Curriculum 2.0: Immersion Phase

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LaToya Ford

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Outline

• Phase Goals and Requirements
• Step 2 Considerations
• ACE Overview
• Entrustable Professional Activities (EPAs)
• Assessment & Grading
• Logistics
Registration Timeline

- **Feb**
  - 2/22: Rising VMS3 MSTP IP Requirements Meeting

- **March**
  - 3/22: Careers in Medicine ISC Fair March 22 at 5 pm LH 202
  - 3/29: How-to Register Meeting March 29 at 5 pm LH 202

- **April**
  - 4/9: Registration opens for rising VMS4 April 9 at 6 pm
  - 4/16: Registration opens for rising VMS3 April 16 at 6 pm
  - 4/26: Registration reopens for ALL April 26 at midnight

- **May**

- **June**

- **July**

- **Aug**
  - 8/27-31: Immersion Phase 2018-19 begins

- **Sept**
  - Immersion Phase Orientation and Intersession Week for VMS3
Immersion Phase Goals & Graduation Requirements
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

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
Courses Designed to Meet Phase Goals

Foundational science knowledge during meaningful clinical engagement

Clinical skills

Practice-based learning skills

Advanced Electives

Professional development

Readiness for intern role/residency

Knowledge and skills regarding scholarship

Knowledge and skills regarding leadership

ACE* (Sub-I) /AI
Institute of Healthcare Improvement (IHI): Required for GME

• Required IHI courses are
  – QI 101 – 105
  – PS 102, PS 104
    • 7 total courses

• Total time estimated to complete = 9.25 hours

• V*LEARN Course
  – Upload completion certificates
  – Due before graduation (Encouraged to complete as early as possible)
## C 2.0 MD-PhD Immersion Phase Requirements

<table>
<thead>
<tr>
<th>Minimum Immersion Phase Requirements (in Months)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>On-Campus</strong></td>
</tr>
<tr>
<td>1 Integrated Science Courses (ISCs)</td>
</tr>
<tr>
<td>1 Acting Internship</td>
</tr>
<tr>
<td>2 Advanced Clinical Experience (ACEs)</td>
</tr>
<tr>
<td><strong>On-Campus or Away</strong> (away with approval)</td>
</tr>
<tr>
<td>4 Competency and Interest-Driven Rotations*</td>
</tr>
<tr>
<td>(can be ISCs, ACEs, AIs or Electives#)</td>
</tr>
<tr>
<td><strong>8 required months</strong></td>
</tr>
<tr>
<td>Must include:</td>
</tr>
<tr>
<td>1 Primary Care course (either ACE or ISC)</td>
</tr>
<tr>
<td>1 Acute Care course (EM or ICU-based course)</td>
</tr>
<tr>
<td><strong>2 Flex months</strong></td>
</tr>
</tbody>
</table>

*two must be clinical rotations

## Notes:
- Any requests for research months (elective) must be approved by Dr. Estrada.
## C2.0 MD-PhD Longitudinal Requirements

### Longitudinal Course Requirements

<table>
<thead>
<tr>
<th>Foundations of Health Care Delivery — 4 units</th>
<th>Learning Communities — 4 unit</th>
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</thead>
<tbody>
<tr>
<td><strong>IPE2</strong> (Self-enroll, paired with ACE)</td>
<td><strong>PS</strong> (Self-enroll)</td>
</tr>
<tr>
<td><strong>HCE</strong> (Feb FHD Immersion Week)</td>
<td><strong>LC1</strong> Applied Ethics (Self-enroll)</td>
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<tr>
<td><strong>HCP</strong> (Feb FHD Immersion Week)</td>
<td><strong>LC2</strong> Lifelong Learning (Self-enroll)</td>
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<tr>
<td><strong>LC5</strong> Priority setting (Self-enroll)</td>
<td><strong>LC7</strong> Uncertainty (Self-enroll)</td>
</tr>
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</table>
# C 2.0 MD-PhD Longitudinal Immersion Phase Requirements

<table>
<thead>
<tr>
<th>On Campus</th>
<th>Unit</th>
<th>Mode of Delivery</th>
<th>Mode of Registration</th>
<th>Required Meeting</th>
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</thead>
<tbody>
<tr>
<td>Yes</td>
<td>Learning Communities Unit 1 (LC1)</td>
<td>Sept or Jan of Immersion Phase#</td>
<td>Self-Enroll (yes.vanderbilt.edu)</td>
<td>Monday 3rd week (1-3p)</td>
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<tr>
<td>Yes</td>
<td>Learning Communities Unit 2 (LC2)</td>
<td>Sept or Jan of Immersion Phase#</td>
<td>Self-Enroll (yes.vanderbilt.edu)</td>
<td>Monday 3rd week (3-5p)</td>
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<tr>
<td>Yes</td>
<td>Learning Communities Unit 5 (LC5)</td>
<td>Nov or March of Immersion Phase</td>
<td>Self-Enroll (yes.vanderbilt.edu)</td>
<td>Monday 3rd week (1-3p)</td>
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<tr>
<td>Yes</td>
<td>Learning Communities Unit 7 (LC7)</td>
<td>April of Immersion Phase</td>
<td>Self-Enroll (yes.vanderbilt.edu)</td>
<td>Monday 3rd week (1-3p)</td>
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<td>No</td>
<td>FHD-Quality Improvement (QI)</td>
<td>VSTAR Learn Course (Self-paced) - Gphase</td>
<td>Coordinated through Dr. Estrada</td>
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<tr>
<td>Yes</td>
<td>FHD-Interprofessional Education 2 (IPE2)</td>
<td>Pair with ACE in Immersion Phase</td>
<td>Self-Enroll (yes.vanderbilt.edu)</td>
<td>Tuesday 4th Week (1-5p)</td>
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<tr>
<td>Yes</td>
<td>FHD-Patient Safety (PS)</td>
<td>Pair with Immersion Phase Course</td>
<td>Self-Enroll (yes.vanderbilt.edu)</td>
<td>Tuesday 4th Week (1-5p)</td>
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<tr>
<td>Yes</td>
<td>FHD-Health Care Economics (HCE)</td>
<td>VSTAR Learn/In person</td>
<td>Auto-enrolled in YES</td>
<td>February FHD Immersion Week</td>
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<tr>
<td>Yes</td>
<td>FHD-Health Care Policy (HCP)</td>
<td>VSTAR Learn/In person</td>
<td>Auto-enrolled in YES</td>
<td>February FHD Immersion Week</td>
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<tr>
<td>No</td>
<td>FHD-Institute for Healthcare Improvement (IHI) Modules</td>
<td>VSTAR Learn Course (Self-paced) - Gphase</td>
<td>Coordinated through Dr. Estrada</td>
<td></td>
</tr>
</tbody>
</table>
Step 2 Considerations

Recommendations From Dean of Student Affairs specific to MSTP students returning from Gphase to FCC/Immersion 4th year.

• Sooner is better: after FCC phase recommend taking Step 2 CK (July-Sept/Oct).
  – About 1/3 of programs are asking for Step II CK in order to give out interviews.
  – We haven’t seen lack of Step II CK hold back MSTP students from getting their interviews.
  – But, will need it well before rank lists in February. Don’t postpone.

• There are many programs that want Step II CS before they will rank (after interviews)
  – Consider taking it before Nov 4th of 4th year.
  – Check the USMLE website for guidance on reporting times.
  – Some programs will absolutely not rank students who haven’t passed Step II CS.
  – CS also is harder to schedule and you have to travel to one of five cities, so plan in advance.
  – Information about CS exam is on Vandy CiM workshop site. Dr. Yakes talk is on mediasite and a must see, practice CELA sessions available for CS.

• For more one-on-one advice: contact Dean Fleming and attend the CiM Fair (March 22)
ACE Overview
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

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)

TAKE OWNERSHIP.
2) Practice-Based Learning Exercise
Average time lag of 17 years to translate discovery into clinical practice
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” is ideally triggered by your patients and hopefully followed up with enough time to truly learn from the experience.
2) Practice-Based Learning Exercise

**EPA 7**: Form a clinical question and retrieve evidence to advance patient care

- **ASK**
- **ACQUIRE**
- **APPRAISE**
- **ADVISE**
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

Core Entrustable Professional Activities for Entering Residency
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: 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 and Grading
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>FOCUS of Assessment</th>
<th>ACEs</th>
<th>ISC</th>
<th>AIs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical Skills Practice-Based Learning</td>
<td>Medical Knowledge Integration</td>
<td>Ensure Readiness for Internship</td>
<td></td>
</tr>
</tbody>
</table>

**Predominant Method of Assessment**

- **ACEs**
  - Milestones
  - Entrustable Professional Activity 7 (EPA 7)

- **ISCs**
  - Knowledge Assessments
    - Multiple Choice Exams
    - Essay exams
    - Quizzes
  - Milestones

- **AIs**
  - Milestones
  - Entrustable Professional Activities (EPA)
### ACEs

<table>
<thead>
<tr>
<th>PATIENT CARE</th>
<th>ISCs</th>
<th>AIs</th>
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<tbody>
<tr>
<td>Differential dx</td>
<td>Integration MK2a</td>
<td>Patient care</td>
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<tr>
<td>Diagnostic workup</td>
<td>Depth MK2b</td>
<td>Medical knowledge</td>
</tr>
<tr>
<td>Self-knowledge of limits</td>
<td>Analysis MK2b</td>
<td>Interpersonal communication</td>
</tr>
<tr>
<td>Assessment and Plan</td>
<td>Inquiry MK7b</td>
<td>Practice-based learning &amp;</td>
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<tr>
<td></td>
<td>Use of info resources MK7c</td>
<td>improvement</td>
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<tr>
<td>MEDICAL KNOWLEDGE</td>
<td>![Table]( MIPS 2023q1 IPS Table 2.png)</td>
<td>Professionalism</td>
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<tr>
<td>INTERPERSONAL COMMUNICATION</td>
<td>Thought process PC2a</td>
<td>Initiative and contribution</td>
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<tr>
<td>Rapport with patients and</td>
<td>Self-knowledge PC7a</td>
<td>to group efforts SBP2a</td>
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<td>families IPS7a.1</td>
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<td>Professional demeanor PR1a</td>
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<td>Content of presentations to</td>
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<td>Honesty/trustworthiness PR5a</td>
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<td>colleagues IPS7b.1</td>
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<td>PRACTICE-BASED LEARNING &amp;</td>
<td>Receptivity to feedback PBLI3a</td>
<td>Initiative and contribution</td>
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<td>to group efforts SBP2a</td>
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<td>Receptivity to feedback</td>
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<td>Prioritization SBP2b</td>
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<td>PR1a</td>
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<td>(Conscientiousness)</td>
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<td>Prioritization SBP2b</td>
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<td>Honesty/trustworthiness PR5a</td>
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### EPAs

**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

**EPA 7**: Form a clinical question and retrieve evidence to advance patient care
### Medical Knowledge

#### Medical Knowledge 2: Deep Knowledge

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

**MK2b: Depth**

- **Undesirable**
  
  Mastery of prior learning is insufficient to support currently expected activities.

- **Entry**
  
  Limited knowledge base. Understanding is descriptive, i.e. focuses on how things appear, without questioning.

- **Consistently displaying lower level, sometimes attaining higher level.**

- **Understanding hinges upon protocols or patterns rather than founded in an understanding of underlying physiologic mechanisms or foundational principles.**

- **Consistently displaying lower level, sometimes attaining higher level.**

- **Consistently displaying lower level, sometimes attaining higher level.**

- **Understands appropriate underlying mechanisms/principles, but may struggle to apply to a given case.**

- **Consistently displaying lower level, sometimes attaining higher level.**

- **Immediately and insightfully places new information in proper context.**

- **Consistently displaying lower level, sometimes attaining higher level.**

- **Aspirational**
  
  Creates unique insights and solutions to existing problems.

- **Not applicable**
Core EPAs during Immersion Phase

Faculty will be asked to assess you using the following scales.

In supervising this student, how much did you participate in the task?

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

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?
• **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.
Compass

• You will use Compass to request data in all ACEs, AIs and ISCs

• Visit [www.vstarcompass.com](http://www.vstarcompass.com) using a browser on your phone, laptop, or tablet. Bookmark this site if you have not already.
Compass (continued)

• Request **milestone** feedback from clinicians (residents or attendings) with whom you have worked.

• Request at least 2x per week.

• Helpful to inform faculty before you send request.
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.

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<tr>
<th>Feedback</th>
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<tbody>
<tr>
<td>1. AI: Medicine, VU: Imm 2017-18 Sec 09</td>
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<td>&gt;</td>
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<tr>
<td>2. EPA 4 - Orders / Prescriptions (Sect 09, 2017-18) AI: Medicine, ...</td>
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<td>&gt;</td>
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<tr>
<td>3. EPA 5 - Clinical Encounter (Sect 09, 2017-18) AI: Medicine, VU</td>
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<td>4. EPA 8 - Handover (Sect 09, 2017-18) AI: Medicine, VU</td>
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<td>5. EPA 10 - Urgent Care (Sect 09, 2017-18) AI: Medicine, VU</td>
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Questions about COMPASS
Assessment in the Immersion Phase

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

- Honors
  - High Pass
  - Pass
  - Fail

Frontline Clinical Faculty/Residents

Course Director

Student

Reach

Target

Threshold

Sub-Threshold
Course Director determines level of performance for each Competency Domain
<table>
<thead>
<tr>
<th>Competency</th>
<th>Performance</th>
</tr>
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<tbody>
<tr>
<td>Medical Knowledge</td>
<td>REACH</td>
</tr>
<tr>
<td>Understands established and evolving biological, clinical, epidemiological and social-behavioral sciences and must be able to apply this knowledge to patient care.</td>
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<tr>
<td>Patient Care</td>
<td>REACH</td>
</tr>
<tr>
<td>Provides care that is compassionate, safe, efficient, cost sensitive, appropriate, and effective for the treatment of illness and the promotion of health.</td>
<td></td>
</tr>
<tr>
<td>Interpersonal &amp; Communication Skills</td>
<td>REACH</td>
</tr>
<tr>
<td>Able to communicate 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></td>
</tr>
<tr>
<td>Systems-Based Practice</td>
<td>REACH</td>
</tr>
<tr>
<td>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></td>
</tr>
<tr>
<td>Practice-Based Learning &amp; Improvement</td>
<td>TARGET</td>
</tr>
<tr>
<td>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></td>
</tr>
<tr>
<td>Professionalism</td>
<td>REACH</td>
</tr>
<tr>
<td>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></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>
<th>Competency</th>
<th>Performance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical Knowledge</td>
<td>REACH</td>
</tr>
<tr>
<td>Patient Care</td>
<td>REACH</td>
</tr>
<tr>
<td>Interpersonal &amp; Communication Skills</td>
<td>REACH</td>
</tr>
<tr>
<td>Systems-Based Practice</td>
<td>REACH</td>
</tr>
<tr>
<td>Practice-Based Learning &amp; Improvement</td>
<td>TARGET</td>
</tr>
<tr>
<td>Professionalism</td>
<td>REACH</td>
</tr>
</tbody>
</table>

**Final Grade:** H

**Risk of Fail (course director discretion):**
- Any Sub-Threshold OR > 2 Thresholds
- No more than 2 Thresholds
- All others at Target or above

**High Pass:** At least 3 Reaches
- All others at Target

**Honors:** Nothing below Target
- 5 Reaches

**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
Logistics
# Academic Calendar 18-19

[https://medschool.vanderbilt.edu/enrollment/2018-19-academic-calendars](https://medschool.vanderbilt.edu/enrollment/2018-19-academic-calendars)

<table>
<thead>
<tr>
<th>SECTION</th>
<th>DATES</th>
<th>Registration Deadline (42 day: EM, PC, ISC, AI)</th>
<th>Registration Deadline (28 day: Electives)</th>
<th>Registration Deadline (7 day: FHD/LC Units)</th>
</tr>
</thead>
<tbody>
<tr>
<td>07</td>
<td>July 9 - Aug. 3, 2018</td>
<td>TBA</td>
<td>TBA</td>
<td>TBA</td>
</tr>
<tr>
<td>08</td>
<td>Aug. 6-31, 2018</td>
<td>TBA</td>
<td>TBA</td>
<td>TBA</td>
</tr>
<tr>
<td></td>
<td><strong>Immersion Orientation (3rd years): Aug. 27-31, 2018</strong></td>
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<tr>
<td></td>
<td><strong>Labor Day: Sept. 3, 2018 (no classes or clinical activities)</strong></td>
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</tr>
<tr>
<td>09</td>
<td>Sept. 4-28, 2018</td>
<td>TBA</td>
<td>TBA</td>
<td>TBA</td>
</tr>
<tr>
<td>10</td>
<td>Oct. 1-26, 2018</td>
<td>TBA</td>
<td>TBA</td>
<td>TBA</td>
</tr>
<tr>
<td>11</td>
<td>Oct. 29 Nov. 21, 2018</td>
<td>TBA</td>
<td>TBA</td>
<td>TBA</td>
</tr>
<tr>
<td></td>
<td><strong>Thanksgiving Break: Nov. 22-25, 2018</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Nov. 26 Dec. 21, 2018</td>
<td>TBA</td>
<td>TBA</td>
<td>TBA</td>
</tr>
<tr>
<td></td>
<td><strong>Winter Break: Dec. 22, 2018 - Jan. 6, 2019</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>01</td>
<td>Jan. 7 Feb. 1, 2019</td>
<td>TBA</td>
<td>TBA</td>
<td>TBA</td>
</tr>
<tr>
<td></td>
<td><strong>MLK, Jr. Holiday: Jan. 21, 2019 (no classes or clinical activities)</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Intersession (3rd and 4th years): Feb. 4-8, 2019</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Events

- **02**
  - Feb. 11 - Mar. 8, 2019
  - TBA
  - TBA
  - TBA

- **03**
  - Mar. 11 - April 5, 2019
  - TBA
  - TBA
  - TBA

- **04**
  - April 8 - May 3, 2019
  - TBA
  - TBA
  - TBA

- **05**
  - May 13 - June 7, 2019
  - TBA
  - TBA
  - TBA

- **06** (end of AY 18-19)
  - June 10 - July 5, 2019
  - TBA
  - TBA
  - TBA

- **07**
  - Feb. 11 - Mar. 8, 2019
  - TBA
  - TBA
  - TBA

- **08**
  - Mar. 11 - April 5, 2019
  - TBA
  - TBA
  - TBA

- **09**
  - April 8 - May 3, 2019
  - TBA
  - TBA
  - TBA

- **10**
  - May 13 - June 7, 2019
  - TBA
  - TBA
  - TBA

- **11**
  - June 10 - July 5, 2019
  - TBA
  - TBA
  - TBA
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
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 (GHLO) service.

VSAS Help
Contact VSAS Help Desk: Contact us by e-mail (vsas@aamc.org) or phone (202-478-9078) Monday - Friday, 9 a.m. - 5 p.m. ET

FAQs: Review our frequently asked questions!

Connect with VSAS on Facebook: https://www.facebook.com/AAMCMedstudent
Process for Pursuing AWAY Rotation

1. Application to AWAY institution (usually via VSAS)
2. VUMC departmental approval (email)
3. 7100 Form to Office of Enrollment Services (on website)
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.
Immersion Phase 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
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
Audit Tool

<table>
<thead>
<tr>
<th>Immersion Phase</th>
<th>✔ Satisfied</th>
</tr>
</thead>
<tbody>
<tr>
<td>Immersion Core</td>
<td>✔ Satisfied</td>
</tr>
<tr>
<td><strong>On-Campus ACEs</strong></td>
<td>✔ Satisfied</td>
</tr>
</tbody>
</table>

**Description:** Select three ACE rotations which must be taken at Vanderbilt. (See [https://medschool.vanderbilt.edu/ume/class2016](https://medschool.vanderbilt.edu/ume/class2016))

**Satisfying Courses**

<table>
<thead>
<tr>
<th>Course</th>
<th>Title</th>
<th>Units Earned</th>
<th>Term</th>
<th>Grade</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>EM 5950</td>
<td>ACE: Emergency Medicine</td>
<td>0</td>
<td>2015 Year</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PED 5612</td>
<td>ACE: Adolescent Medicine</td>
<td>0</td>
<td>2015 Year</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PED 5730</td>
<td>ACE: Child Abuse Pediatric Med</td>
<td>0</td>
<td>2015 Year</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| Immersion Longitudinal | ✔ Satisfied |

| Step Score Evaluation | ✗ Not Satisfied |
Useful Links/Contacts

• Immersion Phase Requirements
  – Immersion.phase@vanderbilt.edu

• Careers in Medicine
  – [https://medschool.vanderbilt.edu/cim/](https://medschool.vanderbilt.edu/cim/)

• Enrollment
  – [https://medschool.vanderbilt.edu/enrollment/](https://medschool.vanderbilt.edu/enrollment/)

• FHD
  – [https://medschool.vanderbilt.edu/ume/fhd](https://medschool.vanderbilt.edu/ume/fhd)
  – FHD@vanderbilt.edu

• Learning Communities
  – pam.lynn@Vanderbilt.Edu