# TABLE OF CONTENTS

2024-2025 Calendar of Clerksnip Periods	
Clerkship Year 2024-2025 Period Dates	3
2025-2026 Calendar of Clerkship Periods	4
Clerkship Year 2025-2026 Period Dates	5
2024-2026 Clerkship Scheduling Calendar	6
Advice from the Advising Deans – February 2024	8
SECTION I. THE CLERKSHIP CURRICULUM	9
Required Clerkships	9
Selective I: Fundamentals of Clinical Care	10
Selective II: Subinternship	
Index of Clinical Clerkships	
Clerkships With No Core Clerkship Prerequisites	
Clerkships Offered for Two Weeks	
Clerkships Requiring Prior Approval Before Registering	
Special Clinical Electives (398A Clerkships)	14
SECTION II. ENTERING CLERKSHIP DRAW REQUESTS ONLINE	15
The Clerkship Scheduling Process 2024	15
Clerkship Petitions Committee	16
Clerkship Draw Program	
Visual Representation of the Schedule	
Entering Draw Requests for Academic Years 2024-2026	
The Second Draw	
SECTION III. OTHER CLINICAL REQUIREMENTS	26
Attacher	0.0
Attendance	
Student Duty Hours and Work Environment	
Respectful Environment and Mistreatment Policy	
Evaluation of Performance in Clinical Clerkships	
INDE 297: Reflection and Contextual Medicine (RCM)	
Links for Other Clinical Requirements	
Working in the Clinical and Lab Setting: Universal Precautions	
Working in the Chilical and Lab Setting. Onliversal Frecautions	30
CECTION IV. CONT. CT. INFORMATION	
SECTION IV. CONTACT INFORMATION	41

## 2024-2025 CALENDAR OF CLERKSHIP PERIODS

## **SUMMER QUARTER**

PERIOD 1 July 1 - July 28, 2024 PERIOD 2 July 29 - August 25, 2024

PERIOD 3 August 26 - September 22, 2024

#### **AUTUMN QUARTER**

PERIOD 4 September 23 - October 20, 2024
PERIOD 5 October 21 - November 17, 2024
PERIOD 6 November 18 - December 15, 2024

HOLIDAY BREAK December 16, 2024 – January 5, 2024

#### WINTER QUARTER

PERIOD 7 January 6 - February 2, 2025 PERIOD 8 February 3 - March 2, 2025 PERIOD 9 March 3 - March 30, 2025

#### **SPRING QUARTER**

PERIOD 10 March 31 - April 27, 2025
PERIOD 11 April 28 - May 25, 2025
PERIOD 12 May 26 - June 22, 2025

SUMMER BREAK June 23 – June 29, 2025

CPX DATES July 15 – August 2, 2024 (Monday to Friday from 1:00 pm to 6:00 pm)

## DATES FOR SCHEDULING VISITING STUDENTS

Visiting students will be scheduled as follows:

SUMMER QUARTER (Periods 1, 2, 3) April 22, 2024
AUTUMN QUARTER (Periods 4, 5, 6) July 22, 2024
WINTER QUARTER (Periods 7, 8, 9) October 21, 2024
SPRING QUARTER (Periods 10, 11, 12) January 27, 2025

# **CLERKSHIP YEAR 2024-2025 PERIOD DATES**

PERIOD START					
PERIOD	DATE	PERIOD END DATE			
Period 1	7/1/24	7/28/24			
Period 1A	7/1/24	7/14/24			
Period 1B	7/15/24	7/28/24			
Period 2	7/29/24	8/25/24			
Period 2A	7/29/24	8/11/24			
Period 2B	8/12/24	8/25/24			
Period 3	8/26/24	9/22/24			
Period 3A	8/26/24	9/8/24			
Period 3B	9/9/24	9/22/24			
Period 4	9/23/24	10/20/24			
Period 4A	9/23/24	10/6/24			
Period 4B	10/7/24	10/20/24			
Period 5	10/21/24	11/17/24			
Period 5A	10/21/24	11/3/24			
Period 5B	11/4/24	11/17/24			
Period 6	11/18/24	12/15/24			
Period 6A	11/18/24	12/1/24			
Period 6B	12/2/24	12/15/24			
Period 7	1/6/25	2/2/25			
Period 7A	1/6/25	1/19/25			
Period 7B	1/20/25	2/2/25			
Period 8	2/3/25	3/2/25			
Period 8A	2/3/25	2/16/25			
Period 8B	2/17/25	3/2/25			
Period 9	3/3/25	3/30/25			
Period 9A	3/3/25	3/16/25			
Period 9B	3/17/25	3/30/25			
Period 10	3/31/25	4/27/25			
Period 10A	3/31/25	4/13/25			
Period 10B	4/14/25	4/27/25			
Period 11	4/28/25	5/25/25			
Period 11A	4/28/25	5/11/25			
Period 11B	5/12/25	5/25/25			
Period 12	5/26/25	6/22/25			
Period 12A	5/26/25	6/8/25			
Period 12B	6/9/25	6/22/25			

## 2025-2026 CALENDAR OF CLERKSHIP PERIODS

## **SUMMER QUARTER**

PERIOD 1 June 30 - July 27, 2025 PERIOD 2 July 28 - August 24, 2025

PERIOD 3 August 25 - September 21, 2025

#### **AUTUMN QUARTER**

PERIOD 4 September 22 - October 19, 2025 PERIOD 5 October 20 - November 16, 2025 PERIOD 6 November 17 - December 14, 2025

HOLIDAY BREAK December 15, 2025 – January 4, 2026

#### WINTER QUARTER

PERIOD 7 January 5 - February 1, 2026 PERIOD 8 February 2 - March 1, 2026 PERIOD 9 March 2 - March 29, 2026

#### **SPRING QUARTER**

PERIOD 10 March 30 - April 26, 2026
PERIOD 11 April 27 - May 24, 2026
PERIOD 12 May 25 - June 21, 2026

SUMMER BREAK June 22 – June 28, 2026

CPX DATES July 14 – August 1, 2025 (Monday to Friday from 1:00 pm to 6:00 pm)

## DATES FOR SCHEDULING VISITING STUDENTS

Visiting students will be scheduled as follows:

SUMMER QUARTER (Periods 1, 2, 3) May 5, 2025 AUTUMN QUARTER (Periods 4, 5, 6) August 4, 2025 WINTER QUARTER (Periods 7, 8, 9) November 3, 2025 SPRING QUARTER (Periods 10, 11, 12) February 2, 2026

# **CLERKSHIP YEAR 2025-2026 PERIOD DATES**

PERIOD START					
PERIOD	DATE	PERIOD END DATE			
Period 1	6/30/25	7/27/25			
Period 1A	6/30/25	7/13/25			
Period 1B	7/14/25	7/27/25			
Period 2	7/28/25	8/24/25			
Period 2A	7/28/25	8/10/25			
Period 2B	8/11/25	8/24/25			
Period 3	8/25/25	9/21/25			
Period 3A	8/25/25	9/7/25			
Period 3B	9/8/25	9/21/25			
Period 4	9/22/25	10/19/25			
Period 4A	9/22/25	10/5/25			
Period 4B	10/6/25	10/19/25			
Period 5	10/20/25	11/16/25			
Period 5A	10/20/25	11/2/25			
Period 5B	11/3/25	11/16/25			
Period 6	11/17/25	12/14/25			
Period 6A	11/17/25	11/30/25			
Period 6B	12/1/25	12/14/25			
Period 7	1/5/26	2/1/26			
Period 7A	1/5/26	1/18/26			
Period 7B	1/19/26	2/1/26			
Period 8	2/2/26	3/1/26			
Period 8A	2/2/26	2/15/26			
Period 8B	2/16/26	3/1/26			
Period 9	3/2/26	3/29/26			
Period 9A	3/2/26	3/15/26			
Period 9B	3/16/26	3/29/26			
Period 10	3/30/26	4/26/26			
Period 10A	3/30/26	4/12/26			
Period 10B	4/13/26	4/26/26			
Period 11	4/27/26	5/24/26			
Period 11A	4/27/26	5/10/26			
Period 11B	5/11/26	5/24/26			
Period 12	5/25/26	6/21/26			
Period 12A	5/25/26	6/7/26			
Period 12B	6/8/26	6/21/26			

## 2024-2026 CLERKSHIP SCHEDULING CALENDAR

## Wednesday, January 31, 2024 Clerkship Orientation Webinar (Meeting 1 of 2)

5:00 pm-6:00 pm Zoom Webinar Link:

https://stanford.zoom.us/j/92587400819?pwd=UlB4bjhIZ1FPaHVnU0VRdWNEYIFzZz09

## Tuesday, February 13, 2024 Clerkship Draw Orientation Webinar (Meeting 2 of 2)

6:00 pm-7:00 pm Zoom Webinar Link:

https://stanford.zoom.us/j/95312739995?pwd=VkRrNUJIRjgvY2dJeERXZi9Jby8zZz09

• The Draw for Academic Years 2024-25 and 2025-26 will be opened online at the Clerkship Fishbowl System (Online Fishbowl) at <a href="http://med.stanford.edu/medfishbowl.html">http://med.stanford.edu/medfishbowl.html</a>

Note: Username is the Stanford Student ID number (without the initial "0"), and all incoming clinical students need to set up their passwords by clicking "Reset Password." Choose "Student" under Pick a User Type, enter your Stanford Student ID and email address to reset your password. An email with the link to reset your password will be sent to you. When choosing a password, make sure all requirements on the right are checked. If any of the requirements is not checked, your password will not be saved.

 Students enter their clerkship draw requests for Medicine, Surgery, and two other cores of the student's choice into the Clerkship Fishbowl System (Online Fishbowl) at http://med.stanford.edu/medfishbowl.html

## Wednesday, February 21, 2024 Clerkship Draw for Medicine, Surgery and two Core Clerkships of the student's choice

- The Deadline to enter Draw requests for Medicine, Surgery, and two other cores of the student's choice for academic years 2024-25 and 2025-26 is Wednesday, February 21, 2024 at 7:58 a.m.
- 8:00 a.m. Clerkship scheduling (The FIRST DRAW FOR MEDICINE, SURGERY, AND TWO OTHER CORES OF THE STUDENT'S CHOICE) will be run for Academic Years 2024-25 and 2025-26 (clerkship periods beginning July 1, 2024 through June 21, 2026).
- **At noon** Draw results will be posted online in the Clerkship Fishbowl System at <a href="http://med.stanford.edu/medfishbowl.html">http://med.stanford.edu/medfishbowl.html</a>
- At noon The Draw for Academic Years 2024-25 and 2025-26 will be reopened online at the Clerkship Fishbowl System (Online Fishbowl) at http://med.stanford.edu/medfishbowl.html

Note: Student usernames and passwords are necessary for data entry. Username is the Stanford Student ID number (without the initial "0").

• Students enter their clerkship draw requests for the rest of the core clerkships into the Clerkship Fishbowl System (Online Fishbowl).

## Wednesday, February 28, 2024 Clerkship Draw for the Rest of the Core Clerkships

- The Deadline to enter Draw requests for the rest of the core clerkships for academic years 2024-25 and 2025-26 is **Wednesday**, **February 28**, 2024 at 7:58 a.m.
- 8:00 a.m. Clerkship scheduling (The SECOND DRAW FOR THE REST OF THE CORE CLERKSHIPS) will be run for Academic Years 2024-25 and 2025-26 (clerkship periods beginning July 1, 2024 through June 21, 2026).
- **At noon** Draw results will be posted online in the Clerkship Fishbowl System at <a href="http://med.stanford.edu/medfishbowl.html">http://med.stanford.edu/medfishbowl.html</a>

Monday, March 11, 2024 (8:00 am) First Weekly Shuffle for Non-Core Clerkships for Academic Years 2024-25 and 2025-26 for all incoming clinical students.

## Advice from the Advising Deans – February 2024

You are about to begin a very exciting part of your medical training – your clinical clerkships – in which you will be given increasing responsibility for the care of patients and will have an opportunity to work in various clinical disciplines, one of which will become your career focus. This *Clerkship Handout* provides information about the logistics of planning your clinical curriculum.

Clerkships are constantly evolving, and changes are sometimes made as the academic year progresses. You will find your fellow clinical students to be a great resource, particularly those who are approaching graduation this year. You will also learn about your responsibilities and the faculty expectations of your performance during INDE 206 (spring quarter "Practice of Medicine"). There are other resources available on the academic advising website, <a href="http://med.stanford.edu/md/academic-advising.html">http://med.stanford.edu/md/academic-advising.html</a>. You can also meet directly with your advisor, who is available and pleased to work with you to plan your schedule.

An important predictor of your success in residency applications will be your performance in the clinical clerkships, especially the core clerkships and the advanced rotations in your field of training. Therefore, it is in your interest to give clerkships your complete, most passionate and undivided attention and to minimize your involvement in other activities during this time. Your emphasis should be on receiving a comprehensive clinical education, regardless of your eventual choice of specialty. A goal of the Stanford curriculum is for each graduate to have outstanding general clinical competence, and students who have devoted themselves to clerkships fully have achieved this goal.

Several weeks after the completion of each clerkship you will receive an evaluation of your performance, prepared by the director after receiving input from the people with whom you have worked. Evaluations from all clinical clerkships in the first clinical year and from periods 1-2 in the graduation year will be included in your Medical School Performance Evaluation (Dean's) letter. We also try to include evaluations from elective clerkships completed in period 3 of your second clinical year in the MSPE. The deadline for submission of the MSPE, as required by the residency application process, is around September 26 each year.

If you have any concerns about your experience on a clerkship or your evaluation, please contact your advising dean, who can point you in the right direction to resolve the issue. This should be done as soon as possible, since early intervention is more likely to result in satisfactory resolution.

Enjoy the year! It can be an amazing period of growth of your skills and confidence.

## SECTION I. THE CLERKSHIP CURRICULUM

## **Required Clerkships:**

Students must have successfully completed all pre-clerkship courses prior to beginning clerkships. NOTE: Students who began clerkships in P14 of the 2020-21 academic year or later are required to complete 99 clinical units. For students who began clerkships prior to P14 of 2020-21, the clerkship requirement is 96 units. *Graduation requirements for clinical training are subject to change.* 

Clerkship#	Department	Title	Units		
To be completed within the student's first 12 months:					
MED 300A	Medicine	Internal Medicine Core	12 (8 weeks)		
SURG 300A	Surgery	Surgery Core	12 (8 weeks)		
Two of the clerkships	below (assigned by draw process) ı	must also be completed within student'	s first 12 months:		
ANES 306A or P	Anesthesia	Critical Care Core	6 (4 weeks)		
EMED 301A	Emergency Medicine	Emergency Medicine Core	6 (4 weeks)		
FAMMED 301A	ED 301A Family & Community Medicine Family Medicine Core		6 (4 weeks)		
MED 313A	Medicine	Ambulatory Medicine Core	6 (4 weeks)		
NENS 301A	Neurology	Neurology Core	6 (4 weeks)		
OBGYN 300A	GYN 300A Obstetrics & Gynecology Obstetr		9 (6 weeks)		
PEDS 300A	Pediatrics	Pediatrics Core	12 (8 weeks)		
PSYC 300A	Psychiatry	Psychiatry Core	6 (4 weeks)		
These clerkships may be completed any time prior to graduation:					
Selective I: Fundamer	6 (4 weeks)				
Selective II: Subintern	Selective II: Subinternship (chosen from approved list)				
ELECTIVE	ELECTIVE				
Total clinical units requ	uired for graduation		99 (66 weeks)		

Periods 5 and 6 of the final clerkship year are blocked for residency interviews.

Students must begin the following clerkships no later than Period 7 of the final clerkship year.

- Internal Medicine
- · Obstetrics and Gynecology
- Pediatrics
- Surgery

Students must begin the following clerkships no later than Period 10 of the final clerkship year.

- Ambulatory Medicine
- Critical Care
- Emergency Medicine
- Family Medicine
- Neurology
- Psychiatry

Periods 11 and 12 of the final clerkship year are not available for Core Clerkship scheduling.

## Selective I: Fundamentals of Clinical Care

Students must complete one month of clerkship(s) from the Selective I list.

Students will broaden their professional education by participating in clinical experiences *in areas not covered in a core clerkship*. This requirement may be met through completion of a clerkship in an ambulatory or combined ambulatory/inpatient setting.

#### Students will:

- Strengthen the ability to perform a directed history and physical examination.
- Become competent at managing problems in an ambulatory setting.
- Build an understanding of transitions between inpatient and outpatient care.

#### Selective clerkship should:

- Provide at least 50% of student experience in an ambulatory/outpatient setting.
- Emphasize common problems in an area relevant to generalist practice.
- Provide knowledge, skills, and attitudes that will enhance development as a well-rounded physician.
- Allow students to accept direct responsibility for patients, including serving as the first to encounter the
  patient, perform procedures, counsel patients, and write notes and orders.
- Provide opportunities for patient follow-up.

## Selective I List: Fundamentals of Clinical Care

#### Approved Clerkships

Department	Clerkship#	Clerkship Name	Location
Anesthesia	304A*	Chronic Pain Management	SUMC, SMOC
Dermatology	300A	Dermatology	SUMC
Emergency Medicine	313A,D	Emergency Medicine	SUMC, Kaiser Santa Clara; KPMC
Family & Community Medicine	310A	Continuity of Care	Various
Family & Community Medicine	345E*	Family Practice Office	Various Office Sites
Medicine	303A,B,C	Cardiology	SUMC, PAVAMC, SCVMC
Medicine	306A*	Endocrinology & Metabolism	SHC, PAVAMC, SCVMC
Medicine	319E	The Community Health of the Underserved	PAVAMC, SCVMC
Medicine	322A	Outpatient Medical Oncology	SUMC
Medicine	323A	Trans-Disciplinary Breast Oncology	SUMC
Medicine	342A*	Geriatric Medicine	SUMC, PAVAMC
Medicine	343B	Palliative Care	SUMC, PAVAMC, SCVMC
Obstetrics & Gynecology	302A*	Pediatric Adolescent Gynecology	Stanford Sunnyvale Clinic
Ophthalmology	300A,E*	Ophthalmology	SUMC, PAVAMC, SCVMC; VAPAHCS-Livermore
Orthopaedic Surgery	303C	Rehabilitation Medicine	SCVMC
Orthopaedic Surgery	304A*	Physical Medicine and Rehabilitation	SUMC, PAVAMC, SCVMC
Orthopaedic Surgery	306A	Orthopaedics	SHC, PAVAMC, SCVMC
Otolaryngology	307A*	Otolaryngology	SUMC, PAVAMC, SCVMC
Pediatrics	315A*	Adolescent Medicine	Various
Pediatrics	340D*	Child Health	Kaiser Milpitas Office
Psychiatry	308E	Trauma Psychiatry	VA Menlo Park
Psychiatry	328B	Addiction Treatment Services	PAVAMC
Radiation Oncology	300A	Radiation Oncology	SUMC
Radiology	301A	Diagnostic Radiology & Nuclear Medicine	SUMC
Urology	308A,B,C*	Urology	SUMC, PAVAMC, SCVMC

<sup>\*</sup> Available as both a two-week and four-week rotation. If students chose a two-week rotation, they must pair it with another two-week rotation on this list to receive full selective I credit.

## Selective II: Subinternship

#### Students must complete one clerkship from the Selective II List

Students will broaden their professional education by participating in clinical experiences *in areas not covered in a core clerkship*. This requirement may be met through completion of a clerkship in an intensive inpatient setting. Through an intensive inpatient experience, students will:

- Provide direct patient care, with internship-like responsibilities, functioning as primary providers at a Manager level in the RIME framework.
- Work on interprofessional teams.
- Strengthen their clinical and procedural skills.
- Improve their ability to manage and provide care to complex, acutely ill patients.

#### Selective Clerkship should:

- Provide at least 75% of student experience in an inpatient setting.
- Provide adequate volume and complexity of patients to support an internship-like experience.
- Allow student to be responsible for direct management and care of patients.
- Support students in building upon knowledge and skills learned during the core clerkships.
- Provide students Internship-like responsibilities: primary workup of new patients, write orders, perform procedures, participate in daily care, take night call, write notes, and dictate discharge summary.

## **Selective II List: Subinternship** (Approved Clerkships)

<u>Department</u>	Clerkship#	Clerkship Name	Location
Cardiothoracic Surgery	300A	Cardiothoracic Surgery	SUMC
Family & Community Medicine	364E	Subinternship in Family Medicine	O'Connor Hospital, etc.
Medicine	304A	Cardiovascular Medicine-Inpatients	SHC
Medicine	311D	Advanced Medicine	KPMC
Medicine	312C	Advanced Medicine	SCVMC
Medicine	314A	Advanced Medicine	SUMC
Medicine	321A	Inpatient Medical Oncology	SUMC
Medicine	339B	Advanced Medicine	PAVAMC
Neurology	307A	Advanced Clinical Elective in Child Neurology	SUMC
Neurology	308A	Advanced Clinical Elective in Adult Neurology	SUMC
Neurosurgery	318A	Subinternship in Neurosurgery	SHC, LPCH, PAVA, SCVMC
Obstetrics & Gynecology	304A*	Inpatient Gynecology	SUMC
Obstetrics & Gynecology	307A*	Maternal-Fetal Medicine	SUMC
Obstetrics & Gynecology	308A	Gynecologic Oncology	SUMC
Orthopaedic Surgery	318A	Subinternship in Orthopaedic Surgery	SHC, PAVAMC, SCVMC
Otolaryngology	336A	Subinternship in Otolaryngology	SUMC
Pediatrics	313A	Neonatal Intensive Care Subinternship	LPCH
Pediatrics	314A	Pediatric Intensive Care	LPCH
Pediatrics	335A	Pediatric Hematology and Oncology Subinternship	LPCH
Pediatrics	336E*	Subinternship in Community Hospital Pediatrics	Watsonville Community Hosp
Pediatrics	338A	Subinternship in Inpatient Pediatrics	LPCH
Psychiatry	358A	Subinternship in Inpatient Psychiatry	SUMC
Psychiatry	362B	Subinternship in Inpatient Psychiatry	PAVA
Surgery	311C	Clerkship at the Burn Center	SCVMC
Surgery	334A	Advanced Vascular Surgery	SUMC
Surgery	338A	Advanced Surgery	SHC
Surgery	339A	Plastic Surgery Subinternship	SUMC, SCVMC, KPMC
Urology	310B	Advanced Surgery/Urology	PAVAMC
Urology	338A	Advanced Urology	SUMC
Urology	338C	Advanced Urology	SCVMC

<sup>\*</sup> Available as both a two-week and four-week rotation. If students chose a two-week rotation, they must pair it with another two-week rotation on this list to receive full selective II credit.

## **Index of Clinical Clerkships**

<u>ANESTHESI</u>	<u>IA</u>	MED 302B	Infectious Diseases Clerkship (PAVAMC)
ANES 300A	Anesthesia Operating Room Clerkship (SUMC)	MED 302C	Infectious Diseases Clerkship (SCVMC)
ANES 300B	Anesthesia Operating Room Clerkship (VAPAHCS)	MED 303A	Cardiology Clerkship-Inpatient/Outpatient Consult (SUMC)
ANES 300C	Anesthesia Operating Room Clerkship (SCVMC)	MED 303B	Cardiology Clerkship (PAVAMC)
ANES 300D	Anesthesia Operating Room Clerkship (KPMC)	MED 303C	Cardiology Clerkship (SCVMC)
ANES 300E	Anesthesia Operating Room Clerkship (Palo Alto Medical	MED 304A	Cardiovascular Medicine Clerkship-Inpatients (SHC)
	Foundation)	MED 305A	Hematology Clerkship (SUMC)
ANES 300P	Pediatric Anesthesia Clerkship (LPCH)	MED 306A	Endocrinology and Metabolism Clerkship (SHC, PAVAMC,
ANES 302A	Obstetrical Anesthesia Clerkship (LPCH)	WED OOON	SCVMC)
ANES 304A	Chronic Pain Management Clerkship (SUMC, SMOC)	MED 308A	Immunology/Rheumatology Clerkship (SUMC)
ANES 306A	Critical Care Core Clerkship – Adult (SUMC, PAVAMC)	MED 308C	Rheumatology Clerkship (SCVMC)
ANES 306P	Neonatal and Pediatric ICU Core Clerkship (LPCH)	MED 311D	Advanced Medicine Clerkship (KPMC)
ANES 307A	Cardiovascular Anesthesia Clerkship (SUMC)	MED 312C	Advanced Medicine Clerkship (SCVMC)
ANES 311A	Regional Anesthesia Clerkship (SUMC)	MED 313A	Ambulatory Medicine Core Clerkship (SUMC, PAVAMC, SCVM
ANES 340A	Medical-Surgical Intensive Care Unit (SUMC)		Kaiser Santa Clara, Kaiser Fremont, Community Clinics)
ANES 340B	Medical-Surgical Intensive Care Unit (PAVAMC)	MED 314A	Advanced Medicine Clerkship (SUMC)
ANES 398A	Special Clinical Elective in Anesthesia (SUMC, PAVAMC,	MED 317C	Medical ICU Clerkship (SCVMC)
	SCVMC, KPMC)	MED 318A	Palliative Medicine (SHC and Virtual)
CARDIOVAS	SCULAR SURGERY	MED 319E	The Community Health of the Underserved Clerkship (PAVAN
CTS 300A	Cardiothoracic Surgery Clerkship (SUMC)	MED 2044	SCVMC)
CTS 301B	Adult Cardiothoracic Surgery Clerkship (PAVAMC)	MED 321A	Inpatient Medical Oncology Clerkship (SUMC)
CTS 303A	Advanced Thoracic Surgery Clerkship (SUMC)	MED 322A	Outpatient Medical Oncology Clerkship (SUMC)
CTS 398A	Clinical Elective in Cardiovascular Surgery (SUMC, PAVAMC)	MED 323A	Trans-Disciplinary Breast Oncology Clerkship (SUMC)
DERMATOL	<u>.OGY</u>	MED 324E	Tri-Valley Medicine Elective Rotation (SHC Tri-Valley)
DERM 300A	Dermatology Clerkship (SUMC)	MED 325A	Gastroenterology Clerkship (SUMC)
DERM 310B	Advanced Clinical Elective in Dermatology (SUMC, VAPAHCS)	MED 325B	Gastroenterology Clerkship (PAVAMC)
DERM 311A	Advanced Pediatric Dermatology Clerkship (SUMC)	MED 325C	Gastroenterology Clerkship (SCVMC)
DERM 398A	Clinical Elective in Dermatology (SUMC, PAVAMC, SCVMC,	MED 326A	Hepatology Clerkship (SUMC, PAVAMC)
	KPMC)	MED 328A	Addiction Medicine Clerkship (SHC)
EMERGENC	CY MEDICINE	MED 330A	Pulmonary Medicine Clerkship (SUMC)
EMED 301A	Emergency Medicine Core Clerkship (SUMC)	MED 330C	Pulmonary Medicine Clerkship (SCVMC)
EMED 308A	Point-of-Care Ultrasound Clerkship (SUMC)	MED 331A	Advanced Work in Pulmonary and Critical Care Medicine (SUN
EMED 312A	Pediatric Emergency Medicine (SUMC)	MED 334A	Nephrology Clerkship (SUMC, PAVAMC)
EMED 313A	Emergency Medicine Clerkship (SUMC, Kaiser Santa Clara)	MED 334C	Nephrology Clerkship (SCVMC)
EMED 313D	Emergency Medicine Clerkship (KPMC)	MED 338A	Outpatient Infectious Diseases Elective (SUMC, PAVAMC, Sa Mateo County Health)
EMED 398A	Clinical Elective in Emergency Medicine (SUMC)	MED 339B	Advanced Medicine Clerkship (PAVAMC)
FAMILY ME	DICINE	MED 340B	Medical-Surgical Intensive Care Unit Clerkship (PAVAMC)
	A Family Medicine Core Clerkship (Stanford Family Medicine	MED 342A	Geriatric Medicine Clerkship (SUMC, PAVAMC)
	Hoover, Stanford Portola Valley, Stanford Los Altos, O'Connor	MED 343B	Palliative Care Clerkship (SUMC, PAVAMC, SCVMC)
	Family Medicine Residency, Kaiser Santa Clara, Milpitas SCVMC, Almaden Family Practice/Stanford UHA, various community sites, and rural sites)	MED 344A	Elective in Quality Improvement, Patient Safety, and Organizational Change Clerkship (SUMC)
FAMMED 310	A Continuity of Care Clerkship (Various)	MED 347A	Stanford Perioperative Medicine Rotation (SUMC)
	EElective Clerkship in Family Medicine (Kaiser Permanente Napa	_MED 397A	MD Capstone Experience: Preparation for Residency (SUMC)
,22 000.	Solano)	MED 398A	Clinical Elective in Medicine (SUMC, PAVAMC, SCVMC, KPM
FAMMED 344	E Family Medicine Elective Clerkship (Indian Health Center of Santa Clara Valley-residency practice, Family Medicine		Y & NEUROLOGICAL SCIENCES
	Associates of San Jose-faculty practice)	NENS 301A	Neurology Core Clerkship (SUMC, PAVAMC, SCVMC, LPCH)
FAMMED 345	EFamily Practice Office Clerkship (Various)	NENS 307A	Advanced Clinical Elective in Child Neurology (SUMC)
FAMMED 364	E Subinternship in Family Medicine (O'Connor Hospital, Indian	NENS 308A	Advanced Clinical Elective in Adult Neurology (SUMC)
	Health Center of Santa Clara Valley-residency practice, Family Medicine Associates of San Jose-faculty practice)	NENS 398A	Advanced Clinical Elective in Neurology (SUMC, PAVAMC, SCVMC)
FAMMED 398	A Clinical Elective in Family Medicine (SUMC, PAVAMC, SCVMC)	) NEUROSUR	,
<u>MEDICINE</u>			
MED 300A	Internal Medicine Core Clerkship (SUMC, PAVAMC, SCVMC,	NSUR 304A	Neurosurgery Clerkship (SHC, LPCH)
	KPMC)	NSUR 304B	Neurosurgery Clerkship (PAVAMC)
MED 302A	Infectious Diseases Clerkship (SUMC)	NSUR 304C	Neurosurgery Clerkship (SCVMC)

NSUR 318A	Subinternship in Neurosurgery (SHC, LPCH, PAVA, SCVMC)	PEDS 336E	Subinternship in Community Hospital Pediatrics (Watsonville Community Hospital)
NSUR 398A	Clinical Elective in Neurosurgery (SHC, LPCH, PAVAMC, SCVMC)	PEDS 338A	Subinternship in Inpatient Pediatrics (LPCH)
OBSTETRIC	S & GYNECOLOGY	PEDS 340D	Child Health Clerkship (Kaiser Milpitas Office)
	Basic Obstetrics/Gynecology Clerkship (SUMC/LPCH, SCVMC, KPMC)	PEDS 398A	Clinical Elective in Pediatrics (Various)
OBGYN 302A	Pediatric Adolescent Gynecology Clerkship (Stanford Sunnyvale Clinic)	·	
OBGYN 304A	Inpatient Gynecology Clerkship (SUMC)	PSYC 300A	Basic Core Psychiatry Clerkship (SUMC, PAVAMC, MPVAMC and Scrivner Center at El Camino Health in Mountain View)
	Complex Family Planning Clerkship (SUMC)	PSYC 308E	Trauma Psychiatry (VA Menlo Park)
OBGYN 306A	Reproductive Endocrinology-Infertility Clerkship (SUMC)	PSYC 326A	Child Psychiatry Clerkship (LPCH)
OBGYN 307A	Maternal-Fetal Medicine Clerkship (SUMC)	PSYC 328B	Addiction Treatment Services (PAVAMC)
OBGYN 308A	Gynecologic Oncology Clerkship (SUMC)	PSYC 333A	Sleep Medicine for Medical Students (SUMC)
OBGYN 398A	Clinical Elective in Gynecology & Obstetrics (SUMC, SCVMC)	PSYC 353A	Psychosomatic Medicine (Psychiatry Consultation Service)
OPHTHALM	OLOGY		Clerkship (SHC)
OPHT 300A	Ophthalmology Clerkship (SUMC, PAVAMC, SCVMC)	PSYC 355A	Geriatric Psychiatry (SUMC)
OPHT 300E	Ophthalmology Clerkship (VAPAHCS Livermore Division)	PSYC 358A	Subinternship in Inpatient Psychiatry (SUMC)
OPHT 301A	Introduction to Ophthalmology Clerkship (SUMC, PAVAMC,	PSYC 362B	Subinternship in Inpatient Psychiatry (PAVA)
OPHT 302A	SCVMC)  Bay Area Ophthalmology Course: Fundamentals in Clinical and	PSYC 398A	Advanced Clinical, Research Elective in Psychiatry (SUMC, PAVAMC, SCVMC)
OTTT 302A	Visual Science (SUMC)	RADIATION	<u>ONCOLOGY</u>
OPHT 398A	Elective in Ophthalmology (SUMC, PAVAMC, SCVMC)	RADO 300A	Radiation Oncology Clerkship (SUMC)
ORTHOPAE	DIC SURGERY	RADO 398A	Clinical Elective in Radiation Oncology (SUMC)
ORTHO 303C	Clinical Clerkship in Rehabilitation Medicine (SCVMC)	RADIOLOGY	•
ORTHO 304A	Physical Medicine & Rehabilitation Clerkship (SUMC, PAVAMC		- Diagnostic Radiology and Nuclear Medicine Clerkship (SUMC)
	SCVMC)	RAD 302A	Nuclear Medicine Clerkship (SUMC)
ORTHO 306A	Orthopaedics Clerkship (SHC, PAVAMC, SCVMC)	RAD 303A	Specialty Clerkship in Diagnostic Radiology (SUMC)
ORTHO 310A	Hand Surgery Clerkship (SUMC, PAVAMC)	RAD 304A	Pediatric Radiology Clerkship (LPCH)
	Subinternship in Orthopaedic Surgery (SHC, PAVAMC, SCVMC	;) RAD 305A	Interventional Radiology Clerkship (SUMC)
ORTHO 398A	Clinical Elective in Functional Restoration (SHC, LPCH, PAVAMC, SCVMC)	RAD 306A	Neuroradiology Clerkship (SUMC, LPCH)
OTOLARYN	GOLOGY/HEAD & NECK SURGERY	RAD 398A	Clinical Elective in Diagnostic Radiology & Nuclear Medicine (SUMC, LPCH)
OTOHNS 307	A Otolaryngology/Head and Neck Surgery Clerkship (SUMC, PAVAMC, SCVMC)	SURGERY	(Contract )
OTOHNS 336	A Subinternship in Otolaryngology/Head and Neck Surgery (SUM	<sub>C</sub> \$URG 300A	General Surgery Clerkship (SUMC, PAVAMC, SCVMC, KPMC)
	A Clinical Elective in Otolaryngology/Head and Neck Surgery	SURG 301A	Dental Medicine & Surgery Clerkship (SUMC)
	(SUMC, PAVAMC, SCVMC)	SURG 310E	Hand and Microsurgery Clerkship (Buncke Clinic)
PATHOLOG	<u>Y</u>	SURG 311C	Clerkship at the Burn Center (SCVMC)
PATH 302A	Pathology Clerkship (SHC, LPCH, PAVMC)	SURG 314A	Vascular Surgery Elective Clerkship (SHC, PAVAMC, SCVMC)
PATH 398A	Clinical Elective in Pathology (SHC)	SURG 317A	Pediatric Surgical Specialties Clerkship (LPCH)
PEDS 300A		SURG 319A	Introduction to Plastics & Reconstructive Surgery Clerkship (SUMC, LPCH)
	Child Health Clerkship – Rotating (LPCH, SCVMC, KPMC)	SURG 334A	Advanced Vascular Surgery Clerkship (SUMC)
PEDS 301A	Medical Genetics Clerkship (LPCH)	SURG 338A	Advanced Surgery Clerkship (SHC)
PEDS 302A	Pediatric Rheumatology Clerkship (LPCH)	SURG 339A	Plastic Surgery Subinternship (SUMC, SCVMC, KPMC)
PEDS 303A	Pediatric Cardiology Clerkship (LPCH)	SURG 340A	Surgical Intensive Care Unit Clerkship (SUMC)
PEDS 304A PEDS 305A	Pediatric Endocrinology and Diabetes Clerkship (LPCH)  Pediatric Hematology-Oncology Clerkship (LPCH)	SURG 340B	Medical-Surgical Intensive Care Unit Clerkship (PAVAMC)
PEDS 306A	Pediatric Nephrology Clerkship (LPCH)	SURG 398A	Clinical Elective in Surgery (SUMC, LPCH, PAVAMC, SCVMC)
		<u>UROLOGY</u>	
PEDS 308A	Pediatric Gastroenterology, Hepatology and Nutrition Clerkship (LPCH)	UROL 308A	Urology Clerkship (SUMC)
PEDS 312A	Pediatric Infectious Diseases Clerkship (LPCH)	UROL 308B	Urology Clerkship (PAVAMC)
PEDS 313A	Neonatal Intensive Care Subinternship (LPCH)	UROL 308C	Urology Clerkship (SCVMC)
PEDS 314A	Pediatric Intensive Care Clerkship (LPCH)	UROL 310B	Advanced Surgery/Urology Clerkship (PAVAMC)
PEDS 315A			
. 2200.0.	Adolescent Medicine (Various)	UROL 338A	Advanced Urology Clerkship (SUMC)
PEDS 335A	Adolescent Medicine (Various) Pediatric Hematology and Oncology Subinternship (LPCH)	UROL 338A UROL 338C	Advanced Urology Clerkship (SUMC) Advanced Urology Clerkship (SCVMC)

## **Clerkships With No Core Clerkship Prerequisites**

The following clerkships, in addition to all core clerkships, are available to students who have not taken a core clerkship:

ANES 300A*	FAMMED 345E	NSUR 304B	PEDS 302A*	SURG 301A
ANES 300B*	MED 303B	NSUR 304C	PSYC 308E	<b>SURG 311C</b>
ANES 300C*	MED 326A	OPHT 300A	PSYC 328B	<b>SURG 317A*</b>
ANES 300E*	MED 334A*	OPHT 301A	PSYC 333A	UROL 308A
ANES 304A*	MED 342A	OPHT 302A	RAD 301A*	UROL 308B
DERM 300A	MED 343B	ORTHO 304A	RAD 303A	UROL 308C
EMED 312A	MED 344A	OTOHNS 307A	RAD 304A*	
FAMMED 338E	MED 347A	PATH 302A	RAD 305A*	
FAMMED 344E	NSUR 304A	PEDS 301A*	RAD 306A	

<sup>\*</sup>Core clerkships highly recommended as prerequisite

## **Clerkships Offered for Two Weeks**

ANES 300A	FAMMED 345E	MED 338A	ORTHO 310A	<b>RAD 305A</b>
ANES 300B	MED 306A	MED 342A	OTOHNS 307A	<b>RAD 306A</b>
ANES 300C	MED 308C	<b>MED 347A</b>	PEDS 301A	SURG 301A
ANES 300D	MED 319A	OBGYN 302A	PEDS 302A	SURG 310E
ANES 300E	MED 324E	OBGYN 304A	PEDS 306A	SURG 317A
ANES 300P	MED 325A	OBGYN 305A	PEDS 315A	<b>SURG 319A</b>
ANES 302A	MED 325B	OBGYN 306A	PEDS 336E	UROL 308C
ANES 304A	MED 325C	OBGYN 307A	PEDS 340D	
ANES 307A	MED 328A	OPHT 300E	PSYC 333A	
ANES 311A	<b>MED 330A</b>	OPHT 301A	<b>RAD 303A</b>	
DERM 311A	MED 331A	ORTHO 304A	RAD 304A	

## **Clerkships Requiring Prior Approval Before Registering**

ANES 300B	<b>DERM 310B</b>	MED 328A	ORTHO 303C	PEDS 313A
ANES 300C	EMED 308A	MED 338A	PEDS 301A	PEDS 314A
ANES 300D	FAMMED 345E	MED 340B	PEDS 302A	PEDS 315A
ANES 300E	MED 302C	MED 342A	PEDS 304A	PEDS 335A
ANES 300P	MED 308A	MED 343B	PEDS 305A	PEDS 336E
ANES 304A	MED 308C	NENS 307A	PEDS 306A	PSYC 333A
ANES 340A	MED 318A	NENS 308A	PEDS 308A	SURG 340A
ANES 340B	MED 325C	OBGYN 305A	PEDS 312A	SURG 340B

## Special Clinical Electives (398A Clerkships)

Each department has a 398A clerkship. This designation can be used for a student-designed clerkship, provided it has the consent of a faculty preceptor who will supervise the student. 398A clerkships must be clinical, not research. Students cannot add 398A clerkships directly to their Fishbowl schedules through the regular shuffles. To add a 398A clerkship, contact the Associate Director of Clerkship Administration in the School of Medicine Registrar's Office at cheang@stanford.edu with the faculty preceptor's name and email address, the period and duration of the clerkship.

# SECTION II. ENTERING CLERKSHIP DRAW REQUESTS VIA THE ONLINE "CLERKSHIP FISHBOWL SYSTEM"

## The Clerkship Scheduling Process 2024

- 1. All students will participate in the Clerkship Draw (i.e., there will be no petitioning for exemption from the Draw.)
- 2. Each student will propose a schedule (according to rules specified for the Clerkship Draw) covering both clinical years that includes all of the following clerkships: Ambulatory Medicine (MED 313A), Critical Care (ANES 306A or ANES 306P), Emergency Medicine (EMED 301A), Family Medicine (FAMMED 301A), Medicine (MED 300A), Neurology (NENS 301A), Obstetrics and Gynecology (OBGYN 300A), Pediatrics (PEDS 300A), Psychiatry (PSYC 300A), Surgery (SURG 300A).
- 3. In the second clerkship year, Periods 11 and 12 will not be included as an option for scheduling as students cannot complete this prior to graduation.
- 4. To allow time away for residency interviews, Periods 5 and 6 of the second clerkship year will automatically be blocked from scheduling of any core clerkships. Students planning to do a specialty with early or late interviews must contact their academic advisor for approval to change the blocked periods.
- 5. In submitting their proposed schedule, students can block up to four clerkship periods in Draw 2 to be held as "open" or "unscheduled" when the program runs. Students will be encouraged to block at least two months between Period 11 of the first clerkship year and Period 3 of the second clerkship year for their subinternships.
- 6. Clerkships will be filled each period only to a maximum number as determined by the clerkship director. No exceptions will be made.
- 7. Medicine 300A and Surgery 300A must be scheduled within the first twelve months of starting clinical clerkships.
- 8. Two additional clerkships must be scheduled within the first twelve months of starting clinical clerkships. (Note: Critical Care will only be scheduled after the prerequisites are scheduled. Prerequisites: ANES 306A SURG 300A and MED 300A; ANES 306P SURG 300A and PEDS 300A.)
- 9. Obstetrics and Gynecology 300A and Pediatrics 300A must be started by Period 7 of the graduation year.
- 10. Ambulatory Medicine 313A, Emergency Medicine 301A, Critical Care 306A or 306P, Family Medicine 301A, Neurology 301A and Psychiatry 300A must be started by P10 of the graduating year.
- 11. An NBME subject examination is currently administered for Emergency Medicine, Family Medicine, Internal Medicine, Neurology, Obstetrics and Gynecology, Pediatrics, Psychiatry, and Surgery.
- 12. The Draw will generate a schedule for every student containing all of the clerkships specified above. Cases where a student wishes to adjust the "blocked" period or to request consideration for exception to the scheduling rules will be handled on an individual basis through the petition process.
- 13. Using the weekly shuffle every Monday, students will schedule the Fundamentals of Clinical Care Selective, the Subinternship, and any elective clerkships they wish to take.
- 14. Students cannot drop any core clerkships scheduled through the Draws from their schedules through the weekly shuffles (i.e., all of the specified core clerkships must appear on a student's schedule at all times). Students may "swap" clerkships if there is an empty slot or if they can identify another student with whom to swap by contacting the Associate Director of Clerkship Administration.

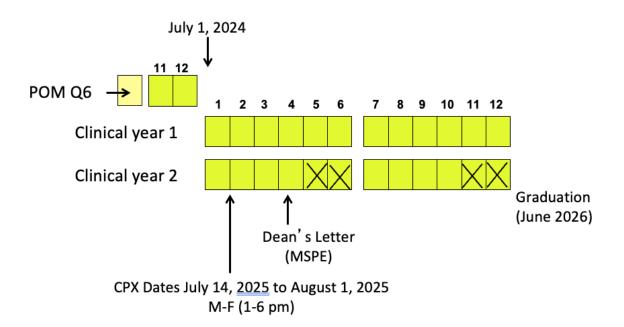
## **Clerkship Petitions Committee**

If a student has compelling reasons for a core clerkship schedule change, it is necessary that the student first consult with his/her advisor. The advisor will work with the Associate Director of Clerkship Administration to determine if the requested adjustment can be made without violating the scheduling criteria. If the requested change violates scheduling criteria, the student may choose to file the request with the Petitions Committee. The Petitions Committee will hear requests for exception to the scheduling rules.

## **Clerkship Draw Program**

The Clerkship Draw program is a computerized scheduling program. The program is designed to guarantee each student an equal chance of getting desired clerkships. Clerkships are assigned in rounds. Each student is assigned one clerkship in each round. In the first round, the program selects a student randomly, assigns one clerkship to that student, and then moves on to the next randomly selected student. This process continues until all students have one clerkship assigned. In the second round, the program reverses the order of the randomly selected students in the previous round to assign their second clerkship. In the third round, the students are again selected randomly. The fourth round is the reverse order of the third round. This alternating method of scheduling continues until all students' draw requests have been processed.

## Visual Representation of the Schedule



Note: Clerkship evaluations through period 2 of the second clinical year will be included in the MSPE. Evaluations from period 3 of the second clerkship year will be included *when possible*; for core clerkships requiring results from a shelf or departmental examination, period 3 evaluations are not available by the MSPE deadline.

## **Entering Draw Requests for Academic Years 2024-2026**

There will be two Draws. The First Draw allows you to request your preferences for Medicine, Surgery and two other core clerkships of your choice. The Second Draw allows you to request your preferences for the rest of the core clerkships.

#### **New for this Year**

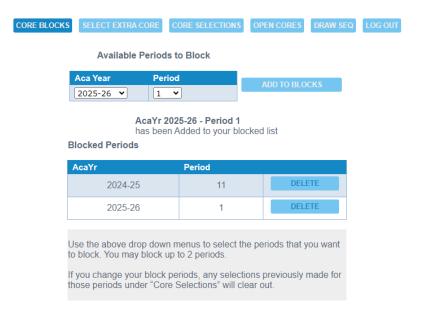
If you choose to start clerkships in Period 11 and/or Period 12 of Academic Year 2023-24, you will be given priority for your first Draw pick during Academic Years 2024-25 or 2025-26.

Log in to the website by going to the following link: http://med.stanford.edu/medfishbowl.html

Choose the **Draw Login** menu and enter your student ID number (without the initial "0") and password.

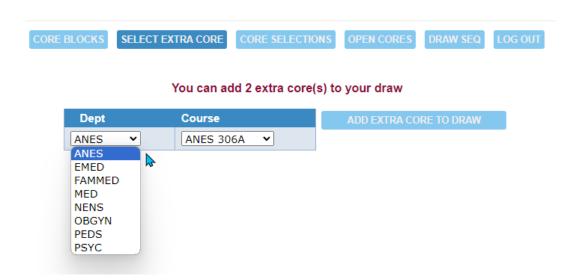


The following screen will be displayed for your First Draw. The first step is to choose the periods that will be "blocked." You can block a maximum of two periods. To specify your blocked periods, choose the Academic Year and Period from the drop-down menus and press the "Add to Blocks" button. Blocked periods will not be scheduled by the Draw system.

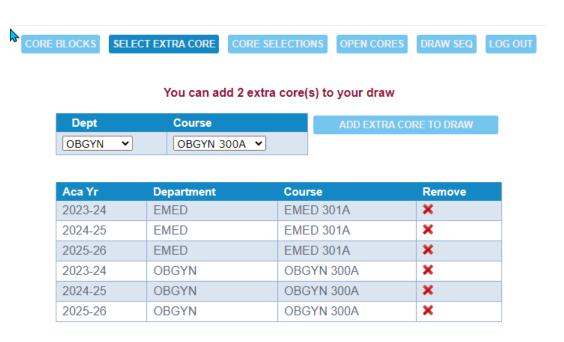


Once you have chosen your blocked periods, you can select your two extra cores to be drawn with Medicine and Surgery in the first Draw.

Click on the **Select Extra Core** tab to display the remaining core clerkships. Your screen will look similar to the picture below:



To designate your extra core clerkships, choose the department and course from the drop-down menus and press the "Add Extra Core to Draw" button.



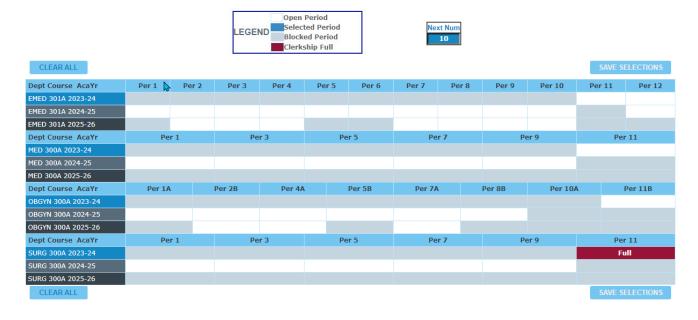
Once you have chosen your extra core(s), you can choose your period preferences. You can now see the number of openings in each of the core clerkships so you can better understand your chances of getting a particular clerkship for a particular period.

When you choose the **Open Cores** tab, the program will display the Academic Year and the core Clerkship Name. If you click the **expand** text, you will see a list of the Periods and Openings for a particular Academic Year/Clerkship combination. Your screen will look similar to the picture below:

CORE BLOCKS | SELECT EXTRA CORE | CORE SELECTIONS | OPEN CORES | DRAW SEQ | LOG OUT

All Cores with Open Periods				
2023-24	ANES	306A		collapse
Period	1		Open 3	
Period	2		Open 3	
Period	3		Open 1	
Period	4		Open 5	
Period	5		Open 6	
Period	6		Open 7	
Period	12		Open 5	
2024-25	ANES	306A		collapse
Period	5		Open 7	
Period			Open 7	
Period	11		Open 8	
Period	12		Open 8	
2025-26	ANES	306A		collapse
Period	1		Open 8	
Period	2		Open 8	
Period	3		Open 8	
Period	4		Open 8	
Period	5		Open 8	
Period	6		Open 8	
Period			Open 8	
Period			Open 7	
Period			Open 8	
Period			Open 8	
Period			Open 8	
Period	12		Open 8	
2023-24	ANES	306P		expand
2024-25	ANES	306P		expand

Click on the **Core Selections** tab to display the selection grids for the clerkships. Your screen will look similar to the picture below. The **Core Selection** screen will show you any clerkships that are already full. You only need to choose the periods that are still open.



## **Directions: Choosing Your Clerkships**

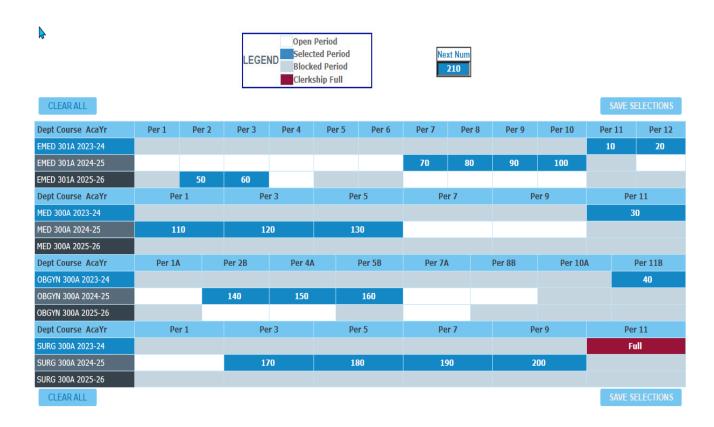
To choose your core clerkship preferences, click on an "open period," which will designate that period as your first preference, using the "10" from the "Next Num" box on the left-hand side of the screen. The "Next Num" box will then automatically change to "20" in preparation for your next selection.

If you make a mistake, you can click on the cell a second time to clear its contents.

If you wish to manually assign a numeric value to a cell, you can override the system counter by typing a number into the "Next Num" box. This number will be used in your next selection. Manual entries do not have to be in increments of 10. If you wish to change the order of your preferences, you may use any number in between. The system will then continue incrementing based on the highest unassigned number.

When you have completed your selections for **all** core clerkships, press the "Save Selections" button. If you want to completely restart the selection process, press the "Clear All" button.

**IMPORTANT:** Your selections are **NOT** complete until you press the "Save Selections" button. Once you have saved your selections, you can choose the **Draw Seq** tab to display a list of your selections. You should **print** this page for your records. This will verify that you have saved your draw selections for the academic years listed. This is the order the Draw system will use to schedule your clerkships. You can change your preferences as often as you like before the draw deadline.



If you would like to get a printout of your selections in numeric order, you can do this from the **Draw Seq** screen. Below is an example of the **Draw Seq** screen:

CORE BLOCKS

SELECT EXTRA CORE CORE SELECTIONS

OPEN CORES DRAW SEQ LOG OUT

Seq	AcaYr	Course	Period	Wks
10	2023-24	EMED 301A	11	4
20	2023-24	EMED 301A	12	4
30	2023-24	MED 300A	11	8
40	2023-24	OBGYN 300A	11B	6
50	2025-26	EMED 301A	2	4
60	2025-26	EMED 301A	3	4
70	2024-25	EMED 301A	7	4
80	2024-25	EMED 301A	8	4
90	2024-25	EMED 301A	9	4
100	2024-25	EMED 301A	10	4
110	2024-25	MED 300A	1	8
120	2024-25	MED 300A	3	8
130	2024-25	MED 300A	5	8
140	2024-25	OBGYN 300A	2B	6
150	2024-25	OBGYN 300A	4A	6
160	2024-25	OBGYN 300A	5B	6
170	2024-25	SURG 300A	3	8
180	2024-25	SURG 300A	5	8
190	2024-25	SURG 300A	7	8
200	2024-25	SURG 300A	9	8

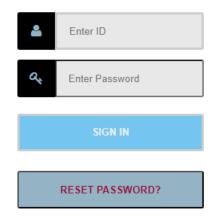
#### The Second Draw

When the results for Draw 1 have been processed, the login screen changes to the following:

Deadline is Wednesday, February 28, 2024 at 7:58 am.

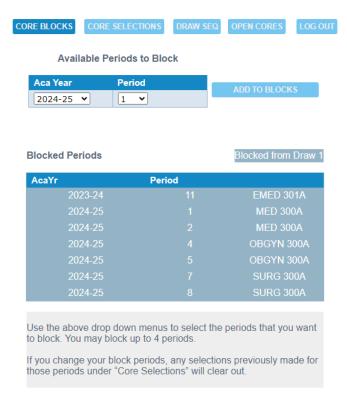
#### **DRAW 2 LOGIN**

Please Enter Your Student ID and Password.



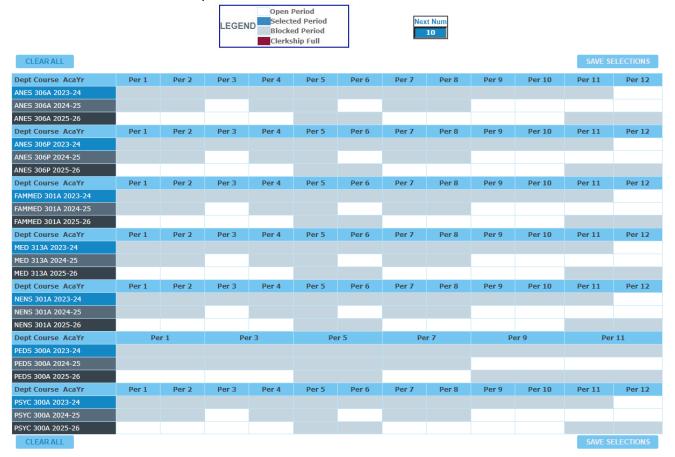
The following menu will be displayed when you login for your Second Draw. The first step is to choose the periods that will be "blocked." You can block a maximum of four periods in the Second Draw. The periods you blocked in the First Draw **do not carry over** to the Second Draw. Blocked periods will not be scheduled by the Draw system. To specify your blocked periods, choose the Academic Year and Period from the drop-down menus and press the "Add to Blocks" button.

The system automatically blocks the periods where clerkships were scheduled in Draw 1.



Once you have chosen your blocked periods, you can choose your period preferences.

Click on the **Core Selections** tab to display the selection grids for the clerkships. Your screen will look similar to the picture below:



## **Directions for Choosing Your Clerkships**

To choose your core clerkship preferences, click on an "open period," which will designate that period as your first preference, using the "10" from the "Next Num" box on the left-hand side of the screen. The "Next Num" box will then automatically change to "20" in preparation for your next selection.

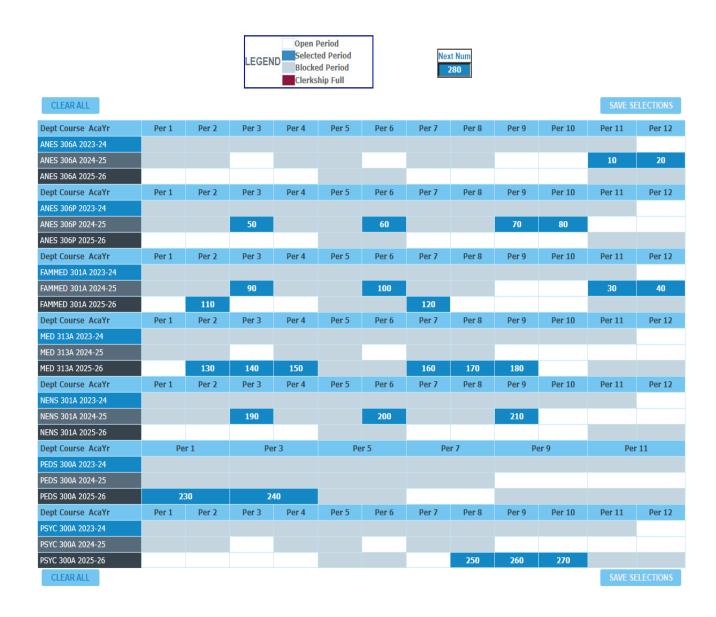
If you make a mistake, you can click on the cell a second time to clear its contents.

If you wish to manually assign a numeric value to a cell, you can override the system counter by typing a number into the "Next Num" box. This number will be used in your next selection. Manual entries do not have to be in increments of 10. If you wish to change the order of your preferences, you may use any number in between. The system will then continue incrementing based on the highest unassigned number.

When you have completed your selections for **all** core clerkships, press the "Save Selections" button. If you want to completely restart the selection process, press the "Clear All" button.

You can check the open clerkship under the **Open Cores** tab.

**IMPORTANT:** Your selections are **NOT** complete until you press the "Save Selections" button. Once you have saved your selections, you can choose the **Draw Seq** button to display a list of your selections. You should **print** this page for your records. This will verify that you have saved your draw selections for the academic years listed. This is the order the Draw system will use to schedule your clerkships. You can change your preferences as often as you like before the draw deadline.



## Below is an example of the **Draw Seq** screen:

CORE BLOCKS

CORE SELECTIONS

DRAW SEQ

OPEN CORES

LOG OUT

Seq	AcaYr	Course	Period	Wks
10	2024-25	ANES 306A	11	4
20	2024-25	ANES 306A	12	4
30	2024-25	FAMMED 301A	11	4
40	2024-25	FAMMED 301A	12	4
50	2024-25	ANES 306P	3	4
60	2024-25	ANES 306P	6	4
70	2024-25	ANES 306P	9	4
80	2024-25	ANES 306P	10	4
90	2024-25	FAMMED 301A	3	4
100	2024-25	FAMMED 301A	6	4
110	2025-26	FAMMED 301A	2	4
120	2025-26	FAMMED 301A	7	4
130	2025-26	MED 313A	2	4
140	2025-26	MED 313A	3	4
150	2025-26	MED 313A	4	4
160	2025-26	MED 313A	7	4
170	2025-26	MED 313A	8	4
180	2025-26	MED 313A	9	4
190	2024-25	NENS 301A	3	4
200	2024-25	NENS 301A	6	4
210	2024-25	NENS 301A	9	4
230	2025-26	PEDS 300A	1	8
240	2025-26	PEDS 300A	3	8
250	2025-26	PSYC 300A	8	4
260	2025-26	PSYC 300A	9	4
270	2025-26	PSYC 300A	10	4

## SECTION III: OTHER CLINICAL REQUIREMENTS

## **Attendance**

Students must contact the clerkship director to obtain explicit advance approval for any planned absence from the clerkship. Unanticipated absences for illness or emergency must be communicated to the clerkship director as promptly as possible.

Students are expected to seek necessary health care to maintain their physical and mental well-being. Examples of necessary health care include preventive health services and screening (e.g., annual check-ups, routine dental cleaning, and vaccinations), new and follow-up visits for acute illness, ongoing care for chronic illnesses, physical therapy, and counseling and psychological services. Consistent with University policies and the law, students have a right to privacy when seeking care.

Students may attend recurring medical or dental appointments during core clerkships. Clerkship director/s, site director/s, and preceptor/s or patient care teams (depending on the service) must be notified in advance of these planned absences to coordinate time away from the clerkship. Clerkship students have a right to privacy when seeking care and need not disclose the specific type of healthcare that is being sought. A student's decision to seek healthcare during a clerkship will be managed so as to have no impact on his or her performance evaluation. Any questions or concerns may be addressed to the Assistant Dean for Clerkship Education and/or the Assistant Director of Clerkship Education by email, phone, or in person.

Students who are absent more than two days during a four or six -week rotation or more than three days during an eight-week rotation for any reason will be required to make up missed time. Students who will miss more than 20% of the total duration of a clerkship – for any reason – will be asked to reschedule the clerkship. Failure to communicate with the clerkship director about unavoidable absences is a potential reason for failing the clerkship. The full absence policy and expectations can be accessed <a href="here">here</a>.

## **Student Duty Hours and Work Environment**

Providing students with a sound academic and clinical education must be carefully planned and balanced with concerns for patient safety and student well-being.

## Supervision of students

- 1. All patient care must be supervised by qualified residents or faculty.
- 2. Faculty, residents and students must be educated to recognize the signs of fatigue, and adopt and apply policies to prevent and counteract the potential negative effects.

## **Duty hours**

1. Duty hours are defined as all clinical and academic activities related to the

students, i.e., patient care (both inpatient and outpatient), administrative duties related to patient care, the provision for transfer of patient care, time spent inhouse during call activities, and scheduled academic activities such as conferences. Duty hours do not include reading and preparation time spent away from the duty site.

- 2. Students must have a minimum of 8-hours free of duty between scheduled duty periods.
- 3. Duty hours must be limited to 80 hours per week, averaged over a four-week period, inclusive of all in-house call activities.
- 4. Students must be provided with one day in seven free from all educational and clinical responsibilities, averaged over a four-week period, inclusive of call. One day is defined as one continuous 24-hour period free from all clinical, academic, and administrative activities.

## In-house call activities

The objective of all call activities is to provide students with continuity of patient care experiences throughout a 24-hour period. In-house call is defined as those duty hours beyond the normal workday when students are required to be immediately available in the assigned institution.

- 1. In-house call must occur no more frequently than every third night, averaged over a four-week period.
- 2. Continuous on-site duty, including in-house call, must not exceed 24 consecutive hours.
- 3. Students must have a minimum of 14-hours free of duty after 24-hours of in-house duty.

Concerns and incidents related to a violation of student duty hours can be reported directly in <u>Qualtrics</u> and this can be done anonymously. Dr. Tracy Rydel, Assistant Dean for Clerkship Education will receive the report. The full student duty hours and work environment policy can be found <u>here</u>.

## Respectful Environment and Mistreatment Policy

## I. Standards

- A. Stanford School of Medicine (SoM) is committed to providing a work and educational environment that is conducive to teaching and learning, research, the practice of medicine and patient care. This includes a shared commitment among all members of the SoM community to respect each person's worth and dignity, and to contribute to a positive learning environment where medical students are enabled and encouraged to excel. Given their roles in the educational process and their inherently unequal positions vis a vis students, all instructional personnel (including faculty, residents, and other members of the healthcare team) are to treat students with courtesy, civility and respect and with an awareness of the potential impact of their behavior on such students' professional futures.
- B. Conduct inconsistent with this policy can occur in a variety of forms and may seriously impair learning. In particular, instructional personnel are expected to create an environment in which feedback regarding their performance can be

given openly by students without concern for reprisal, and which is free of exploitation, harassment, impermissible discriminatory treatment, humiliation, or other mistreatment or abuse of medical students. Examples of conduct inconsistent with these standards might include:

- Sexual harassment
- Physical or verbal abuse
- Assigning duties as punishment rather than education
- Requiring a student to perform personal services (such as shopping or babysitting)
- Unwarranted exclusion from reasonable learning or professional opportunities
- Evaluation or grading on inappropriate criteria (or threatening to do so)
- Harassment or discrimination on the basis of sex, race, age, color, disability, religion, sexual orientation, gender identity, national or ethnic origin, or any other characteristic protected by applicable law
- C. Note: The expectations stated in this policy primarily relate to the standards of conduct for instructional personnel. For their part, medical students are expected to adhere to similar standards of respectful and professional behavior, including (but not limited to) the standards of conduct for students set forth in the MD Program Handbook and Policy Manual (https://med.stanford.edu/md/mdhandbook.html)

## II. Guidelines For Application

- A. These standards of conduct are applicable to all SoM instructional personnel (including faculty, residents, and other members of the healthcare team) in their interactions with Stanford medical students—whether on or off campus and whether in formal educational (such as clinical or classroom) or in social settings.
- B. In general, a determination of whether specific conduct is inconsistent with this policy will depend on a case-by-case analysis of the particular facts and circumstances, and the use of a "reasonable medical student" standard.
- C. Students subjected to abuse, discrimination, mistreatment, or harassment have a right to seek timely and effective remediation with the full support of the SoM and Stanford University. In addition, retaliation and/or reprisals against an individual who in good faith reports or provides information in an investigation about conduct that may violate this policy is prohibited.
- D. Conduct inconsistent with this policy may include repeated actions or may even arise from a single incident if sufficiently egregious.
- E. In the review of conduct under this policy, other Stanford University and SoM policies and procedures (such as Stanford's Sexual Harassment and Consensual Sexual or Romantic Relationships Policy) may become relevant.
- III. The Respectful Environment and Mistreatment Committee
  The Respectful Environment and Mistreatment Committee is a standing committee to
  carry out the purposes and procedures set forth in this policy.
  - A. The committee meets monthly, and on an ad hoc basis if it is deemed necessary by the Chair.
  - B. The committee is chaired by the Associate Dean for Medical Student Life Advising, who is hereafter referred to as the Chair.

- C. The composition of the committee includes the following as members:
  - The Chair
  - One or more students (clinical and preclinical)
  - A student selected by SUMMA (Stanford University Minority Medical Alliance)
  - A student selected by SNMA (Student National Medical Association)
  - An Academic Advising Dean
  - The Director of Graduate Medical Education (or designee)
  - The Assistant Dean for Clerkship Education
  - The Assistant Dean for Preclerkship Education
  - The Associate Dean for Medical Student Research (ad hoc member)
  - The Director of Educators for CARE
  - A Residency Training Program Director
  - A faculty or staff member with specific knowledge and sensitivity to racial issues and instances of bias
  - A faculty or staff member with specific knowledge and sensitivity to LGBTQ+ issues and instances of bias
  - A faculty or staff member with specific knowledge and sensitivity to ability issues and instances of bias
  - One clerkship director
  - One clerkship or site director from a training site other than Stanford Hospital or Lucile Packard Children's Hospital
  - One or more residents or fellows
  - The Chair of the Physician Wellbeing Committee
- D. The committee will keep such confidential records of its proceedings as are appropriate to support its purposes of education and concern resolution.

#### IV. Procedures

The following procedures for handling incidents of potential violations of the Standards of Conduct for the Teacher-Learner Relationship place a strong emphasis on resolving complaints informally. The procedures include advising and mediation. It is important to note that the procedures do not preempt other formal or informal channels available within the University. It is recommended that students should -- as a first step-contact the Chair of the Respectful Environment and Mistreatment Committee to review the various options that are available (on a confidential basis as that status is granted to the Associate Dean for Medical Student Life Advising – <a href="https://med.stanford.edu/md/student-wellness.html#student-life-advising">https://med.stanford.edu/md/student-wellness.html#student-life-advising</a>). The Chair of the committee is empowered to explore with the student a plan of action that may include some or all of the steps described below.

- A. **Informal:** Concern about potential violations may be handled by communication with various individuals, including but not limited to the following:
  - 1. Direct discussions (by the student or others) with the alleged offender.
  - Conversation (by the student or others) with individuals such as the chief resident, attending physician, clerkship director, and/or Educator for Care (E4C) faculty.
  - 3. The Chair of the Respectful Environment and Mistreatment Committee may present the concern to all or a portion of the Respectful Environment and Mistreatment Committee, and to such third parties that the Chair of the

- Respectful Environment and Mistreatment Committee deems appropriate for seeking an informal resolution.
- 4. The Chair of the Respectful Environment and Mistreatment Committee may request that a mistreatment coach discuss the concern with the educator or other individuals depending on the nature of the concern.
- 5. The Chair of the Respectful Environment and Mistreatment Committee also may in his/her discretion refer the matter to an alternate available University process or office, such as an existing grievance process or the Sexual Harassment Policy Office or the Director of the Diversity and Access Office.
- Direct conversation by the student with confidential resources including but not limited to the Ombuds, Counseling and Psychological Services, and the Deans of Religious Life.

Informal solutions to address the problem may be recommended and/or pursued such as (but not limited to) systems changes or educational interventions. The Chair of the committee will be available throughout the process to discuss with the student the status of the matter, including any potential resolution.

- B. **Formal:** If no resolution is reached and the student wishes to proceed with a more formal grievance or complaint process, the Chair of the Respectful Environment and Mistreatment Committee may refer the student to other existing processes or may (in an appropriate case) accept from the student a written grievance or complaint to use the procedure described below.
  - The student should set forth in writing the substance of the grievance or complaint, the grounds for it and the evidence on which it is based, and the efforts taken to date to resolve the matter. It is at this stage that the matter becomes a formal grievance or complaint.
  - 2. The grievance or complaint document should be submitted to the Chair of the Respectful Environment and Mistreatment Committee. A grievance should be filed in a timely fashion, i.e., normally within thirty days of the end of the academic quarter in which the action that is the subject of the grievance or complaint occurred. A delay in filing may be grounds for rejection of that grievance or complaint.
  - 3. The Chair of the Respectful Environment and Mistreatment Committee will review the grievance or complaint and (if it reflects an appropriate use of the process) will then promptly (within 7 days) transmit the grievance or complaint to the Senior Associate Dean for Medical Education (SADME) for handling.
  - 4. The SADME shall promptly initiate a review, which should normally be completed within sixty days. The SADME may attempt to resolve the matter informally, and may refer the matter (or any part of it) to a grievance officer or other designee, who will evaluate and/or address the matter as the SADME directs. The SADME may also, in appropriate cases, remand the matter to the appropriate administrator (including to the administrative level at which the grievance or complaint arose) for further consideration.
  - 5. In undertaking this review, the SADME (or his or her designee) may request a response to the issues raised in the grievance or complaint from any individuals believed to have information the reviewer considers relevant, including faculty, staff and students.

6. The SADME (or his or her designee) shall issue his or her decision in writing, and take steps to initiate such corrective action as is called for (if any). Conduct meriting discipline shall be brought to the attention of the appropriate disciplinary process.

## 7. Appeal

- a. If the student is dissatisfied with the disposition by the SADME (or his or her designee), he or she may appeal to the Dean of the School of Medicine. The appeal should be filed in writing with the Dean within ten days of the issuance of the decision by the SADME (or his or her designee); a delay in filing the appeal may be ground for rejection of that appeal.
- b. The Dean may attempt to resolve the matter informally, and may refer the matter (or any part of it) to a grievance appeal officer or other designee, who will review the matter at the Dean's direction. The Dean also may remand the matter to the appropriate administrator (including to the administrative level at which the grievance arose) for further consideration.
- c. The Dean should normally complete his or her review of the appeal and issue his or her decision in writing within forty-five days. That decision is final. It is not subject to further review by any other University process.

## V. General Provisions

- A. *Time Guidelines:* The time frames set forth herein are guidelines. They may be extended by the Chair of the Respectful Environment and Mistreatment Committee, the SADME or the Dean, as applicable, in his or her discretion for good cause (including for reasons relating to breaks in the academic calendar).
- B. Advisers: A student initiating or participating in a grievance or complaint under this procedure may be accompanied by an adviser in any discussion with the Chair of the Respectful Environment and Mistreatment Committee, the SADME, the Dean, or their designees (such as a grievance or grievance appeal officer); such adviser must be a current Stanford faculty, staff member or student.
- C. Ombuds: Students should be aware that the University Ombuds (<a href="https://ombuds.stanford.edu/">https://ombuds.stanford.edu/</a>) and the School of Medicine Ombuds (<a href="https://med.stanford.edu/ombuds.html">https://med.stanford.edu/ombuds.html</a>) are available to discuss and advise on any matters of University concern and frequently helps expedite resolution of such matters. Although it has no decision-making authority, the Ombuds' Office has wide powers of inquiry.
- D. Sexual Harassment and Disability related issues: For further information and resources concerning sexual harassment, students should refer to the web page of the Sexual Harassment/Assault Response & Education Title IX Office at <a href="https://share.stanford.edu/">https://share.stanford.edu/</a>. For further information and resources concerning disabilities and accessible education, students should refer to the web page of the Office of Accessible Education at <a href="https://oae.stanford.edu/">https://oae.stanford.edu/</a> and/or the Diversity and Access Office at <a href="https://diversityandaccess.stanford.edu/">https://diversityandaccess.stanford.edu/</a>.
- E. *No retaliation:* Stanford University prohibits retaliation or reprisals against individuals based on their pursuit in good faith of a grievance or complaint under

- this procedure, or their participation in good faith in the grievance or complaint process.
- F. Standards for Review: If the grievance or complaint involves a decision that is being challenged, the review by the SADME, as well as the review by the Dean on appeal, usually will be limited to the following considerations:
  - 1. Were the proper facts and criteria brought to bear on the decision? Were improper or extraneous facts or criteria brought to bear that substantially affected the decision to the detriment of the grievant?
  - 2. Were there any procedural irregularities that substantially affected the outcome of the matter to the detriment of the grievant?
  - 3. Given the proper facts, criteria, and procedures, was the decision one which a person in the position of the decision maker might reasonably have made?

## VI. Education

The Stanford School of Medicine will provide ongoing education to promote a positive learning environment and discourage violations of the standards of conduct for the teacher-learner relationship. Such education serves several purposes. First, it promotes an environment of respect for each person's worth and dignity. Second, it informs students that there are procedures available for them to register concerns of educator conduct violations, which can be investigated and addressed without fear of retaliation. Third, it informs instructional personnel of the SoM's standards of conduct and procedures for responding to allegations of violations of these standards. This policy will be included in the MD Program, Resident and Faculty handbooks and posted on the medical school website. Educational sessions on this topic will be introduced during the pre-clerkship curriculum and readdressed early in the clinical curriculum. Educational sessions on this topic will also be presented to educational personnel including but not limited to at forums such as resident orientation, department meetings, and staff meetings. The materials and methods for providing this education will be the responsibility of the Respectful Environment and Mistreatment Committee.

For most up to date information about the Respectful Environment and Mistreatment Policy, refer to the MD Student Handbook (<a href="https://med.stanford.edu/md/mdhandbook/section-3-md-requirements-procedures/section-3-13-respectful-educatorand-mistreatment-policy.html">https://med.stanford.edu/md/mdhandbook/section-3-md-requirements-procedures/section-3-13-respectful-educatorand-mistreatment-policy.html</a>)

## **Evaluation of Performance in Clinical Clerkships**

## <u>Criterion-Based Evaluation System (CBES)</u>

CBES refers to the evaluation system used in required clerkships at Stanford. Student performance is assessed in three domains: Patient Care, Professionalism and Interpersonal Communication, and Knowledge, as measured by a final written exam. Students whose performance meets established criteria in each domain receive a mark of Pass with Distinction. All students are eligible to earn Pass with Distinction, independently of how other students perform. Performance in each domain is reported separately in the Medical Student Performance Evaluation (MSPE), without reference to an overall grade.

- Written exam requirements are set by the clerkship director.
- Clerkships may use either the NBME Subject Exam or an alternative departmental exam. Clerkships using the NBME Subject Exam are marked with an asterisk above.
- Written examinations must be passed with a minimum score as established by the clerkship.
- Clerkship Exam thresholds for "pass" and "pass with distinction" are determined by each core clerkship and will be noted in each clerkship's respective syllabus and/or orientation.
- Students who do not pass the written exam receive an "N" (continuing) grade for the clerkship and must retake either the NBME Subject Exam or the departmental exam.
- Students who do not pass the written exam on the second attempt must take an oral exam or a suitable alternative, to be determined by the clerkship director in conjunction with the Assistant Dean for Clerkship Education.
- After the third attempt at satisfying the exam requirement, the "N" grade converts to either "pass" or "fail."
- "N" grades must be corrected within 9 months of the end of the clerkship. Uncorrected "N" grades will convert to "fail" after 9 months.

## Electives/Selective Clerkship Grading

Students on elective and selective clerkships may earn a final grade of Pass, Marginal Pass, or Fail.

## Mid-rotation Feedback

All required clerkships must provide students a formal mid-clerkship assessment of performance. Mid-clerkship feedback must be provided early enough to allow a student the opportunity to improve his or her performance before the end of the clerkship. Clerkships must maintain written documentation that mid-rotation feedback has been provided to each student.

## Clerkship Performance Evaluation Appeals

Students who have questions or concerns about a performance evaluation in a clinical clerkship should contact the Clerkship Director or an Advising Dean to request a review. If a student's disagreement remains unresolved, the student or his or her Advising Dean may request a review by the Clerkship Evaluation Committee (CEC) by contacting the CEC chair. A written request for a review must be received *within eight weeks* of the date that the final student performance evaluation was submitted in E\*Value in order to be considered.

The CEC consists of the following members (or their designees) who will participate in each appeal or review:

- Director of Evaluation (CEC chair)
- Assistant Dean for Clerkship Education
- An Advising Dean other than the appealing student's advisor
- A Required Clerkship Director other than the director involved in the appeal
- One additional faculty member (who does not hold a formal role in clerkships or CP3)

Upon receiving a request for review, the CEC will notify the clerkship team responsible for the performance evaluation and will gather data from the student and the clerkship

team. The CEC will review the final evaluation and all submitted data, gather additional information as needed, and will generally, though it is not required, reach a decision by consensus. The student and clerkship team will be notified in writing of the final decision. The CEC will attempt to complete each appeal within 45 days of the request. The CEC decision is considered final. Students with further concerns may choose to pursue the Stanford University student academic grievance procedure:

<u>https://exploredegrees.stanford.edu</u>, though they should recognize the limited scope of review inherent in that procedure.

Additional details may be found in the MD Program Handbook and Policy Manual (<a href="https://med.stanford.edu/md/mdhandbook.html">https://med.stanford.edu/md/mdhandbook.html</a>)

## **Guidelines for Coordinating Clerkship and MedScholars Projects**

Students who plan to either apply for MedScholars during Clerkships, or who want to continue MedScholars work during Clerkships, must be aware of and abide by the following policies and guidelines.

- During 100% research quarters, you may not take any Clerkships.
- In quarters where you have a full clerkship schedule, you may not hold any MedScholars grants.
- MedScholars grants during quarters in which you take a reduced Clerkship schedule are possible.

25% MedScholars	50% MedScholars	75% MedScholars
Must commit to working on	Must commit to working on	Must commit to working on
the project for 40 hours per	the project for 40 hours per	the project for 40 hours per
week for at least 3 weeks.	week for at least 6 weeks.	week for at least 9 weeks.
Must have 3 or more "free"	Must have 6 or more "free"	Must have 9 or more "free"
weeks with no clerkships.	weeks with no clerkships.	weeks with no clerkships.

For purposes of this definition, a free week is a week during the regular academic quarter in which there are not other responsibilities during normal work hours Monday-Friday

- Clerkship schedules, as recorded by the clerkship program, will be reviewed at various points in the MedScholars application and approval process.
  - During the MedScholars application process, students starting or already in Clerkships, must present their Clerkship schedule and specify which weeks they will be available to complete a MedScholars project.
  - o Within two weeks of project approval students must demonstrate an approved Clerkship schedule sufficient to allow their approved MedScholars grants in accordance with the above guidelines. If your Clerkship schedule will not allow this your MedScholars approval will be revoked.
  - o At the start of any quarter in which MedScholars funds are to be disbursed, Clerkship schedules will be reviewed and funding will not be issued if the clerkship schedule does not conform to the above guidelines.
  - o Students are responsible for advising the MedScholars Coordinator of any Away Clerkships that may affect their project effort.

## Some Advice:

- Plan your Clerkships as if you have been awarded the MedScholars project you are applying for; it is NOT recommended, and often not possible to adjust your Clerkships after you receive a MedScholars award. The Clerkship program will not view receiving a MedScholars award as sufficient justification for changing your core Clerkship schedule.
- If you are planning to complete a full year of full-time research\* before starting Clerkships, please contact the MedScholars program to discuss incorporating POM Q6 with your research schedule.

\*If you are applying for Doris Duke, HHMI, Fogarty, Fullbright, etc. please contact the MedScholars Program Administrator <a href="https://med.stanford.edu/medscholars/contact.html">https://med.stanford.edu/medscholars/contact.html</a>

## **INDE 297: Reflection and Contextual Medicine (RCM)**

In addition to successful completion of 15.5 months of clerkships (93 clinical units), students must fulfill the following graduation requirements during the clinical years. More information about each of these requirements may be found in the relevant sections of the MD Program Handbook (noted below).

The curriculum for Reflection and Contextual Medicine (RCM) is designed to provide structured time independent of clinical clerkship duties, in order to promote both reflection on and reinforcement for learning in the clinical environment. RCM is structured as a two-year curriculum to span the clinical years. Sessions occur every 8 weeks, on the third Friday of even-numbered clerkship periods (see dates below), and incorporate the curricular components outlined below.

## Goals:

- 1. To offer a regular opportunity for students to discuss and reflect upon challenging issues faced in their clinical training.
- 2. To provide resources and training to help discern and manage strong emotional responses triggered in the workplace.
- 3. To offer resources and training to help track and regulate states of stress and activation in themselves and patients.
- 4. To provide methods to skillfully navigate common challenging interpersonal dynamics in healthcare
- 5. To explore the diverse ways communication, narrative, and storytelling are used in health care and in public perceptions of healthcare
- 6. To provide instruction in health humanities topics to better understand the broader contexts of medicine.
- 7. To reinforce and develop creativity, critical thinking and expressive skills
- 8. To provide supportive approaches fostering students' career-long learning and development, including resources to better understand diverse career pathways.

<sup>\*\*</sup>Remember, you cannot take more than 4 units during 100% MedScholars quarters.

Attendance and participation in INDE 297 are required for all medical students enrolled in clerkships at Stanford affiliated sites (SHC, LPCH, VAMC, Kaiser Santa Clara and Valley Medical Center). Please note that this applies to students enrolled in required, selective and elective clerkships.

Absence requests should be submitted to the course directors well in advance of the scheduled course date and students are required to adhere to the <a href="School of Medicine">School of Medicine</a>
<a href="Absence Policy and Expectations">Absence Policy and Expectations</a> as set forth by Section 3.25 of the MD Program Handbook and Policy Manual.

Additional details for all parts of the day may be found below and in the <u>Canvas page</u>. Dates for INDE 297 (RCM Day) Sessions for 2024-2025 clerkship year with full policy in the <u>MD Program Handbook</u>:

August 16, 2024 (Period 2) October 11, 2024 (Period 4) December 6, 2024 (Period 6) February 21, 2025 (Period 8) April 18, 2025 (Period 10) June 13, 2025 (Period 12)

## **Links for Other Clinical Requirements**

MD Program Handbook and Policy Manual

https://med.stanford.edu/md/mdhandbook.html

Advanced Cardiac Life Support (ACLS) - MED 295

http://med.stanford.edu/md/mdhandbook/section-4--discovery-curriculum-overview/section-4-13-advanced-cardiac-life-support-requirement.html

Clinical Performance Examination (CPX)

http://med.stanford.edu/md/mdhandbook/section-4--discovery-curriculum-overview/section-4-14-cpx.html

United States Medical Licensing Examination (USMLE) Requirements

http://med.stanford.edu/md/mdhandbook/section-3-md-requirements-procedures/section-3-22-united-states-medical-licensing-examinations-requirements.html

Scholarly Concentrations

https://med.stanford.edu/md/student-research/scholarly-concentrations.html

Stepping Out of the MD Curriculum Sequence

http://med.stanford.edu/md/mdhandbook/section-3-md-requirements-procedures/section-3-17-stepping-out-of-md-curriculum-sequence.html

Chart of Responses to Student Issues

http://med.stanford.edu/md/mdhandbook/section-6-cp3/section-6-5-preclerkship.html

N-95 Respirator Mask Fit Requirements for Medical Students

http://med.stanford.edu/md/mdhandbook/section-3-md-requirements-procedures/section-3-26-n95maskfit-requirements-for-medical-students.html

Clerkship Resources for MD Students

https://med.stanford.edu/md/discovery-curriculum/clerkships/clerkship-resources.html

## **UNIVERSAL PRECAUTIONS**

#### UNIVERSAL PRECAUTIONS AND NEEDLESTICK PROTOCOL

Universal Precautions apply to the handling of all blood, body fluids, and human tissue. Body fluids, also known as other potentially infectious materials (OPIM), include: semen, vaginal secretions, cerebrospinal, synovial, pleural, peritoneal, pericardial, and amniotic fluids, feces, urine, sputum, nasal secretions, saliva, tears, vomitus or any other body fluid or tissue that is visibly contaminated with blood. Appropriate protection including gloves, mask and gown should be worn to protect oneself from exposure.

# If you are stuck by a needle or splashed with bloody fluid, follow the 1-STIX (1-7849) protocol.

- 1. If sharps injury: Wash skin with soap/water x 15 minutes If eyes: Flush with 500cc lactated Ringers or normal saline; If mouth/ nose: Flush with water x 15 minutes
- 2. Activate 1-STIX Pager for OHS BBP Advice RN (24/7/365)
  - a. Page Operator (650) 723-6661: Ask for 1-STIX pager (17849)
- 3. Obtain Source Patient's Blood by cooperating with site hospital personnel:
  - a. Name/MRN/Unit Location/ HIV, HBV, HCV status
  - b. Follow-up services may be advised by OHS BBP RN for testing at University Services at 484 Oak Rd (650) 735-5308.

QUICK & CONVENIENT - A trained professional will contact you and will obtain the information from you about the exposure. F/U may be advised by the OHS BBP Advice RN at University Services at 484 Oak Rd (650-725-5308).

CONFIDENTIAL - Does not become part of your health care record.

FREE - No charge for services obtained via hotline.

Keep a copy of the 1-STIX orange card with your Hospital ID Badge at all times. Hotline problems? Email the wellness team at <a href="mailto:somwellness@stanford.edu">somwellness@stanford.edu</a>.

Should a student experience a needle stick, they are advised to call the Needlestick Hotline regardless of where the incident occurs. If immediate emergency medical treatment is deemed necessary (sutures, x-ray, etc.), the hotline practitioner will work cooperatively with the student to decide where to have these done. Most exposures do not need to be seen in the Emergency Department. If post-exposure prophylactic medication is necessary, the hotline practitioner will encourage the student to be seen by a physician in Employee Health at 484 Oak Road. The hotline practitioner and student will work with the hospital personnel to attain source patient blood for testing.

In addition, students will be instructed to visit Stanford University's Occupational Health Services at 484 Oak Road if follow-up is necessary. Any necessary testing and further treatment will be addressed at this visit and follow-up care will be arranged. Costs related to Emergency Department care at an affiliated hospital, will be paid for by the affiliated hospital. Costs related to the hotline usage and initial care not done at the affiliated hospital will be paid for by Stanford. The student would assume the financial responsibility for long-term care in the unlikely event that a chronic infection (e.g., HIV or hepatitis) ensues.

Students exposed to meningococcal meningitis, pertussis, or other infections that require prophylactic antibiotics are to report to Vaden Student Health Services for treatment regardless of the site where the exposure occurred.

Information about prevention, testing, and quarantining for COVD-19 are posted to the School of

Medicine website (<a href="https://med.stanford.edu/eps/someducationrestart.html">https://med.stanford.edu/eps/someducationrestart.html</a>). Students are reminded and alerted of the policies and policy changes through email communication and town halls. Long-term policies and procedures will be developed and a strategy for disseminating the information is also in development.

**Hand Washing:** Hands and other skin surfaces contaminated with blood or body fluids must be immediately and thoroughly washed. Change gloves and wash hands between patient contacts.

**Protective Barriers:** Protective barriers will be worn to prevent exposure to blood or body fluids during procedures where splashing or aerosolization may occur. Individual departments/units will specify the type of protective barrier(s) to be used during any specific procedure, according to the type of exposure anticipated. Barriers such as gloves, gowns, plastic aprons, masks, protective eyewear, or face shields may be required.

**Gloves:** Gloves will be worn during phlebotomy, finger or heel sticks, when starting or manipulating intravascular lines, or during any procedure involving a potential exposure to blood or OPIM:

- 1. Use sterile gloves for procedures involving contact with normally sterile areas of the body.
- 2. Use examination gloves for procedures involving contact with mucous membranes or for other patient care.
- 3. Change gloves and wash hands between patient contacts.
- 4. Do not wash or disinfect surgical or examination gloves for reuse (deterioration may result).
- 5. Use general-purpose utility gloves (e.g. rubber household gloves) for housecleaning chores and for instrument cleaning and decontamination procedures. Utility gloves may be decontaminated and reused, but should be discarded if peeling, cracked, torn, or damaged.

**Preventing Penetrating Injuries:** Gloves will reduce the incidence of contamination of the hands, but they cannot prevent penetrating injuries from needles or other sharp instruments.

- 1. **NEVER RECAP NEEDLES BY HAND**; do not remove used needles from disposable syringes by hand and do not bend, break, or otherwise manipulate used needles by hand.
- 2. Place used disposable syringes, needles, scalpel blades, and other sharp items in red puncture-resistant containers for disposal. Containers should be located at the bedside or as close to the area as practical.
- 3. Take care, both during and after procedures, to prevent injuries from needles, scalpels, or other sharp instruments or tools. Always maintain eye contact with these devices.

**Use of Needleless Systems, Safe Needles and Non-Needle Sharps:** Needleless systems are to be used during:

- 1. Withdrawal of body fluids after initial venous or arterial access is established;
- 2. Administration of medications or fluids; and
- 3. Any other procedure involving the potential for an exposure incident for which a needleless system is available as an alternative to the use of needle devices.

**Safe Needle Devices:** When needleless systems are not used or cannot be used, needles with engineered sharps injury protection are to be used during:

- 1. Withdrawal of body fluids;
- 2. Accessing a vein or artery;
- 3. Administration of medications or fluids; and

4. Any other procedure involving the potential for an exposure incident for which a needle device with engineered sharps injury protection is available.

**Non-Needle Sharps:** If sharps other than needle devices are used, these items shall include engineered sharps injury protection.

**Preventing Contamination:** Unnecessary contamination to yourself and others can be prevented by observing these additional procedures:

- Always clean up spills of blood or OPIM promptly and disinfect spill site.
- Decontaminate workbench and laboratory equipment after liquid spills.
- Place contaminated disposable items in appropriate containers (red bags or sharps container).
- Shield machines and equipment which could emit aerosols or splashes.
- Use biological safety cabinets for all research procedures involving blood or OPIM.
- Decontaminate reusable instruments and devices before reprocessing.
- Choose a suitable specimen container. Avoid contaminating the outside of the container and be sure the lid is on tight. Decontaminate the outside of the container before transporting.
- Never pipette by mouth. Use a pipetting aid.

## **SECTION IV: CONTACT INFORMATION**

## Office of Medical Student Affairs

1265 Welch Road, MSOB, Suite X100 Stanford, CA 94305-5404 FAX: 650-725-3867

## Caroline Cheang, MBA, Associate Director of Clerkship Administration

Phone: 650-498-7619 / Email: cheang@stanford.edu

## Kyra Lui, Associate Registrar

Phone: 650-724-5518 / Email: kyralui@stanford.edu

## Celeste Nguyen, EdD, Registrar

Phone: 650-723-5085 / Email: celeste.nguyen@stanford.edu

## Mijiza M. Sanchez-Guzman, MPA, EdD, Associate Dean, Office of Medical Student Affairs

Phone: 650-497-9594 / Email: mijizamsanchez@stanford.edu

## Ray Jackman, Associate Director for Academic Advising

Phone: 650-724-9622 / Email: rayj@stanford.edu

## N. Nounou Taleghani, MD, PhD, Associate Dean for Academic Advising

Phone: 650-723-6576 / Email: nounou@stanford.edu

#### Michael Gisondi, MD, Advising Dean

Phone: 650-498-8569 / Email: mgisondi@stanford.edu

## Yasmin Owusu, MD, Advising Dean

Phone: 650-498-7586 / Email: yowusu@stanford.edu

## Darren Salmi, MD, Advising Dean

Phone: 650-723-6265 / Email: dsalmi@stanford.edu

## Sumit A. Shah, MD, MPH, Advising Dean

Phone: 650-498-6000 / Email: sas7@stanford.edu

## Anita Honkanen, MD, Associate Dean for Wellness and Student Life Advising

Phone: 650-725-5066 / Email: honkanen@stanford.edu

#### Tracy Rydel, MD, Assistant Dean for Clerkship Education

Phone: 650-723-9621 / Email: tarydel@stanford.edu

#### Mary Devega, Assistant Director of Clerkship Education

Phone: 650-725-4677 / Email: mdevega@stanford.edu