Curriculum 2.0: Immersion Phase

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Welcome

Immersion Phase Website

https://medschool.vanderbilt.edu/ume/IP
What we’ll cover today:

- Program Evaluation & Lessons
- Portfolio Cycles, Promotions, AOA
- Immersion Phase Course Types
- ACE requirements (Student Learning Plan, Practice-based Learning)
- Assessment (milestones, EPAs, Compass, Grading)
- Attendance Policy
- Dual degrees
- Research
- Learning Communities & Foundations of Healthcare Delivery (FHD)
- Ombudsman: Professional Accountability
- Enrollment (Aways, add/drops, special studies, degree audit)
- Preparing for USMLE Step 2 Clinical Skills Examination
Use ONE word to describe the Immersion Phase

Respond at PollEv.com/lourdesestra209

Text LOURDESESTRA209 to 22333 once to join, then text your message

almostthere #lit exciting confusing
focused sciatica great

#blessed kwaku

customizable smashville

electives

angst done with step 1

unique

Logout
Curriculum 2.0: Immersion Phase
A highly individualized post-clerkship phase
that uses clinical context to build upon prior learning

- Advanced Clinical Experiences
  rigorous clinical rotations

- Integrated Science Courses
  mixed didactic and clinical experiences

- Acting Internships
  supervised intern-level responsibilities

- Research
  mentored research project

- Learning Communities
  longitudinal development as professionals

- Foundations of Health Care Delivery
  longitudinal exploration of systems of care

**IMMERSION PHASE GOALS**

- Deepen **FOUNDATIONAL SCIENCE KNOWLEDGE**
  during meaningful clinical engagement

- Solidify **CLINICAL SKILLS**

- Enhance **PRACTICE-BASED LEARNING SKILLS**

- Ensure readiness for **INTERN ROLE/RESIDENCY**

- Expand knowledge and skills regarding **SCHOLARSHIP**

- Further grow knowledge and skills regarding **LEADERSHIP**

- Encourage **PROFESSIONAL DEVELOPMENT**
Individualization

Advanced Clinical Experiences
rigorous clinical rotations

Integrated Science Courses
mixed didactic and clinical experiences

Acting Internships
supervised intern-level responsibilities

Research
mentored research project

Learning Communities
longitudinal development as professionals

Foundations of Health Care Delivery
longitudinal exploration of systems of care

15-16 July
RES IMM: Ethics
RES IMM: Ethics
RES IMM: Ethics
ACE: Primary Care
ACE: Adoles Med Ethics in Healthcare
ISC: Global Health
AI: Ped Med
ISC: Critical Illness
ACE: EM

16-17 July
AWAY: Med
ACE: Med Ethics
ISC: Diabetes
ACE: Rheum
ISC: Sex Med & Fertility
ACE: Diag Radiology
ACE: ShadeTree

15-16 July
ISC: Inj Repair & Rehab
RES IMM: Clin & Trans
RES IMM: Clin & Trans
ISC: Addiction
ACE: Adv Clin Anesth
ACE: EM
ISC: Critical Illness

16-17 July
AE: Special Studies
AWAY: EM
AWAY: EM
ACE: Prim Care
ISC: Med Imag & Anatomy
ACE: Pall Care
AI: Med VU
ACE: Ophthalmology

15-16 July
ISC: Immunity & Infections
ISC: Addiction
ISC: Otolaryngology
AI: Surg VAH
AI: Surg VAH
ACE: ShadeTree

FREQUENT ASSESSMENT

ITERATIVE PERSONAL LEARNING GOALS
What to expect?

SOMETHING FEELS DIFFERENT.
Reminders on your IP Planning Approach

• Plan for a minimum of 2 (max of 3) ISCs

• Acting Internships (AI) will happen between March of Y3 and September of Y4

• Recognize that you will make many changes to your schedule
VA Access

• Students who rotate at the Veteran's Affairs Hospital need to initiate the process to gain computer access at least six weeks in advance of their rotation

• Our team will prompt you four weeks before your rotation to make sure you have started this process

• Details regarding what you need to do: https://medschool.vanderbilt.edu/ume/va-rotations
Program Evaluation & Lessons Learned

- Competencies Learning Objectives
- VUSM Quality Improvement
- Assessment of Learning
- VSTAR Portfolio
- Structured review with Portfolio Coaches

Personalized Learning Plan
Program Evaluation & Lessons

• Tools
  – Course evaluations data
  – Rapid cycle with student curriculum committee

• How do we use the information?
  – Make improvements, clarify, streamline
  – Protect your privacy
Exploration

— “I can just say that the exploring aspect helps me a lot… I came in [to medical school and I] thought I knew what I wanted, and then second year, I just enjoyed so many things […]

— “[…] my first rotation of this year was something that I thought could be what I wanted to do and it was very confirming for me. It was like, "Whoa, this is it." I wouldn't have known that unless I spent a month doing it.

— “[…] I'm a lot more confident going into my application. I think my personal statement will be better and my confidence in interviews. It's just that I have more of a purpose than I think I would've had with a traditional curriculum.”
Professionalism, Portfolio cycles

Dean Amy Fleming
Portfolio Cycle
Grades, Promotions & Distinctions

Dr. Geoffrey Fleming
Course types and what should you expect?

Immersion Phase Website
https://medschool.vanderbilt.edu/ume/IP
Multiple Disciplines

Single Discipline

“Classroom” Based

“Workplace” Based

Learning objectives aimed at building standardized scaffolds, based on the ideal and the idealized

Learning objectives are idiosyncratic, personalized, based on the real and pragmatic

Structured, predictable
Formal, prescribed
Protected time
“How do I build enduring conceptual scaffolds?”

Complex, unpredictable
Informal, responsive
Opportunistic
“How do I convert experience into deep learning?”

Integrated Science Courses

Advanced Electives

Advanced Clinical Experiences

Acting Internships

Immersion Phase Conceptual Framework:
Curriculum 2.0: Immersion Phase

A highly individualized post-clerkship phase that uses clinical context to build upon prior learning

- Advanced Clinical Experiences (ACE)
  - rigorous clinical rotations
- Integrated Science Courses (ISC)
  - mixed didactic and clinical experiences
- Acting Internships (AI)
  - supervised intern-level responsibilities
- Advanced Electives (AE)
  - competency- or interest-driven rotations in nonclinical settings
- Special Studies
  - competency- or interest-driven rotations

Existing courses in the catalogue

Tailored courses not in catalogue
Advanced Clinical Experiences (ACE)

- 4-week clinical rotations designed to develop clinical and practice-based learning skills

- Common ACE course-type learning objectives

- The **final grade is assigned on an H/HP/P/F basis** based on milestones and formative comments
Integrative Science Courses (ISC)

- 4-week mixed didactic/clinical rotations designed to reinforce and advance the foundational sciences* underlying clinical medicine (the why)
- Innovative mixed design with multiple learning activities (CELA, CBL, TBL, lectures, conferences, community clinics, etc.)
- Common ISC course-type learning objectives
- The final grade is assigned on an H/HP/P/F basis based on quantitative scores, competency milestones, and formative comments.

*traditional pre-clinical sciences as well as social and behavioral sciences, health services and population science, quantitative methods and informatics.
Acting Internships (AI)

- An intensive, inpatient experience designed to provide the student supervised intern-level responsibilities.
- All time devoted to this rotation; no longitudinal units (PLAN or LC) can be paired with AI.
- **Final grade will be assigned as H/HP/P/F** based on milestones, Entrustable Professional Activities (EPAs), and formative comments.
- Will be offered March – September.

_In November, we will communicate the process for enrollment._
Acting Internships (AI)

- As the Acting Intern, you can expect to:
  - Write daily notes, perform H&Ps, discharge summaries where appropriate.
  - Discuss and enter patient orders, under the oversight of residents where appropriate.
  - Learn how to triage cross-cover concerns where appropriate.
  - Perform handovers under the supervision of a resident where appropriate.
  - Assume ownership of a level of patient census closer to that of an intern.
  - Respond to calls (such as through paging) for patient care needs under the supervision of a physician.
Advanced Electives (AE)

- 4-week courses that are usually “classroom”-based
- These courses will meet the competency- and interest-driven requirement

<table>
<thead>
<tr>
<th>AE: Child Abuse Pediatric Medicine</th>
</tr>
</thead>
<tbody>
<tr>
<td>AE: Ethics in Health Care: Theological and Philosophical Perspectives</td>
</tr>
<tr>
<td>AE: Forensic Pathology</td>
</tr>
<tr>
<td>AE: Fundamentals of Quality Improvement</td>
</tr>
<tr>
<td>AE: Global Health</td>
</tr>
<tr>
<td>AE: Med School 101</td>
</tr>
<tr>
<td>AE: Preparation for Internship</td>
</tr>
<tr>
<td>AE: Preparation for Surgical Internship</td>
</tr>
<tr>
<td>AE: Students as Teachers</td>
</tr>
</tbody>
</table>

- Final grade will be assigned as P/F
Special Studies

- Courses that are uniquely designed by the student **in collaboration with Vanderbilt faculty**
- These must be courses not in our current catalog
- Courses must be 4-week long experiences to receive credit with learning goals and multiple assessment modalities
- Fulfill a “competency/interest-driven” requirement
- Final grade will be assigned as **P/F**
  (Exception—7100 AWAY Clinical Rotations graded as H/HP/P/F)
- Enrollment will explain the process for petition and review

<table>
<thead>
<tr>
<th>Form #</th>
<th>Course</th>
</tr>
</thead>
<tbody>
<tr>
<td>Form 6100</td>
<td>Petition for Clinical Special Study (at VUSM)</td>
</tr>
<tr>
<td>Form 6200</td>
<td>Petition for Non-Clinical Special Study</td>
</tr>
<tr>
<td>Form 6150</td>
<td>Petition for Research Special Study (at VUSM)</td>
</tr>
<tr>
<td>Form 7100</td>
<td>Petition for Clinical Rotation (Away)</td>
</tr>
<tr>
<td>Form 7150</td>
<td>Petition for Research Special Study (Away)</td>
</tr>
</tbody>
</table>
# C 2.0 Immersion Phase Requirements

## Minimum C2.0 Requirements (in Months)

<table>
<thead>
<tr>
<th>On-Campus</th>
<th>4</th>
<th>Integrated Science Courses (ISCs)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Acting Internship (AI)</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Advanced Clinical Experiences (ACEs)</td>
<td></td>
</tr>
<tr>
<td>On-Campus or Away (away with approval)</td>
<td>3</td>
<td>Research Immersion</td>
</tr>
<tr>
<td>3</td>
<td>Competency and Interest-Driven Rotations (can be ISCs, ACEs, AIs or Electives)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>*1 must be clinical</td>
<td></td>
</tr>
</tbody>
</table>

### Impact of Increasing Research Months

<table>
<thead>
<tr>
<th>3 months of research:</th>
<th>Complete 15 course requirements</th>
</tr>
</thead>
<tbody>
<tr>
<td>To extend research beyond 3 months:</td>
<td>Student must be in good academic standing and complete an approval process with the Office of Medical Student Research.</td>
</tr>
<tr>
<td>4 months:</td>
<td>Additional research month fulfills one competency/interest-driven rotation</td>
</tr>
<tr>
<td>5 months:</td>
<td>Additional research months fulfill two competency/interest-driven rotations</td>
</tr>
<tr>
<td>6 months:</td>
<td>Additional research months fulfill two competency/interest-driven rotations and requires the use of one flex month</td>
</tr>
</tbody>
</table>

### Longitudinal Courses

- Foundation of Health Care Delivery (11 units)
  - 6 units taken during intersessions
  - 5 units take longitudinally, paired with other courses during the Immersion Phase

- Learning Communities (8 units)
Which of the following course types will be your first Immersion Phase rotation?

Respond at PollEv.com/lourdesestra209

Text LOURDESESTRA209 to 22333 once to join, then A, B, C, or D
You are here

Enjoy your journey!

- Year 3
  - Fixed Step 1 Period
  - Integrated Science Course 1
  - Research Immersion
  - Advanced Clinical Experience 1
  - Integrated Science Course 2
  - Integrated Science Course 3
  - Advanced Clinical Experience 2
  - Advanced Clinical Experience 3
  - Flex Month

- Year 4
  - Competency-Driven Rotation
  - Acting Internship
  - Away Rotation
  - Advanced Clinical Experience 4
  - Flexible Month
  - Fixed Interview
  - Break
  - Flex Month
  - Integrated Science Course 4
  - Competency-Driven Rotation
  - Exit Portfolio Review
  - Graduation

Immersion Phase (Years 3 and 4): 15 blocks required over 20 months, including research immersion of at least 3 months.
ACE Overview

Immersion Phase Website

https://medschool.vanderbilt.edu/ume/IP
ACE Overview

Overarching Goals for ACEs
1) Solidify Clinical Skills
2) Enhance Practice-Based Learning Skills

Focus on Developing Skills:
1) Creating and discussing your learning plan
2) Practice-Based Learning and Improvement
1) Student Learning Plan

WHY?
1) Student Learning Plan

Teacher Directed

Learner Directed

https://aaronwolowiec.files.wordpress.com/2012/08/picture1.jpg
1) Student Learning Plan

How To...

1. In VSTAR-Learn, go to the ACE you are about to start
2. Click on ACE Student Learning Plan
3. Fill out the form (next slide)
4. Print the form and take to your ACE Day 1
5. Have a discussion with clinical preceptor (attending, resident)
ACE STUDENT LEARNING PLAN

Please complete this form, print and take with you to your clinical rotation. This form will facilitate the conversation with the frontline clinical faculty that will provide you with learning experiences and potentially assess your progress.

Advanced Clinical Experiences (ACEs) are rigorous clinical experiences that are designed to:
1. Solidify clinical skills
2. Enhance practice-based learning skills

Please create 2-5 learning goals for this rotation.

After you have discussed your learning goals with the frontline clinical faculty, please ask the following questions:
(1) What clinical experiences would be most helpful to achieve these goals?
(2) What additional goals do you think I should focus on this month?
(3) What are your expectations for me during this month?
1) Student Learning Plan

Tips for the conversation with the clinical faculty

1. Have the conversation with whoever will be your primary clinical faculty during week 1 (attending, resident)

2. Initiate the conversation with something like…

   “I am very excited for this rotation and would like to do everything I can to get the most out of it”

3. Be confident but not brash. Be open to feedback and redirection if there are other/different goals they want you to focus on
1) Student Learning Plan

Advantages to the Student Learning Plan Process

• Think Through Your Own Learning
• Develop Shared Expectations with Faculty
• Gain insight into How to Achieve your Goals
• Gain insight into How to be Successful in that Environment
• Develop the habit (VERY LITTLE DIRECTION IN GME)
2) Practice-Based Learning Exercise

Has been a course requirement in each Advanced Clinical Experience (ACE)
Continually changing practice context

- Changing patient demographics
- Changing expectations of society/patients/profession
- Increasing rates of chronic disease
- New Diseases/Re-emergence of “old” diseases
- Shifting standards of care and practice guidelines
- Improving health information technology
- Skyrocketing costs
- Advances in medical science → Expanding knowledge base
Average time lag of 17 years to translate discovery into clinical practice

Medicine today...

• Learning in this environment is different
• Individual patient encounters routinely highlight knowledge gaps for medical students and practicing physicians, but...

Further investigation often thwarted in the fast-paced clinical environment
Learning in the Workplace

• Being able to ask and answer questions that come up in the routine daily care of patients is an essential skill for medical students, residents, and practicing physicians alike.

• This “practice-based learning” was ideally triggered by your patients and hopefully followed up with enough time to truly learn from the experience.
Assignment Changes Based on Course Evaluation

- The assignment felt like “busy work”… Did not feel authentic.
- Feedback from librarian was not valuable.
- Minimal understanding and buy-in from clinical faculty.

Submit Question VSTAR

Assessment and feedback from librarian

Assessment of presentation and content by faculty

Present to faculty at end of course

Research Question
2) Practice-Based Learning Exercise

**EPA 7:** Form a clinical question and retrieve evidence to advance patient care
What is an EPA?

• Tasks or responsibilities that trainees (i.e. YOU) are entrusted to perform unsupervised once you have attained sufficient competence

• The activities are independently
  – Executable
  – Observable
  – Measurable

• It is our goal for faculty and residents to directly observe your abilities in these areas
What is an EPA?

• You will continue to be supervised during your medical school activities, but...

• **THE GOAL** is for you to be able to do all of these activities *unsupervised on Day 1 of Residency*
EPA 1

HISTORY AND EXAMINATION
Gather a history and perform a physical examination

EPA 2

DIFFERENTIAL DIAGNOSIS
Prioritize a differential diagnosis following a clinical encounter

EPA 3

COMMON TESTS
Recommend and interpret common diagnostic and screening tests

EPA 4

ENTER ORDERS
Enter and discuss orders and prescriptions

EPA 5

DOCUMENT ENCOUNTER
Document a clinical encounter in the patient record

EPA 6

ORAL PRESENTATION
Provide an oral presentation of a clinical encounter

EPA 7

CLINICAL QUESTIONS
Form clinical questions and retrieve evidence to advance patient care

EPA 8

PATIENT HANDOVER
Give or receive a patient handover to transition care responsibility

graphics courtesy of our colleagues at OHSU
EPA 9
INTERPROFESSIONAL TEAM
Collaborate as a member of an interprofessional team

EPA 10
EMERGENT CARE
Recognize a patient requiring urgent or emergent care and initiate evaluation and management

EPA 11
OBTAIN CONSENT
Obtain informed consent for tests and/or procedures

EPA 12
PERFORM PROCEDURES
Perform general procedures of a physician

EPA 13
SAFETY AND IMPROVEMENT
Identify system failures and contribute to a culture of safety and improvement

graphics courtesy of our colleagues at OHSU
STEP 1: ASK a Clinical Question

• As you go through the ACE, pay attention to the different questions that come up related to your patient care.

• **Identify** a real knowledge gap in caring for an actual patient

• **Pick a gap and generate** a well-formed **PICO** question to address the knowledge gap
  
  • Patient-Intervention-Comparison-Outcome
STEP 2: ACQUIRE Evidence

• Find evidence to find the answer(s) to the question

• Select an appropriate resource to answer the question (Summary/Guideline vs. Pre-synthesized resource vs. Primary literature)
STEP 3: APPRAISE Evidence

- Identify both strength(s) and weakness(es) of the selected study
- Cite evidence applicable to the patient
STEP 4: ADVISE

• Verbalize clear recommendation(s) to the provider(s) for practice based on study findings
  • Attending, resident, team
  • During rounds or one-on-one discussions
STEP 5: Request Assessment via Compass

Embedded in the standard VSTAR-Portfolio activity for each ACE

**EPA7: Form a clinical question and retrieve evidence to advance patient care**

1. In supervising this student in ASKING and ANSWERING this clinical question, how much did you participate in the task?
   - I did it
   - I talked them through it
   - I directed them from time to time
   - I was available just in case

2. With regards to the student’s ability to FORM a clinical question and RETRIEVE evidence that would actually change a patient’s medical care, which would you most likely tell them...
   - I’ll double check all of your findings
   - I’ll double check your key findings
   - I feel comfortable acting on your findings without checking.

3. What does this student need to work on to become more independent or to allow you to act upon their findings?
First Day of Course

Students should page Dr. Oluwole, the course director, at 615-835-5031 to confirm a meeting place for 8:15 am on the first day of the course.

Additional information can be found in the IP Catalog (Google Version).

Form a clinical question and retrieve evidence to advance patient care

Student participation is expected to include the following characteristics.

**ASK**
- Identification a real knowledge gap in caring for an actual patient
- Generation of a well-formed PICO question (Patient-Intervention-Comparison-Outcome) to address the knowledge gap

**ACQUIRE**
- Use of evidence to find the answer(s) to the question
- Selection of an appropriate resource to answer the question (Summary/Guideline vs. Pre-synthesized resource vs. Primary literature)

**APPRAISE**
- Identification of both strength(s) and weakness(es) of the selected study
- Citation of evidence applicable to the patient

**ADVISE**
- Verbalization of clear recommendation(s) to the provider(s) for practice based on study findings
Assessment

Immersion Phase Website

https://medschool.vanderbilt.edu/ume/IP
Goals of Immersion Assessments

- Assess desired outcomes of VUSM curriculum required for graduation
- Appraise readiness for residency
- Provide feedback to direct future learning
- Provide distinction among students
- Generate data to inform curricular improvement
Grading in the Immersion Phase

**Graded as H/HP/P/F**
- Integrated Science Courses (ISC)
- Advanced Clinical Experiences (ACE)
- Acting Internships (AI)
- Special Study–Away
- Research Immersion
- Foundations of Healthcare Delivery Quality Improvement (FHD QI) – 1-3 and Advanced Track

**Graded as P/F**
- Advanced Electives (AE)
- Special Studies (Clinical here, Research - here or away)
- Learning Communities (LC)
- Foundations of Healthcare Delivery (FHD) – all except QI above
<table>
<thead>
<tr>
<th>ASSESSMENT in the IMMERSION PHASE</th>
<th>ACEs</th>
<th>ISC s</th>
<th>AIs</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>FOCUS of Assessment</strong></td>
<td>Clinical Skills Practice-Based Learning</td>
<td>Medical Knowledge Integration</td>
<td>Ensure Readiness for Internship</td>
</tr>
<tr>
<td><strong>Predominant Method of Assessment</strong></td>
<td>• Milestones • EPA 7</td>
<td>• Knowledge Assessments -Multiple Choice Exams -Essay exams -Quizzes • Milestones</td>
<td>• Milestones • Entrustable Professional Activities (EPA)</td>
</tr>
</tbody>
</table>
**EPA 7:** Form a clinical question and retrieve evidence to advance patient care

**EPA 4:** Enter and discuss orders and prescriptions
**EPA 5:** Document a clinical encounter in the patient record
**EPA 8:** Give or receive a patient handover to transition care responsibility
**EPA 10:** Recognize a patient requiring urgent or emergent care and initiate evaluation and management
### Medical Knowledge 2: Deep Knowledge

Demonstrate deep knowledge of the sciences essential for one’s chosen field of practice.

**MK2b: Depth**

<table>
<thead>
<tr>
<th>Requirement</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Undesirable</strong></td>
<td>Mastery of prior learning is insufficient to support currently expected activities.</td>
</tr>
<tr>
<td><strong>Entry</strong></td>
<td>Limited knowledge base. Understanding is descriptive, i.e. focuses on how things appear, without questioning.</td>
</tr>
<tr>
<td><strong>Aspirational</strong></td>
<td>Creates unique insights and solutions to existing problems.</td>
</tr>
<tr>
<td><strong>Not applicable</strong></td>
<td></td>
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</tbody>
</table>
Core EPAs during Immersion Phase
Faculty will be asked to assess you using the following scales

<table>
<thead>
<tr>
<th>Scale Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>I did it - Required complete guidance, student was unprepared, I had to do the work for them.</td>
</tr>
<tr>
<td>I talked them through it - Allowed to practice co-actively, with supervisor engaged in task.</td>
</tr>
<tr>
<td>I directed them from time to time - Student demonstrated some independence; only required intermittent prompting.</td>
</tr>
<tr>
<td>I was available just in case - Student functioned fairly independently, only needed assistance with nuances or complex situations.</td>
</tr>
</tbody>
</table>

If you were in a similar situation again with this student, which are you most likely to tell them...

- Watch me do this.
- Let's do this together.
- I'll watch you.
- You go ahead, and I'll double check all of your findings.
- You go ahead, and I'll double check key findings.

What does this student need to work on to become more independent?
Frontline Clinical Faculty/Residents

Student
• **Who reports?** Anyone that directly observes you!
  - Faculty
  - Residents
  - Interns
  - Staff

• **Who solicits? How?**
  - Course Directors - VStarPortfolio
  - Immersion Phase Coordinator - VStarPortfolio
  - **Learner (You!) - Compass**

---

More data helps Course Directors understand assessor variability, learner’s performance over time and provide more accurate summative assessment.
How to Compass

- Please visit www.vstarcompass.com using a browser on your phone, laptop, or tablet. Bookmark this site for future use.
- Any activities to which you have been assigned *and* can send out will be listed here. You may see activities like:
How to Compass: AI Example
How to Compass (continued)

• Click the activity that you wish to use. To request **milestone** feedback from clinicians that you have worked, use the activity with your course name.
How to Compass: AI Example

Milestones for the AI or ACE are named simply by the course name.

Students in their AI will have additional EPA activities.
How to Compass (continued)

Once you choose your activity, you are taken to a new screen with “request feedback” or “type feedback.”

Use “request feedback.”

A detailed guide on request feedback is here: https://vstar.mc.vanderbilt.edu/help/?p=575
How to Compass (continued)

When you click “request feedback” you have three options for choosing the clinician.

- If you “select from advisor list” you get the names of the Course Directors.
- If you want to use someone else, you can search the Vanderbilt Directory.
- If you are working at the VA or with a preceptor who would not have a VUNetID and Vanderbilt email address, choose “Add Email IDs”
How to Compass (continued)

Find or input the individual you want to provide an assessment on your performance
How to Compass (continued)

• When you select the individual, you are taken to a new page that requests the date on which you worked with him/her.
  – You can input a single day, a week or longer. To input a range, use the Encounter Date and the End Date.
  – If you are requesting feedback on the day you worked with the individual or your last day to work with the individual (ideal), you can verbally ask the clinician to be sure to complete the assessment.
  – The request will auto expire in 7 days.
  – Once this info is input, select the blue bar “Request Feedback” at the bottom of the screen.
Step 3: Send Request

WILLIAM B CUTRER

Options

Encounter Date
10/15/2015

(Optional) End Date

REQUEST FEEDBACK
An auto message will pop up stating “Your request has been sent successfully.” If you do not see this message, begin the process again. Your browser may have timed out. The assessor will receive a message that looks like this:

---

**VSTAR Portfolio**

Dear nathan.mcclure@vanderbilt.edu,

John Doe has requested that you submit a brief evaluation of his/her performance during a clinical encounter or presentation on **Aug 23**. Please click the following link to complete this evaluation: [John Doe Assessment](#).

Thank you for taking the time to both observe this student and fill out this evaluation.

**Vanderbilt University School of Medicine**

Contact Support if you encounter any technical difficulties.

Please do not reply to this email. This mailbox is not monitored and you will not receive a response.
How to Compass (continued)

If/when you receive data, you can see it here in Compass (as well as in V*Portfolio)
How to Compass (continued)

You can send a reminder after a few days, if the individual has not responded.
Questions about COMPASS
Data Collected to Inform Grades

• Milestones on all 6 Domains
• PBL Exercise (EPA7)
• Clinical observations (milestone-based + comments)
• Other course specific assessment modalities (e.g., quizzes, exams, CBL, TBL)
• EPAs

How does the performance data lead to a final grade?
Milestone (14) Assessments

- MK2b-Depth
- PC2b-Diff Dx
- PC2c-Dx Workup
- PC7a-Self-Knowledge
- PC7b-Assessment/Plan
- IPCS7a.1-Patient Rapport
- IPCS7b.1-Presentation Content
- SBP2a-Initiative
- SBP2b-Prioritization
- PBLI3a-Receptivity
- MK7b-Inquiry
- MK7c-Use of info resources
  **EPA7**
- PR1a-Prof Demeanor
- PR5a-Honesty

Domain Scores

- MK
- PC
- IPCS
- SBP
- PBLI
- Prof

Final Grade

- Reach
- Target
- Threshold
- Sub-Threshold

Honors High Pass Pass Fail

Frontline Clinical Faculty/Residents

Course Director

Student
### Course Director

determines level of performance for each Competency Domain

<table>
<thead>
<tr>
<th>Activity Title</th>
<th>Assessor</th>
<th>Completed</th>
<th>pc2b</th>
<th>pc2c</th>
<th>pc7a</th>
<th>pc7b</th>
<th>mk2b</th>
<th>mk7b</th>
<th>mk7c</th>
<th>ipcs7a.1</th>
<th>ipcs7b.1</th>
<th>pbii3d</th>
<th>pr1b</th>
<th>sbp2b</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Imm 2016-17 Sec 2 ACE: Course</td>
<td>Assessor 1</td>
<td>10/2/16</td>
<td>4</td>
<td>4</td>
<td>4</td>
<td>4</td>
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<td>4</td>
<td>4</td>
<td>5</td>
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<td>4</td>
<td>5</td>
<td>4</td>
<td>n/a</td>
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<tr>
<td>Imm 2016-17 Sec 2 ACE: Course</td>
<td>Assessor 2</td>
<td>10/1/16</td>
<td>4</td>
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<td>5</td>
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<td>3</td>
<td>4</td>
<td>4</td>
<td>4</td>
<td>4</td>
<td>4</td>
<td>4.5</td>
<td>4</td>
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<tr>
<td>Imm 2016-17 Sec 2 ACE: Course</td>
<td>Assessor 3</td>
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<td>Imm 2016-17 Sec 2 ACE: Course</td>
<td>Assessor 4</td>
<td>9/27/16</td>
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<td>5</td>
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<tr>
<td>Imm 2016-17 Sec 2 ACE: Course</td>
<td>Assessor 5</td>
<td>9/26/16</td>
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<tr>
<td>Imm 2016-17 Sec 2 ACE: Course</td>
<td>Assessor 6</td>
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</table>

**Average Value for milestone**

<table>
<thead>
<tr>
<th></th>
<th>pc2b</th>
<th>pc2c</th>
<th>pc7a</th>
<th>pc7b</th>
<th>mk2b</th>
<th>mk7b</th>
<th>mk7c</th>
<th>ipcs7a.1</th>
<th>ipcs7b.1</th>
<th>pbii3d</th>
<th>pr1b</th>
<th>sbp2b</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>4.06</td>
<td>4.06</td>
<td>4.50</td>
<td>4.00</td>
<td>4.19</td>
<td>4.13</td>
<td>4.13</td>
<td>4.67</td>
<td>4.43</td>
<td>3.94</td>
<td>4.64</td>
<td>4.00</td>
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</table>

**Average Value for domain**

<table>
<thead>
<tr>
<th></th>
<th>PC</th>
<th>MK</th>
<th>IPCS</th>
<th>PBLI</th>
<th>PR</th>
<th>SBP</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>4.16</td>
<td>4.15</td>
<td>4.55</td>
<td>3.94</td>
<td>4.64</td>
<td>4.00</td>
</tr>
</tbody>
</table>

**Final assessment per domain**

- **Reach**
- **Target**
- **Threshold**
- **Sub-threshold**
<table>
<thead>
<tr>
<th>Competency (Reach [R], Target [T], Threshold [TH], Sub-threshold [Sub])</th>
<th>Performance</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Medical Knowledge</strong> Understands established and evolving biological, clinical, epidemiological and social-behavioral sciences and must be able to apply this knowledge to patient care.</td>
<td>REACH</td>
</tr>
<tr>
<td><strong>Patient Care</strong> Provides care that is compassionate, safe, efficient, cost sensitive, appropriate, and effective for the treatment of illness and the promotion of health.</td>
<td>REACH</td>
</tr>
<tr>
<td><strong>Interpersonal &amp; Communication Skills</strong> Able to communicates in ways that result in safe, effective and respectful information exchange and create beneficial partnerships with patients, their families, and other health professionals.</td>
<td>REACH</td>
</tr>
<tr>
<td><strong>Systems-Based Practice</strong> Understand and respond to the larger context and system of healthcare and effectively call on system resources to provide care that is of optimal value.</td>
<td>REACH</td>
</tr>
<tr>
<td><strong>Practice-Based Learning &amp; Improvement</strong> Able to continuously improve patient care by investigating and evaluating outcomes of care and by engaging in learning activities which involve critical appraisal and assimilation of scientific evidence and application of relevant</td>
<td>TARGET</td>
</tr>
<tr>
<td><strong>Professionalism</strong> Possesses the knowledge, skills and attitudes necessary to carry out professional responsibilities, adhere to ethical standards and establish and maintain productive, respectful relationships with patients and colleagues.</td>
<td>REACH</td>
</tr>
</tbody>
</table>

Formative Comments: (Not to be quoted in Dean’s Letter; please provide specific recommendations for improvement)

Summative Comments: (Summative comments of student’s performance may be used in Dean’s Letter)
<table>
<thead>
<tr>
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<th>Performance</th>
</tr>
</thead>
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</tr>
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</tr>
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<td>TARGET</td>
</tr>
<tr>
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</tr>
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<td></td>
</tr>
</tbody>
</table>

### Summative Competency Ratings (6 domains assessed)

<table>
<thead>
<tr>
<th>Risk of Fail (course director discretion)</th>
<th>Pass</th>
<th>High Pass</th>
<th>Honors</th>
</tr>
</thead>
<tbody>
<tr>
<td>Any Sub-Threshold OR &gt;2 Thresholds</td>
<td>No more than 2 Thresholds All others at Target or above</td>
<td>At least 3 Reaches All others at Target</td>
<td>Nothing below Target 5 Reaches</td>
</tr>
</tbody>
</table>

---

**Final Grade:** H

- H: Excellent performance in all competency domains
- HP: Excellent performance in several, but not all, competency domains
- P: Satisfactory performance in all competency domains
- P*: Temporary grade given to students whose performance is marginal because of important deficiencies in some aspects of course-work or competency domains; must ultimately be resolved to Pass or Fail
- F: Unsatisfactory performance

**Note:** "I" Incomplete is not a grade and is not an alternative for failure, but indicates that some work must be completed before a grade is issued.

**For clinical courses:** Rate suitability for appointment as a resident on your service: Superior
Quality Control

Supporting standardization of outcomes in the context of individualization of learning experiences
Courses Designed to Meet Phase Goals

- Foundational science knowledge during meaningful clinical engagement
- Clinical skills
- Practice-based learning skills
- Readiness for intern role/residency
- Knowledge and skills regarding scholarship
- Knowledge and skills regarding leadership
- Professional development
- Advanced Electives

ISC → AI
ISC → Res
ISC → LC
AI → Res
Res → LC
FHD → LC
Consistency within course categories

- Each category has a set of milestones being assessed during the rotation that all use (at a minimum):
  - AI milestone set: https://medschool.vanderbilt.edu/ume/ai-milestones-students
  - ACE milestone set: https://medschool.vanderbilt.edu/ume/ace-milestones-students
  - ISC milestone set: https://medschool.vanderbilt.edu/ume/isc-milestones-students
Consistency within course categories

- The set of milestones (and EPAs) is aligned to ensure the main goal of each course is weighted appropriately
  - ISC—Medical Knowledge
  - ACE—Patient Care + Practice-Based Learning
  - AI—Patient Care (+ EPA assessments)
QI efforts

- Meetings of course directors within each category, to discuss data, review case examples and address process issues
- Faculty Development efforts to train workplace assessors
- Data analysis by Standing Assessment Committee:
  - Overall grade distribution
  - Distribution within categories
  - Milestone rating distributions by student and by faculty
  - Comparison with performance outcomes from prior phases
Curriculum 2.0: Immersion Phase
A highly individualized post-clerkship phase that uses clinical context to build upon prior learning.

Immersion Phase Goals:
- Deepen foundational science knowledge during meaningful clinical engagement
- Solidify clinical skills
- Enhance practice-based learning skills
- Ensure readiness for intern role/residency
- Expand knowledge and skills regarding scholarship
- Further grow knowledge and skills regarding leadership
- Encourage professional development
Attendance Policy

• Students are expected to attend all required sessions as described in the course syllabus

• Pre-approval required for
  – Interviews
  – Religious holy dates
  – Presentations of work at an advertised scholarly meeting

• Emergency absences can be approved for serious medical issues and family emergencies

• The full policy and form is available in every V*Learn Immersion Phase course
IMMERSION PHASE ABSENCE REQUEST FORM

Refer to the VUSM Catalog for the full absence policy and procedures related to this form
http://vanderbilt.edu/catalogs/documents/medical.pdf#phase

Request permission at least 4 weeks in advance of the start of the course.

Name: ____________________________________________  Today’s Date: ________________

Date(s) of absence: ____________________________  Type of absence:  □ Planned Absence
                                                □ Emergency Absence
                                                □ Interview

Reason(s) for absence: ________________________________________________________________

Step 1: Obtain signature/email approval from the appropriate course director of the section that will be missed:

________________________________________________________

Course director
Signature acknowledges that a make-up plan has been mutually agreed upon with the student.
Step 2: Obtain signature/email approval from the appropriate faculty director of the longitudinal(s) that will be missed. **NOTE: Learning Communities requires face-to-face sessions. If you are going to miss an LC session, reach out to bill.cutrer@vanderbilt.edu to gain approval to drop the course.**

---

*Foundations of Healthcare Delivery (FHD) – fhd@vanderbilt.edu*

*Research (PLAN) – vms.research@vanderbilt.edu*

---

Step 3: It is your responsibility to discuss your absence with your clinical team.

Step 4: Drop-off completed form to 201 Light Hall or email completed form to VUSMabsence@vanderbilt.edu (Attached any email approvals you have if you did not get signatures)

**Final Approval:** ________________________________________________________________

Associate Dean Amy Fleming or Assistant Dean Cathy Pettepher
Dual Degrees

https://medschool.vanderbilt.edu/ume/Imm_dual_degrees
Dual Degrees

• Students wishing to receive a waiver from any required curriculum requirements must complete and submit the Alternative Pathway Request with the Registrar.
• The Registrar will process the request and obtain approvals from the appropriate course director(s).
C2.0 Dual Degree Requirements

https://medschool.vanderbilt.edu/ume/Imm_dual_degrees

<table>
<thead>
<tr>
<th>C2.0 Requirements (in Months)</th>
<th>Ongoing Longitudinal Courses</th>
</tr>
</thead>
<tbody>
<tr>
<td>4 Integrated Science Courses (ISCs) — on campus</td>
<td>Foundations of Health Care Delivery (11 units)</td>
</tr>
<tr>
<td>1 Acting Internship — on campus</td>
<td>• 6 units taken during Intersessions</td>
</tr>
<tr>
<td>4 Advanced Clinical Experiences (ACEs) — on campus</td>
<td>• 5 units taken longitudinally, paired with other courses during the Immersion Phase</td>
</tr>
<tr>
<td>3 Research Immersion*</td>
<td>Learning Communities (8 units)</td>
</tr>
<tr>
<td>2 Competency and Interest-driven Rotations</td>
<td></td>
</tr>
<tr>
<td>• can be ISCs, ACEs, Away ACEs, AIs or Advanced Electives</td>
<td></td>
</tr>
<tr>
<td>• away with approval</td>
<td></td>
</tr>
<tr>
<td>• one must be clinical</td>
<td></td>
</tr>
</tbody>
</table>

Overall Requirements

14 months required

6 flex months (4 flex + 2 months for Step 1 in July/August of year 3 + 1 month for interviews in December of year 4)

May register for up to 16 rotations

Must include:

• 1 Primary Care course (ACE: PC (VU or away), ACE: Adolescent Medicine or ISC: Community Healthcare)
• 1 Acute Care course (ACE: Emergency Medicine or any ICU-based course, including ISC: Critical Care or critical care ACEs)
C2.0 Dual Degree - Research

- Review dual degree with Research faculty, since some dual degrees can meet the Research Immersion credit requirement.
- If Research Immersion is needed, student must register for PLAN as well (only offered in March and September)

<table>
<thead>
<tr>
<th>Research Immersion</th>
</tr>
</thead>
<tbody>
<tr>
<td><em>It is strongly recommended that students contact the Office of Medical Student Research to discuss dual degree plans before enrollment in the degree program. Waiver request required for all dual degree students. Any request for research extensions require review of entire schedule.</em></td>
</tr>
</tbody>
</table>

| MPH: | PLAN and Research Immersion requirements fulfilled by degree coursework. |
| MDiv: | PLAN and Research Immersion required. |
| MBA: | PLAN and Research Immersion requirements may be fulfilled by degree coursework. Evidence required for waivers. |
| MEd: | PLAN and Research Immersion requirements fulfilled by degree coursework. |
| MSCI: | PLAN and Research Immersion requirements fulfilled by degree coursework. |
| MTS: | If taking the thesis track, PLAN and Research Immersion requirements may be fulfilled by degree coursework. Evidence required for waivers. |
| LLM: | PLAN and Research Immersion requirements may be fulfilled by degree coursework. Evidence required for waivers. |
C2.0 Dual Degrees - Learning Communities

- 8 units required in most cases
- Strongly recommend to complete the required LC units *before* taking the year off

<table>
<thead>
<tr>
<th>Learning Communities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Some Learning Communities requirements are fulfilled by graduate degree coursework.</td>
</tr>
<tr>
<td>MPH: all 8 units required; recommended to complete in Y3</td>
</tr>
<tr>
<td>MDiv: all 8 units required; recommended to complete in Y3</td>
</tr>
<tr>
<td>MBA: 4 units required (LC1, LC2, LC4 and LC7); recommended to complete in Y3</td>
</tr>
<tr>
<td>MEd: 7 units required (LC1, LC3, LC4, LC5, LC6, LC7 and LC8); recommended to complete in Y3</td>
</tr>
<tr>
<td>MSCI: Will be reviewed on a case-by-case basis</td>
</tr>
<tr>
<td>MTS: Will be reviewed on a case-by-case basis</td>
</tr>
<tr>
<td>LLM: Will be reviewed on a case-by-case basis</td>
</tr>
</tbody>
</table>
C2.0 Dual Degrees - FHD

- Requirements vary by degree; review webpage for information.
- Strongly recommend to complete the FHD requirements *before* taking the year off

<table>
<thead>
<tr>
<th>Foundations of Health Care Delivery</th>
</tr>
</thead>
</table>

**MPH:** 5 longitudinal units required (QI 1-3, IPE2, and PS recommended to complete in Y3) plus both year 3 intersessions (AC1/PHP and AC2/IPE1)

**MDiv:** all 11 units required, including content of 4th year intersession (via attendance or alternative pathway depending on individual student’s schedule).

**MBA:** 5 longitudinal units required (QI 1-3, IPE2, and PS recommended to complete in Y3) plus both year 3 intersessions (AC1/PHP and AC2/IPE1)

**MED:** all 11 units required, including content of 4th year intersession (via attendance or alternative pathway depending on individual student’s schedule).

**MSCI:** Will be reviewed on a case-by-case basis

**MTS:** Will be reviewed on a case-by-case basis

**LLM:** Will be reviewed on a case-by-case basis
Inquiry Program

Office of Medical Student Research
https://medschool.vanderbilt.edu/student-research/

Joey V. Barnett, PhD
Director, Office of Medical Student Research
Assistant Dean of Physician-Researcher Training
PLAN

Office of Medical Student Research
https://medschool.vanderbilt.edu/student-research/
PLAN Team

Alicia Beeghly-Fadiel, PhD, MPH, MPhil
Assistant Professor of Medicine
Email: Alicia.beeghly@vanderbilt.edu

Mario A. Davidson, PhD
Assistant Professor of Biostatistics
Email: mario.davidson@vanderbilt.edu

Christina Fiske, MD, MPH
Assistant Professor, Adult Infectious Disease
Email: christina.fiske@vanderbilt.edu

Carlos G. Grijalva, MD, MPH
Course Director
Associate Professor of Health Policy
Email: carlos.grijalva@vanderbilt.edu

Bill Heerman, MD, MPH
Assistant Professor of Pediatrics
Assistant Professor of Medicine
Email: bill.heerman@vanderbilt.edu

Kirk Keegan III, MD, MPH, MS
Assistant Professor of Urologic Surgery
Email: pat.keegan@vanderbilt.edu

Candace McNaughton, MD, MPH
Assistant Professor of Emergency Medicine
Email: candace.mcnaughton@vanderbilt.edu

April Pettit, MD, MPH
Assistant Professor of Medicine
(Infectious Diseases)
Email: april.pettit@vanderbilt.edu

Michael Ward, MD, MBA
Assistant Professor of Emergency Medicine
Email: Michael.j.ward@vanderbilt.edu

Derek Williams, MD, MPH
Assistant Professor of Pediatrics
Email: derek.williams@vanderbilt.edu
Course Competencies

By the end of the course, students will be able to demonstrate the following specific competencies:

- Understand the research process and appreciate the close connection between research, clinical practice, and population health
- Identify and formulate a structured research question
- Identify major research study designs
- Understand basic principles of measurement and data analyses
- Understand basic principles for the interpretation of research findings within the context of the study design
- Understand basic principles of effective scientific communication
Assessment

P/F

Average of Quizzes 15%
Oral Presentation 25%
Average of Assignments 30%
Final Project Plan 30%

Milestone assessments will be completed by your SGFs.
PLAN Preparation

• **VSTAR Learn** Forum Blast last week - notifications

• **SESSION 1: September 5\textsuperscript{th} @ 1:00 PM**
  – Pre-reading and Pre-Session Assessment due by 11:59 pm, Sunday September 3\textsuperscript{rd}. Be prepared to present your project to your small group – whiteboards, 5 min each.

• Small Groups & Locations; Mentor feedback

• Mentor Email – support funds

• Invite your mentor to presentations (last session)
Research Immersion

Office of Medical Student Research
https://medschool.vanderbilt.edu/student-research/
RESEARCH IMMERSION TEAM

Office of Medical Student Research
312 Light Hall
vms.research@vanderbilt.edu

Joey Barnett, PhD
Director, Office of Medical Student Research
Assistant Dean, Physician-Researcher Training

Luke Finck, EdD, MA
Assistant Director, Office of Medical Student Research
Instructor, Medical Education and Administration

Stacey Satchell, MS, MA
Program Manager, Office of Medical Student Research

Marlene Johnson
Program Coordinator, Office of Medical Student Research
CORE LEARNING OBJECTIVES AND COMPETENCIES

The course Learning Objectives for the Research Immersion are closely aligned with selected School of Medicine milestones:

- Independently interpret information to formulate a research plan (MK7a, MK7b)
- Model a commitment to continuous self-regulated learning as evidenced by the collection, analysis, interpretation, and implementation of newly acquired information (MK7a, MK7b)
- Demonstrate knowledge and understanding of the science for selected course project (MK2a, MK2b, MK7a, MK7b)
CORE LEARNING OBJECTIVES AND COMPETENCIES
(Cont.)

- Receptive to, and able to apply, constructive feedback (PBLI3a, PBLI3b)
- Apply knowledge of the scientific method, reproducible research, and experimental design in evaluating questions of interest (MK2a, MK7a, MK7b)
- Demonstrate knowledge and understanding of science effectively through various communication channels (IPCS7b.1, IPCS7b.2)
- Effectively engage in team-based activities, utilizing resources to support and lead team efforts (SBP2c).
Assessment

H/HP/P/F

Graded course Assignments/Activities:

• Abstract
• Poster
• Presentation
Assessment Continued

Milestones Completed by:

Research Director(s)
Mentor
Co-collaborator
Assessment Continued

Other Activities:

Area Meetings & Activities
Journals
Co-Curricular Activities
OMSR Journal Clubs
Updated Project Plan
Peer, Mentor, RD Evaluations
Administration

• Marlene Johnson, Program Coordinator
• Block Calendar & assignments will be posted in VSTAR Learn 1 week before start of block
• 2 Course sessions per block (2\textsuperscript{nd} and 4\textsuperscript{th} Wed)
• Research Area meetings
• Support funds and Travel
Questions?

Contact Us: vms.research@vanderbilt.edu

Course Director: Luke Finck, EdD, MA
  luke.finck@vanderbilt.edu

Course Support: Marlene Johnson
  marlene.j.johnson@vanderbilt.edu
Learning Communities
Learning Communities–IMMERSION Refresher

Beth Ann Yakes, MD
College Mentor
REFRESHER...

- You have seen most of these slides before
- They are meant to serve as a refresher as to the WHAT and the WHY behind the LC-IMM units
- As usual, please email Bill.Cutrer@Vanderbilt.Edu and Pam.Lynn@Vanderbilt.Edu with ANY and ALL questions
Learning Communities

• Definition:
  “intentionally developed longitudinal groups that aim to enhance students’ medical school experience and to maximize learning”

• Seek to maximize learning, specifically related to student development as professionals

• Function by:
  – fostering communication among students and faculty
  – promoting caring, trust, and teamwork
  – assisting students establish academic/support networks
  – encouraging student participation in learning activities
Learning Communities-IMMERSION

The Learning Communities-Immersion course seeks to maximize medical student learning related to student development as professionals. Helping students solidify an appropriate image of the medical profession and skill set related to functioning within the healthcare environment are the essential foundation for future success. Development as professionals involves knowledge, skills and attitudes related to students’ practice as well as the environment within which the practice will occur. The longitudinal nature and trusting environment created within the Learning Communities fosters student professional development, specifically addressing personal areas of metacognition and reasoning, ethics, and leadership, as well as the knowledge and understanding of the broader healthcare environment. The preparatory work and the academic sessions will build on prior experiences in LC-FMK and LC-FCC. The LC-Immersion course will focus on solidifying student understanding of previously covered topics such as cognition, critical thinking, metacognition, and ethics, while exposing students to new topics within the learning and leadership development arenas. In sum, the Learning Communities will provide the nurturing environs to maximize student development as professionals.
OVERARCHING COURSE GOALS:

1. To solidify student understanding regarding the **professional role of a physician**, and to develop the skills necessary for successful functioning as a medical professional

2. To re-explore major moral philosophies and tenets of biomedical **ethics** within the context of clinical medicine

3. To foster the ongoing development of a deeper understanding of **cognition**, including **critical thinking, clinical reasoning, and metacognition**, to allow students to function within the complex adaptive systems found within the healthcare environment

4. To develop the skills and processes of a **expert learner** who seeks to address gaps in knowledge as they arise in the clinical and research contexts

5. To build on foundational leadership abilities to enhance student knowledge, skills and attitudes surrounding **effective physician leadership**

6. To foster an ongoing sense of **collegial identity** within each of the four colleges, manifested as a respectful tolerance towards perspectives and beliefs discordant with their own, which will serve as a foundation for professionalism and professional discourse with colleagues and patients
### Session Format:

**Individual Preparatory Work**

- Complete assigned readings
- Complete assigned exercises
- Posting in Vstar Forums
- Gather in College groups for discussion on one Monday during the 4-week block
## LC Units during Immersion Phase

Work Individually Prior to Face to Face Session

<table>
<thead>
<tr>
<th>1) Applied Ethics</th>
<th>2) Lifelong Learning</th>
</tr>
</thead>
<tbody>
<tr>
<td>3) Situational Leadership</td>
<td>4) Problem Solving</td>
</tr>
<tr>
<td>5) Priority Setting</td>
<td>6) Change Management</td>
</tr>
<tr>
<td>7) Dealing With Uncertainty</td>
<td>8) Leading and Managing Up</td>
</tr>
</tbody>
</table>

**Face to face session 1-3pm**

**Face to face session 3-5 pm**
Grading

• Students will receive one grade for the entire course (which will include completion of all 8 units—each unit block is weighted equally)
• LC-Immersion will be graded P/F
• Grades based on
  – Preparation
  – Participation—including both:
    • Unit specific work product (forum questions/reflections/essays/assignments)
    • Verbal participation in group discussions
Logistics of LC sessions

- Offered on a rolling schedule
- Offered 4x during your Immersion Phase

<table>
<thead>
<tr>
<th>Year</th>
<th>July</th>
<th>August</th>
<th>September</th>
<th>October</th>
<th>November</th>
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<tr>
<td>LC</td>
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<td>LC1/LC2</td>
<td>LC3/LC4</td>
<td>LC5/LC6</td>
<td>LC7/LC8</td>
<td>LC1/LC2</td>
<td>LC3/LC4</td>
<td>LC5/LC6</td>
<td>LC7/LC8</td>
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<th>August</th>
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<td>LC3/LC4</td>
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<td>LC3/LC4</td>
<td>LC5/LC6</td>
<td>LC7/LC8</td>
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</tbody>
</table>
Logistics of Registering

• Registration via of YES! for each individual unit

• May not enroll in an LC unit during an acting internship (or away rotations)
  – May be taken during Research/ACEs/ISCs

Must be physically present for LC In-College discussions
## Typical Immersion Phase Block Rotation: Longitudinal Elements

<table>
<thead>
<tr>
<th></th>
<th>Sun</th>
<th>Mon</th>
<th>Tues</th>
<th>Wed</th>
<th>Thurs</th>
<th>Fri</th>
<th>Sat</th>
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<tbody>
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<td></td>
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<tr>
<td>Week 2</td>
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<td>FHD</td>
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<td>Week 3</td>
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<td>FHD</td>
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<td>FHD</td>
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<td>Week 4</td>
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<td><strong>FHD meeting</strong></td>
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</table>
Typical Immersion Phase Block Rotation: IF you are taking **PLAN**

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<thead>
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<th>Mon</th>
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<tr>
<td>Week 1</td>
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<tr>
<td>Week 2</td>
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<tr>
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<td>PLAN</td>
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<td>Week 4</td>
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## Immersion Phase

<table>
<thead>
<tr>
<th>Time</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
<th>Saturday</th>
<th>Sunday</th>
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<tbody>
<tr>
<td><strong>8:00 AM-12 Noon</strong></td>
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<tr>
<td><strong>1:00 PM-5:00 PM</strong></td>
<td>Learning</td>
<td>FHD</td>
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<tr>
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<td><strong>Learning</strong></td>
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<td><strong>(Even # units)</strong></td>
<td><strong>FHD</strong></td>
<td><strong>(Even # units)</strong></td>
<td><strong>(Even # units)</strong></td>
<td><strong>(Even # units)</strong></td>
<td><strong>(Even # units)</strong></td>
<td><strong>(Even # units)</strong></td>
</tr>
</tbody>
</table>
Dates for FACE TO FACE In-College Sessions

(ie must be physically present on campus to participate)

LC1/3/5/7/9 from 1-3pm and LC2/4/6/8/10 from 3-5pm

• September block 2017 → Monday 9/18/17
• October block 2017 → Monday 10/16/17
• November block 2017 → Monday 11/13/17
• December block 2017 → Monday 12/11/17
• January block 2018 → Monday 1/22/18
• February block 2018 → Monday 2/26/17
• March block 2018 → Monday 3/26/17
• April block 2018 → Monday 4/23/17
Questions?

Please direct questions to:

Bill.Cutrer@Vanderbilt.edu
and
Pam.Lynn@Vanderbilt.edu
Foundations of Health Care Delivery
Foundations of Health Care Delivery: Course Goals

FHD will integrate students into clinical teams to care for individual patients while learning about the larger care delivery system. By immersing students in a longitudinal experience, the course will:

• Prepare professionals with systems level skills necessary to provide care that is safe, effective, patient-centered, timely, efficient, and equitable
• Integrate health systems science with clinical care
• Cultivate respectful professionals
Foundations of Health Care Delivery

Year 1: Foundations of Medical Knowledge
- The Health Care Team
- The Patient Within Care
- Medication Reconciliation
- Patient Education & Health Coaching
- Introduction to Patient Safety

Year 2: Foundations of Clinical Care
- Social Determinants of Health
- Advocacy
- Transitions of Care
- High Value Care
- Settings of Care

Years 3 & 4: Immersions
- Quality Improvement
- Patient Safety
- Advanced Communication
- Interprofessional Education*
- Public Health and Prevention
- Health Care Economics and Policy

*VPIL students fulfilled requirement during years 1 & 2
Immersion Course Topics

1. Advanced Communication:
   – Overcoming barriers & personalizing communication (AC1) and skills for disclosure & professionalism (AC2)

2. Interprofessional Education:
   – The professions (IPE1) and team-based care (IPE2)

3. Quality Improvement (QI1-3)

4. Patient Safety (PS)

5. Advanced Population Health
   – Economics, Policy, and Public Health & Prevention
FHD Immersion Course Information

- 6 units as a class during three one-week intersessions
1. AC1 and PHP (Intro to Immersion Phase week)

2. AC2 and IPE1 (3rd year spring intersession)

3. HCE & HCP (4th year winter intersession)
FHD Immersion Course Information

- 6 units as a class during three one-week intersessions
- 5 units longitudinally, mostly during 3\textsuperscript{rd} year
  - Paired with a primary rotation
  - Tuesdays from 1-5 pm
  - 20 hours effort per unit
  - Primarily self-directed, asynchronous learning
  - \textbf{One or two face-to-face meetings (varies by course)}
1. AC1 and PHP (Intro to Immersion Phase week)

2. AC2 and IPE1 (3rd year spring intersession)

3. HCE & HCP (4th year winter intersession)

4. QI 1-3/PS longitudinally during 3rd year
   IPE2 fulfilled either via one month longitudinal or other approved experience*

*Such as Nicaragua, Shade Tree, VPIL, or other approved interprofessional experience
FHD Immersion Course Information

• 6 units as a class during 3 one-week intersessions
• 5 units longitudinally, mostly during 3rd year
  – Paired with a primary rotation
  – Tuesdays from 1-5 pm
  – 20 hours effort per unit
  – Primarily self-directed, asynchronous learning
  – One or two face-to-face meetings (varies by course)
• Pass/Fail except QI
• Can fulfill IPE2 via one month longitudinal OR other approved experience
  – Nicaragua, Shade Tree, VPIL, etc
• Multiple pathways to fulfill QI requirements
  – QI 1-3 via three 1 month longitudinals
  – QI Advanced Track (self-paced project)
QI Grading

- 1 grade for QI 1-3 or Advanced Track
- Honors/High Pass/Pass/Fail, starting 9/1/17
- Grading done based on established rubrics
- New grading schema NOT retroactive
FHD Immersion Course Information

https://medschool.vanderbilt.edu/fhd/fhd-immersion-phase-courses

• Lots of additional information:
  – Criteria for QI-Advanced Track projects
  – Immersion course prerequisites and pairing suggestions
  – Dual degree equivalencies for MBA/MPH students
  – Links to all syllabi
  – Wiki of QI projects
  – Course policy details (add/drop, group work, etc.)
FHD Questions?

fhd@vanderbilt.edu or jennifer.green@vanderbilt.edu

Course Directors:

Jesse M. Ehrenfeld, M.D., M.P.H.
Departments of Anesthesiology, Surgery, Biomedical Informatics, & Health Policy

Jennifer K. Green, M.D., M.P.H.
Departments of Internal Medicine & Pediatrics

Heather A. Ridinger, M.D.
Department of Internal Medicine
Quality & Safety Coordinator

Questions regarding:
- QI completion
- QI advanced track
- Patient safety

Cecelia Theobald, M.D., M.P.H.
Department of Internal Medicine
Administrative Staff

Program Manager
Heather Laney

Program Coordinator
Ernest Guerra

Program Coordinator
Eric Huffman

Light Hall 333
https://medschool.vanderbilt.edu/fhd/
  fhd@vanderbilt.edu
Promoting Professionalism at VUMC: You Have an Important Role!

Lynn E. Webb, PhD
Assistant Dean, School of Medicine
Center for Patient and Professional Advocacy
Professionalism and Self-Regulation

- Technical & Cognitive Competence
- Modeling Respect
- Self-awareness
- Effective Communication
- Being Available
- Teamwork

We provide excellence in health care, research and education.
We treat others as we wish to be treated.
We continuously evaluate and improve our performance.

• I make those I serve my highest priority
• I respect privacy and confidentiality
• I have a sense of ownership
• I conduct myself professionally
• I communicate effectively
• I am committed to my colleagues
“During a feedback session, the attending told me ‘when you are presenting, in my head I am thinking, shut up, just shut up, I wish you would shut up, please shut up.’”

“I thought [the lecturer] was being disrespectful to anyone suffering from mental illness, even students with anxiety.”

“Dr. X said that we were all retarded.”

“We were on rounds and the resident said to me, ‘bend over, I need something to write on…it was very humiliating.’”

“I was placing the retractor; the attending slapped my hand. It hurt.”
Definition of Behaviors That Undermine the Learning Environment

- Interfere with ability to achieve intended outcomes
- Create intimidating, hostile, offensive (unsafe), biased environment
- Threaten safety (aggressive or violent physical actions)
- Violate policies (including conflicts of interest and compliance)

It’s About Safety

Excerpts from Vanderbilt University and Medical Center Policy #HR-027, 2010
What behaviors are “worth” reporting?

All reported events represent an opportunity to reflect
How are data shared in a thoughtful way?

- Level 3 "Disciplinary" Intervention
- Level 2 "Guided" Intervention by Authority
- Level 1 "Awareness" Intervention
- "Informal" Cup of Coffee Intervention

Vast majority of professionals - no issues - provide feedback on progress

No Δ Pattern persists

Apparent pattern

Single "unprofessional" incidents (merit?)

Egregious*

Mandated

Mandated Reviews

*includes CMS-defined “condition level” and “immediate jeopardy” safety-related complaints
Total credentialed clinicians (MD + APRN) at VUMC

2,634
How many clinicians received a CORS report in FY 2017?

195

7.4%
How many clinicians received an awareness intervention in FY 2017?

22

0.8%
How many clinicians did not respond to a CORS awareness intervention? 7 (0.3%)
Our Approach:

Help learners feel safe to report

 Equip “trusted” faculty to help learners reflect on event and encourage reporting

Use standard VUMC processes to address behavior

Consider timing of feedback to minimize potential impact on the learner
Options for those who experience or witness conduct inconsistent with Credo:

- Informal/Collegial feedback with the Professional (Cup Of Coffee)

- Search out a trusted faculty member to share the concern

- Report occurrence in Veritas
Trained Faculty Resources:

- College Advisors/Portfolio coaches
- Clerkship and Course Directors
- Associate/Assistant Deans
- Faculty Coordinator:
  - Lynn Webb, PhD
  - Lynn.Webb@Vanderbilt.edu
  - Cell: (615) 429-2827
What questions do you have for me?

www.mc.vanderbilt.edu/cppa
Aways, Add/Drops, Degree Audit and more

Office of Enrollment Services
https://medschool.vanderbilt.edu/enrollment/
Office of Enrollment Services (OES)

- Admissions, **Student Records**, Financial Aid
- 303 Light Hall
- Student Records related services:
  - Course Registration
  - Maintenance of academic records
  - Credentialing
  - Verifications
  - Academic credentialing
  - Away rotation support
  - Degree audit services
  - Grade recording
Know Your Rotation Schedule

- You are currently registered through June 2018
- Log into YES (http://yes.vanderbilt.edu)
- Click on Student Registration
- For ACEs and ISCs, section number corresponds to rotation month. e.g. 09 for September, 10 for October, etc.
What is my schedule?

Click here to view schedule
What is my schedule?

2017 Year = 2017-18 = July 1, 2017 through June 30, 2018

Click here to see all enrolled courses
Timelines for Adding and Dropping

Self-service (via YES) adding and dropping is available throughout the academic year subject to the following deadlines:

• No less than 6 weeks in advance for
  – ACE Emergency Medicine
  – ACE Primary Care
  – All ISCs

• No less than 4 weeks in advance for all other ACEs

• No less than 1 week in advance for all individual (non-intersession) FHD units

• For details, see https://medschool.vanderbilt.edu/enrollment/2016-2017-academic-calendars
Late Requests to Add or Drop

- Late requests to add or drop are evaluated case-by-case.
  - **Immersion rotations** - Immersion Phase Team (immersion.phase@Vanderbilt.edu)
  - **FHD Immersion** - FHD Team (fhd@Vanderbilt.edu)
- Send email request explaining why deadline was not met.
- If drop or add is approved, complete the form at https://medschool.vanderbilt.edu/enrollment/forms
Special Studies

• Can be clinical or research
• In select cases, can be non-clinical and non-research
• Requires a faculty mentor with a full faculty appointment
• Does not count toward ACE, ISC or AI
• Not designed as an alternative to ACE, ISC or AI
• Must be approved by the Immersion Phase Team
• Approval form is available on OES website
Special Studies Approval Forms

• Designed to be collaboratively completed by student and faculty mentor.
• Final submission is made to OES by faculty mentor.
• Form is at https://medschool.vanderbilt.edu/enrollment/forms
Degree Audit

Click here to view degree audit
Degree Audit

• Designed to track progress toward degree completion
• Helps you know which “bucket” a course or rotation falls into
• Available to you and your portfolio coach in YES
**Immersion Phase**

*Description:* The Immersion Phase is a highly individualized period that builds upon the foundational knowledge acquired earlier, in a context that is most relevant to each student's individual interests. Immersion courses will solidify clinical skills; deepen foundational science knowledge through meaningful clinical engagement; allow students to dive into areas of personal learning needs and/or interest; expand knowledge and skills in leadership and scholarship; ensure readiness for residency; and enhance workplace learning skills. Students will select from a broad menu of courses including Integrated Science Courses, Advanced Clinical Electives, Acting Internships and Concentrations. During a portion of the immersion phase, students will participate in a three- to six-month mentored research experience, tailored around each student's particular research and clinical interests. The longitudinal curricular elements of Foundations of Healthcare Delivery and Learning Communities will remain integral to student development during the Immersion Phase.

**Requirement(s):**

<table>
<thead>
<tr>
<th>Requirement</th>
<th>Status</th>
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<tbody>
<tr>
<td>Primary Care Check</td>
<td>Not Satisfied</td>
</tr>
<tr>
<td>Acute Care Check</td>
<td>Satisfied</td>
</tr>
<tr>
<td>Immersion Core</td>
<td>Not Satisfied</td>
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</tbody>
</table>

**Immersion Core**

*Description:* Minimum of 15 courses required over 22 months

**Courses:** 15 required, 7 taken, 8 needed

<table>
<thead>
<tr>
<th>Course</th>
<th>Status</th>
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<tbody>
<tr>
<td>Integrated Science</td>
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<tr>
<td>Acting Internship</td>
<td>Not Satisfied</td>
</tr>
<tr>
<td>Advanced Clinical Experiences</td>
<td>Not Satisfied</td>
</tr>
<tr>
<td>Research Immersion</td>
<td>Satisfied</td>
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<tr>
<td>Competency and Interest-Driven Rotations - (Clinical)</td>
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<tr>
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<td>Satisfied/Not Satisfied</td>
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<td>Foundations of Health Care Delivery Intersessions</td>
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<tr>
<td>Quality Improvement and Patient Safety</td>
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<td>Interprofessional Education</td>
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<td>EPA Week</td>
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<tr>
<td>Learning Communities</td>
<td>Not Satisfied</td>
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</tbody>
</table>

**PLAN**

Satisfied
Degree Audit

• Remember: Current enrollments only go through June 2018
• You will register for 2018-19 in April 2018
• Audit assumes successful completion of in-progress coursework
• Audits are automatically “refreshed” weekly
• Self-service “refresh” button is available
Degree Audit Refresh

Degree audits are for advisory purposes only and do not certify progress in the degree. Please refer to the appropriate school catalog as the authoritative document governing degree requirements. The student, in consultation with the adviser, should carefully review both sources.

NOTE: The audit assumes the successful completion of enrolled classes; classes in progress display as "satisfied" in the audit. Students and their advisers should check the audit carefully before concluding that a distributional or major requirement has been completed.

Effective Fall 2015, Vanderbilt University has introduced a new course catalog numbering scheme. For assistance with the translation between old and new numbers, please consult the Course Renumbering Lookup Tool.

Self-service refresh
Alternative Pathways

• Dual degree
• Research year
• Form available at https://medschool.vanderbilt.edu/enrollment/student-alternative-path-request

• Must declare pathway to completing Immersion requirements
• Must be approved by Dean Fleming
• Not approved until you’ve received written approval from Dean Fleming
Most Common Specialties for Away Rotations

Dermatology
Emergency Medicine
Ophthalmology
Orthopaedics
Otolaryngology
Neurosurgery
Plastic Surgery
Pursuing AWAY Rotation

• You are eligible once FCC phase is complete and you have taken and passed Step 1.
• Form and instructions are at https://medschool.vanderbilt.edu/enrollment/forms
• You will **not** self-service register. You will work closely with Office of Enrollment Services to:
  – Apply for away rotations
  – Register for away rotations
• You can apply for **most** away rotations through the Visiting Student Application Service (VSAS) which is sponsored by the Association of American Medical Colleges (AAMC).
• FOLLOW THE VUSM APPROVAL PROCESS!
• Not covered for liability if not enrolled in the experience at VUSM
Visiting Student Application Service

Logging in for the First Time?
Before you can log into VSAS, your home school or medical institution must grant you access. You will receive a "VSAS: New User Instructions" email containing login instructions once you have been granted access.

Students who have not yet been granted access should contact the office or person who assists with 4th year scheduling regarding VSAS access.

About VSAS
The Visiting Student Application Service (VSAS) is an AAMC application designed to make it easier for medical students to apply for senior electives at U.S. medical schools and teaching hospitals. Please visit our VSAS website for detailed information and resources.

Do I need to use VSAS?
Students will use VSAS only if enrolled at a U.S. LCME-accredited medical school or participating COCA-accredited ACOM member school and applying for senior away electives at any VSAS host institutions.

If not applying to one of these institutions, please review the Extramural Electives Compendium (EEC) for visiting student application information.

International students may also review information about the Global Health Learning Opportunities (GHO) service.

VSAS Help
Contact VSAS Help Desk: Contact us by e-mail (vsas@aamc.org) or phone (202-478-9878) Monday - Friday, 9 a.m. - 5 p.m. ET
FAQS: Review our frequently asked questions
Connect with VSAS on Facebook: http://www.facebook.com/AAMCMedStudent
Process for Pursuing AWAY Rotation

1. Application to AWAY institution (usually via VSAS)
2. 7100 Form to Office of Enrollment Services (on website)
3. VUMC departmental approval (email)
Process for Pursuing AWAY Rotation

• Office of Enrollment Services MUST receive notification from VU departmental approver. [see website for list]
• You are not registered until your form is submitted, departmental approval is received, and you see the rotation listed in YES.
• ALWAYS check for schedule conflicts and remember the immersion rotation drop deadlines.
• In early 2018 we will conduct extensive in-person overview of the process.
Questions?

Office of Enrollment Services
303 Light Hall
Ph. 615-322-2145
medregistrar@vanderbilt.edu
Monday-Friday 8am-4:30pm

Student Records Staff

Logan Key
Melissa Carro (away rotations; credentialing)
David Swayze (enrollment; registration)
Meredith Wood (general assistance with enrollment or financial aid)