



**SCHOOL OF
MEDICINE**

**OFFICE OF
MEDICAL STUDENT AFFAIRS**

A photograph of medical supplies on a white surface. A white paper bag is in the center, with a pen and a pair of glasses inside it. A silver stethoscope is positioned to the right of the bag, and a grey stethoscope is in the foreground, partially overlapping the bag. The background is a plain white surface.

**VISITING STUDENT
CLERKSHIP CATALOG
2021-2022**

The University of New Mexico School of Medicine 2020-2021 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.

The UNM SOM participates in the Visiting Student Learning Opportunities (VSLO) application system. **All** domestic and international visiting elective applications must be submitted using VSLO: <https://students-residents.aamc.org/attending-medical-school/article/visiting-student-learning-opportunities/>

UNM OFFICE OF MEDICAL STUDENT AFFAIRS CONTACT INFORMATION

The information in this handbook is subject to change at any time. If you have questions regarding any policy or requirement in this catalog, please contact the Office of Medical Student Affairs.

Office Contact: Program Coordinator, Visiting Students
 Office of Medical Student Affairs
 HSC-MDVisiting@salud.unm.edu
 Phone: 505-272-3414
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COVID POLICIES FOR THE 2020-21 ACADEMIC YEAR

COVID-19 has disrupted the clinical education of students at the University of New Mexico School of Medicine. This policy is to regulate both incoming and outgoing away rotations to maintain safety, promote equity, and ensure adequate experience for medical students.

This policy is congruent with the AAMC's Coalition for Physician Accountability recommendations updated on April 14, 2021.

- Beginning on April 15, learners may apply for and schedule in-person away rotations with a date concluding in July or later.
- The UNM SOM will accept students in a limited capacity for rotations that include July 1, 2021.
- All VSLO applications will be accepted by the UNM SOM Office of Medical Student Affairs after April 15, 2021 and sent to UNM SOM programs hosting learners for review starting May 1, 2021.
- Visiting student rotations will be limited to one away rotation per student per specialty, except in cases where additional rotations are needed to complete graduation or accreditation requirements.
(The UNM SOM will confirm with home institutions that students do not plan to participate in more than one away rotation.)
- Visiting students (domestic and international) wishing to rotate at UNM SOM must apply to AAMC's Visiting Student Learning Opportunity (VSLO) website:
<https://students-residents.aamc.org/attending-medical-school/article/visiting-student-learning-opportunities/>
- Visiting or returning students entering the state from another state or country or from any other area specified by university or state guidelines may be required to self-quarantine for up to two weeks, as determined by university and state mandates as well as occupational health review.

Given the rapidly changing nature of the current COVID crisis, away rotations may be canceled based on current conditions and depending on the location of the rotation. Cancellations will be based on prevailing university guidelines, municipal regulations, and state and federal mandates.

The Office of Medical Student Affairs will review all incoming and outgoing student requests. All incoming and outgoing out-of-state rotations must be approved by the Associate Dean of Medical Students.

INTRODUCTION

The University of New Mexico School of Medicine welcomes visiting medical students to participate in senior year elective clerkships. Clerkships for domestic and international visiting MD students are coordinated by the Office of Medical Student Affairs.

This catalog contains descriptive information about course and clerkship opportunities for visiting students. The variety of learning experiences includes hospital, clinic, community, and laboratory environments. The information has been condensed in this listing.

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

Visiting students must have completed all course prerequisites (Family Medicine, Internal Medicine, Obstetrics/Gynecology, Pediatrics, Psychiatry, Neurology, and General Surgery). Neurology is a firm requirement for Neurology electives, but may be waived for electives in other departments. Prerequisites are stated in each course description in the catalog. *Each course description identifies which student types are eligible to apply for that elective (Domestic MD, Domestic DO, and/or International). If a student type is not listed, then the elective does not accept that student type.*

While every effort is made to accommodate students' stated preferences, departmental needs take precedence. In developing schedules, the Office of Medical Student Affairs takes these priorities into consideration. Each department establishes the maximum number of students accepted for each rotation. UNM SOM student scheduling requests are given priority over visiting students. Visiting students are expected to meet the same professionalism requirements as UNM SOM students. Please refer to the UNM SOM Medical Student Code of Conduct for more information:

<https://app.box.com/s/vc7268vrewinejlmf72unmb80wk5ged1>

COVID SAFETY REQUIREMENTS

Learners completing essential required rotations must follow all quarantine orders and [COVID-19 safe practices](#). This includes requiring all visiting students be asymptomatic when they begin their travel, wearing a mask and practicing careful personal hygiene during their trip. They must also be screened for symptoms each day before coming to campus (a screening email will be sent daily to your UNM SOM issued email and must be completed daily).

[Here](#) are some of the additional safety measures you can expect and plan ahead for when visiting New Mexico. Please contact the UNM COVID Call Center at 505.515.8212 for additional guidance on travel and follow their recommendations.

For current application processes, please visit our visiting student webpage at:

<https://hsc.unm.edu/medicine/education/md/student-affairs/visiting-students.html> or contact the Office of Medical Student Affairs by email at HSC-MDVisiting@salud.unm.edu

VISITING STUDENT REQUIREMENTS & APPLICATION GUIDELINES

ALL domestic and international visiting student applications MUST be received through VSLO at least 45 days prior to the clerkship start date. **Visiting medical students may NOT seek clerkship “pre-approval” from UNM Faculty or Hospital Staff. Doing so may lead to elective cancellation or dismissal.**

REQUIREMENTS FOR ALL STUDENTS:

The UNM School of Medicine requires visiting students to meet the same standards expected of our own students. ALL visiting medical students must meet the following criteria:

- Be a current medical student in the final year of medical school
- Be in good academic standing
- Be enrolled in an LCME or AACOM accredited medical school (US Students Only)
- Have completed background check since matriculating medical school
- Have completed core clinical clerkships (Family Medicine, Internal Medicine, OB/GYN, Pediatrics, Psychiatry, and General Surgery – Neurology may also be required for Neurology electives)
- Meet any individual departmental requirements (outlined in catalog course description)
- Submit a CV
- Submit a 1-page personal statement addressing interest in specialty/New Mexico/UNM/etc.
- Submit copy of USMLE Step 1 or COMLEX score report – *firm requirement cannot be waived*
- Submit copy of transcript from current medical school
- Submit completed AAMC standardized immunization form
- Submit proof of current BLS certification – *effective for the rotation period*
- Have been N-95 mask fitted within the last year – *must upload copy of mask fit info to VSLO*
- Have current personal health insurance coverage – *effective for the rotation period*
- Have current liability insurance (minimum \$3 million aggregate/\$1 million per occurrence) – *effective for the rotation period*
- Submit \$125 non-refundable processing fee
- Have home institution complete the AAMC Uniform Clinical Training Affiliation Agreement & Implementation letter (post-approval requirement)
- Submit \$22 Needlestick insurance fee (post-approval requirement)

ADDITIONAL REQUIREMENTS FOR INTERNATIONAL STUDENTS:

- Must provide proof of passing TOEFL with score of at least 95/120 *OR* home institution must verify that >80% of the home curriculum is taught in English
- Submit proof that \$125 tuition fee has been paid upon application submission
- Submit a copy of Passport personal identification page (post-approval requirement)
- Submit a copy of VISA (post-approval requirement)

*Please note that due to an increase in class size at the University of New Mexico School of Medicine, elective choices may be very limited. Therefore, it can be very challenging to process schedule change requests. **For accepted visiting students, schedule change requests must be made at least 45 days prior to the start of the rotation.**

*****If a visiting student cancels their elective less than 45 days prior to the start of the rotation, UNM SOM Office of Medical Student Affairs will contact the home institution to make them aware that the student did not follow UNM SOM’s standards for professionalism.**

If you need to cancel an elective, please contact the Office of Medical Student Affairs IMMEDIATELY at HSC-MDVisiting@salud.unm.edu. You must also drop the elective in VSLO.

HOUSING OPTIONS FOR VISITING STUDENTS

While the UNM School of Medicine does not coordinate housing for visiting students, there are a number of resources students may refer to:

Due to COVID, UNM Residence Life & Student Housing will *NOT* be able to accommodate visiting students for the 2021-22 academic year.

UNM Off-Campus Housing Bulletin Board:

<https://och.unm.edu/>

Global Education Office Short Term Housing list:

https://geo.unm.edu/students/life_unm/housing/short_term.html

Housing is not guaranteed through any of the options above. Students are encouraged to also review local listings for additional options.

PUBLIC TRANSPORTATION & PARKING ON CAMPUS

UNM School of Medicine is centrally located and can be accessed by multiple public transit routes. More information about Albuquerque public transit can be found here: <https://www.cabq.gov/transit>

Parking permits can be purchased from the UNM Parking and Transportation Office located on main campus. Daily and weekly permits may be available by contacting PATS at Parktran@unm.edu. Parking permits are non-refundable. For more parking information, please visit <http://pats.unm.edu>

Please note that parking is not guaranteed and is dependent on availability. Students may find it more convenient to use public transit. Please notify your clerkship coordinator if you have any issues obtaining a parking pass.

| UNM School of Medicine 2021-22 Phase III Block Schedule | |
|---|-------------------------------|
| BLOCK | DATES |
| 1 | RESERVED FOR UNM SOM STUDENTS |
| 2 | RESERVED FOR UNM SOM STUDENTS |
| 3 | RESERVED FOR UNM SOM STUDENTS |
| 4 | RESERVED FOR UNM SOM STUDENTS |
| 5 | 08/16 - 09/12/21 |
| 6 | 09/13 - 10/10/21 |
| 7 | 10/11 - 11/07/21 |
| 8 | 11/08 - 12/05/21 |
| 9 | UNAVAILABLE - WINTER BREAK |
| 10 | 01/03 - 1/30/22 |
| 11 | 01/31 - 02/27/22 |
| 12 | 02/28 - 03/27/22 |
| 13 | 03/28 - 04/24/22 |

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Courses Offered by Block

| CLNS# | Course Name | BLOCK # | | | | | | | | | | | | |
|---|--|---------|---|---|---|---|---|---|---|---|----|----|----|----|
| | | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 |
| ANESTHESIOLOGY | | | | | | | | | | | | | | |
| 801 | Elective - Anesthesiology & Critical Care UNMH | | | | | X | X | X | X | | X | X | X | |
| 805 | Elective - Obstetric Anesthesia | | | | | X | X | X | X | | X | X | X | X |
| DERMATOLOGY | | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 |
| 810 | Elective - Clinical Dermatology at UNMH | | | | | X | X | X | X | | X | X | X | X |
| EMERGENCY MEDICINE | | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 |
| 689 | Elective - Pediatric Emergency Medicine | | | | | X | X | X | | | X | X | X | X |
| 821 | Elective - Emergency Medicine at UNMH | | | | | X | X | X | | | X | X | X | X |
| 824 | Elective - Toxicology | | | | | X | X | X | | | X | X | X | |
| 825 | Elective - Wilderness Medicine | | | | | | | | | | | | | X |
| 834 | Elective - Emergency Ultrasound at UNMH | | | | | X | X | X | X | | X | X | X | |
| 835 | Elective - Evolutionary Medicine | | | | | X | X | X | X | | | | | |
| FAMILY MEDICINE | | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 |
| 777 | Sub-I - Family Practice at UNMH | | | | | X | X | X | X | | X | X | X | X |
| 780 | Elective - Health Care for the Homeless | | | | | X | X | X | X | | X | X | X | X |
| INTERNAL MEDICINE | | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 |
| 627 | Elective - Project ECHO | | | | | | | | | | | X | X | |
| 950C | Elective - Culinary Medicine | | | | | | | X | | | | | | X |
| NEUROLOGY | | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 |
| 701 | Sub-I - Neurology at UNMH | | | | | X | X | X | X | | X | X | X | X |
| 704 | Sub-I - Child Neurology at UNMH | | | | | X | X | X | X | | X | X | X | X |
| NEUROSURGERY | | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 |
| 753 | Sub-I - Neurosurgery at UNMH | | | | | X | X | X | X | | X | X | X | X |
| 774 | ICU - Neuroscience Intensive Care Unit (NSICU) | | | | | X | X | X | X | | X | X | X | X |
| OBSTETRICS AND GYNECOLOGY | | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 |
| 654 | Sub-I - Maternal Fetal Medicine at UNMH | | | | | X | X | X | X | | X | X | X | X |
| 660 | Sub-I - Benign Gynecology | | | | | X | X | X | X | | X | X | X | X |
| 950Y | Sub-I - Urogynecology | | | | | X | X | X | | | | | | |
| ORTHOPAEDICS | | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 |
| 850 | Sub-I - General Orthopaedic Surgery | | | | | X | X | X | X | | X | X | X | X |
| 852 | Sub-I - Orthopaedic Trauma | | | | | X | X | X | X | | X | X | X | X |
| 854 | Elective - Orthopaedic Spine Clinical Experience | | | | | X | X | X | X | | X | X | X | X |
| 855 | Elective - Sports Medicine | | | | | X | X | X | X | | X | X | X | X |
| PATHOLOGY | | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 |
| 872 | Elective - Anatomic Pathology at UNMH | | | | | X | X | X | X | | X | X | X | X |
| 874 | Elective - Forensic Pathology | | | | | X | X | X | X | | X | X | X | X |
| 950R | Elective - Hematopathology | | | | | X | X | X | X | | X | X | X | X |
| 950T | Elective - Transfusion Medicine & Coagulation | | | | | X | X | X | X | | X | X | X | X |
| PEDIATRICS | | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 |
| 677 | Sub-I - Pediatrics at UNMH | | | | | X | X | X | X | | X | X | X | X |
| 678 | Elective - Pediatric Cardiology | | | | | X | X | X | X | | X | X | X | X |
| 680 | Elective - Pediatrics Genetics and Dysmorphology | | | | | X | X | X | X | | X | X | X | X |
| 681 | Elective - Pediatric Hematology & Oncology | | | | | X | X | X | X | | X | X | X | X |
| 684 | ICU - Pediatric Intensive Care Unit (PICU) | | | | | X | X | X | X | | X | X | X | X |
| 686 | Elective - Pediatric Infectious Disease | | | | | X | X | X | X | | X | X | X | X |
| 694 | Elective - Pediatric Gastroenterology | | | | | X | X | X | X | | X | X | X | X |
| PHYSICAL MEDICINE AND REHABILITATION | | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 |
| 950L | Elective - Physical Medicine & Rehabilitation | | | | | X | X | X | X | | X | X | X | X |
| 950SR | Elective - Sport and Spine Rehabilitation | | | | | X | X | X | X | | X | X | X | X |

Courses Offered by Block

| CLNS# | Course Name | BLOCK # | | | | | | | | | | | | |
|--|---|---------|---|---|---|---|---|---|---|---|----|----|----|----|
| | | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 |
| PSYCHIATRY | | | | | | | | | | | | | | |
| 726 | Sub-I - Advanced Clinical Psychiatry - Inpatient | | | | | X | X | X | X | | X | X | X | X |
| RADIOLOGY | | | | | | | | | | | | | | |
| 882 | Elective - Neuroradiology | | | | | X | X | X | X | | X | X | X | X |
| 883 | Elective - Diagnostic Radiology | | | | | X | X | X | X | | X | X | X | X |
| 887 | Elective - Musculoskeletal Radiology | | | | | X | X | X | X | | X | X | X | X |
| SURGERY | | | | | | | | | | | | | | |
| 755 | Sub-I - Otolaryngology | | | | | X | X | X | X | | X | X | X | X |
| 758 | Sub-I - Urology | | | | | X | X | X | X | | X | X | X | X |
| 761 | Elective - Plastic Surgery | | | | | X | X | X | X | | X | X | X | X |
| 950X | Sub-I - Plastic/Burn Surgery | | | | | X | X | X | X | | X | X | X | X |
| UNDERGRADUATE MEDICAL EDUCATION | | | | | | | | | | | | | | |
| 950Z | Elective - Creating Medical Educations for the Future | | | | | | X | | | | | | | |

DEPARTMENT OF ANESTHESIOLOGY
Anesthesiology & Critical Care Medicine at UNMH

| | | | | | | | | | | | | | |
|---------------------------------|-------------------|---|---|---|---|-------------------|---|---|---|----|----|----|----|
| Course Number | CLNS 801 | | | | | 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 | |
| # of Students per Block | 3 per block | | | | | | | | | | | | |
| Prerequisites: | Yes | | All Phase II Clerkships | | | | | | | | | | |
| Accepts Visiting Students | Yes | | Domestic MD, Domestic DO*, and International MD | | | | | | | | | | |
| Accepts Off-Cycle Date requests | No | | <i>*DO and International applicants MUST provide USMLE Report</i> | | | | | | | | | | |

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

| | | | | | | | | | | | | | |
|---------------------------------|-------------------|---|---|---|---|-------------------|---|---|---|----|----|----|----|
| Course Number | CLNS 805 | | | | | 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 |
| # of Students per Block | 1 | | | | | | | | | | | | |
| Prerequisites: | Yes | | All Phase II Clerkships | | | | | | | | | | |
| Accepts Visiting Students | Yes | | Domestic MD, Domestic DO*, and International MD | | | | | | | | | | |
| Accepts Off-Cycle Date requests | No | | <i>*DO and International applicants MUST provide USMLE Report</i> | | | | | | | | | | |

Goals and Unique Aspects:

This rotation provides the student with an experience in obstetric anesthesia, a subspecialty not many schools offer. Students applying to obstetrics and gynecology residency are especially encouraged to participate. They will gain a better understanding of the anesthesiologist's role in optimal obstetric management, interprofessional communication, and teamwork.

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 DERMATOLOGY
Clinical Dermatology at UNMH & VAMC

| | | | | | | | | | | | | | |
|---------------------------------|-------------------|---|-----------------------------|---|---|-------------------|---|---|---|----|----|----|----|
| Course Number | CLNS 810 | | | | | 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 |
| # of Students per Block | 4 | | | | | | | | | | | | |
| Prerequisites: | Yes | | All Phase II Clerkships | | | | | | | | | | |
| Accepts Visiting Students | Yes | | Domestic MD and Domestic DO | | | | | | | | | | |
| Accepts Off-Cycle Date requests | No | | | | | | | | | | | | |

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, dermatopathology 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 and Friday mornings. 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 off 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 may be opportunities to complete a case report or other similar publication with mentorship from faculty.

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 |
| X = Offered in Block | | | | | X | X | X | | | X | X | X | X |
| # of Students per Block | 2 | | | | | | | | | | | | |
| Prerequisites: | Yes | | All Phase II Clerkships | | | | | | | | | | |
| Accepts Visiting Students | Yes | | Domestic MD and Domestic DO | | | | | | | | | | |
| Accepts Off-Cycle Date requests | No | | | | | | | | | | | | |

Goals and Unique Aspects:

To become more comfortable with the general care of the acutely ill or injured child.

Objectives:

Familiarize the student with ER procedures and patient care including suturing, splinting, starting IVs, discussing cases with consultants, overall patient flow in the Pediatric ER, and management of the acutely ill or injured child.

Responsibilities:

Clinical: typically 13-18 shifts per block including 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 in PED. Interview dates and travel can also determine the duration of the rotation.

Research: help recruit patients for on-going clinical studies in Peds ER. The attending should orient you to studies with ongoing enrollment, and the study team will take care of enrollment. Ultimately this is the attending's responsibility, but help is always appreciated.

Case Presentation: present an interesting case you saw and managed during the month to the clerkship director. The presentation should include a brief literature review (2-3 sources) on the diagnosis and management of the presenting illness or problem, pertinent labs and imaging, and disposition of the patient.

Supervision and Training:

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

Evaluation:

Clinical observation and final patient presentation. Criteria for outstanding grade: any supervising faculty can nominate the student for Outstanding. In general, the student must be hardworking, organized, enthusiastic, a team player, and provide his/her patients with compassionate and comprehensive care. In addition the student should demonstrate progression in complete and efficient patient presentations that highlight pertinent positives, appropriate differential diagnosis, and initial steps for patient management.

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 requests to drop the rotation.

DEPARTMENT OF EMERGENCY MEDICINE
Emergency Medicine at UNMH

| | | | | | | | | | | | | | |
|--|---|---|-----------------------------|---|---|-------------------|---|---|---|----|----|----|----|
| Course Number | CLNS 821 | | | | | 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 |
| # of Students per Block | 8 | | | | | | | | | | | | |
| Prerequisites: | Yes | | All Phase II Clerkships | | | | | | | | | | |
| Accepts Visiting Students | Yes | | Domestic MD and Domestic DO | | | | | | | | | | |
| Accepts Off-Cycle Date requests | Yes - additional dates are predetermined and already available for VSLO | | | | | | | | | | | | |

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.

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
Toxicology

| | | | | | | | | | | | | | |
|--|----------------------------------|---|--|---|--------------------------|---|---|---|---|----|----|----|----|
| Course Number | CLNS 824 | | | | 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 |
| # of Students per Block | 2 | | | | | | | | | | | | |
| Prerequisites: | Yes | | All Phase II Clerkships | | | | | | | | | | |
| Accepts Visiting Students | Yes | | Domestic MD, Domestic DO, and International MD | | | | | | | | | | |
| Accepts Off-Cycle Date requests | Yes - with department permission | | | | | | | | | | | | |

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:

Observational: Inpatient clinical rounds. Clinical: Toxicology inpatient consults, Emergency Department consults. All of these are currently limited by COVID-19 and students do not participate on bedside consultations. Research: Poison Center and quality assurance and education projects, 30-minute lecture on toxicology topic, opportunity to publish case reports. Required: Pre-rounding via Citrix Receiver access to Poison Center servers. ** An email is sent every morning directing rotators to a Zoom meeting 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:

This rotation adheres to a strict add/drop policy. No changes allowed less than 30 days prior to the rotation start date. This includes drop requests. 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 vary; check website 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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|---------------------------------|-----------------------|---|--|---|---|-------------------|---|---|---|----|----|----|----|
| Course Number | CLNS 825 | | | | | Duration: 4 weeks | | | | | | | |
| Credit Type | Non-Clinical Elective | | | | | | | | | | | | |
| Block Number | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 |
| X = Offered in Block | | | | | | | | | | | | | X |
| # of Students per Block | 20 | | | | | | | | | | | | |
| Prerequisites: | Yes | | All Phase II Clerkships | | | | | | | | | | |
| Accepts Visiting Students | Yes | | Domestic MD, Domestic DO, and International MD | | | | | | | | | | |
| Accepts Off-Cycle Date requests | 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, orthopedic 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:

Several field trips throughout New Mexico. No changes are allowed less than 45 days prior to the rotation start date. This includes requesting to drop the rotation. An outdoor CV and a personal statement indicating why you want to take the rotation is required. The course is demanding and can get physical - although you do not need to be a superior athlete, a modicum of physical and mental fitness will ensure you that this rotation will be one of the best you have ever experienced. ***This elective requires a \$925 course fee. This includes an initial non-refundable course deposit of \$250 (due no later than Oct 31, 2021). The remaining balance of \$675 is due no later than Feb 1, 2022. 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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|--|---|--|---|---|-------------------|---|---|---|---|----|----|----|----|
| Course Number | CLNS 834 | | | | Duration: 4 weeks | | | | | | | | |
| Credit Type | Non-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 | |
| # of Students per Block | 0-2 students per Block depending on availability | | | | | | | | | | | | |
| Faculty Evaluator(s) | Tamara Barrett, MBA, RDMS, Wendy Hanna, MD, and Amanda Medoro, MD | | | | | | | | | | | | |
| Prerequisites: | Yes | All Phase II Clerkships MSIV applicants must have completed at least one EM rotation | | | | | | | | | | | |
| Accepts Visiting Students | Yes | Domestic MD and Domestic DO | | | | | | | | | | | |
| Accepts Off-Cycle Date requests | No | | | | | | | | | | | | |

Goals and Unique Aspects:

This course is designed as an introduction to Point of Care Ultrasound (POCUS). This is a non-clinical elective that integrates emergency medicine knowledge with technical bedside ultrasound skills. The rotation is a combination of lectures, hands-on ultrasound scanning, ultrasound image review, and bedside teaching by ultrasound trained faculty. Didactics are in an asynchronous online format, through pre-recorded online lecture program called SonoSim.

Objectives:

This course is designed to provide the learner with a strong foundation in the basic core applications of POCUS. Students who complete this course will be able to perform basic POCUS in dynamic clinical settings, interpret both normal and abnormal basic POCUS exams and incorporate their interpretation into the care of patients. Learners will also be able to describe the basics of ultrasound physics, ultrasound equipment and image/control modification to maximize image quality.

Responsibilities:

Learners will perform at least 50 POCUS exams during their rotation and complete their corresponding QPathE worksheet. Learners are required to attend weekly Clip Review sessions (4 in total), attend weekly group scanning shifts with the rotation preceptor (4 in total), and be present for additional hands-on scanning (20 hours/week) in the emergency department. The learner also will lead a POCUS journal club on the final week of the clip review session with the guidance of the rotation preceptor.

Supervision and Training:

Learners will be supervised by ultrasound trained EM faculty or EM residents during their rotation in both clinical and non-clinical settings. Their training will be a combination of online modules, hands-on scanning and Clip Review sessions.

Evaluation:

To avoid receiving a fail for this course, the learner must complete a minimum of 75% of the scheduled group scanning shifts (3 of the 4 required), 75% of the Clip Review sessions (3 of the 4 required) and complete 100% of the assigned SonoSim modules. Each course director will submit comments on the learner's performance during the rotation. Included in these comments will be the number and types of ultrasounds completed during the rotation, ability to perform these exams and the learner's ability to interpret ultrasound images in the core areas. For those students with an interest in Emergency Medicine, a SLOR can be generated for the rotation if requested.

DEPARTMENT OF EMERGENCY MEDICINE
Evolutionary Medicine

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|--|------------------------------|---|-----------------------------|---|---|--------------------------|---|---|---|----|----|----|----|
| Course Number | CLNS 835 | | | | | Duration: 4 weeks | | | | | | | |
| Credit Type | Non-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 | | | | | |
| # of Students per Block | Unlimited | | | | | | | | | | | | |
| Prerequisites: | Yes | | All Phase II Clerkships | | | | | | | | | | |
| Accepts Visiting Students | Yes | | Domestic MD and Domestic DO | | | | | | | | | | |
| Accepts Off-Cycle Date requests | No | | | | | | | | | | | | |

Goals and Unique Aspects:

Evolutionary Medicine is the intersection between evolutionary biology, health, and disease. In this elective, we will explore how evolutionary history and natural selection influence pathogen - host interactions, genetics, immunology, cancer, and aging.

Objectives:

At the end of the elective students will understand basic concepts of evolutionary biology as they relate to disease and health, with an emphasis on the role of the microbiome in disease; learn how health systems and prescriber behavior influence antibiotic resistance; understand the evolution of emerging diseases and implications for public health; understand how gene-environment mismatch contributes to chronic inflammatory diseases and cancer; and recognize how some disease symptoms represent host defenses and others are pathogen virulence factors. This is a discussion-based course. Students are expected to complete online assignments, take part in interactive case-based discussions, and complete writing assignments. Students will have opportunities to pursue in-depth study of evolutionary medicine topics and present these to the faculty and students.

Responsibilities:

1. Weekly writing assignments. 12 page in length summary of topics assigned each week.
2. Journal review. We will assign an article for you to assess/critique and discuss during meetings.
3. Final project. Longer written essay or review on the topic of your choice. Length 1-2 pages.

Supervision and Training:

Learners will work with the Dr. Alcock both in small group sessions and, when possible, during clinical shifts in the emergency department. Feedback will be given to learners after discussion sessions and after submission of written assignments. Learners may have opportunities to work additional clinical shifts in the emergency department if desired. Performance during small group sessions and of written assignments will be evaluated weekly.

Evaluation:

Students will be expected to attend online presentations and meetings. 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 may be asked to evaluate the strengths and weaknesses of journal articles in evolutionary medicine. For this journal review assignment, each student will be assigned a journal article to present to the group and provide commentary. Finally, each student is expected to produce a scholarly product during the last week of the course. Students should choose an area that interests them and produce an essay that is also discussed with the group. Participation in discussions and in literature review (50%), Weekly Writing Project and Essay (50%).

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

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|---------------------------------|----------------------------------|---|-----------------------------|---|---|-------------------|---|---|---|----|----|----|----|
| Course Number | CLNS 777 | | | | | 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 |
| # of Students per Block | 3 | | | | | | | | | | | | |
| Prerequisites: | Yes | | All Phase II Clerkships | | | | | | | | | | |
| Accepts Visiting Students | Yes | | Domestic MD and Domestic DO | | | | | | | | | | |
| Accepts Off-Cycle Date requests | Yes - with department permission | | | | | | | | | | | | |

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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|---------------------------------|-------------------|---|-----------------------------|---|---|-------------------|---|---|---|----|----|----|----|
| Course Number | CLNS 780 | | | | | 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 |
| # of Students per Block | 1 | | | | | | | | | | | | |
| Prerequisites: | Yes | | All Phase II Clerkships | | | | | | | | | | |
| Accepts Visiting Students | Yes | | Domestic MD and Domestic DO | | | | | | | | | | |
| Accepts Off-Cycle Date requests | No | | | | | | | | | | | | |

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.

DEPARTMENT OF INTERNAL MEDICINE

Project ECHO: UNM HSC Interprofessional Chronic Complex Disease

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|---------------------------------|----------------------------------|---|-----------------------------|---|---|-------------------|---|---|---|----|----|----|----|
| Course Number | CLNS 627 | | | | | 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 | |
| # of Students per Block | 3 | | | | | | | | | | | | |
| Prerequisites: | Yes | | All Phase II Clerkships | | | | | | | | | | |
| Accepts Visiting Students | Yes | | Domestic MD and Domestic DO | | | | | | | | | | |
| Accepts Off-Cycle Date requests | Yes - with department permission | | | | | | | | | | | | |

Goals and Unique Aspects:

This interprofessional rotation, which includes students from School of Medicine, College of Pharmacy, College of Nursing, Allied health, and the Department of Psychology, 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, such as HIV.

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, including some on-site clinic work, remote video teleconference participation, and asynchronous assignments. 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 (i.e. HIV, HCV, ASAP, Healthy Heart). 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 landiorio, 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. 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:

- Patient write-ups presented to teams
- Written reflections on aspects of chronic disease and the role of interprofessional teams, professionalism associated with management of patients with chronic complex disease
- Learning topics presented to teams
- Clinic mentor evaluation forms
- 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.
- Student evaluation of the rotation.

DEPARTMENT OF INTERNAL MEDICINE
Culinary Medicine

| | | | | | | | | | | | | | |
|--|------------------------------|---|-----------------------------|---|---|---|--------------------------|---|---|----|----|----|----|
| Course Number | CLNS 950C | | | | | | Duration: 4 weeks | | | | | | |
| Credit Type | Non-Clinical Elective | | | | | | | | | | | | |
| Block Number | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 |
| X = Offered in Block | | | | | | | X | | | | | | X |
| # of Students per Block | up to 20 | | | | | | | | | | | | |
| Prerequisites: | Yes | | All Phase II Clerkships | | | | | | | | | | |
| Accepts Visiting Students | Yes | | Domestic MD and Domestic DO | | | | | | | | | | |
| Accepts Off-Cycle Date requests | No | | | | | | | | | | | | |

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 currently utilizes the following modules from the Goldring Center for Culinary Medicine (GCCM) curriculum:

- Introduction to Culinary Medicine
- Weight Management and Portion Control
- Fats, Texture, Increasing Fiber, Lunch
- Food Allergy and Intolerance
- Protein, Amino Acids, Vegetarian Diets, and Eating Disorders
- Renal Physiology, Hypertension, Sodium and Potassium Homeostasis, Sodium Reduction and Flavor Building
- Carbohydrates, Fiber, Diabetes, Snacking, and Desserts
- The Pediatric Diet
- Anti-Inflammatory Diet

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.
- Discuss scripting to talk to patients about diet and nutrition in outpatient visits.
- Become familiar with Lifestyle Medicine (LM) competencies and attempt 1-2 LM changes during the course.
- Practice mindful eating techniques as a powerful tool for improving the experience of eating

Responsibilities:

Participation in all scheduled Zoom sessions including teaching kitchen " labs," small group and clinical seminars, and completion of Health Meets Food modules, all associated quizzes, presentations, and the Lifestyle Medicine assignment.

Learning Activities and Evaluation:

Participation in online seminars

Labs (online cooking classes from home)

Quizzes

Seminars will also incorporate case discussions associated with the modules.

Each student will also provide a 15-minute presentation on a trending nutrition topic using evidence-based literature.

Additional Information:

The Culinary Medicine 4th year elective curriculum is focused on the significant role that food choices and nutrition play in preventing and managing chronic diseases in America, and will help future physicians understand the impact of food on the health of their patients. This curriculum combines basic science and clinical education to 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 into their routine during the course.

The course be entirely online and via zoom.

Once per week, afternoon online cooking classes will be taught by a local registered dietician who regularly teaches in this format. We are privileged to have her participation in the course!

DEPARTMENT OF NEUROLOGY
Neurology Sub-Internship at UNMH

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|---------------------------------|----------------|---|-----------------------------|---|-------------------|---|---|---|---|----|----|----|----|
| Course Number | CLNS 701 | | | | 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 |
| # of Students per Block | 1 | | | | | | | | | | | | |
| Prerequisites: | Yes | | All Phase II Clerkships | | | | | | | | | | |
| Accepts Visiting Students | Yes | | Domestic MD and Domestic DO | | | | | | | | | | |
| Accepts Off-Cycle Date requests | No | | | | | | | | | | | | |

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 a thorough neurologic examination including patients with altered level of consciousness or abnormal mental status
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. Prepare clear, concise, and thorough documentation of patient's neurological history and examination
7. Educate inpatient team members in patient presentations on rounds
8. Apply principles of evidence-based medicine to patient care
9. Demonstrate effective communication with patients and their families from diverse backgrounds
10. 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. If available, students may be able to perform a lumbar puncture under direct supervision. No overnight or weekend call is expected.

Supervision and Training:

Students will typically be assigned to two weeks with cerebrovascular and two weeks with the student's choice, either inpatient wards or consults, if there is sufficient room on the teams. 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 students are 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. 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 UNMH

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|---------------------------------|----------------|---|-----------------------------|---|-------------------|---|---|---|---|----|----|----|----|
| Course Number | CLNS 704 | | | | 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 |
| # of Students per Block | 1 | | | | | | | | | | | | |
| Prerequisites: | Yes | | All Phase II Clerkships | | | | | | | | | | |
| Accepts Visiting Students | Yes | | Domestic MD and Domestic DO | | | | | | | | | | |
| Accepts Off-Cycle Date requests | 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. Prepare clear, concise, and thorough documentation of patient's neurological history and examination.
7. Educate inpatient team members in patient presentations on rounds
8. Apply principles of evidence-based medicine to patient care
9. Demonstrate effective communication with patients and their families from diverse backgrounds
10. Demonstrate professional demeanor and behavior

Responsibilities:

Students will spend 4 weeks on the Child Neurology inpatient/consult service. As part of the team, students will oversee the care of up to 5 patients, under the supervision of the senior resident(s) and supervising attending. Students will attend 2-3 afternoon child neurology clinics per week, attend all teaching conferences available to the neurology residents, and assist in the education of phase II students. If available, students 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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|---------------------------------|----------------------------------|---|-----------------------------|---|-------------------|---|---|---|---|----|----|----|----|
| Course Number | CLNS 753 | | | | 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 |
| # of Students per Block | 10 | | | | | | | | | | | | |
| Prerequisites: | Yes | | All Phase II Clerkships | | | | | | | | | | |
| Accepts Visiting Students | Yes | | Domestic MD and Domestic DO | | | | | | | | | | |
| Accepts Off-Cycle Date requests | Yes - with department permission | | | | | | | | | | | | |

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 Meic Schmidt, 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

| | | | | | | | | | | | | | |
|--|----------------------------------|---|-------------------------|---|---|-------------------|---|---|---|----|----|----|----|
| Course Number | CLNS 774 | | | | | Duration: 4 weeks | | | | | | | |
| 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 | 2 | | | | | | | | | | | | |
| Prerequisites: | Yes | | All Phase II Clerkships | | | | | | | | | | |
| Accepts Visiting Students | Yes | | Domestic MD | | | | | | | | | | |
| Accepts Off-Cycle Date requests | Yes - with department permission | | | | | | | | | | | | |

Goals and Unique Aspects:

To develop a differential diagnosis for a wide range of neurological conditions and to hone your ability to perform and report a focused neurological examination.

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 sub-intern 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 Neuroscience ICU attendings will be primarily responsible for the students and will be assisted by ED attendings,

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.

DEPARTMENT OF OBSTETRICS AND GYNECOLOGY
Maternal Fetal Medicine Sub-Internship at UNMH

| | | | | | | | | | | | | | |
|---------------------------------|----------------|---|-------------------------|---|---|-------------------|---|---|---|----|----|----|----|
| Course Number | CLNS 654 | | | | | 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 |
| # of Students per Block | 1 | | | | | | | | | | | | |
| Prerequisites: | Yes | | All Phase II Clerkships | | | | | | | | | | |
| Accepts Visiting Students | Yes | | Domestic MD | | | | | | | | | | |
| Accepts Off-Cycle Date requests | No | | | | | | | | | | | | |

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
Benign Gynecology Sub-Internship at UNMH

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|---------------------------------|----------------|---|-------------------------|---|-------------------|---|---|---|---|----|----|----|----|
| Course Number | CLNS 660 | | | | 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 |
| # of Students per Block | 1 | | | | | | | | | | | | |
| Prerequisites: | Yes | | All Phase II Clerkships | | | | | | | | | | |
| Accepts Visiting Students | Yes | | Domestic MD | | | | | | | | | | |
| Accepts Off-Cycle Date requests | 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 UNM hospital, main OR, SRMC 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: managing 3rd year medical students, being assigned inpatients, writing daily progress notes, 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: Ambulatory GYN curriculum; Weekly colposcopy conferences, Friday PM didactic sessions, option to attend resident school.

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

| | | | | | | | | | | | | | |
|--|----------------------------------|---|-------------------------|---|---|-------------------|---|---|---|----|----|----|----|
| Course Number | CLNS 950Y | | | | | 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 | | | | | | |
| # of Students per Block | 1 | | | | | | | | | | | | |
| Prerequisites: | Yes | | All Phase II Clerkships | | | | | | | | | | |
| Accepts Visiting Students | Yes | | Domestic MD | | | | | | | | | | |
| Accepts Off-Cycle Date requests | Yes - with department permission | | | | | | | | | | | | |

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 typical objectives for this FPMRS sub-internship are based on the ACGME core competencies and are listed below. Based on considerations surrounding COVID, schedules and clinical exposure may need to be amended and may be different for different blocks. Rather than trying to predict the end of COVID, we will plan for typical objectives and tailor the experience as needed for each block during the 2021-2022 academic year based on the current state of COVID:

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

- 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
3. For intraoperative care:
 - a. Participate in appropriate preoperative time out, including discussion of the surgical plan with the operating room team
 - b. Help properly position the patient for the procedure to minimize compression and stretch neuromuscular injuries
 - c. Discuss appropriate antibiotics and deep vein thrombosis prophylaxis.
 4. 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
 5. 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
 6. 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

Supervision and Training:

Students will be supervised by several members of the FPMRS team: attendings (Komesu, Dunivan, Jeppson, Ninivaggio, and Meriwether), fellows (students will spend time with three FPMRS fellows), and 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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|---------------------------------|----------------------------------|---|-------------------------|---|-------------------|---|---|---|---|----|----|----|----|
| Course Number | CLNS 850 | | | | 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 |
| # of Students per Block | 5 | | | | | | | | | | | | |
| Prerequisites: | Yes | | All Phase II Clerkships | | | | | | | | | | |
| Accepts Visiting Students | Yes | | Domestic MD | | | | | | | | | | |
| Accepts Off-Cycle Date requests | Yes - with department permission | | | | | | | | | | | | |

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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|---------------------------------|----------------------------------|---|-------------------------|---|---|-------------------|---|---|---|----|----|----|----|
| Course Number | CLNS 852 | | | | | 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 |
| # of Students per Block | 5 | | | | | | | | | | | | |
| Prerequisites: | Yes | | All Phase II Clerkships | | | | | | | | | | |
| Accepts Visiting Students | Yes | | Domestic MD | | | | | | | | | | |
| Accepts Off-Cycle Date requests | Yes - with department permission | | | | | | | | | | | | |

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.

Supervision and Training:

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.

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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|---------------------------------|----------------------------------|---|-------------------------|---|-------------------|---|---|---|---|----|----|----|----|
| Course Number | CLNS 854 | | | | 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 |
| # of Students per Block | 5 | | | | | | | | | | | | |
| Prerequisites: | Yes | | All Phase II Clerkships | | | | | | | | | | |
| Accepts Visiting Students | Yes | | Domestic MD | | | | | | | | | | |
| Accepts Off-Cycle Date requests | Yes - with department permission | | | | | | | | | | | | |

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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|---------------------------------|----------------------------------|---|-----------------------------|---|---|-------------------|---|----|---|----|----|----|----|
| Course Number | CLNS 855 | | | | | 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 |
| # of Students per Block | 1 | *Available in Block 8, however department is closed the week of Thanksgiving * Available in Block 10, however block will begin post-UNM Winter Break | | | | | | | | | | | |
| Prerequisites: | Yes | | All Phase II Clerkships | | | | | | | | | | |
| Accepts Visiting Students | Yes | | Domestic MD and Domestic DO | | | | | | | | | | |
| Accepts Off-Cycle Date requests | Yes - with department permission | | | | | | | | | | | | |

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 (**can be in a case report format**) 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: *Interview and examine patients in outpatient clinics.* Present case to attending. *Observe and perform joint injections.* Assist with and complete medical record. Assist in initial evaluation of injured athlete in high school training room. (**Note - In the UNM Lobo Athletic training room, the experience will be observational only**)

Supervision and Training:

Amount and type: Supervision by faculty at all levels of patient contact, including hands-on training and direct observation. Didactic Content: *On line videos of selected joint exams. Weekly 6:45am sports conferences. 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: Student is expected to develop a personal exercise program during this rotation **and attend 4 running medicine sessions.**

DEPARTMENT OF PATHOLOGY
Anatomic Pathology at UNMH

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|--|--------------------------|---|-----------------------------|---|---|--------------------------|---|---|---|----|----|----|----|
| Course Number | CLNS 872 | | | | | 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 |
| # of Students per Block | 1 | | | | | | | | | | | | |
| Prerequisites: | Yes | | All Phase II Clerkships | | | | | | | | | | |
| Accepts Visiting Students | Yes | | Domestic MD and Domestic DO | | | | | | | | | | |
| Accepts Off-Cycle Date requests | No | | | | | | | | | | | | |

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 the 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. In addition, students will accompany our residents, fellow, and attendings while we perform our own fine needle aspiration biopsies on patients, including a subset of cases in which we perform ultrasound-guided biopsies. Finally, students will attend any scheduled multi-disciplinary tumor boards and Pathology resident didactic sessions. By the end of their four weeks, students will have obtained a thorough understanding of the vital diagnostic and consultative role that anatomic pathologists play in our hospital system.

Objectives:

1. Identify common indications for intraoperative frozen section evaluation of surgical specimens.
2. Recognize the role of the surgical pathologist in triaging surgical specimens for ancillary studies such as cytogenetics, flow cytometry, and microbial cultures.
3. Perform gross dissections of simple surgical specimens (e.g., appendices, gallbladders) with direct supervision.
4. Develop differential diagnoses for surgical pathology and cytopathology cases during slide preview sessions.
5. Define the cytologic features of low-grade and high-grade dysplasia, as seen in the routine Pap test.
6. Explain the core cytologic features that are suggestive of malignancy.
7. Perform a successful ultrasound-guided fine needle aspiration biopsy using the Phantom training device.
8. Indicate potential sites for a primary malignancy, based on the pattern of cytokeratin 7 and 20 expression of a metastatic tumor focus.

Responsibilities:

Prior to days spent in the UNMH Gross room, students will be expected to review patient histories for upcoming surgeries. Gross room time will be spent observing dissections and processing simple specimens under direct supervision. During surgical pathology/cytopathology glass slide preview, students will be expected to preview a small subset of cases and, using histologic features and the electronic medical record, generate preliminary diagnoses and/or differential diagnoses for their cases. During case sign-out with the attending, students will be expected to discuss their findings and convey their diagnostic impression and reasoning. Students on the cytopathology service will also be expected to accompany Pathology resident didactic sessions.

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/fellows/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:

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. Recommended Reading: *The Practice of Surgical Pathology: A Beginner's Guide to the Diagnostic Process*. By Diana Weedman Molavi

DEPARTMENT OF PATHOLOGY
Forensic Pathology

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|--|----------------------------------|-----------------------------|---|---|---|--------------------------|---|---|---|----|----|----|----|
| Course Number | CLNS 874 | | | | | 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 |
| # of Students per Block | 1 | | | | | | | | | | | | |
| Prerequisites: | Yes | All Phase II Clerkships | | | | | | | | | | | |
| Accepts Visiting Students | Yes | Domestic MD and Domestic DO | | | | | | | | | | | |
| Accepts Off-Cycle Date requests | Yes - with department permission | | | | | | | | | | | | |

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 MRI 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:

Suggested reading:

- Dolinak, Matshes and Lew Forensic Pathology, Principles and Practice; Elsevier
- Robbins & Cotran Pathologic Basis of Disease; Saunders

DEPARTMENT OF PATHOLOGY
Hematopathology

| | | | | | | | | | | | | | |
|--|----------------------------------|-----------------------------|---|---|---|--------------------------|---|---|---|----|----|----|----|
| Course Number | CLNS 950R | | | | | 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 |
| # of Students per Block | 1 | | | | | | | | | | | | |
| Prerequisites: | Yes | All Phase II Clerkships | | | | | | | | | | | |
| Accepts Visiting Students | Yes | Domestic MD and Domestic DO | | | | | | | | | | | |
| Accepts Off-Cycle Date requests | Yes - with department permission | | | | | | | | | | | | |

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
Transfusion Medicine and Coagulation

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|--|----------------------------------|---|-----------------------------|---|---|--------------------------|---|---|---|----|----|----|----|
| Course Number | CLNS 950T | | | | | 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 |
| # of Students per Block | 1 | | | | | | | | | | | | |
| Prerequisites: | Yes | | All Phase II Clerkships | | | | | | | | | | |
| Accepts Visiting Students | Yes | | Domestic MD and Domestic DO | | | | | | | | | | |
| Accepts Off-Cycle Date requests | Yes - with department permission | | | | | | | | | | | | |

Goals and Unique Aspects:

This course will provide senior medical students with a foundation in clinical and laboratory transfusion, apheresis, and coagulation. The course intends to prepare the student for future residency responsibilities in transfusion, with a focus on practical topics including:

1. Understanding the 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
4. Recognizing, diagnosing, and managing adverse events related to transfusion.

This rotation provides a functional understanding of transfusion and hemostasis medicine necessary for virtually all clinical specialties. It 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:

During the Transfusion Medicine Rotation, the medical students will perform as a junior house officer:

- Real-time consultation for blood component approval
- Clinical and laboratory evaluation of transfusion reactions
- 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)
- Providing clinical support during massive transfusion protocol activations
- Report generation for immunohematology studies and ROTEM panels

The student is expected to be on service M-F from 8-5 pm (no nights or weekends). In addition to the responsibilities outlined above, all students on the service are expected to participate in the weekly Coagulation conference held at TriCore Reference Lab. This conference involves the evaluation of coagulation test utilization, test interpretation, report generation, and clinical-pathologic correlation of laboratory findings with the patient's history. During the rotation, the medical students are expected to prepare and present a fifteen-minute talk based on either a coagulation case or on a pre-approved coagulation topic, **twice** during the rotation.

Supervision and Teaching:

Medical students will be on service with an attending transfusion service physician, who will provide direct supervision. In addition to the attending physician, the student will usually be on service with residents from various services (e.g., pathology, anesthesia) and/or the transfusion medicine fellow. The attending transfusion medicine physician will review and edit the student's diagnostic reports and patient progress notes for accuracy. During the rotation, there will be educational lectures on various transfusion, coagulation, and apheresis based topics deemed necessary for future transfusion based clinical practice.

Evaluation:

The following criteria are used to assess the students on rotation:

- 50%: Direct observation and assessment of written service reports presented to the attending transfusion service physician
- 25%: Directed discussion during transfusion medicine attending didactic sessions
- 15%: Coagulation case presentations
- 10%: Feedback from apheresis nurses, blood bank technologists, +/- Feedback from the Transfusion Medicine Fellow on professionalism and teamwork

Additional Information:

Specific resources will be provided to ensure that the student has the necessary tools and resources required to accomplish stated learning objectives.

DEPARTMENT OF PEDIATRICS
Pediatrics Sub-Internship at UNMH

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|--|----------------------------------|---|-----------------------------|---|---|--------------------------|---|---|---|----|----|----|----|
| Course Number | CLNS 677 | | | | | 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 |
| # of Students per Block | 2 | | | | | | | | | | | | |
| Prerequisites: | Yes | | All Phase II Clerkships | | | | | | | | | | |
| Accepts Visiting Students | Yes | | Domestic MD and Domestic DO | | | | | | | | | | |
| Accepts Off-Cycle Date requests | Yes - with department permission | | | | | | | | | | | | |

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; Morbidity & Mortality conference as they arise.

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. Patricia Hogan (PJHogan1@salud.unm.edu), two weeks prior to block for orientation materials.

DEPARTMENT OF PEDIATRICS
Pediatric Cardiology

| | | | | | | | | | | | | | |
|--|----------------------------------|---|-----------------------------|---|---|--------------------------|---|---|---|----|----|----|----|
| Course Number | CLNS 678 | | | | | 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 |
| # of Students per Block | 1 | | | | | | | | | | | | |
| Prerequisites: | Yes | | All Phase II Clerkships | | | | | | | | | | |
| Accepts Visiting Students | Yes | | Domestic MD and Domestic DO | | | | | | | | | | |
| Accepts Off-Cycle Date requests | Yes - with department permission | | | | | | | | | | | | |

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:

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.

DEPARTMENT OF PEDIATRICS
Pediatric Genetics and Dysmorphology

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|--|----------------------------------|---|-----------------------------|---|---|--------------------------|---|---|---|----|----|----|----|
| Course Number | CLNS 680 | | | | | 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 |
| # of Students per Block | 1 | | | | | | | | | | | | |
| Prerequisites: | Yes | | All Phase II Clerkships | | | | | | | | | | |
| Accepts Visiting Students | Yes | | Domestic MD and Domestic DO | | | | | | | | | | |
| Accepts Off-Cycle Date requests | Yes - with department permission | | | | | | | | | | | | |

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: Tom Cushing, MD, and. 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:

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

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|---------------------------------|-------------------|---|-------------------------|---|---|-------------------|---|---|---|----|----|----|----|
| Course Number | CLNS 681 | | | | | 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 |
| # of Students per Block | 1 | | | | | | | | | | | | |
| Prerequisites: | Yes | | All Phase II Clerkships | | | | | | | | | | |
| Accepts Visiting Students | Yes | | Domestic MD | | | | | | | | | | |
| Accepts Off-Cycle Date requests | No | | | | | | | | | | | | |

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. Student does have the ability to complete the entire 4 week rotation inpatient if they would like an advanced inpatient experience.

Research: Present seminar at the end of the course. Teaching: Patient education and outcome evaluation.

Supervision and Training:

Amount and type: Drs. Jessica M. Valdez, 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 nurse practitioners, 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:

The University of New Mexico School of Medicine 2020-2021 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.

Availability is based on resident schedule for certain blocks.

DEPARTMENT OF PEDIATRICS Pediatric Intensive Care Unit

| | | | | | | | | | | | | | |
|--|----------------------------------|---|-----------------------------|---|---|-------------------|---|---|---|----|----|----|----|
| Course Number | CLNS 684 | | | | | Duration: 4 weeks | | | | | | | |
| 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 | | | | | | | | | | | | |
| Prerequisites: | Yes | | All Phase II Clerkships | | | | | | | | | | |
| Accepts Visiting Students | Yes | | Domestic MD and Domestic DO | | | | | | | | | | |
| Accepts Off-Cycle Date requests | Yes - with department permission | | | | | | | | | | | | |

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.

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:

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.

DEPARTMENT OF PEDIATRICS Pediatric Infectious Disease

| | | | | | | | | | | | | | |
|--|----------------------------------|---|-----------------------------|---|---|--------------------------|---|---|---|----|----|----|----|
| Course Number | CLNS 686 | | | | | 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 |
| # of Students per Block | 1 | | | | | | | | | | | | |
| Prerequisites: | Yes | | All Phase II Clerkships | | | | | | | | | | |
| Accepts Visiting Students | Yes | | Domestic MD and Domestic DO | | | | | | | | | | |
| Accepts Off-Cycle Date requests | Yes - with department permission | | | | | | | | | | | | |

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:

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.

DEPARTMENT OF PEDIATRICS
Pediatric Gastroenterology

| | | | | | | | | | | | | | |
|--|--------------------------|-----------------------------|---|---|---|--------------------------|---|---|---|----|----|----|----|
| Course Number | CLNS 694 | | | | | 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 |
| # of Students per Block | 1 | | | | | | | | | | | | |
| Prerequisites: | Yes | All Phase II Clerkships - | | | | | | | | | | | |
| Accepts Visiting Students | Yes | Domestic MD and Domestic DO | | | | | | | | | | | |
| Accepts Off-Cycle Date requests | Yes - with permission | | | | | | | | | | | | |

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: Availability may be dependent on resident scheduling. Final schedule approval will not be available until after August 1st each year.

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 |
| # of Students per Block | 2 | | | | | | | | | | | | |
| Prerequisites: | Yes | All Phase II Clerkships | | | | | | | | | | | |
| Accepts Visiting Students | Yes | Domestic MD and Domestic DO | | | | | | | | | | | |
| Accepts Off-Cycle Date requests | Yes - with department permission | | | | | | | | | | | | |

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 IO 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.
- Describe the roles of 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.
- Discriminate between a diagnosis, impairment, disability, and deficiency in participation

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)
- 2 weeks - Lovelace Rehabilitation Hospital (rehabilitation and occupational medicine)
- 1 week - Sports and Spine plus Neuromuscular

Overall supervision of the clerkship will be performed by Lawrence J. Horn, M.D.

The rotation locations will have local supervision:

- Lovelace UNM Rehabilitation Hospital supervision will be provided by John Henry Sloan, MD and Wallace Gladden, M.D.
- UNM Hospital Outpatient clinics supervision will be performed by W. Evan Rivers, DO

Evaluation:

- Clinical evaluation: 32%
- Rehabilitation Problem Solving Forms: 18%
- Test questions: 25%
- In Service presentation 25%

DEPARTMENT OF PHYSICAL MEDICINE AND REHABILITATION
Sport and Spine Rehabilitation

| | | | | | | | | | | | | | |
|--|-------------------|---|--|---|---|-------------------|---|---|---|----|----|----|----|
| Course Number | CLNS 950SR | | | | | 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 |
| # of Students per Block | 1 | | | | | | | | | | | | |
| Prerequisites: | Yes | | All Phase II Clerkships | | | | | | | | | | |
| Accepts Visiting Students | Yes | | Domestic MD, Domestic DO, and International MD | | | | | | | | | | |
| Accepts Off-Cycle Date requests | 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 demonstrate 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)

| | | | | | | | | | | | | | |
|--|------------------------|---|---|---|---|-------------------|---|---|---|----|----|----|----|
| Course Number | CLNS 726 | | | | | 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 |
| # of Students per Block | 1-2 students per block | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | |

Goals and Unique Aspects:

Direct responsibility for evaluation, diagnosis, treatment and discharge planning of hospitalized adult, child, or adolescent psychiatric patients (under supervision of attending psychiatrists, psychologists, and resident physicians or fellows). 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:

Performing initial and ongoing evaluations of psychiatric inpatients (history taking- using active listening strategies within the Psychiatric interview, performing physical exams: primarily mental status examinations, and recommending pertinent laboratory testing and other studies), making accurate diagnoses, and leading a multidisciplinary team managing patients with severe psychiatric disorders. Identifying defense mechanisms utilized by patients and incorporating this awareness into treatment plans and interpersonal interactions. Managing one's own wellness while coordinating an inpatient psychiatric service (with support and supervision). Coordinating consulting services and educating families and patients regarding mental health diagnoses, treatments, relapse and risk factors, and available supports and resources.

Responsibilities:

Attendance and participation in reports, rounds and conferences; performing patient interviews and exams, and observing procedures- including mental health court and ECT. Clinical: Extensive patient contact involving approximately eight hours per day in direct patient related activity at the intern level of responsibility. Student is expected to assume primary clinical responsibility for 6-8 patients on the service-per day of service- dependent upon the census. Students take two call shifts in the Psychiatric emergency service- shared with a resident or fellow and includes attending faculty supervision.

Research: Two clinically relevant- evidence based medicine, critical appraisal presentations of a primary research article to the team during the rotation. Teaching: Responsible for helping to teach Phase II clerkship students also assigned to service.

Supervision and Training:

The psychiatric attending faculty and resident or fellow physicians directly supervise the student. Evaluations including interviews, physical examinations, diagnoses, treatment and management plans are all thoroughly reviewed, discussed and modified to ensure excellent patient care. The student is expected to attend all concurrent morning reports, treatment team meetings, journal club, weekly resident seminars, and departmental conferences.

Evaluation:

Student is expected to assume primary clinical responsibility for patients on the service. Criteria for outstanding grade: An "outstanding" grade will be assigned for performance demonstrating exemplary professionalism, ability to achieve therapeutic alliance, excellent communication skills, an unusual depth of knowledge, meticulous patient care with leadership and teamwork skills, competent completion of documentation, and competence in

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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 third year clerkship student or Phase III fourth year students scheduled for the rotation. Rotation is offered at University Mental Health or Children's Psychiatric Center, and VAMC (but no visiting students at the VA) depending upon availability and supervision.

DEPARTMENT OF RADIOLOGY
Neuroradiology

| | | | | | | | | | | | | | |
|--|----------------------------------|-----------------------------|---|---|---|--------------------------|---|---|---|----|----|----|----|
| Course Number | CLNS 882 | | | | | 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 |
| # of Students per Block | 2 | | | | | | | | | | | | |
| Prerequisites: | Yes | All Phase II Clerkships | | | | | | | | | | | |
| Accepts Visiting Students | Yes | Domestic MD and Domestic DO | | | | | | | | | | | |
| Accepts Off-Cycle Date requests | Yes - with department permission | | | | | | | | | | | | |

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 work up an emergent patient with common neuroimaging studies and procedures. Gain an understanding of neuroradiology clinical workflow and environment.

Responsibilities:

Students should plan to attend the daily radiology resident noon conferences, and multidisciplinary conferences and tumor boards as able (Case Conference with Neurology/Neurosurgery, Neuro-oncology Tumor Board, Head and Neck Tumor Board, Pediatric Tumor Board, Epilepsy Conference, Thyroid/Parathyroid Conference). 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 professional in the reading room and radiology department.

Supervision and Training:

Amount and type: Daily supervision and teaching by faculty neuroradiologists. Didactic Content: Daily noon conferences with the residents, 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 can be helpful but would not be 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 Kellie Smith krsmith@salud.unm.edu prior to starting the rotation.**

DEPARTMENT OF RADIOLOGY
Diagnostic Radiology

| | | | | | | | | | | | | | |
|--|----------------------------------|---|-----------------------------|---|---|--------------------------|---|---|---|----|----|----|----|
| Course Number | CLNS 883 | | | | | Duration: 4 weeks | | | | | | | |
| Credit Type | Non-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 |
| # of Students per Block | 6 | | | | | | | | | | | | |
| Prerequisites: | Yes | | All Phase II Clerkships | | | | | | | | | | |
| Accepts Visiting Students | Yes | | Domestic MD and Domestic DO | | | | | | | | | | |
| Accepts Off-Cycle Date requests | Yes - with department permission | | | | | | | | | | | | |

Goals and Unique Aspects:

This general radiology clerkship is designed to provide students with the knowledge, skills, and resources to understand common imaging modalities, basic radiology terminology, appropriate imaging for common indications, radiation and imaging risks, common imaging findings, and radiology reports.

Objectives:

At the end of this rotation, the student should have gained the following:

1. Basic understanding of common imaging modalities.
2. Ability to recognize “don’t miss” diagnoses on common imaging modalities (see AMSER curriculum).
3. Familiarity with imaging terminology to better understand radiology reports.
4. Knowledge of normal radiographic anatomy and appearance of common disease processes.
5. Basic understanding of radiology physics, specifically the effects of radiation, and what studies involve radiation exposure.
6. Familiarity with technology (i.e. PACS).
7. Knowledge of the appropriate use and sequencing of radiologic imaging.
 - a. Learn the most appropriate imaging examinations to order for common clinical questions (using evidence-based guidelines, including ACR Appropriateness Criteria® (AC), etc.).
 - b. Understand the role of the radiologist as a consultant and be able to provide pertinent clinical information to guide appropriate interpretation.
 - c. Understand risks and contraindications for common imaging procedures.

Responsibilities:

- Complete assigned radiology textbook reading and online learning curriculum
- Attend didactic sessions
- Actively participate in medical student didactic sessions
- Complete procedure/productivity log
- Complete and present (to other medical students) one formal case presentation.
- Submit one case presentation for publication (encouraged)
- Complete and pass final examination

Training:

Formal Didactics:

- Resident Noon Conference: M-F at 12 noon (currently virtual)
- Dedicated Medical Student Didactic Sessions (currently virtual)
- Online coursework

Evaluation:

- Clinical evaluations (if applicable) and productivity log
- Completion of online learning
- Case presentation/case submission

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- End-of-rotation exam

Additional Information:

If/when in-person rotations resume, 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 Kellie Smith krsmith@salud.unm.edu prior to starting the rotation.

DEPARTMENT OF RADIOLOGY
Musculoskeletal Radiology

| | | | | | | | | | | | | | |
|---------------------------------|----------------------------------|---|-----------------------------|---|---|-------------------|---|---|---|----|----|----|----|
| Course Number | CLNS 887 | | | | | 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 |
| # of Students per Block | 1 | | | | | | | | | | | | |
| Prerequisites: | Yes | | All Phase II Clerkships | | | | | | | | | | |
| Accepts Visiting Students | Yes | | Domestic MD and Domestic DO | | | | | | | | | | |
| Accepts Off-Cycle Date requests | Yes - with department permission | | | | | | | | | | | | |

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 participate in minor procedures including joint injection and aspirations as well as minor spine procedures. The student will be present in the MSK reading room or doing independent learning (under the discretion of the attending radiologist) Monday-Friday from 8 AM-4:00 PM and will be expected to attend Radiology Noon Conference on a daily basis, which are currently held via teleconference. The student will participate in a project during the rotation in preparing one 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 one 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 biweekly tumor board which are offered through teleconference. 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 Training:

Amount and type: Daily supervision by senior residents, fellows, and faculty radiologists, the majority of which will consist of virtual "readouts" via teleconferencing. Didactic Content: Daily musculoskeletal film reading. Daily radiology conference.

Evaluation:

The students will be assessed at the completion of the rotation by Dr. Josh Rider, or the faculty member with the greatest interaction with the learner. 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, Kellie Smith, krsmith@salud.unm.edu prior to starting the rotation.**

DEPARTMENT OF SURGERY
Otolaryngology Sub-Internship

| | | | | | | | | | | | | | |
|---------------------------------|----------------------------------|---|-----------------------------|---|---|-------------------|---|---|---|----|----|----|----|
| Course Number | CLNS 755 | | | | | 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 |
| # of Students per Block | 1 | | | | | | | | | | | | |
| Prerequisites: | Yes | | All Phase II Clerkships | | | | | | | | | | |
| Accepts Visiting Students | Yes | | Domestic MD and Domestic DO | | | | | | | | | | |
| Accepts Off-Cycle Date requests | Yes - with department permission | | | | | | | | | | | | |

Goals and Unique Aspects: The goal of this rotation is to develop a foundation of understanding of surgical and non-surgical disorders of the head and neck, and to augment existing knowledge of the subject. The rotation should be of substantial benefit to learners seeking to prepare for a career in Otolaryngology-Head and Neck Surgery (OHNS), or to augment knowledge for those pursuing other specialties.

Specific goals:

1. Understand basic head and neck anatomy and pathophysiology of common disorders.
2. Become competent in head and neck physical exam with recognition of normal and abnormal.
3. Develop differential diagnosis of common head and neck complaints.
4. Develop understanding of outpatient, inpatient and surgical management of head and neck disorders.

Objectives:

1. Practice-Based Learning and Improvement: Develop understanding of adjunctive testing information, such as audiometry, swallow and voice evaluation, and others in collaboration with interdisciplinary team, and appreciate laryngeal evaluation on both indirect exam and operative endoscopy.
2. Patient Care and Procedural Skills: Obtain accurate and efficient Otolaryngology-specific history and physical examination; evaluate and make recommendations for patient care with appropriate supervision. Assist and perform procedures and surgeries with appropriate, direct supervision.
3. Systems-Based Practice: Understand the role of the Otolaryngologist within the interdisciplinary team and the hospital system as a whole to optimize patient care and outcomes.
4. Medical Knowledge: Demonstrate preparation and prior study in clinic and the operating room; prepare educational didactic presentation to present to the Division at the end of the rotation.
5. Interpersonal and Communication Skills: Demonstrate compassionate communication with patients with sensitivity to diversity, equity and inclusion and the greater context of the patient's situation within society. Communicate effectively and professionally with team members and other hospital staff.
6. Professionalism: Present on rounds and at weekly clinical conference; take primary responsibility for patients in the learner's panel; appropriately utilize and complete medical records in a timely fashion.

Responsibilities:

Learners ideally will function at the level of an Otolaryngology-Head and Neck Surgery intern, will attend clinics and OR as scheduled, and work within the resident/APP team to facilitate care for patients with head and neck complaints. Learners are encouraged to seek out opportunities for quality improvement within the hospital, and are expected to provide feedback and evaluation of attendings and residents on the service.

Supervision and Training:

All work is supervised by surgical attendings and senior residents. Teaching occurs during daily rounds, in the operating room, in clinic and in twice weekly didactic sessions. All patients will be presented to a senior team member, and direct supervision will be provided during all procedures or surgeries.

Evaluation:

Criteria for Outstanding Grade: Performing at or beyond 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
Urology Sub-Internship

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|--|----------------------------------|---|-----------------------------|---|---|--------------------------|---|---|---|----|----|----|----|
| Course Number | CLNS 758 | | | | | 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 |
| # of Students per Block | 1 | | | | | | | | | | | | |
| Prerequisites: | Yes | | All Phase II Clerkships | | | | | | | | | | |
| Accepts Visiting Students | Yes | | Domestic MD and Domestic DO | | | | | | | | | | |
| Accepts Off-Cycle Date requests | Yes - with department permission | | | | | | | | | | | | |

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 the wards, in the 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
Plastic Surgery

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|--|----------------------------------|-----------------------------|---|---|---|--------------------------|---|---|---|----|----|----|----|
| Course Number | CLNS 761 | | | | | 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 | x |
| # of Students per Block | 1 | | | | | | | | | | | | |
| Prerequisites: | Yes | All Phase II Clerkships | | | | | | | | | | | |
| Accepts Visiting Students | Yes | Domestic MD and Domestic DO | | | | | | | | | | | |
| Accepts Off-Cycle Date requests | Yes - with department permission | | | | | | | | | | | | |

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 Training:

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
Plastic/Burn Surgery Sub-Internship

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|--|----------------------------------|---|-----------------------------|---|---|--------------------------|---|---|---|----|----|----|----|
| 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 |
| # of Students per Block | 1 | | | | | | | | | | | | |
| Prerequisites: | Yes | | All Phase II Clerkships | | | | | | | | | | |
| Accepts Visiting Students | Yes | | Domestic MD and Domestic DO | | | | | | | | | | |
| Accepts Off-Cycle Date requests | Yes - with department permission | | | | | | | | | | | | |

Goals and Unique Aspects:

This rotation provides the subintern an intensive exposure to the care of the plastic surgery and burn patient: Surgical and non-surgical treatment, critical care management and evaluation of outpatient wounds. The subintern will participate in the care of patients, assessment of wound depth and the prognosis for wound healing and excisional debridement and autografting of 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 plastic surgery and burn patients.
2. Knowledge, diagnostic and treatment skills. Demonstrate knowledge about established and evolving management of 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). For burn surgery, perform tangential burn wound excision, harvest split thickness autografts, apply and secure autografts to wound, use skin graft mesher, and perform escharotomy. For plastic surgery, learn about the reconstructive ladder and advanced techniques for wound closure.

Responsibilities:

The subintern will function as an intern on the Plastic/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 our educational conference, lead rounds on their patients, see patients in the clinic, and operate as described above. For the new plastic/burn surgery sub internship, the student will be expected to take call for 2 weekends (out of their 4 week rotation) along with select weekdays (for maxillofacial trauma call) at the discretion of the plastics chief resident but not to exceed duty hour rules. No night shifts. Rotation will primarily be inpatient direct patient care but will also include outpatient clinics and consult components.

Supervision and Training:

Supervision will be from the Plastic/Burn Service team including attendings, residents and APPs. 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
Creating Medical Educators for the Future

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|--|----------------------------------|---|-----------------------------|---|---|-------------------|---|---|---|----|----|----|----|
| Course Number | CLNS 950Z | | | | | Duration: 4 weeks | | | | | | | |
| Credit Type | Non-Clinical Elective | | | | | | | | | | | | |
| Block Number | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 |
| X = Offered in Block | | | | | | X | | | | | | | |
| # of Students per Block | 20 | | | | | | | | | | | | |
| Prerequisites: | Yes | | All Phase II Clerkships | | | | | | | | | | |
| Accepts Visiting Students | Yes | | Domestic MD and Domestic DO | | | | | | | | | | |
| Accepts Off-Cycle Date requests | Yes - with department permission | | | | | | | | | | | | |

Goals and Unique Aspects:

This course teaches 4th year medical students how to teach and all participants will earn a Stanford Clinical Teaching certificate. 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 as resident or attending physicians. 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. Through 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. As part of this course students will become certified in the Stanford Clinical Teaching Method which can be added to their CVs and is often discussed during 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 the Phase I WISE Curriculum.

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 first or second year students in the WISE Curriculum.

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.