to the following criteria:
- 50%: Direct observation and evaluation of written service reports presented to the attending transfusion service physician.
- 25%: Directed discussion during transfusion medicine attending didactic sessions.
- 25%: Final rotation presentation.

**Additional Information:**
Specific resources will be provided to assure that the student meets the learning objectives. These resources include a transfusion medicine reference library, selected relevant literature and guideline statements in transfusion medicine/apheresis/hemostasis, and didactic lectures provided by the transfusion service attendings.
**DEPARTMENT OF PATHOLOGY**

Advanced Topics in Pathology

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**# of Students per Block**

1 or 2 (based on availability)

**Faculty Evaluator(s)**

Devon Chabot-Richards, MD

**Prerequisites:**

Yes - All Phase II Clerkships

**Accepts Visiting Students**

No

**Accepts Off-Cycle Date requests**

Yes - with department permission

**Add/Drop Policy**

Add: 45 Days  
Drop: 45 Days  
Other:

**Clerkship Contact:**

Teresa Quintana  
tquintana@salud.unm.edu  
505-272-0590

**Prior Approval Required:**

YES - Must submit Add Form after Phase III schedules are released

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**Goals and Unique Aspects:**

This course is intended to provide an opportunity for studies in pathology beyond the scope of introductory electives offered elsewhere in the course catalog. Only students with previous exposure to pathology training (and/or strong demonstrated interest in pathology) will be accepted. The student will gain broad exposure to the multiple sub-disciplines such as neuropathology, clinical chemistry, cytogenetics, informatics, as well as surgical pathology and cytopathology. The time spend in each area can be adjusted based on student interest and experience.

**Objectives:**

1) Recognize key histologic features of neoplasms of the central nervous system, and differentiate key glial neoplasms based on morphology and immunohistochemistry.
2) Interpret a Levey-Jennings quality control ploy and recommend corrective action.
3) Deconstruct and describe the components of a typical HL7 message.
4) Produce a karyotype and FISH data using standard laboratory techniques, starting from a submitted specimen.
5) Perform gross dissections of simple surgical specimens (e.g. appendices, gallbladders) with faculty supervision.
6) Develop differential diagnoses for surgical pathology and cytopathology cases during slide preview sessions.
7) Explain the core cytologic features that are suggestive of malignancy.

**Responsibilities:**

Students will be responsible for interpreting cases in their assigned areas of the laboratory. They will receive primary data, correlate with available clinical information, and confer with the attending pathologist to finalize interpretations and diagnoses that will be communicated to the clinical teams.

**Supervision and Teaching:**

All cases are reviewed as a team that will include the attending faculty member, a pathology resident, as well as the rotating medical student. All aspects of the cases will be reviewed together. The faculty member will review and edit the student's diagnostic reports for accuracy.

**Evaluation:**

1) Participation and performance during the case review and sign-out process, as assessed by the attending faculty (70%).
2) Submission of an exemplary diagnostic patient report, authored by the student, assessed for completeness and accuracy (10%).
3) Creation of a 1,000-word educational write-up of an interesting case (20%).

**Additional Information:**
Prior approval is required. Once approved by department, submit add/drop request to OMSA. As this rotation is intended for advanced students, discussion with the faculty coordinator and others in the department will be necessary before a student is accepted. The specific goals and objectives may also be tailored based on student experience and interest. Prior approval is required, please email/call clerkship contact.
**DEPARTMENT OF PEDIATRICS**

**Ambulatory Pediatrics at Young Children’s Health Center**

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**Faculty Evaluator(s):** Gillian Harris, MD

**Goals and Unique Aspects:**

Clinical experience in a community-based pediatric setting. Exposure to family-centered services in low-income community of southeast Albuquerque. There is a large immigrant population. Exposure to multicultural aspects in medical care. Integration of primary care and behavioral health in a pediatric setting, especially for children and youth with special health care needs. The majority of the clinic’s patients are primarily Spanish speakers. **Learners must be able to provide patient care in Spanish.**

**Objectives:**

Learners will be able to: state advantages of an integrated clinical medicine – behavioral health approach in pediatrics; discuss economic and social problems associated with poverty and immigrant status; deal with common pediatric outpatient problems, such as upper and lower respiratory tract infections, urinary tract infections, diarrheal illness, etc.; handle common chronic pediatric conditions, such as asthma, attention deficit disorder, seizure disorder, etc., specifying diagnostic and treatment plans for each condition and means of supporting other family members as well as the affected member; be acquainted with community efforts to improve the health and well-being of children and families in the Southeast Heights; and state how these might be generalized to other populations.

**Responsibilities:**

Observational: Observe multi-agency medical and family services. Clinical: Interview and evaluate/assess health related problems of six to ten patients per day under direct supervision of faculty. Research: Small scale clinical or community project strongly encouraged. Teaching: May participate in educational activities provided by faculty in neighborhood schools.

**Supervision and Training:**

Amount and type: Supervised by pediatric faculty. Didactic content: Reading materials, with reserve materials available online through HSLIC. Student can arrange schedule as desired since office hours are 8am-7pm Mon/Tue/Wed/Thurs. Friday hours are from 8am-5pm and Saturday hours are 9am to 2pm. No night call.

**Evaluation:**

Based on direct observation, presentations, and clinical performance. Criteria for outstanding grade: Consistently perform at an outstanding level in all areas, using PRIME. Enthusiasm, ability to relate with patients and their families and with staff.

**Additional Information:**

*APPROVAL REQUIRED*

Prior approval is required. Once approved by department, submit add/drop request to OMSA. Prior approval is required from Dr. Gillian Harris: 505-272-9242, gharris@salud.unm.edu. Availability is based on resident schedule for certain blocks. Please contact the Pediatric Clerkship Contact for more information.
DEPARTMENT OF PEDIATRICS

Pediatrics Sub-Internship at UNMH

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<th>CLNS 677</th>
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<th>Faculty Evaluator(s)</th>
<th>Christal Chow, MD</th>
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<tr>
<th>Clerkship Contact:</th>
<th>Elizabeth Sauve</th>
<th><a href="mailto:pediatricclerkship@salud.unm.edu">pediatricclerkship@salud.unm.edu</a></th>
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Goals and Unique Aspects:
Direct responsibility for diagnosis and treatment of hospitalized pediatric patients (under supervision of residents and faculty attending physicians).

Objectives:
To assess the nature and severity of illness in a child through history, physical examination, and laboratory examinations and to plan for and carry out that patient’s care.

Responsibilities:
Observational: During rounds and teaching conferences, the student observes the approach of others to diagnose and manage patients for whom the student is not directly responsible.
Clinical: Patient contact is extensive. Students are expected to take ownership of 2-5 patients, and act as that child’s primary contact with pediatric team. Students will spend 3 weeks on days and 1 week on nights.
Teaching: The student is responsible for one small group teaching session related to his/her patients. Student is also responsible for educating patients/parents.

Supervision and Training:
Amount and type: Supervision by upper level resident (PL II, III) and faculty attending. Upper level resident closely supervises student, reviews and countersigns all notes and orders written by the student. Faculty reviews history, physical, and progress notes and will directly observe patient presentations. Didactic content: Attend inpatient teaching sessions while on days and nights; Morning Report Tuesday and Wednesday; Thursday Grand Rounds; daily x-ray rounds; Morbidity & Mortality conference monthly.

Evaluation:
Based on evaluations submitted by supervising attendings. A sub-intern who performs at an OUTSTANDING level will demonstrate excellent patient care and an enthusiastic and motivated attitude for working with children and families. Based on the PRIME Evaluation System.

Additional Information:
Availability is based on resident schedule. Certain blocks may be restricted. Visiting student availability based on UNM student schedule and permission of Pediatric Program Director. Students should contact the Pediatric Clerkship Contact (PediatricClerkship@salud.unm.edu) and the Sub-I Rotation Director, Dr. Christal Chow (CChow@salud.unm.edu), two weeks prior to block for orientation materials.
DEPARTMENT OF PEDIATRICS
Pediatric Cardiology

Goals and Unique Aspects:
To provide a well-rounded introductory experience to the field of pediatric cardiology.

Objectives:
Acquire basic knowledge of congenital and acquired heart disease in infants, children, and adolescents, and of the pathophysiology associated with these problems. Learn to evaluate cardiovascular system by history and physical examination, to distinguish innocent from pathologic heart murmurs. Learn to interpret pediatric electrocardiograms. Be introduced to advanced cardiovascular diagnostic modalities (echocardiography, exercise stress testing, and diagnostic and therapeutic cardiac catheterization).

Responsibilities:
Observational: Observe evaluation, diagnosis, and management of infants, children, and adolescents with suspected heart disease; uses and limitations of advanced cardiovascular diagnostic modalities. Clinical: Evaluate pediatric cardiology inpatients and outpatients, write progress notes, consult, and interpret ECG. Observe echocardiograms, exercise stress test, and cardiac catheterizations. Research: None. Teaching: Phase II students accompany us to clinic and you may have the opportunity to teach them. Required: Complete assigned reading in references provided at beginning of rotation. Attend cardiosurgical care conference and division care conferences.

Supervision and Training:
Amount and Type: Direct supervision by attending cardiologist. Didactic content: numerous sites on internet, faculty PowerPoint presentations at the Children’s Hospital Heart Center website and on New Innovations.

Evaluation:
Criteria for Outstanding Grade: High level pediatric cardiology knowledge at end of rotation, determined subjectively by the attending cardiologists. High motivation and initiative. Excellence in patient care, evidence of good clinical judgment, professional and courteous interaction with faculty, staff, patients, and families.

Additional Information:
Prior approval is required. Once approved by department, submit add/drop request to OMSA. This course will accept visiting students and scheduling can be flexible. Permission of Program Director and Course Director needed for visiting students. Availability is based on resident schedule for certain blocks. Please contact the Pediatric Clerkship Coordinator for more information. The student has the opportunity to see many patients with both pathologic and innocent heart murmurs. The student will have access to reference textbooks to borrow during the rotation. 45-day add/drop policy will be strictly enforced.

Course Number | CLNS 678 | Duration: 4 weeks
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Credit Type | Clinical Elective | |
Block Number | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 |
X = Offered in Block | X | X | X | X | X | X | X | X | X | X | X | X |
# of Students per Block | 1 | |
Faculty Evaluator(s) | Anne Greene, MD | |
Prerequisites: | Yes | All Phase II Clerkships | |
Accepts Visiting Students | Yes | Domestic MD and Domestic DO | |
Accepts Off-Cycle Date requests | Yes - with department permission | |
Add/Drop Policy | Add: 45 Days | Drop: 45 Days | Other: |
Clerkship Contact: | Elizabeth Sauve | pediatricclerkship@salud.unm.edu | 505-272-1088 | | | |
Prior Approval Required: YES - Must submit Add Form after Phase III schedules are released

*APPROVAL REQUIRED*
DEPARTMENT OF PEDIATRICS
Pediatric Genetics and Dysmorphology

Course Number: CLNS 680
Duration: 4 weeks
Credit Type: Clinical Elective

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# of Students per Block: 1 or 2 (based on availability)
Faculty Evaluator(s): Randall Heidenreich, MD and Tom Cushing, MD
Prerequisites: Yes All Phase II Clerkships
Accepts Visiting Students: Yes Domestic MD and Domestic DO
Accepts Off-Cycle Date requests: Yes - with department permission
Add/Drop Policy: Add: 45 Days Drop: 45 Days Other:
Clerkship Contact: Elizabeth Sauve pediatricclerkship@salud.unm.edu 505-272-1088

Goals and Unique Aspects:
Integrated experience in clinical genetics. Students will evaluate patients with suspected genetic disease including patients with congenital malformations and inborn errors of metabolism. Students will gain experience in the use of clinical and laboratory tools in the analysis of genetic disorders. This will include the application of DNA analysis to clinical care. At the end of the rotation, the student will have expanded their clinical ability to recognize congenital malformations and to interpret biochemical and molecular laboratory tests.

Objectives:
Be able to take a detailed genetic history; perform a clinical examination for dysmorphic features; develop a detailed understanding of genetic mechanisms; and utilize computerized genetic database resources.

Responsibilities:
Observational: With the assistance of the genetics staff, learn how to conduct detailed genetic examinations and history. Clinical: participate in weekly scheduled genetics clinic and consultations (usually 3-5 per week). Research: Access web-based and other resources for diagnosis and testing of genetic disorders in the patients. Teaching: Educate patient and family as appropriate.

Supervision and Training:
Amount and type: Shared by three clinical genetics faculty and staff: Randall Heidenreich, MD, Tom Cushing, MD, and Joanne Milisa Drautz, MS, Genetic Counselor. Make daily rounds; participate in clinics and weekly clinical conference.
Attend twice-monthly metabolic genetics clinics at Carrie Tingley Hospital. Didactic content: Designated reading. Responsible for library searches as appropriate. Attend lectures and seminars as appropriate.

Evaluation:
Criteria for outstanding grade: Assumes responsibility for follow-up and counseling of all patients he/she is involved with. Does independent reading, with evidence of effective use of the literature for problem solving in clinical settings. Integrates basic biologic mechanisms with clinical data. Is aware of all patients on the inpatient services who represent problems in morphogenesis and/or hereditary disorders.

Additional Information:
*APPROVAL REQUIRED* Once approved by department, submit add/drop request to OMSA. Availability is based on resident schedule for certain blocks. Please contact the Pediatric Clerkship Coordinator for more information.
DEPARTMENT OF PEDIATRICS
Pediatric Hematology and Oncology

Course Number: CLNS 681  
Duration: 4 weeks

Credit Type: Clinical Elective

Goals and Unique Aspects:
Introduce the student to issues relating to clinical management, in both the inpatient and outpatient settings, of childhood cancers and hematologic disorders: diagnostic work up, therapies, supportive care, emotional support, follow-up of late effects and end-of-life-issues, as well as general hematology work-ups and comprehensive hemophilia care.

Objectives:
Recognize common types of childhood cancers and hematologic disorders; develop some expertise in taking focused histories and determining appropriate diagnostic work ups. Become familiar with the process of choosing and instituting therapy and special supportive services for families/patients dealing with childhood cancer. See the importance of cooperative group trials in clinical oncology.

Responsibilities:
Multidisciplinary team approach to management of childhood cancers and hematologic disorders: medical, nursing, pharmacy, social work, and child life. Become familiar with diagnostic and therapeutic procedures, central venous catheters, and the administration of chemotherapy. Clinical: Two weeks on the inpatient service and two weeks in the outpatient clinic. While on inpatient service, round daily on patients with attending, coordinate care plan and write daily progress notes on assigned patients. Also attend any treatment or family conferences in the outpatient clinic setting, see patients presenting for follow up under the supervision of an attending, observe diagnostic and therapeutic procedures. Will also review lab results, radiographic studies, and peripheral blood and bone marrow smears with attending faculty. Required attendance at monthly pediatric tumor board. Research: Present seminar at the end of the course. Teaching: Patient education and outcome evaluation.

Supervision and Training:
Amount and type: Drs. Shirley Abraham, John Kuttesch, Koh Boayue, Jodi Mayfield, and Amy Cruickshank are the responsible faculty. Close supervision and teaching will also be given by the hematology/oncology nurses and social workers. Didactic content: Small didactic sessions conducted by the inpatient attending at least once a week; clinic patient care discussions; ward rounds; selected reading.

Evaluation:
Criteria for outstanding grade: Based on evaluation by oncology team: excellent fund of knowledge consistently applied to patient care; mastery of pertinent data combined with excellence in reporting; demonstration of independent thinking and initiative.

Additional Information:
Prior approval is required. Once approved by department, submit add/drop request to OMSA. Availability is based on the needs of the program.

*APPROVAL REQUIRED*
on resident schedule for certain blocks. Please contact the Pediatric Clerkship Coordinator for more information. Visiting students require prior approval of Program Director and Rotation Director. This course may be adapted to count as a sub-internship with prior approval from Rotation Director and Student’s Match Advisor. In such cases, the course will be a 4-week inpatient experience, and special coordination with School of Medicine will be required.
DEPARTMENT OF PEDIATRICS
Adolescent Medicine

Course Number: CLNS 683  
Duration: 4 weeks

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# of Students per Block: 1

Faculty Evaluator(s): Mary Ramos, MD, MPH and Monique Vallabhan, DNP

Prerequisites: Yes  
All Phase II Clerkships

Accepts Visiting Students: No

Accepts Off-Cycle Date Requests: Yes - with department permission

Add/Drop Policy: Add: 45 Days  
Drop: 45 Days  
Other:

Clerkship Contact: Elizabeth Sauve  
Michelle Widener  
pediatricclerkship@salud.unm.edu  
MiWidener@salud.unm.edu  
505-925-0516

Prior Approval Required: YES - Must submit Add Form after Phase III schedules are released

Goals and Unique Aspects:
Useful for anyone who is going into Primary Care or interested in adolescents. Exposure to different venues delivering adolescent health care, e.g. clinics, schools, vocational venues, and to common adolescent health problems, e.g. acne, STIs, contraception, depression, anxiety. Gain understanding of the basic physiology and psychology of adolescence.

Objectives:
Perform a competent history and physical exam on a teenager. Be able to develop appropriate medical treatment plans for common adolescent health problems.

Responsibilities:
Observational: At several different adolescent psychiatry clinics and behavioral health sites. Clinical: Opportunity to see and treat teenagers at a variety of different clinical sites. Research: Updated review of an adolescent topic of choice. Teaching: Telehealth presentation on adolescent topic. Required: Attend scheduled clinics, e.g. school-based, sports medicine, adolescent dermatology, Young Women’s Health Clinic, YCHC gynecology clinic, Job Corps, Healthy & Fit Clinic.

Supervision and Training:
Amount and type: Supervision by a variety of different adolescent medicine and adolescent psychiatry experts, including Drs. Thomas (STI Clinic), Vallabhan (Health & Fit Clinic), Smidt (Pediatric/Adol Derm Clinic), McGrew and Cass (Sports Medicine), as well as Jen Robinson (Pediatric/Adol Gyn) and Jane Epstein, Shawn Blaisdell, and Jennifer Duvall at school-based health clinics. Didactic content: Provided readings, self-directed readings, Pediatric/Adolescent Medicine conferences, where appropriate.

Evaluation:
Criteria for outstanding grade: Evaluation based on PRIME. High degree of motivation and interest based on direct observation and clinical performance. Punctual attendance at all clinics and sessions.

Additional Information:
Prior approval is required. Once approved by department, submit add/drop request to OMSA. This is an informal exposure to the field of Adolescent Medicine. There is ample time for reading and reflection. Travel to local clinics is required. Visiting students must be approved by Program Director and Course Director. Availability is based on resident schedule for certain blocks. Need to have completed all Phase II Clerkships; if not, will need permission of Course Director. Contact the Pediatric Clerkship Coordinator for more information.

*APPROVAL REQUIRED*
Pediatric Intensive Care Unit

Goals and Unique Aspects:
Medical students who rotate through the PICU will gain the knowledge, skills, and attitudes needed to recognize, evaluate, and initiate care for patients with disease processes that require pediatric critical care management. They will gain an understanding of the pathophysiology processes as they apply to critical illness. They will develop an appreciation and comfort level with the multi-disciplinary nature of pediatric critical care. The medical students will develop strategies for delivering multi-disciplinary care and for problem solving necessary for the care of critically ill children.

Objectives:

Responsibilities:
The medical students will actively participate in bedside patient care in the PICU. They will be responsible under the supervision of the senior pediatric resident, PICU nurse practitioner, and PICU attending for up to 2 initially, at maximum 3, patients in the PICU. They will be involved in the initial admission and ongoing daily care of their patients. This will include presenting the patient on daily rounds with a working assessment and ongoing plan of care, following-up on patients’ plans of care, ongoing reassessments, and involvement in patient/family discussions as to patient status. They will cover the PICU for 3 weeks on day shift (6:30 AM to 6:00 PM) and one week of night float (5:30 PM to 7:00 AM). They will have at least one day off per week and one weekend off per month. They will be expected to attend resident school (Pediatric lecture series) and Pediatric Grand Rounds every Thursday afternoon.

Supervision and Training:
PICU attendings are in the hospital 24 hours a day and will provide direct supervision for the care of all patients in the PICU. The senior pediatric resident will also provide direct supervision of the medical student. Medical students are expected to take advantage of multiple educational opportunities to enhance their own educational needs. Teaching will occur on the bedside family-centered rounds and in small group discussions outside of rounds. Critical care textbooks will be available in the PICU. Professionally pod-cast lectures for resident education are available through the Society for Critical Care Medicine and will be available to the medical students. The patients in the PICU require care from multiple disciplines and as such the medical students will have the opportunity to learn from other pediatric subspecialists - surgical and medical - and other health care professionals - occupational therapists, physical therapists, speech therapists, nutritionists, pharmacists, respiratory therapists, nurse practitioners, bedside nurses, etc. The medical students will also be expected to go to the medical literature to learn more about aspects of their patients.

Evaluation:
Based on the PRIME Evaluation System.

Additional Information:

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<td>Senan Hadid, MD</td>
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<td>Clerkship Contact:</td>
<td>Elizabeth Sauve <a href="mailto:pediatricclerkship@salud.unm.edu">pediatricclerkship@salud.unm.edu</a> 505-925-0516</td>
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*See Additional Info*
Prior approval is required. Once approved by department, submit add/drop request to OMSA. Availability is based on resident schedule for certain blocks. Blocks 1-5 are reserved for Pediatric match students only, one student per block. Blocks 6-13 require prior approval of Course Director for any student not matching in Pediatrics. Visiting students with permission of Course Director and approval of Residency Program Director. Highest priority given to medical students with interest in pediatrics, emergency medicine, anesthesia, family medicine, or pediatric neurology. Need to have completed all Phase II clerkships; if not, will need permission of Course Director. Contact the Pediatric Clerkship Coordinator for more information. Students will contact Clerkship Coordinator 2 weeks prior to rotation for orientation material.
Pediatric Infectious Disease

Goals and Unique Aspects:
Provide an approach to problem solving and management of pediatric infectious disease and an overview of careers in pediatric infectious diseases. Primary experience is in the inpatient wards, with occasional outpatient exposure. Students may have the option of visiting the microbiology laboratory, though this is not guaranteed. Students will have an opportunity to work with children with a variety of infections, as well as with an immunocompromised population.

Objectives:
Understand basic pediatric infectious disease processes and immunization practice. Learn to provide consultative pediatric care, organize and write a teaching review, and choose the most appropriate antibiotic for empiric therapy of specific organ system infections. Understand basic antimicrobial chemotherapy.

Responsibilities:
Observational: Observe/participate with faculty, residents, and fellows in direct and consultative care. Student will function as a Sub-I with the same clinical responsibilities as residents. Research: May participate in written reviews or case reports. Teaching: Attend pediatrics and pediatric infectious disease conference. May be asked to provide an oral and/or written literature search. Required: Perform, write, and present consults. Attend all pediatric weekly teaching conferences. Participate in problem-based case analysis and in clinical microbiology interactive teaching. Students will be expected to give a 10-15 minute presentation at the end of the rotation to faculty on a topic of their choosing. Optional: No weekends, no call is required.

Supervision and Training:
Amount and type: Supervised by faculty, occasional PL2/PL3 or adult ID fellow. Didactic content: Provided by Department of Pediatrics, ID Teaching Conferences (1 hour/week), ID rounds (daily Mon-Fri), additional didactic sessions.

Evaluation:
Based on clinical/written (e.g. consults) skills, verbal reports, attendance, completion of reports and in-depth study. No examination. Criteria for outstanding grade: Commitment to excellent patient care and scholarly activity, quality self-direction and independent study, excellent clinical skills. Performance at the level of consistent reporter and interpreter, starting to manage.

Additional Information:
Prior approval is required. Once approved by department, submit add/drop request to OMSA. Pediatric Infectious Disease has a highly variable patient load, which requires high motivation and self-directed independent study skills. All rotations subject to division approval and dependent upon resident and faculty schedules. Please contact the Pediatric Clerkship Coordinator for more information. Visiting students may be accepted with special permission from Program Director and Pediatric Infectious Disease faculty.
Newborn Intensive Care Unit

Goals and Unique Aspects:
Attend all high risk deliveries. Learn intensive care management of neonates: fluids, nutrition, ventilator management, infectious diseases of the newborn; learn physiology and embryology. Family-centered approach to intensive care.

Objectives:
To provide excellent care for the sick newborn and understand pathophysiology of newborns. Understand family dynamics during this time.

Responsibilities:
Observational: Rounds, procedures (involved in patient care as well as observation), labor & delivery. Clinical: Patient care and management. Perform procedures such as intubations, resuscitation, umbilical catheters. Research: Clinical studies as desired. Teaching: Give one talk to group; participate in discussions on rounds. Required: No night call, only daytime shifts (intern equivalent).

Supervision and Training:
Amount and type: By senior faculty, fellows and resident. Didactic content: Read, attend lectures.

Evaluation:
Based on daily involvement with attendings, fellows, and resident. Criteria for outstanding grade: Greatly increase fund of knowledge. Provide excellent care. Work well with team.

Additional Information:
The Phase III student in the NICU functions as a sub-intern and has direct responsibility for patient care and delivery room experience. Excellent rotation for those interested in pediatrics, family medicine, obstetrics, or anesthesia. Availability is based on resident schedule for certain blocks. Drop policy is strictly enforced. 45-day notification is required; no exceptions made. Contact the Pediatric Clerkship Coordinator for more information.

Course Number | CLNS 687 | Duration: 4 weeks
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Credit Type | ICU | 
Block Number | 1 2 3 4 5 6 7 8 9 10 11 12 13
X = Offered in Block | X X X X X X X X | 
# of Students per Block | 1 or 2 (based on availability)
Faculty Evaluator(s) | Dawn Novak, MD
Prerequisites: | Yes All Phase II Clerkships
Accepts Visiting Students | Yes Domestic MD
Accepts Off-Cycle Date Requests | No
Add/Drop Policy | Add: 45 Days Drop: 45 Days Other: 
Clerkship Contact: | Elizabeth Sauve PediatricClerkship@salud.unm.edu 505-272-3907
Prior Approval Required: | No

*APPROVAL REQUIRED*
Pediatric Gastroenterology

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<td>Kalyan Parashette, MD and Jacqueline Fridge, MD</td>
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Accepts Visiting Students: No
Accepts Off-Cycle Date requests: No

Add/Drop Policy: Add: 45 Days | Drop: 45 Days | Other: |
Clerkship Contact: Elizabeth Sauve | pediatricclerkship@salud.unm.edu | 505-925-0516 |
Prior Approval Required: YES - Must submit Add Form after Phase III schedules are released

Goals and Unique Aspects:
Understand the pathogenesis, clinical presentation, differential diagnosis, diagnostic work-up, and treatment of common pediatric gastroenterology problems. Pediatric GI rotation provides a combination of inpatient, ambulatory, and endoscopy exposure. It also provides intense and direct access to faculties.

Objectives:
The student will be able to differentiate between normal and pathologic states of the GI tract. The student will understand diagnosis and management of common GI conditions in children and recognize which require further evaluation.

Responsibilities:
The student will take competent and complete history and perform physical exam for pediatric patients with chief complaints of a GI nature. The student will prepare a (patient-based) presentation on a clinical problem, reviewing literature, summarizing recommendations, and applying them to the patient at hand. Direct observation of GI procedures with Pediatric GI faculty.

Supervision and Training:
The attending makes rounds daily. The student presents cases, formulates diagnosis and plan management under attending supervision. Teaching is provided through direct patient care, bedside teaching, small-group discussions, and didactic sessions. Didactic sessions on major topics in Pediatric GI will be given frequently throughout the elective period. The student will present a short talk on a GI topic of interest. The student will participate in the department teaching activities including attending rounds, grand rounds, and morning rounds. The student will also attend the monthly Pediatric GI-Pathology Conference, Pediatric GI- Radiology Conference, Pediatric GI research conference, and Pediatric GI journal club.

Evaluation:
Student rotating in Pediatric Gastroenterology are evaluated on the following criteria:
Active participation in the daily care of patients, daily presentations during rounds, history and physical examination skills, ability to generate appropriate differential diagnoses, documentation in the electronic health record, ability to work with all members of the healthcare team, communication skills, professionalism, and attendance.

Additional Information:
Prior approval is required. Once approved by department, submit add/drop request to OMSA. Availability may be dependent on resident scheduling. Final schedule approval will not be available until after July 1st each year.

DEPARTMENT OF PEDIATRICS

The University of New Mexico School of Medicine 2019-2020 Phase III Clerkship Catalog
The UNM School of Medicine reserves the right to make changes to any of the policies, procedures, codes, standards, requirements, or services included in this handbook as it deems necessary, with changes applicable to all students in attendance at the SOM Doctor of Medicine program. Please visit the OMSA website to obtain a copy of the most current 2019-2020 Phase III Clerkship Catalog.
Pediatric Nephrology

Goals and Unique Aspects:
To expose the student to clinical consultative pediatric nephrology.

Objectives:
Gain a detailed knowledge of renal anatomy, physiology, and pathophysiology. Take a competent and complete history and physical exam for pediatric patients with renal disease. Develop clinical skills and clinical reasoning necessary to make pediatric nephrology specific assessment and differential. Direct observation of Nephrology procedures with Pediatric Nephrology faculty. Participation in the process of making diagnostic and therapeutic decisions critical to good patient care.


Responsibilities:
Each student will be required to do a 20-30 minute PowerPoint presentation at the end of their rotation that will be factored into their grade.

Supervision and Training:
Amount and Type: Daily rounds with Nephrology faculty and Pediatric residents. Didactic Content: Formal curriculum, self-directed reading, case discussions, research conferences.

Evaluation:
Based on direct observation, presentations, and clinical performance. Criteria for outstanding grade: Consistently perform at an outstanding level in all areas, using PRIME. Enthusiasm, ability to relate with patients and their families and with staff.

Additional Information:
Prior approval is required. Once approved by department, submit add/drop request to OMSA. Requires permission of the Pediatric Nephrology Course Director. Availability may be dependent on resident scheduling. Final schedule approval will not be available until after July 1st each year.
Goals and Unique Aspects:
Provides a comprehensive experience caring for special needs children and children and adolescents recovering from traumatic brain injury and other disabling conditions, integrating the medical and psychosocial aspects of their care. Understand the neurologic basis of rehabilitation. Interact with multidisciplinary teams, the educational system, and community resources.

Objectives:
Recognize and contract the developmentally delayed child/infant to known normal growth and development markers. Perform complete histories and physicals on special needs children (inpatient and outpatient), and formulate treatment/rehabilitative plans. Recognize the impact of a chronic handicapping condition on child, family, and community.

Responsibilities:
Observational: Perform histories and physicals in clinics (Peds, rehab, multidisciplinary); participate in team rehab conference; inpatient treatment sessions in PT, OT, SLP, recreation, special education, family conferences. Clinical: At least one new CP, pediatric or rehabilitation evaluation, complete history and physical with formulation of treatment plan. Research: Individually determined. Required: Attend multidisciplinary clinics and at least one rehab conference; visit at least one community program; follow two or more rehab inpatients through therapies. Participate in outpatient clinics. Optional: Pediatric Orthopaedic Clinics, Resident Teaching Conferences, IRA, Pediatric Neurology Clinics, observe PT, OT, SLP, O&P. Participate in neurobehavioral clinic.

Supervision and Training:
Amount and type: Shared by pediatric physiatrist and general pediatricians. Didactic content: Reading lists provided, resident lectures, weekly rehabilitation lecture series.

Evaluation:
Based on clinical observations by faculty. Criteria for outstanding grade: Meet goals and objectives with enthusiasm and demonstrate excellence in skills and comprehension of materials.

Additional Information:
*APPROVAL REQUIRED*
Once approved by department, submit add/drop request to OMSA. Availability is based on resident schedule for certain blocks. Please contact the Pediatric Clerkship Coordinator for more information.
DEPARTMENT OF PHYSICAL MEDICINE AND REHABILITATION
Physical Medicine and Rehabilitation

Course Number | CLNS 950L | Duration: 4 weeks
--- | --- | ---
Credit Type | Clinical Elective |  
Block Number | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 |  
X = Offered in Block | X | X | X | X | X | X | X | X | X | X | X | X |  
# of Students per Block | 4 |  
Faculty Evaluator(s) | W. Evan Rivers, DO, Mary Bryant, MD, and John Henry Sloan, MD |  
Prerequisites: | Yes | All Phase II Clerkships |  
Accepts Visiting Students | Yes | Domestic MD, Domestic DO, and International |  
Accepts Off-Cycle Date requests | Yes - with department permission |  
Add/Drop Policy | Add: 30 Days | Drop: 30 Days | Other: |  
Clerkship Contact: | Dyanna Monahan | DMonahan@salud.unm.edu | 505-925-7569 |  
Prior Approval Required: | No |  

Goals and Unique Aspects:
This elective will provide a broad exposure to the field of Physical Medicine and Rehabilitation, where students will help patients learn to walk, move, think and live again after devastating injuries. Experience will include acute inpatient rehabilitation, many different areas of outpatient rehabilitation, and will allow exposure to physical therapy, occupational therapy, and speech and language pathology in acute hospitalization, acute inpatient rehabilitation hospitalization, and outpatient settings.

Objectives:
- Describe the medical field of Physical Medicine and Rehabilitation.
- Explain the clinical roles of at least 10 rehabilitation professions and how they are integrated into a team approach.
- Outline the continuum of medical care. Describe the role of rehabilitation professionals throughout the continuum of medical care.
- State the purpose of consulting Physical Therapy, Occupational Therapy, and Speech and Language Pathology in the acute inpatient and outpatient clinical settings.
- Express the concept of a “functional goal”, and incorporate the concept into 3 patients’ care plans.
- Discuss the factors that determine success in pursuit of functional goals.
- Express the importance of interprofessional teams in physical medicine and rehabilitation.
- Explain IPEC (Interprofessional Education Collaborative Core Competencies)

Responsibilities:
- Focusing on improving important life activities for patients and caregivers
- Addressing physical structures, but also physical function, cognitive function, psychological strategies, and behavior modification
- Helping people with serious limitations recover when possible, maximize well-being despite serious limitation, and prevent further injury
- This rotation requires extensive work with interdisciplinary team

Supervision and Training:
Each week will be spent at a location (see below):
- 1 week - University of New Mexico Rehabilitation Services (inpatient and outpatient therapy)
- 1 week - Lovelace Rehabilitation Hospital (rehabilitation and occupational medicine)
- 1 week - Veteran's Administration
- 1 week - Sports and Spine plus Neuromuscular

Overall supervision of the clerkship will be performed by W. Evan Rivers.
The rotation locations will have local supervision:
- VA supervision will be provided by Mary Bryant, MD
- Lovelace UNM Rehabilitation Hospital supervision will be provided by John Henry Sloan, MD
- UNM Hospital Inpatient and Outpatient Supervision will be performed by Forest Jarnigan, PT
- UNM Hospital Outpatient clinics supervision will be performed by W. Evan Rivers, DO

Evaluation:
- Clinical evaluation: 32%
- Rehabilitation Problem Solving Forms: 18%
- Test questions: 50%
DEPARTMENT OF PHYSICAL MEDICINE AND REHABILITATION

Sport and Spine Rehabilitation

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| # of Students per Block | 2 |

| Faculty Evaluator(s) | Rebecca Dutton, MD and W. Evan Rivers, MD |

| Prerequisites: | Yes | All Phase II Clerkships |

| Accepts Visiting Students | Yes | Domestic MD, Domestic DO, and International |

| Accepts Off-Cycle Date requests | No |

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| Clerkship Contact: | Dyanna Monahan | DMonahan@salud.unm.edu | 505-925-7569 |

| Prior Approval Required: | No |

Goals and Unique Aspects:
This elective is designed to introduce medical students to the role of rehabilitative medicine, specifically in the non-operative management of musculoskeletal and spine disorders. Students will enhance their musculoskeletal exams skills and ability to formulate a differential diagnosis for common musculoskeletal complaints. They will have an understanding of the various management strategies for these disorders, including the role of the physical therapy, medications, interventional procedures, and appropriateness for surgical evaluation and management. Finally, students will have the opportunity to observe a variety of interventional procedures including ultrasound and fluoroscopy-guided injections.

Objectives:

- Name the five key components to include in any musculoskeletal physical examination
- Develop a systematic approach to the musculoskeletal physical examination and become comfortable conducting symptom-directed evaluation for the spine and peripheral extremities
- Ascertain common risk factors for back pain and musculoskeletal injury, and distinguish between intrinsic and extrinsic factors
- Identify the key providers in musculoskeletal rehabilitation (including the physical and occupational therapists, athletic trainers, psychologists, nutritionist, fitness experts, physicians) and be able to define their respective roles as part of the rehabilitative team
- Describe non-operative management options for common musculoskeletal injuries, including appropriate indications for physical or occupational therapy, physical modalities, medication, injections, as well as complementary and alternative techniques.
- List the basic principles that guide a proper return-to-activity/return-to-sport progression
- Recognize appropriate indications for surgical referral in patients with spine and peripheral joint complaints

Responsibilities:
Students will be expected to:
- Conduct a symptom-directed evaluation (history and physical examination) of patients presenting with musculoskeletal ailments
- Present a comprehensive differential diagnosis and preliminary management plan based on their clinical evaluation
- Arrive on-time and demonstrative active engagement in all clinical activities
- Provide one 20-30 minute presentation at the end of the rotation on a topic of the students’ choosing that is relevant to sports, spine, or pain medicine
- Attend all required didactics
- Attend 1-2 evening or weekend local sporting events for sideline coverage
Supervision and Training:
Overall supervision of the clerkship will be performed by primary faculty evaluators. In addition, local supervision of each of the rotation locations will be provided.

Evaluation:
Students will be assessed on the basis of clinical performance and an end-of-rotation presentation as follows:
Clinical Performance: 66%
End of Rotation Presentation: 33%
A grade of Outstanding will be considered for students who consistently demonstrate regular and timely attendance to clinical and didactic sessions, active participation in daily clinical duties, self-directed learning through independent reading and literature review, as well as successful completion of the end-of-rotation presentation.
## DEPARTMENT OF PSYCHIATRY

### Advanced Clinical Psychiatry Sub-Internship (Inpatient)

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| Accepts Visiting Students | Yes | Domestic MD and Domestic DO |
| Accepts Off-Cycle Date requests | No |
| Add/Drop Policy | Add: 14 Days | Drop: 14 Days | Other: |
| Clerkship Contact: | Mary Haley | MHaley@salud.unm.edu | 505-272-4874 |
| Prior Approval Required: | No |

### Goals and Unique Aspects:
Direct responsibility for evaluation, diagnosis, treatment and discharge planning of hospitalized psychiatric patients (under supervision of attending psychiatrists and house staff). Sub-Internships may be selected from the University Psychiatric Center’s Adult or Geriatric units, Children’s Psychiatric Center’s Child or Adolescent cottages, or at the VA Medical Center’s Adult Ward 7 unit.

### Objectives:
Evaluation (history, physical and mental status examinations, laboratory, psychological testing), diagnoses and management of patients with severe psychiatric disorders.

### Responsibilities:
Observational: Attendance/participation in reports, rounds and conferences; patient interviews and procedures. Clinical: Extensive patient contact involving approximately eight hours per day in direct patient related activity at the intern level of responsibility. Students take two calls shared with a resident or fellow. Research: Two evidence based medicine, critical appraisal of a research article presentations to the team during the rotation. Teaching: Responsible for helping to teach Phase II students assigned to service.

### Supervision and Training:
The psychiatric attending faculty and house staff directly supervise the student. Evaluative examinations, diagnostic treatment and management plans are thoroughly reviewed, discussed and evaluated. The student is expected to attend morning reports, treatment team meetings, journal club, weekly house staff seminars and departmental conferences.

### Evaluation:
Student’s grade is determined by evaluation of performance in areas listed on student evaluation form. Criteria for outstanding grade: An "outstanding" grade is given for performance demonstrating professionalism and patient rapport, an unusual depth of knowledge, meticulous patient care management, competent completion of documentation and competence in formulation and presentation skills.

### Additional Information:
This rotation is able to accept visiting students. Scheduling can be flexible as long as dates do not interfere with UNM Phase II or Phase III students scheduled for the rotation. Rotation is offered at MHC, CPH, and VAMC (no visiting students at the VA) depending upon availability and supervision.
DEPARTMENT OF PSYCHIATRY
Alcohol and Substance Abuse Program

Course Number | CLNS 730 | Duration: 4 weeks
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Credit Type | Clinical Elective | ---

| Block Number | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 |
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X = Offered in Block | X | X | X | X | X | X | X | X | X | X | X | X | X |

# of Students per Block | 1

Faculty Evaluator(s) | Snehal Bhatt, MD and Paul Romo, MD

Prerequisites: | Yes | All Phase II Clerkships – see also department specific in additional info

Accepts Visiting Students | Yes | Domestic MD and Domestic DO

Accepts Off-Cycle Date requests | No

Add/Drop Policy | Add: 14 Days | Drop: 14 Days | Other: |

Clerkship Contact: | Mary Haley | MHaley@salud.unm.edu | 505-272-4874 |

Goals and Unique Aspects:
Introduction to the areas of substance abuse, giving students an opportunity to work with adult and adolescent patients who have substance abuse problems in an outpatient detox and treatment program (ASAP).

Objectives:
Take a thorough history, evaluating use and abuse of substances. Develop a working knowledge of the detoxification process. Develop knowledge of physical symptoms of substance abuse. Be able to identify patients with early problems related to substance abuse and dependence. Develop an understanding of medical and psychiatric bio-psycho-social treatments for substance use disorders and dual diagnoses (patients with SUDs and comorbid mental illness).

Responsibilities:
Observational: Observe patient evaluations at intake. Observe several clinical intakes and interviews by experienced staff. Participate in treatment planning and triage meetings. Participate in interviewing the family. Clinical: Assigned patients to follow for detoxification or in the day program. Participate in the initial education of the patients. Prepare and deliver a lecture to day program patients. Participate in AA/NA meetings. Research: May participate in ongoing research. May initiate and complete small project with clinical staff's supervision. Teaching: Teach skill building in day program. Lecture to day program patients.

Supervision and Training:
Amount and type: Meet weekly for at least one hour for supervision and more often as necessary. Didactic content: Participate in Division's in-service training. Attend Psychiatry Grand Rounds. Must choose a topic for review in the substance abuse area, and make a presentation to clinical supervisor. Attend treatment planning sessions.

Evaluation:
Criteria for an outstanding grade: Ability to work with patients and staff. Ability to take a competent substance abuse history and give competent presentations with plans. Dependability and professionalism. Ability to maintain appropriate documentation.

Additional Information:
This rotation is able to accept visiting students. All students should be advised this rotation is located off campus. Students will need to drive to another location not located at the University. This clinical site hosts many other trainees and availability may depend upon supervision and coordination with other placements.
DEPARTMENT OF PSYCHIATRY
Consultation and Liaison Psychiatry

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<td>Emiliano Valles, MD (adult) and Viveca Meyer, MD (pediatric)</td>
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<tr>
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<th>Mary Haley</th>
<th><a href="mailto:MHaley@salud.unm.edu">MHaley@salud.unm.edu</a></th>
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| Prior Approval Required: | No |

**Goals and Unique Aspects:**
Learn to perform comprehensive psychiatric evaluation (including mental status exam) in a consultative setting. Opportunity to evaluate “biopsychosocial” issues in a hospital setting. Opportunity to learn to conduct family treatment, brief psychotherapy and make psychiatric treatment decisions.

**Objectives:**
Perform psychiatric consultations on a variety of medical, surgical, pediatric and OB patients.

**Responsibilities:**
Observational: Observe staff evaluate patients, formulate consultation and communicate with referring staff. Clinical: Act as “subintern” in doing consults and following patients in hospital or as outpatients while on rotation. Research: If interested, student can participate in ongoing studies and learn to use structured interviews or standardized questionnaires. Teaching: May teach Phase II students on occasion.

**Supervision and Training:**
Amount and type: Attends regular teaching rounds, conferences, seminars as well as supervision for each case. Didactic content: Service rounds two/three times per week, department rounds, and individual supervision on each case.

**Evaluation:**
Criteria for outstanding grade: Clinical skills development, quality written and oral presentations of consults.
# DEPARTMENT OF RADIOLOGY

## Neuroradiology

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<tr>
<td>Clerkship Contact:</td>
<td>Jesse Hernedez</td>
<td><a href="mailto:JIHernandez@salud.unm.edu">JIHernandez@salud.unm.edu</a></td>
<td>505-272-0932</td>
</tr>
<tr>
<td></td>
<td>Hollie Medina</td>
<td><a href="mailto:hmedina@salud.unm.edu">hmedina@salud.unm.edu</a></td>
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### Goals and Unique Aspects:
The trainee will receive exposure to neuroradiology, including clinical applications of brain, spine, and head and neck imaging in adult and pediatric patients.

### Objectives:
Recognize and differentiate appearances of common pathologies on neuroimaging studies. Know how to correctly work up an emergent patient with common neuroimaging studies and procedures. Gain a basic understanding of neuroradiology work-flow and environment.

### Responsibilities:
Students should plan to attend the daily radiology resident noon conferences, the multi disciplinary neuroradiology conference at 8AM on Tuesday morning, the head and neck tumor board (8AM two Fridays per month), the neuro-oncology tumor board (9AM two Fridays per month), and potentially the weekly pediatrics oncology rounds (2:30PM Wednesday), and epilepsy conference (intermittent Fridays at noon). Plan to spend approximately half the day in the reading room with the neuroradiology faculty and residents and half the day on independent study (we can provide reading materials and guidance for your case presentation). You will be responsible for making a case presentation to the neuroradiology section towards the end of your rotation. Be respectful in the reading room and radiology department.

### Supervision and Teaching:
Amount and type: Daily supervision and teaching by faculty neuroradiologists. Didactic Content: Daily noon conferences with the residents, weekly multi-disciplinary conferences and tumor boards. Daily case review with radiology residents and faculty. Independent simulation review of interesting cases with feedback.

### Evaluation:
Criteria for outstanding grade: Active participation in neuroradiology clinical work and outstanding case presentation.

### Additional Information:
A prior rotation in Diagnostic Radiology and Neurology/Neurosurgery/Emergency Medicine/ENT is helpful but not required.
Goals and Unique Aspects:
The clerkship will acquaint student with multiple imaging modalities guided by subspecialized faculty. The clerkship will also give students a basic understanding of proper sequencing of radiologic imaging modalities to achieve better patient care while limiting radiation exposure and containing cost. Rotations within the imaging modalities are structured according to the student’s desired field of medicine/residency.

Objectives:
1) Basic understanding of common imaging modalities including the various indications and potential complications.
2) Appropriate use and sequencing of radiologic imaging to achieve better patient care while containing costs.
   a. Learn the most appropriate imaging examination to order to answer common clinical questions.
   b. Understand the role of the radiologist as a consultant and be able to provide pertinent clinical information to guide appropriate imaging.
   c. Understanding of contraindications to common procedures.
3) Exposure to imaging procedures, with goal of understanding patient-specific factors which may limit or preclude specific studies.
4) Ability to recognize “don’t miss” diagnoses on common imaging modalities (AMSER curriculum).
5) Become familiar with imaging terminology to aid in understanding radiology reports.
6) Learn normal radiographic anatomy and common diseases as displayed on plain radiographs.
7) Develop a basic understanding of radiology physics, specifically of the harmful effects of radiation and what studies involve radiation exposure.
8) Become familiar with technology (i.e. PACS).

Responsibilities:
1) Read a basic textbook of radiology
2) Attend all lectures
   a. Medical Student Conference 3PM Tuesdays in the Van Epps Library
   b. Noon Conference in the Radiology Conference Room
3) Actively participate in medical student didacticsessions
4) Complete procedure log
5) Complete and present (to other medical students) one formal case presentation.
6) Complete and pass final examination

Supervision and Teaching:
Daily Formal Didactics:
1) Resident Noon Conference: M-F at 12 noon. (Radiology Conference Room)
2) Dedicated Medical Student Didactic Sessions Tuesdays at 3 pm (Van Epps Library)

**Evaluation:**
The students will be assessed at the completion of the rotation by Dr. Lisa Blacklock and Dr. Joseph Hunt.
- Clinical evaluations and log: 25%
- Presentation: 25%
- End of Block Exam: 50%

**Additional Information:**
Students must complete the Personnel Radiation Monitoring with Radiation Badges HSC 181 course in Learning Central and email the completion certificate to the Clerkship coordinator Hollie Medina, hmedina@salud.unm.edu prior to starting the rotation.
DEPARTMENT OF RADIOLOGY
Musculoskeletal Radiology

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| Clerkship Contact: | Jesse Hernandez  
Hollie Medina | JJHernandez@salud.unm.edu  
hmedina@salud.unm.edu | 505-272-0932 |

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Goals and Unique Aspects:
The clerkship will include in-depth exposure to Musculoskeletal (MSK) Radiology, including sports imaging, orthopedic oncology and MSK trauma. The rotation also provides the opportunity to perform minor procedures including joint injection and aspirations as well as minor spine procedures. The student will be present in the MSK reading room Monday-Friday from 8 AM-4:00 PM and will be expected to attend Radiology Noon Conference on a daily basis. The student will participate in a project during the rotation in preparing 1 case conference.

Objectives:
1) Exposure through current clinical material of all major areas of Musculoskeletal Radiology,
2) Introduction to associate procedures.
3) Assist with the creation of 1 case conference during rotation

Responsibilities:
The student will be supervised by MSK Faculty, Fellows and residents. They will attend the daily MSK film reading, weekly sports conference and the weekly tumor board. The students will be supervised in the interpretation and dictation of MSK plain films, CT, and MRI as well as supervision of performance of minor procedures.

Supervision and Teaching:

Evaluation:
The students will be assessed at the completion of the rotation by Dr. Steven Tandberg. For a grade of Outstanding, student must actively participate in breadth of MSK Radiology, clinical work and case conference.

Additional Information:
A prior rotation in Diagnostic Radiology is preferred but not required. Students must complete the Personnel Radiation Monitoring with Radiation Badges HSC 181 course in Learning Central and email the completion certificate to the Clerkship coordinator Hollie Medina, hmedina@salud.unm.edu prior to starting the rotation.
DEPARTMENT OF RADIOLOGY
Interventional Radiology

Course Number: CLNS 950M  
Duration: 4 weeks

Credit Type: Clinical Elective

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Faculty Evaluator(s): Christopher Gutjahr, MD

Prerequisites: Yes  
All Phase II Clerkships

Accepts Visiting Students: No

Accepts Off-Cycle Date Requests: No

Add/Drop Policy:  
Add: 30 Days  
Drop: 30 Days  
Other:

Clerkship Contact:  
Jesse Hernandez  
Hollie Medina  
JJHernandez@salud.unm.edu  
hmedina@salud.unm.edu  
505-272-0932

Prior Approval Required: No

Goals and Unique Aspects:
Interventional Radiology is a unique branch of radiology dedicated to image guided diagnostic and therapeutic procedures. The University of New Mexico IR division performs a full array of IR procedures, from the routine (eg, biopsies, vascular access) to the complex (eg, interventional oncology, portal hypertension management). Clerkship students will be exposed to this spectrum of radiology and will be expected to participate in the procedures, as well as the periprocedural evaluation and management of patients.

Objectives:
1. Exposure to the broad scope of IR procedures and their place in the care of both inpatients and outpatients.
2. Exposure to the periprocedural evaluation and management of IR patients, including indications/contraindications for procedures, interaction with anxious patients and families, procedural sedation, and management of complications.
3. Exposure to basic radiation safety practices.

Responsibilities:
Clerkship students will be expected to participate in the procedures, as well as the periprocedural evaluation and management of patients. Students will be expected to be present in the department during normal weekday hours (approximately 6:45a-5:00p). As this is a clinical rotation, students are also expected to participate in IR call: 1 weeknight per week and 1 weekend. At the conclusion of the rotation, the student will deliver a formal case presentation.

Supervision and Training:
The student will be supervised primarily by Interventional Radiology faculty, consisting entirely of fellowship trained interventional radiologists. The junior fellow and rotating radiology residents will also participate.

Evaluation:
The student will be evaluated at the completion of the rotation by the clerkship director based on personal exposure and survey of the faculty and fellow. Grade will be based primarily on clinical performance (80%), with the remainder based on the case presentation (20%). Criteria for an outstanding grade: active participation in both patient procedures and periprocedural management, demonstration of knowledge of patients undergoing procedures, evidence of familiarity with procedural basics, and a well prepared case presentation.
DEPARTMENT OF SURGERY
Ophthalmology

Course Number | CLNS 754 | Duration: 4 weeks
--- | --- | ---
Credit Type | Clinical Elective |

**Goals and Unique Aspects:**
In general, it is our goal for you to leave the rotation with a complete understanding of what you need to see any patient who presents with a primary eye complaint. Toward that end, you should spend as much time as possible evaluating urgent care patients and consults. These are most representative of what you will encounter in your medical career.

Specific goals:
1) Basic eye anatomy
2) Basic eye exam techniques (what you need to be able to perform in a primary care setting)
3) Differential diagnosis of common eye complaints
4) Basic understanding of common eye conditions
5) Exposure to common surgical procedures in Ophthalmology

**Objectives:**
Take an ocular history, and perform the following examinations: visual acuity testing, visual fields to confrontation, pupil check, intraocular pressure, slit lamp exam, fluorescein staining, direct ophthalmoscopy.

**Responsibilities:**
Attend clinics and OR as scheduled. Help the Ophthalmology resident whenever possible. Complete the online tutorials. Evaluate the resident(s) with whom you work. Take an ocular history and perform the visual examinations described above.

**Supervision and Training:**
All work is supervised by surgical attendings and senior residents. Teaching during daily rounds, in the operating room, in clinic and in weekly didactics.

**Evaluation:**
Criteria for Outstanding Grade: Performing at the level expected for an intern in the quality of notes, such as histories and physicals and consults, the quality of generating a differential diagnosis and quality of patient care. Demonstrating appropriate knowledge on responses to questions of patient care on ward rounds. Demonstrating appropriate knowledge in OR and clinics.
Goals and Unique Aspects:
In general, it is our goal for you to leave the rotation with a complete understanding of what you need to see in any patient who presents with a primary ENT complaint. Toward that end, you should spend as much time as possible evaluating urgent care patients and consults. These are most representative of what you will encounter in your medical career.

Specific goals:
1) Basic head and neck anatomy
2) Basic head and neck exam techniques (what you need to be able to perform in a primary care setting)
3) Differential diagnosis of common head and neck complaints
4) Basic understanding of common head and neck conditions
5) Exposure to common surgical procedures in Otolaryngology

Objectives:
1) Take head and neck history
2) Evaluate the oral cavity
3) Evaluate the nasal cavity
4) Evaluate the ears
5) Evaluate the neck
6) Understand evaluation of audiograms
7) Appreciate laryngeal evaluation on both indirect exam and endoscopy
8) View basic and common procedures such as Tonsillectomy and thyroidectomy

Responsibilities:
1) Attend clinics and OR as scheduled
2) Help the Otolaryngology residents whenever possible
3) Evaluate the attending(s) and resident(s) with whom you work

Supervision and Training:
All work is supervised by surgical attendings and senior residents. Teaching during daily rounds, in the operating room, in clinic and in weekly didactics.

Evaluation:
Criteria for Outstanding Grade: Performing at the level expected for an intern in the quality of notes, such as histories and physicals and consults, the quality of generating a differential diagnosis and quality of patient care. Demonstrating appropriate knowledge on responses to questions of patient care on ward rounds. Demonstrating appropriate knowledge in OR and clinics.
## DEPARTMENT OF SURGERY
### General Surgery Sub-Internship at VAMC

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**Faculty Evaluator(s):** Anthony Vigil, MD

**Prerequisites:**
- All Phase II Clerkships

**Accepts Visiting Students:** No

**Accepts Off-Cycle Date requests:** Yes - with department permission

**Add/Drop Policy:**
- Add: 30 Days
- Drop: 30 Days
- Other:

**Clerkship Contact:**
- Daniel Maes DaAMaes@salud.unm.edu
- 505-272-0434

**Goals and Unique Aspects:**
In general, the goal is to ensure students are familiar with common General Surgery diseases and their management. Students will also go to OR and see some of the most commonly performed General Surgery operations and endoscopy.

**Specific goals:**
1) Basic Anatomy
2) History taking and examination for commonly seen General Surgery problems
3) Creating differential diagnosis and basic management of common surgical problems
4) Exposure to endoscopy and commonly performed General Surgery operations

**Objectives:**
1) Take history
2) Clinical examination
3) Interpret labs and X-rays

**Responsibilities:**
1) Attend clinics and OR as scheduled, no calls required
2) Help the team whenever possible
3) Read about Common General Surgery Problems and Operations you will be scrubbing in
4) Evaluate the resident(s) / Attendings with whom you work

**Supervision and Training:**
Amount and Type: All work is supervised by surgical attendings and senior residents. Daily ward rounds, review of cases two times per week and approval of clinic work. Didactic Content: An assignment of topic for discussion with the Phase II/third-year students.

**Evaluation:**
Criteria for Outstanding Grade: Performing at the level expected for an intern in the quality of notes, such as histories and physicals and consults, the quality of generating a differential diagnosis and quality of patient care. Demonstrating appropriate knowledge on responses to questions of patient care on ward rounds. Demonstrating appropriate knowledge in OR and clinics.
DEPARTMENT OF SURGERY
Pediatric Surgery Sub-Internship at UNMH

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<td>Daniel Maes</td>
<td><a href="mailto:DaAMaes@salud.unm.edu">DaAMaes@salud.unm.edu</a></td>
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Goals and Unique Aspects:
- Rounds: You should round with the residents on all of the patients. You should follow one or two patients closely and be responsible for writing their notes and presenting them to the attending. OR: The patient and parents should be met in the holding unit if you did not meet them in clinic. You should be present in the OR when the patient is being induced. If you show up late or are unprepared, do not expect to operate. Clinic: Unless you are in the operating room or conference, you are expected to be in clinic. No scrubs.
- Conference: Pediatric service conference will be at 4 pm every Wednesday. You will be expected to present once or twice during conference depending on the length of your rotation.
- Feedback: Feedback will be given at the midpoint of the rotation and at the end.

Objectives:
- To understand basic pediatric surgical principles in the areas of diagnosis, operative treatment, anatomy, and physiology.
- Learn to work together as part of a surgical team with a common effort and goal.
- Learn to appreciate the differences between adult and pediatric surgical problems and their solutions.
- The student should acquire a knowledge of the work-up, pre and post-operative management and aspects of the operative techniques involved in caring for patients that range in age from neonates to adolescents with a wide variety of congenital and acquired disorders.

Responsibilities:
- Observational: To be responsible for his/her share of work-ups and day to day record keeping.

Supervision and Training:
- Amount and type: Daily contact with faculty and senior resident during patient care rounds and in the operating room. Close supervision by attendings and surgical residents.
- Didactic content: The student is expected to attend most General Surgery and Pediatric conferences. Additionally, attendance at a weekly pediatric seminar and pediatric surgery pathology slide review with the Department of pathology is encouraged.

Evaluation:
- Criteria for outstanding grade: Based upon overall quality of work, enthusiasm, comprehension of essential material, ability to accept responsibility and discharge it promptly and efficiently, and the ability to work as a team member.

Additional Information:
- Students who anticipate dealing with children in the future are strongly urged to consider this rotation. This includes future pediatricians, surgeons and/or family practitioners.
DEPARTMENT OF SURGERY
Urology Sub-Internship

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Faculty Evaluator(s)

Max Gallegos, MD

Prerequisites:

Yes | All Phase II Clerkships

Accepts Visiting Students

Yes | Domestic MD and Domestic DO

Accepts Off-Cycle Date requests

Yes - with department permission

Add/Drop Policy

Add: 30 Days | Drop: 30 Days | Other:

Clerkship Contact:

Daniel Maes | DaAMaes@salud.unm.edu | 505-272-0434
Max Gallegos | MaxGallegos@salud.unm.edu |

Prior Approval Required: No

Goals and Unique Aspects:

Student assumes level of responsibility commensurate with Phase III on wards and in clinic for patient workup and management. Participates in the operating room at his/her level of ability.

Objectives:

Enhance student’s knowledge of evaluation and management of challenging urologic patients; recognize pertinent clinical problems in urology and develop appropriate treatment plans; develop a degree of competency that allows for independent initial evaluation in the urology clinics; assist in operating room, and become more comfortable with perioperative management of urologic patients.

Responsibilities:

Observational: Participate as an active urology team member, observe procedures and surgeries, and become proficient in minor surgical procedures and in evaluation of more difficult problems. Clinical: Daily task include, but are not limited to, inpatient rounds, evaluating and managing clinic patients, and familiarity with and ability to interpret all tests and imaging modalities. Research: May participate in on-going research projects or initiate a new one. Teaching: Responsible for teaching of junior medical students, and presenting on selected topics to residents and faculty. Required: Function at, or near intern level. Participate in inpatient care, clinics and OR. Take call as determined by Chief Resident.

Supervision and Training:

Amount and type: Faculty and residents closely supervise student’s work on wards, in clinics, or in operating room. In addition to morning rounds teaching, the student attends all urologic conferences and any other didactic teaching sessions. Attendance at weekly grand rounds is required.

Evaluation:

Based on demonstrated knowledge on wards, in operating room and in clinic as relates to quality of patient care, didactic materials comprehension and technical ability. Criteria for outstanding grade: Demonstrate outstanding fund of knowledge in urological diseases, technical ability and patient care. Base on faculty and resident consensus.

Additional Information:

This is a unique opportunity to participate in New Mexico’s only comprehensive urologic surgery program. Management of these patients provides invaluable knowledge applicable to many other medicine disciplines. Visiting Students: please note this course offers flexible scheduling. Students can request off-cycle dates through VSAS. For scheduling concerns, please contact Dr. Maxx Gallegos at MaxGallegos@salud.unm.edu
DEPARTMENT OF SURGERY
General Surgery Sub-Internship at UNMH

Course Number | CLNS 759 | Duration: 4 weeks
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<td>Ming-Li Wang, MD</td>
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Add/Drop Policy | Add: 30 Days | Drop: 30 Days | Other: | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
Clerkship Contact: | Daniel Maes | DaMAaes@salud.unm.edu | 505-272-0434 | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
Prior Approval Required: No

Goals and Unique Aspects:
In general the goal is to ensure students are familiar with common General Surgery diseases and their management. Students will also go to OR and see some of the most commonly performed General Surgery operations and endoscopy.

Specific goals:
1) Basic anatomy
2) History taking and examination for commonly seen General Surgery problems
3) Creating differential diagnosis and basic management of common surgical problems
4) Exposure to endoscopy and Commonly performed General Surgery operations

Objectives:
1) Take history
2) Clinical examination
3) Interpret labs and X-rays

Responsibilities:
1) Attend clinics and OR as scheduled, no calls required
2) Help the team whenever possible
3) Read about common General Surgery problems and operations you will be scrubbing in
4) Evaluate the resident(s)/Attendings with whom you work

Supervision and Training:
Amount and type: Direct supervision by residents and attending staff. Didactic content: Self-study, attendance at resident conferences and education meetings. Curriculum guided by resident schedule.

Evaluation:
Based on observations of attendings and residents.
Criteria for outstanding grade: Demonstrate clinical skills and patient care equal to or above that of surgical interns.

Additional Information:
Student is personally responsible, under the guidance of senior residents, for 5-7 patients on the hospital wards, and follows additional studies on the rest of the hospital service. Average time in OR is 30%, in outpatient clinics 30%, and in hospital patient care 40%
DEPARTMENT OF SURGERY
Surgical Critical Care Intensive Care Unit

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# of Students per Block: 2

Faculty Evaluator(s): Ashley Keiler-Green, MD

Prerequisites: Yes All Phase II Clerkships

Accepts Visiting Students: No

Accepts Off-Cycle Date Requests: Yes - with department permission

Add/Drop Policy: Add: 30 Days Drop: 30 Days Other:

Clerkship Contact: Daniel Maes DaAMaes@salud.unm.edu 505-272-0434

Prior Approval Required: No

Goals and Unique Aspects:
Exposure to critically ill trauma and surgical patients.

Objectives:
At the end of the rotation, the student should be able to: 1. demonstrate an understanding of the comprehensive approach to patients with multi-system critical illness, 2. list the medication, complications and demonstrate the techniques in insertion of arterial, ventral venous and pulmonary artery catheters, and 3. present to peers the complex problems of critically ill patients in a logical and comprehensive manner.

Responsibilities:
Clinical: Alternate every third night call, function in capacity of subintern (no more than 80 hours per week).

Supervision and Training:
Amount and type: Daily with rounds by surgery or emergency medicine attendings. All activities under supervision of residents. Didactic content: Morning rounds, 2-3 weekly sessions by resident, fellow, attendings, respiratory therapy, or pharmacy. Reading and background material provided. Daily teaching sessions with staff. Student is expected to make one didactic presentation of 15-20 minutes.

Evaluation:
Criteria for Outstanding Grade: Performing at the level expected for an intern in the quality of notes, such as histories and physicals and consults, the quality of generating a differential diagnosis and quality of patient care. Demonstrating appropriate knowledge on responses to questions of patient care on ward rounds.
DEPARTMENT OF SURGERY
Plastic Surgery

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<td>Eugene Wu, MD</td>
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Prerequisites: Yes All Phase II Clerkships

Accepts Visiting Students: Yes Domestic MD and Domestic DO

Accepts Off-Cycle Date requests: Yes - with department permission

Add/Drop Policy: Add: 30 Days Drop: 30 Days Other: |

Clerkship Contact: Daniel Maes DaAMaes@salud.unm.edu 505-272-0434

Prior Approval Required: No

Goals and Unique Aspects:
The student will demonstrate understanding of the evaluation of potential plastic surgery patients following discussion of the patient with faculty attendings. The student will understand key anatomical features of major flap donor sites, and be able to discuss differences between local, regional and free flaps. The student will demonstrate appropriate decision making for work-up and management of common plastic surgery problems by the completion of the rotation. For common plastic surgical problems, the student will develop basic operative skills as it relates to these problems: instrument handling, knot tying, soft tissue respect, and dressings. The student will demonstrate respect and will collaborate with paramedical personnel (therapists, OR nurses, clinic nurses and secretarial/administrative staff).

Objectives:
Evaluate the physical and psychological condition of the patient presenting for plastic surgery and participate in pre-, intra-, and postoperative care.

Responsibilities:
Observational: Student participates in clinic and operating room care.

Supervision and Teaching:
Amount and type: Student is supervised by plastic surgeons. Teaching during daily rounds, in the operating room, in clinic and in weekly didactics.

Evaluation:
Criteria for outstanding grade: Superior effort on the part of the student to evaluate and understand the patients’ problems and prepare for and participate in surgery.
DEPARTMENT OF SURGERY
Vascular Surgery Sub-Internship

Goals and Unique Aspects:
Exposure to patients with peripheral vascular disease.

Objectives:
1) Master the basic principles of the physical examination of the vascular system.
2) Be able to recognize and diagnose patients with arterial and venous insufficiency.
3) Become familiar with the non-invasive assessment of the arterial and venous circulations.
4) Learn how to interpret an arteriogram.
5) Become familiar with medical and surgical management of patients with diseases of the vascular system.

Responsibilities:
Clinical: Function in the capacity of a sub intern. Optional: participate in ongoing clinical research projects and help prepare a paper or case report for presentation at resident/student research forum.

Supervision and Teaching:
All work is supervised by surgical attendings and senior residents. Pre-op Didactic Content: Vascular Conference every Wednesday at 4:00pm. Vascular Case Conference third Wednesday of the month. Weekly Morbidity and Mortality Conference every Wednesday morning.

Amount and type of supervision:
1) Daily rounds with attending staff and service
2) Participate in surgical procedures
3) Participate in vascular surgery clinics

Evaluation:
Criteria for Outstanding Grade: Performing at the level expected for an intern in the quality of notes, such as histories and physicals and consults, the quality of generating a differential diagnosis and quality of patient care. Demonstrating appropriate knowledge on responses to questions of patient care on ward rounds. Demonstrating appropriate knowledge in OR and clinics. Evaluation to be determined by vascular house staff and service attending.
DEPARTMENT OF SURGERY
Pediatric Urology

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<td>Daniel Maes</td>
<td><a href="mailto:DaAMAes@salud.unm.edu">DaAMAes@salud.unm.edu</a></td>
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Goals and Unique Aspects:
To assume more responsibility with regard to patient work-up and management on the wards and in the clinic as compared to a Phase II student. To participate in the OR commensurate with his/her ability.

Objectives:
1) To enhance the student’s knowledge of the evaluation and management of pediatric urology patients.
2) To recognize pertinent clinical problems and develop appropriate treatment plans.
3) To develop a degree of competency that allows the student to do independent initial evaluations in clinic.
4) To assist in the OR.

Responsibilities:
Observational: Clinics, OR, inpatient, x-rays, ICU’s.
Clinical: Become familiar with all tests and x-rays ordered for pediatric urology patients, and be able to interpret them. Research: Available, but not required.

Supervision and Teaching:
Amount and type: All work is supervised by surgical attendings and senior residents. Teaching: Daily with faculty and residents. Didactic content: Attend all conferences, lectures, and VPs. Required readings.

Evaluation:
Based on a fund of knowledge of urology, quality of patient care, technical ability, comprehension of didactic material and other usual criteria. Criteria for grade of “Outstanding”: Demonstration of outstanding fund of knowledge of pediatric urological diseases, technical ability, and patient care.

Additional Information:
This is a unique opportunity to participate in New Mexico’s only comprehensive pediatric urology surgery program. Management of these patients provides invaluable knowledge, which will be used in many other medicine disciplines.
**DEPARTMENT OF SURGERY**

**Clinical Applications of Anatomy**

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| Accepts Visiting Students | No |
| Accepts Off-Cycle Date requests | No |

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<tr>
<td>Clerkship Contact:</td>
<td>Daniel Maes</td>
<td><a href="mailto:DaAMaes@salud.unm.edu">DaAMaes@salud.unm.edu</a></td>
<td>505-272-0434</td>
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**Goals and Unique Aspects:**
The “Surgical Boot Camp” is a 4 week elective held in the spring for students who are planning on enrolling in surgical residency programs with the primary purpose of preparing the student for their internship year. The elective is designed to be action-based and hands-on and will be facilitated by faculty and staff of the UNM School of Medicine. Unique aspects of this elective will include operative anatomy labs, group dynamic scenarios, technical skills sessions and simulations and mock paging scenarios.

**Objectives:**
**Patient Care and Medical Knowledge:**
1) Demonstrate the ability to write comprehensive and appropriate orders for surgical patients.
2) Demonstrate the ability to manage common electrolyte abnormalities in the surgical patient.
3) Demonstrate the ability to interpret common ancillary testing performed on the surgical patient.
4) Establish the fundamentals of basic perioperative care of the surgical patient.
5) Demonstrate the ability to function safely in the role of the first responder to an urgent or emergent patient care situation.

**Technical Skills:**
1) Demonstrate proficiency in performing bedside procedures.
2) Demonstrate proficiency in performing minor procedures.
3) Demonstrate understanding of basics of wound care and management.
4) Demonstrate proficiency in performing emergency procedures.

**Professionalism:**
1) Develop strategies for addressing professionally challenging situations in surgical residency.

**Interpersonal Skills and Communication:**
1) Effectively interact and communicate will all members of the healthcare team.
2) Effectively handoff patient information during transitions of care.

**Practice-Based Learning and Improvement:**
1) Optimally utilize the medical record.

**Responsibilities:**
Attendance and participation in lectures, cadaver labs and simulations. Answering mock pages. Completion of pre- and post-course questionnaires.

**Supervision and Teaching:**
Teaching done through lectures, cadaver labs and simulations and debriefing of mock pages.

**Evaluation:**
Evaluation will be based on attendance and participation in labs and scenarios, graded response to mock pages and completion of pre- and post-course questionnaires.

**Additional Information:**
This course is generally offered only once during an academic year, either during the month of March (block 12) *or* April (block 13).
DEPARTMENT OF SURGERY
Trauma Sub-Internship

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Goal and Unique Aspects:
The principal goal on the Trauma Surgery rotation is to become familiar with the care of the trauma ward patient. This entails understanding the assessment of the injured patient as outlined in the American College of Surgeons ATLS course.

Objectives:
1) Perform a trauma evaluation with ABCDE
2) Interpret labs and X-rays
3) Oral presentation of trauma patients
4) Teamwork on a trauma service

Responsibilities:
1) Manage all trauma ward patients on the service under the direction of the Junior Resident/PAs/Chief Resident/Attending Surgeons.
2) Attend daily ward rounds with the team.
3) Attend all Trauma Surgery Clinics (see Outpatient Clinic for details).
4) Attend and participate in the weekly trauma case conferences (see Weekly Schedule for details).
5) Scrub in on all operative cases as patient care allows.
6) Read assigned materials as distributed and as directed.
7) Respond to all Trauma activations and act as the recorder with other duties as assigned.
8) Participation and observation of all procedures.

Responsibilities:
1) Perform a trauma evaluation with ABCDE
2) Interpret labs and X-rays
3) Oral presentation of trauma patients
4) Teamwork on a trauma service
5) Manage trauma patients

Supervision and Teaching:
Amount and type: Daily rounds by attendings. All activities under supervision of residents. Didactic content: Morning rounds. Reading and background material provided. Attend Thursday morning service conference and weekly teaching sessions. Student is expected to make one didactic presentation of 15-20 minutes.

Evaluation:
Criteria for Outstanding Grade: Performing at the level expected for an intern in the quality of notes, such as histories and physicals and consults, the quality of generating a differential diagnosis and quality of patient care.
Demonstrating appropriate knowledge on responses to questions of patient care on ward rounds. Demonstrating appropriate knowledge in OR and clinics. Criteria for outstanding grade: By consensus of attendings and housestaff.
DEPARTMENT OF SURGERY

Vascular Surgery Sub-Internship at VA

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<td>Daniel Maes</td>
<td><a href="mailto:DaAMaes@salud.unm.edu">DaAMaes@salud.unm.edu</a></td>
<td>505-272-0434</td>
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Goals and Unique Aspects:
This course is designed to allow the sub-intern to follow his/her own patients from the clinic, to the OR, to the ICU, and to the ward, thereby allowing an appropriate level of autonomy in order to gain confidence in the management of vascular surgery patients in preparation for a surgical residency program or to increase their skill set in caring for future surgical patients (e.g. as a primary care provider). The VA Vascular Surgery learning environment will be formulated as an “apprenticeship” model (rare in today’s training environment) and the sub-I will often be able to first-assist during operations.

Objectives:
The principal goal for the Sub-I is to become familiar with the pathophysiology of vascular disease. This will be achieved by:
1) Learning the signs and symptoms of arterial, venous, and lymphatic disease.
2) Performing accurate and detailed vascular examinations including the interpretation of vascular lab examinations and cross-sectional imaging.
3) Developing an individualized treatment plan for each patient.

Responsibilities:
The Sub-I will function as an intern on the vascular surgery resident team, however, time spent in the OR will be one-on-one with the operating surgeon as often as possible to engage the student in the operative decision-making, basic catheter and wire skills, and open technical skills to prepare the student for surgery residency. The Sub-I will prepare an educational didactic presentation for the Wednesday AM conference, lead rounds on their patients, see patients in the clinic, and operate as described above. Participation in ongoing quality improvement and/or research projects is strongly encouraged. Graduated responsibility in carrying the surgical on-call pager may also be possible.

Supervision and Teaching:
The Sub-I will be expected to present their patients scheduled for operations at the preoperative indications conference which is held each Wednesday starting at 0700. Didactics, hands-on demonstrations, divisional M&M, ethics discussions, and vascular lab demonstrations will also be integrated into the Wednesday morning educational programming, and the student will be assigned no less than one didactic presentation during their rotation. The Sub-I will also be expected to spend time in the vascular laboratory to gain real time knowledge of this valuable assessment tool. When time allows, the student will be expected to attend the UNM Vascular Surgery conference on Wednesdays at 1600.

Evaluation:
Criteria for Outstanding Grade: Performing at the level expected for an intern in the quality of notes, such as histories and physicals and consults, the quality of generating a differential diagnosis and quality of patient care.
Demonstrating appropriate knowledge on responses to questions of patient care on ward rounds. Demonstrating appropriate knowledge in OR and clinics.
DEPARTMENT OF SURGERY
Burn Surgery Sub-Internship

Course Number | CLNS 950X | Duration: 4 weeks
--- | --- | ---
Credit Type | Sub-Internship |
Block Number | 1 2 3 4 5 6 7 8 9 10 11 12 13 |
X = Offered in Block | X X X X X X X X X X |
# of Students per Block | 1 |
Faculty Evaluator(s) | Eugene Wu, MD |
Prerequisites: | Yes | All Phase II Clerkships |
Accepts Visiting Students | No |
Accepts Off-Cycle Date requests | No |
Add/Drop Policy | Add: 30 Days | Drop: 30 Days | Other: |
Clerkship Contact: | Daniel Maes | DaAMaes@salud.unm.edu | 505-272-0434 |
Prior Approval Required: | No |

Goals and Unique Aspects:
This rotation provides the subintern an intensive exposure to the care of the burn patient: Surgical and non-surgical treatment, critical care management and evaluation of outpatient wounds. The subintern will participate in the care of patients in the Burn Intensive Care Unit, assessment of burn depth and the prognosis for wound healing and excisional debridement and autografting of burn wounds.

Objectives:
1. Obtain history and physical examination. Gather important information that is needed for the general history and perform accurate, rapid and thorough physical examination of burn patients.
2. Knowledge, diagnostic and treatment skills. Demonstrate knowledge about established and evolving management of burn wounds.
3. Professionalism and communication. Provide patient care that is compassionate, appropriate and effective. Adherence to ethical principles and sensitivity to diverse patient populations.
4. Surgical skills (under supervision). Perform tangential burn wound excision, harvest split thickness autografts, apply and secure autografts to wound, use skin graft mesher, perform escharotomy and insert central lines.

Responsibilities:
The subintern will function as an intern on the Burn Surgery team. Time spent in the OR will engage the student in the operative decision-making and basic operative skills outlined in the objectives to prepare the student for surgery residency. The subintern will prepare an educational didactic presentation for the Burn conference, lead rounds on their patients, see patients in the clinic, and operate as described above.

Supervision and Teaching:
Supervision will be from the Burn Service team including attendings, residents and PAs. The subinterns will be expected to present all patients to a team member and will be supervised during all procedures/surgeries.

Evaluation:
Pre-, mid-, and post-rotation assessments will be scheduled with the faculty for ongoing and real-time feedback for the subintern to ensure goals for the rotation are being met.
DEPARTMENT OF UNDERGRADUATE MEDICAL EDUCATION

Comprehensive Ambulatory Care - Required

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| Accepts Visiting Students | No |
| Accepts Off-Cycle Date requests | No |

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<tr>
<td>Clerkship Contact:</td>
<td>Details of courses &amp; preceptor requests: Kim Mora <a href="mailto:KKHalsten@salud.unm.edu">KKHalsten@salud.unm.edu</a></td>
<td>Davette Sandoval <a href="mailto:ddelaosandoval@salud.unm.edu">ddelaosandoval@salud.unm.edu</a></td>
<td>505-272-0971</td>
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Prior Approval Required: No

**Goals and Unique Aspects:**
The outpatient clinic has long been the site for the primary care and coordination of preventive care, but increasingly the care of more complex patients and highly technical procedures are being transferred to the outpatient setting. Understanding capabilities and limitations of the outpatient setting will be critical to providing effective healthcare in the future. In this rotation, you will participate in three main areas of focus: (1) The Comprehensive Ambulatory Block is a final opportunity for you to discuss in depth major challenges facing healthcare with peers and share your experiences and perspectives gained over the course of medical school. (2) You will be working on the frontlines in an outpatient clinic assigned through a lottery process to see how clinics are adapting to current demands and to observe innovative strategies to address these challenges. (3) Finally, you will be exploring an ethical public health dilemma in an oral and written capstone presentation.

**Objectives:**
- **Seminars:**
  1. Describe the macro-environment for delivery of care in the outpatient setting, including economic, legal, public health, and ethical factors.
  2. Discuss challenges to/innovative strategies for the delivery of comprehensive care in the outpatient setting.
  3. Identify skills for maintaining resilience and managing boundaries in ambulatory practice.

- **Clinical Selective:**
  1. Recognize challenges and best practices for providing comprehensive outpatient care in a selected setting.
  2. Apply skills mastered during Phase 2 to direct patient care in an ambulatory setting.
  3. Develop skills in interprofessional team collaboration.

- **Capstone:**
  1. Analyze a public health issue, which poses an ethical dilemma relevant to future practice.

**Responsibilities:**
- 1. Complete pre-reading, attend, and actively participate in all required seminars.
- 2. Attend all required sessions of the clinical selective to which you have been assigned.
- 3. Complete 3-5 page research paper.
- 4. Make an oral presentation of your research topic.
- 5. Present a challenge you have observed in your clinic and an innovative proposed solution to address it.
**Supervision and Training:**
Attending faculty preceptors supervise students in clinical settings. Experts in the field facilitate interactive seminars.

**Evaluation:**
To receive full credit, students must participate in all seminars, site rotations and capstone requirements.

**Additional Information:**
There is limited availability for this required block (it is offered only 6 blocks) and requires advanced scheduling with the preceptors. Please check with OMSA before making any block changes pertaining to CAM, because there is no guarantee you’ll be rescheduled in this academic year.
### DEPARTMENT OF UNDERGRADUATE MEDICAL EDUCATION

#### Medicine in New Mexico - Required

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<tr>
<td>Faculty Evaluator(s)</td>
<td>Amy Clithero-Eridon, PhD</td>
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| Accepts Visiting Students | No |
| Accepts Off-Cycle Date requests | No |

#### Goals and Unique Aspects:
Regardless of future specialty, all residency programs require clinical expertise, the ability to work in a complex ever-changing healthcare system, leadership and time management capabilities and scholarly work. This rotation will give you practical experiences including practicing in the community and pursuing life-long learning through continuing education depending on YOUR learning goals.

The goals of this block are for students to:
1) Improve skills in area of specialty
2) Demonstrate independent learning and critical thinking skills
3) Demonstrate adult learning by identifying and achieving your learning needs

#### Objectives:
1) Clinical: develop clinical skills in your area of specialty by working with a preceptor in his/her practice
2) Completion of a learning track that meets your learning needs and area of interest
   - Track 1: Healthcare concepts
   - Track 2: Population health exploration
   - Track 3: Scholarly work

#### Responsibilities:
Minimum of 96 clinical hours with your preceptor as well as successful completion of one of three tracks, all of which have weekly homework assignments. In addition, you will complete an on-line course evaluation and your preceptor will submit an evaluation of your skills and abilities along with a signed certification of effort. There is a mandatory 1 hour orientation that you must attend *before* the rotation start date.

#### Logistics:
60 days prior to the block, Antoinette Guliford will send an email to the students to discuss preceptor options. For those enrolled in Block 10, there will be a 90 day add/drop commitment. Rotations will only be rescheduled under extreme circumstances. We have made firm commitments to preceptors and you are expected to honor your commitment to the times/dates that you have chosen. Once a student is scheduled for a specific rotation, it is binding to the same extent as other clinical rotations. If the date is to be changed the request must be approved by both OMSA and the Preceptorship office. In some instances there is housing and/or mileage reimbursement. Contact Antoinette Guliford for more information.

#### Additional Information:

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The University of New Mexico School of Medicine reserves the right to make changes to any of the policies, procedures, codes, standards, requirements, or services included in this handbook as it deems necessary, with changes applicable to all students in attendance at the SOM Doctor of Medicine program. Please visit the OMSA website to obtain a copy of the most current 2019-2020 Phase III Clerkship Catalog.
There is limited availability for this required block (no more than 12 students can be registered each block) as advanced scheduling with preceptors is required. ONLY incoming Phase III students may enroll in blocks 1 and 2. Please contact OMSA to inquire on availability before requesting any block changes (ADD or DROP) pertaining to Medicine in New Mexico, as there is no guarantee that you'll be rescheduled in this academic year.
Advanced Clinical Reasoning

Goals and Unique Aspects:
This course is offered to students who are interested in honing their skills in clinical reasoning. The course provides explicit instruction in clinical reasoning processes in conjunction with clinical work (typically 10 hours per week in UNMH). Students will attend two 3-hour seminars per week organized around common clinical presentations (e.g. “chest pain” or “altered mental status”). Faculty will walk students step-by-step through the clinical reasoning process using either cases students have evaluated in the hospital or with web-based cases as prototypes. They will challenge students to identify key features of important diagnoses (illness scripts), compare and contrast competing diagnostic hypotheses using clinical reasoning diagrams and outline investigative strategies. Students will participate in additional workshops on hypothesis-driven physical exam and on advanced communication skills. They will receive coaching on their oral presentation skills. Additional activities will support students’ individual learning objectives. Participation in this course will provide students with tools to enhance their clinical performance, meet Phase II and Phase III expectations and support their ongoing development in clinical reasoning.

Objectives:
- Define common terms used to describe clinical reasoning.
- Compare and contrast analytic and intuitive approaches to clinical reasoning and identify their unique error potentials.
- Perform an accurate clinical evaluation of a patient and synthesize the data collected into a problem presentation.
- Perform discriminating physical exam maneuvers correctly.
- Develop illness scripts for common important diagnoses using clinical experience and medical literature.
- For common presentations, compare and contrast relevant differential diagnoses, identifying discriminating features and justifying a working diagnosis.
- Develop a problem list that reflects clinical priorities.
- Self-assess their reasoning performance, identifying strengths and areas for improvement.

Responsibilities:
Attend all didactic sessions and actively participate. Attend all sessions with preceptor in ED. Attend communication intensive. Complete online work and submit required work.

Supervision and Teaching:
Students will be supervised in the hospital by the assigned faculty. They will present patients that they evaluate and will receive feedback at the end of each shift on their performance. In addition, a faculty coach will meet with

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<td>Deepti Rao, MD</td>
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<td>Clerkship Contact:</td>
<td>Sally Fortner <a href="mailto:sfortner@salud.unm.edu">sfortner@salud.unm.edu</a> 505-272-8028</td>
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<td>Prior Approval Required:</td>
<td>YES - Must submit Add Form after Phase III schedules are released</td>
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students on a weekly basis to review their progress on course objectives, and review assignments/application exercise results.

Evaluation:
Students will pass the course if they meet the requirements. If more than half of required work is turned in by midpoint, then the student will receive an outstanding.

Additional Information:
Prior approval is required, please email/call clerkship contact listed. Once approved, submit signed add/drop slip to OMSA.
### Teaching Elective

**Goals and Unique Aspects:**
Teaching and communication skills are essential to the effective practice of medicine. Medical students will benefit from teaching and tutoring experience relevant to their medical training and clinical practice. This elective is designed to develop teaching skills for 4th year medical students, and includes mentoring for students with an interest in academic medicine.

**General Teaching Elective Options (and others that student may design):**
- **Teaching Assistant.** Develop teaching & learning sessions with block or clerkship faculty; may include writing of cases, teaching a small group tutorial, and other within course assistance. Plan developed with Faculty Mentor.
- **Phase I student tutor.** Develop and coordinate review sessions: step 1 content review; practice sessions and clinical skills coaching for Phase I-II (CE) and Phase II (OSCE) exams (may include participation in the A&L Clinical Reasoning block). Plan developed with Faculty Mentor.

**Objectives:**
Through this elective students will be able to:
- Expand understanding of instructional methods and learning process
- Gain experience with organizing materials for review sessions, PAL tutoring sessions, etc.
- Gain experience in teaching and/or tutoring
- Gain experience in coordinating small group teaching and learning sessions
- Develop skill and gain experience in presentation
- Enhance post-graduate training opportunities

**Responsibilities:**
- Student contacts a potential Faculty Mentor and together devise plans for a Teaching Elective.
- Elective activities potentially include basic and clinical science and performance, and/or Step 1 study, or student suggestion.

**Supervision and Training:**

**Evaluation:**
Grading is Credit/No Credit. Evaluation is the responsibility of the Teaching Elective, with evaluation criteria established at the outset.

**Additional Information:**
Prior approval is required, please email/call clerkship contact listed. Once approved, submit “Teaching Elective” add/drop slip to OMSA.
## DEPARTMENT OF UNDERGRADUATE MEDICAL EDUCATION

### UNM Quality Improvement Practicum

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<td>Faculty Evaluator(s)</td>
<td>Sergio Huerta, MD</td>
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<tr>
<td>Clerkship Contact:</td>
<td>Davette Sandoval</td>
<td><a href="mailto:ddelaosandoval@salud.unm.edu">ddelaosandoval@salud.unm.edu</a></td>
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### Goals and Unique Aspects:

The UNM Quality Improvement Practicum will be curricular opportunity for medical students to learn about quality improvement through the design and implementation of a student-driven quality improvement initiative. Students will be introduced to the field of quality improvement, as well as gain a deeper understanding of its methods, through the completion of online Institute for Healthcare Improvement quality improvement modules and participation in monthly discussion sessions. Throughout the course, students will work in teams to develop a unique quality improvement initiative with the assistance of resident and faculty mentors skilled in quality improvement, as well as field operatives (social work, case management, nursing, and/ or pharmacy quality improvement champions) within UNM Hospital.

### Objectives:

1) Introduce students to the field of quality improvement.
2) Promote a deeper understanding of quality improvement methods through online education, seminar-based discussion, and experiential learning.
3) Facilitate the design, implementation, and evaluation of student-driven quality improvement initiatives.
4) Create student mentorship opportunities with faculty and residents skilled in quality improvement.
5) Improve patient care in areas of student interest.
6) Assist students in publishing completed quality improvement projects at local and national meetings.
7) Provide an opportunity for medical students to fulfill their research requirement.
8) Serve as a forum to connect medical students with quality improvement initiatives

### Responsibilities:

Online educational modules are to be completed independently by medical student participants. Monthly discussion sessions will be led by faculty and resident mentors. Additional meetings to insure project implementation will be coordinated and overseen by faculty mentors, resident mentors, and field operatives. Students will be in regular contact with faculty mentors, resident mentors, and field operatives via email and phone.

### Evaluation:

Student satisfaction will be assessed via pre and post surveys. Student understanding of quality improvement will be assessed via the validated QI-Kat-R questionnaire. Additional metrics for program for success, including the number of completed quality improvement projects and the number of medical student publications, will be assessed on a continuous basis.

### Additional Information:

*APPROVAL REQUIRED*
Prior approval is required. Please contact Faculty Evaluator for approval. Once approved by department, submit add/drop request to OMSA.* Please note this course is graded credit/no credit (a letter grade O, G, S, F will not be assigned).

A series of monthly meetings held over a 9-month period will facilitate a discussion of quality improvement, as well as the design and implementation of a student-driven quality improvement initiative.

- Students will complete the Institute for Healthcare Improvement’s Open School Quality Improvement QI 101 -- 105 modules (101-103 prior to starting, and 4 and 5 during months 3 and 4). A discussion of the material covered by the online module(s) will be led by a faculty/resident mentor to reinforce key points.

- As a team, medical students will identify a project, author a project proposal, complete background research, and plan an initial PDSA cycle during months 1 and 2. Each team will be aided by a faculty/resident mentor, as well as a field operative. Scale should be 2 weeks to 1-month interventions. During months 3, 4, and 5, repeat PDSA cycles will be undertaken.

- Between monthly meetings, students will meet with their faculty/resident mentor on one occasion, and then as needed thereafter. Medical students will meet with their field operative as frequently as necessary in order to successfully implement their quality improvement initiative.

- During month 6, final data will be analyzed and groups will share their projects. Upon completion of the series, students will be encouraged to continue working their intervention, as well as assist the program by serving as a student mentor.

*IMPORTANT NOTE: If student used QIP as credit for their scholarly project in phase I or II, they are not eligible to receive phase III credit.*
Goals and Unique Aspects:
This is a course that teaches 4th year medical students how to teach. The course is designed to help 4th year medical students (course may include residents) develop the skills needed to be more effective educators, learners, and clinicians as they transition to a teaching role in residency and eventually as clinical faculty. All students are welcome, even if they choose not to pursue a career in academics. This course will teach students how to teach colleagues, learners, employees/staff, and patients. This course offers opportunities and develops skillsets that are not available to faculty in many circumstances. Through extensive reading, interactive sessions, and teaching practice, students will be introduced to methods of teaching in large-group, small-group, and one-on-one scenarios. This includes practice teaching one another, junior and senior medical students, resident physicians, and standardized patients. Additionally, as part of this course students will become certified in the Stanford Clinical Teaching Method which can be added to their CV for residency interviews. By the end of the rotation, students will be competent in their understanding of evidence-based methods of learning, optimal teaching, and how to design curricula for academic and non-academic settings. Student participants in this course will have ample opportunity to practice teaching in the Phase I Clinical Reasoning Course, Doctoring, Pediatric Morning Report, Internal Medicine Afternoon Report, and during a UNM freshman course in healthcare.

Objectives:
By the end of the course, learners should be able to:
- Outline at least 4 principles of learning theory
- Describe how principles of learning theory apply to teacher-student and physician-patient interactions
- List at least 4 components of effective evidence-based teaching
- Describe 3 techniques for effective information sharing with colleagues and patients
- Demonstrate at least 2 specific teaching strategies to effectively facilitate learning in clinical situations, large and small-group learning sessions
- Demonstrate at least 3 best practices of public speaking
- Outline the basic structure of a medical curriculum
- Recognize the importance of medical students and residents as teachers
- Increase satisfaction and decrease anxiety about teaching

Responsibilities:
Participants are responsible for the readings (Make it Stick), teaching one another, preparing and teaching in Pediatric and Internal Medicine case conference, and teaching college freshman on UNM main campus.

Supervision and Training:
Supervision of participating learners will occur both in the classroom and in small-group teaching sessions where feedback will be provided by faculty and one another. Learners will practice teaching skills as co-facilitators in small-group sessions for phase I or II medical students or with peers in class. Course faculty will supervise students during these activities or alternatively recruit additional faculty as small group session co-facilitators. Student/resident teaching will be observed during delivery of one or more large-group didactic sessions, after which faculty and class participants will provide feedback.

**Evaluation:**
Final grade is pass/fail. A passing grade is contingent on participation in all the following unless otherwise excused by coordinator:
1) Attendance of at least 75% of didactic sessions,
2) Participation in all assigned teaching sessions,
3) Delivery of a final didactic or other teaching sessions utilizing teaching methods learned in the course,
4) Completion of all online coursework with a passing grade.

**Additional Information:**
The development and structure of the course is based on Dr. David Kern's book Curriculum Development in Medical Education and the AAMC logic model in program evaluation provided by the AAMC’s Te4Q seminar.