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# CLERKSHIP MANUAL CLASS OF 2024



ALABAMA COLLEGE OF  
OSTEOPATHIC MEDICINE

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## **PHILOSOPHY OF OSTEOPATHIC MEDICINE**

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Osteopathic medicine stresses a comprehensive approach to the maintenance of health. The roots of osteopathic medical education lie in the emphasis it places on the musculoskeletal system. The interrelationship between this and other body systems is basic to health maintenance and the prevention of disease. Founded by Andrew Taylor Still, MD, DO (1828-1917), osteopathic medicine utilizes four fundamental principles which enable the osteopathic physician to look at health and disease in a unique manner:

- The body is a unit; the person is a unity of body, mind, and spirit.
- The body is capable of self-regulation, self-healing, and health maintenance.
- Structure and function are reciprocally interrelated.
- Rational treatment is based on the above three principles.

## **OSTEOPATHIC PLEDGE OF COMMITMENT**

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I pledge to:

- Provide compassionate, quality care to my patients;
- Partner with them to promote health;
- Display integrity and professionalism throughout my career;
- Advance the philosophy, practice, and science of osteopathic medicine;
- Continue life-long learning;
- Support my profession with loyalty in action, word and deed; and
- Live each day as an example of what an osteopathic physician should be.

## **OSTEOPATHIC PHYSICIAN'S OATH**

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I do hereby affirm my loyalty to the profession I am about to enter. I will be mindful always of my great responsibility to preserve the health and the life of my patients, to retain their confidence and respect both as a physician and a friend who will guard their secrets with scrupulous honor and fidelity, to perform faithfully my professional duties, to employ only those recognized methods of treatment consistent with good judgment and with my skill and ability, keeping in mind always nature's laws and the body's inherent capacity for recovery.

I will be ever vigilant in aiding the general welfare of the community, sustaining its laws and institutions, not engaging in those practices which will in any way bring shame or discredit upon myself or my profession. I will give no drugs for deadly purposes to any person, though it be asked of me.

I will endeavor to work in accord with my colleagues in a spirit of progressive cooperation, and never by word or by act cast imputations upon them or their rightful practices.

I will look with respect and esteem upon all those who have taught me my art. To my college I will be loyal and strive always for its best interests and for the interests of the students who will come after me. I will be ever alert to further the application of basic biologic truths to the healing arts and to develop the principles of osteopathy which were first enunciated by Andrew Taylor Still.

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## Overview

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This manual provides an overview of the curriculum delivery and assessment strategies of Alabama College of Osteopathic Medicine (ACOM) pertaining to third- and fourth-year clinical clerkships. ACOM reserves the right to make changes at any time in educational policies, schedules, training sites, evaluation processes, or any other aspects of the clinical training program. Changes will occur, as needed, to maintain educational requirements, standards, or the quality of the program. Every effort will be made to notify students in a timely manner when changes are implemented and new or revised processes are instituted. Any conflicts regarding the application or interpretation of the processes contained in this manual will be resolved by the Associate Dean of Clinical Sciences, whose decision is final. The **Student Handbook** is the primary student guide on all ACOM policies. The **Clerkship Rotation Manual** is a curriculum delivery and assessment guide for ACOM students while on clerkship rotations.

### Mission

ACOM is dedicated to providing students with the highest quality clinical educational opportunities. Each student is assigned to a core site, which is managed by a director and coordinator, and connected to a regional coordinator for that geographical region. Clerkship rotation schedules are coordinated by these personnel and are based on multiple factors, including availability of preceptors.

ACOM provides students with a well-integrated didactic and experiential curriculum that expands students' medical knowledge and clinical skill sets within common clinical care settings. ACOM Clinical Sciences Faculty serve as clerkship directors and as facilitators for main campus-driven clerkship rotation didactics. ACOM preceptors assess student abilities at the point of care and within other educational, patient-care venues.

There are two ACOM divisions that manage the OMS-III and OMS-IV curriculum. Clinical Resources manages core site infrastructure, including directors and coordinators, as well as student credentialing for all Out of Network clerkship rotations. Clinical Sciences manages curriculum delivery and assessment of students.

### Hours of Operations

Regular business hours for the ACOM main campus are 8:00 a.m. to 4:30 p.m. Central Time, excluding days when the ACOM campus is closed. It is recommended, because of varying schedules, that communications are made primarily via email.

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## Faculty / Staff Contact Information

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ACOM faculty and staff guide and assist students with clerkship rotation schedules, curriculum delivery, and assessments.

<b>DIVISION LEADERS</b>			
<b>NAME</b>	<b>POSITION</b>	<b>PHONE</b>	<b>EMAIL</b>
Jonathan F. Howell	Executive Director of Clinical Resources	334-944-4051	<a href="mailto:jfhowell@acom.edu">jfhowell@acom.edu</a>
Richard R. Thacker, DO, MACOI	Associate Dean of Clinical Resources	850-528-8791	<a href="mailto:rthacker@acom.edu">rthacker@acom.edu</a>
Stevan Walkowski, DO, FAAMA	Associate Dean of Clinical Sciences	334-944-4046	<a href="mailto:swalkowski@acom.edu">swalkowski@acom.edu</a>
<b>REGIONAL LEADERS</b>			
<b>NAME</b>	<b>POSITION</b>	<b>PHONE</b>	<b>EMAIL</b>
Lana Calvert	Regional Coordinator – North	334-305-1029	<a href="mailto:lcalvert@acom.edu">lcalvert@acom.edu</a>
Brenda Coxwell	Regional Coordinator – Southeast	334-305-1014	<a href="mailto:bcoxwell@acom.edu">bcoxwell@acom.edu</a>
Becky Jordan, RN	Regional Coordinator – South	334-944-4076	<a href="mailto:bjordan@acom.edu">bjordan@acom.edu</a>
Leigh Kincer	Regional Coordinator – Central	334-944-4075	<a href="mailto:lkincer@acom.edu">lkincer@acom.edu</a>
<b>STAFF</b>			
Katelyn Abraham	Primary Clinical Skills & Curriculum Coordinator	334-944-4024	<a href="mailto:kabraham@acom.edu">kabraham@acom.edu</a>
Victoria Beverett, LPN	Student Credentialing Manager	334-305-1036	<a href="mailto:ybeverett@acom.edu">ybeverett@acom.edu</a>
TBD	Preceptor Credentialing Coordinator		
Kandice Bladen, MS	Clinical Curriculum Manager	334-944-4094	<a href="mailto:kbladen@acom.edu">kbladen@acom.edu</a>
Priscilla Mixon, MBA	Clerkship System Analyst	334-944-4003	<a href="mailto:pmixon@acom.edu">pmixon@acom.edu</a>
Kathy Whitehead	Affiliation Agreement Coordinator	334-944-4087	<a href="mailto:kwhitehead@acom.edu">kwhitehead@acom.edu</a>

<b>CLERKSHIP DIRECTORS</b>			
<b>CLERKSHIP ROTATION</b>	<b>DIRECTOR</b>	<b>PHONE</b>	<b>EMAIL</b>
ACOM Rural Health Clinic	Justin Hovey, MD	334-899-3363	<a href="mailto:jhovey@acom.edu">jhovey@acom.edu</a>
Emergency Medicine	Greg Jacobs, DO, DTM&H, FACEP, FAAEM	334-305-1046	<a href="mailto:gjacobs@acom.edu">gjacobs@acom.edu</a>
Family Medicine	James Lyons, MD	334-944-4027	<a href="mailto:jlyons@acom.edu">jlyons@acom.edu</a>
Hospice & Palliative Care	Richard R. Thacker, DO, MACOI	850-528-8791	<a href="mailto:rthacker@acom.edu">rthacker@acom.edu</a>
Internal Medicine	Martin Clemmons, DO, FACOI	334-944-4021	<a href="mailto:mclemmons@acom.edu">mclemmons@acom.edu</a>
Obstetrics / Gynecology	Praful G. Patel, MD, FACOG	334-944-4026	<a href="mailto:ppatel@acom.edu">ppatel@acom.edu</a>
Pediatrics	Lee Scott, MD, FAAP	334-944-4037	<a href="mailto:lscott@acom.edu">lscott@acom.edu</a>
Psychiatry	Sandra Parker, MD	251-706-5553	<a href="mailto:sparker@acom.edu">sparker@acom.edu</a>
Surgery	Sherry Roach, MD		<a href="mailto:sroach@acom.edu">sroach@acom.edu</a>
Electives - General	Praful G. Patel, MD, FACOG	334-944-4026	<a href="mailto:ppatel@acom.edu">ppatel@acom.edu</a>
Advanced Clinical Skills Training Elective	Praful G. Patel, MD, FACOG	334-944-4026	<a href="mailto:ppatel@acom.edu">ppatel@acom.edu</a>
Clinical Integration Elective	James Lyons, MD Fred Helms, EdD	334-944-4027 334-944-4045	<a href="mailto:jlyons@acom.edu">jlyons@acom.edu</a> <a href="mailto:fhelms@acom.edu">fhelms@acom.edu</a>
International Medicine Elective	Mark J. Hernandez, PhD Richard Thacker, DO, MACOI	334-944-4098 334-305-1016	<a href="mailto:mhernandez@acom.edu">mhernandez@acom.edu</a> <a href="mailto:rthacker@acom.edu">rthacker@acom.edu</a>
Introduction to Medical Spanish Elective	Lisa Ennis, MA, MS, MPH Nicole Mitchell, MA, MLIS	334-944-4068 334-944-4067	<a href="mailto:lennis@acom.edu">lennis@acom.edu</a> <a href="mailto:nmitchell@acom.edu">nmitchell@acom.edu</a>
Public Health Elective	Lisa Ennis, MA, MS, MPH Nicole Mitchell, MA, MLIS	334-944-4068 334-944-4067	<a href="mailto:lennis@acom.edu">lennis@acom.edu</a> <a href="mailto:nmitchell@acom.edu">nmitchell@acom.edu</a>
Research Elective	Audrey Vasauskas, PhD	334-944-4079	<a href="mailto:avasauskas@acom.edu">avasauskas@acom.edu</a>

# General Information and Guidelines for Participation in Clerkship Rotations

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## Clerkship Rotation Management Software

ACOM uses eValue to schedule clerkship rotations, record student evaluations, and manage the clinical experiences of students. Students receive instructions and login information from the Clerkship Systems Analyst to access their clerkship rotation schedule, maintain their personal records (to include their vaccination and titer documentation, relevant certifications, etc.), maintain their competency portfolio, review preceptor evaluations of them, and complete evaluations of their preceptors and clerkship rotation sites.

## Professional Demeanor and Titles

All students are held to the highest professional standards regarding truthfulness in word and deed in all academic and clinical matters, as articulated in this manual, the clerkship rotation syllabi, and the Student Handbook. Any deviation from these standards as assessed by the clinical site personnel, working in conjunction with ACOM Clerkship Directors, may result in a failure of that clerkship rotation and/or immediate removal from site. Such violations of professionalism will result in referral to the Student Progress Committee.

Students will refer to themselves as “First name, Last name, third/fourth year medical student at Alabama College of Osteopathic Medicine” in a clinical setting. As a group, students are referred to as “Medical Students.” Students will refer to other professionals in the clinical setting by their appropriate title, such as “Dr. Smith,” “Ms. Jones,” etc. Students are **never** to represent themselves as licensed physicians. If a student has a doctoral degree in any field, this title **cannot** be used while matriculated at ACOM. Students may expect to be treated as professionals by all clinical personnel at all times, and in turn conduct themselves professionally, ethically, and respectfully at all times. Courtesy and a professional demeanor at all times are essential traits for a physician.

## Clerkship Rotation Policy Summaries (details found in the Student Handbook)

- **Participation in Direct Patient Care Activities.** Student participation in all direct patient care activities within clinical settings is governed by the Scope of Participation guidelines (see Appendix B). Students may only participate in activities within clinical settings under the express approval of ACOM. All such direct patient care activities are scheduled as formal clerkship rotations. Students may not be involved in direct patient care activities without approval from ACOM. Liability insurance only covers students participating in approved clinical activities.
- **Appearance.** School officials, hospital administration, and preceptors are the final arbiters of appropriate student appearance. If a student’s appearance is not appropriate, students may be immediately removed from clinical duties and asked to correct the problem before continuing with clinic duties. Specific rules that apply at all times while the student is participating in activities within clinical settings can be found in the Student Handbook.
- **Change of Address.** It is important for students to notify their Regional Coordinator and the Registrar’s office of any changes in contact information. Failure to promptly report a change in mailing address, telephone number, or other contact information can result in failure to receive important information required to successfully complete clerkship rotations. **It is the responsibility of the student to provide current and timely contact information.**
- **Liability Insurance.** The College provides liability insurance coverage for students on approved clerkship rotations while they are directly under the supervision of the assigned preceptor or designee. The College's liability coverage does not apply to unsupervised student clinical activity. Any clerkship rotation not officially scheduled and approved by ACOM will not be recognized for official credit toward graduation requirements.

- **Personal Insurance.** Students are required to have personal health insurance while on clerkship rotations. Students may be asked to show evidence to the clinical training site that health insurance is in place.
- **Counseling, Physical, and Behavioral Health Care Support Services.** The Alabama College of Osteopathic Medicine is committed to providing an environment supportive of its mission with regards to student osteopathic education and wellness, and because of this commitment provides many resources to equip our students for success. Details about these services can be found in the Student Handbook.
  - Note: As a matter of policy, any health professional providing health services, via a therapeutic relationship, must recuse him/herself from the academic assessment or promotion of the student receiving those services.
- **Tobacco, Drug, and Alcohol Use.** All students must comply with the Drug Free Campus and Workplace Policy. The full policy is included in the ACOM Security and Fire Safety Report. The report is available online in the [Consumer Information](#) section of the ACOM website.
- **Inappropriate Conduct.** The Student Handbook provides additional information about appropriate student conduct, and how issues which arise regarding student conduct will be addressed.
- **Property of Others.** Students will not take temporary or permanent possession of hospital or preceptor property (books, journals, food, scrubs, etc.) without the owner's expressed permission. Such items should be returned at the completion of the clerkship rotation.
- **Needle-Stick and Blood-Borne Pathogen Exposure.** If a student experiences a needle stick, puncture wound, accident, or sharp injury, or is otherwise exposed to bodily fluids of a patient while on a clerkship rotation, the student should follow the steps listed in the Student Handbook and on the [Needle-Stick Policy and Procedures libguide](#).
- **Eligibility for Clerkship Rotations.** Students should refer to the Eligibility for Clerkship Rotations section of the Student Handbook for detailed requirements in order to begin participating in clerkship rotations.
- **Additional Background Check Information.** Each student is required to consent to periodic background checks as a condition of enrollment. For further details, please refer to the Student Handbook.
- **Core Site Assignments.** Details about how students are assigned to core sites can be found in the Student Handbook.
- **Registering for Clerkship Rotations.** Students will receive training on how to register for clerkship rotations near the end of spring semester of their OMS-II year. For details on the registration process, please refer to the Student Handbook.
- **Hours of Duty.** Each clinical training site sets its own schedule. Night call, weekend coverage, and holiday assignments are at the discretion of the training site. Additional details may be found in the Student Handbook.
- **Attendance.** ACOM recognizes that professional development occurs in the classroom, laboratory, and clinical environments. Students develop the skills to interact professionally with their colleagues, faculty, and staff, which is integral to their success in entering a medical residency program and subsequent medical practice. Students are responsible for all the material presented in all academic events. Detailed information regarding attendance is provided in each course syllabus. Further details regarding attendance policies while on clerkship rotations may be found in the Student Handbook.
- **Clinical Experiences Beyond Patient Care.** It is important for students to observe and participate in clinical experiences such as tumor board, journal club, or hospital committees in order to understand and appreciate the full spectrum of activities in which physicians are involved. Students are expected to participate in as many clinical experiences as are approved by the preceptor, medical education director, and/or clerkship director.

- **Health Insurance Portability and Accountability Act (HIPAA).** Students will abide by the rules established by HIPAA with a focus on maintaining privacy of Protected Health Information (PHI). This includes prohibition of discussing patient information in an inappropriate manner or setting.

## Student Responsibilities during Clerkship Rotations

- Students are clinically responsible to the person to whom they are assigned at that time.
- Students will comply with all rules and regulations at the core site and any institution to which they are assigned.
- All qualified students are required to attend their core site orientation as scheduled by their Core Site Coordinator.
- Students will conduct themselves during the clerkship rotation as though they were guests in someone else's home. Conduct otherwise may result in disciplinary action by the hospital and/or ACOM including dismissal from the clerkship rotation and/or referral to the Student Progress Committee.
- Students will return any borrowed property before the end of the clerkship rotation, including surgical garb, library materials, textbooks, pagers or other items.
- OMS-III and IV students on rotation are expected to follow educational guidelines as outlined in each clerkship rotation syllabus. Simple shadowing, defined as following and observing a preceptor without participating in patient care duties, is insufficient to meet educational requirements and will not be counted towards course or clerkship rotation credit hours.
- Students cannot practice or work at a site or educational location where they may get training as a student, such as nurses or advanced practice clinicians.

## Clerkship Rotation Sites

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The Alabama Medical Education Consortium (AMEC) established a core site network in Alabama in 2005. This network was managed by core site directors (physicians) and coordinators, which enriched and expanded clinical network opportunities in Alabama for several medical schools. ACOM has continued to develop this network in Alabama and has expanded it into Florida and Mississippi.

Each site is centered on a carefully selected hospital, with sufficient resources within a 50-mile radius for all required OMS-III clerkship rotations. Formal clinical affiliation agreements are in place with these training sites. Students are expected to comply with the policies, procedures, and general rules of the training facility at which any clerkship rotation is completed. Each institution is responsible for determining the degree of student involvement at that institution, including access to the facility and areas within the facility, clinical access to patients, access and contribution to patients' medical records, as well as observation and participation in procedures. Each student should have access to the hospital library or learning resources center in the same capacity as physicians and house staff at that institution. Additionally, each institution defines what benefits the students have while at that institution (e.g. discounted or free meals, lodging, etc.) and under what circumstances the students will have access to those benefits.

At each core site, there is a **Medical Education Director** and **Core Site Coordinator**. The Medical Education Director manages the core site and its operation, as well as directing interaction with the College regarding student performance. The Core Site Coordinator manages the day-to-day activities of students, such as preceptor assignment, evaluations, lectures, and COMAT exams.

Each site is located within a specified geographic region – North, Central, South, and Southeast. A Regional Coordinator is assigned to each region. She coordinates core site development and assists core site staff in managing students' educational experiences.

Students at each site are assigned to work with local preceptors who provide excellent learning opportunities in clinical settings and deliver quality assessments of students throughout their clinical training. These educational exposures occur in a practical, clinical environment designed to help students develop expertise in patient diagnosis, management, and professional etiquette within healthcare teams. In addition to outpatient experiences at hospital-based clinics, free-standing clinics, and physicians' offices, students will be provided with inpatient clinical experiences at hospitals and medical centers. As part of these educational experiences, students may be required to work with a variety of instructors at various levels, including interns, residents, and attending physicians, all under the purview of the Supervising Physician Preceptor.

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## Curriculum Overview

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ACOM partners with its various clinical training sites, Medical Education Directors, and Supervising Physician Preceptors to train students for excellence in clinical practice. Under the leadership of ACOM, the preceptors and clinical training sites implement the curriculum to balance the students' learning needs and the educational resources available at the site. To enhance learning, preceptors and sites are encouraged to use a variety of teaching methods and innovations, including observation, monitored participation, video and audio recordings, technology, readings, individual discussions, and presentations by students, faculty, and others. Specific curricular expectations are outlined in the syllabus for each of the required clerkship rotations.

The clinical curricula consists of clinic, hospital, and office-based training. All clinical faculty are approved by ACOM based on interest and dedication to teaching, as well as a credentialing process including evaluation of the Curricula Vitae (CV), recommendation by appropriate Medical Education Director, board certification or board eligibility, and medical license verifications. The clinical curricula reflects the mission of the college through planning and evaluation by Clerkship Directors, the Curriculum Committee, and the input and review of the Dean's Cabinet.

Entry into any OMS-III level course requires successful completion of all OMS-II level courses and the COMLEX-USA Level 1 exam. The core experience within the in-network core sites will consist of the following REQUIRED clerkship rotations: one month of Psychiatry, two months of Internal Medicine, one month of General Surgery, one month of Obstetrics/Gynecology, one month of Pediatrics, one month of Family Medicine, and one month in the ACOM Rural Health Clinic. One of the Internal Medicine core clerkship rotations must be completed as an inpatient experience, in addition to combined inpatient and outpatient experiences in other core clerkship rotations. One third-year core clerkship rotation must be imbedded within a residency program, and a minimum of one core clerkship rotation must be completed under the supervision of an osteopathic physician. The remainder of the year is designated for electives. During rotation periods two through eleven, embedded in the required core and elective clerkship rotations, students will participate in Pathway to Residency didactic activities. The Core Site Coordinator will contact the student before core clerkship rotations begin regarding student expectations, housing, orientation activities, and other pertinent information. Students are encouraged, but not required, to complete most of their core clerkship rotations early in their OMS-III year.

The OMS-IV curriculum is intended to build on the foundational experience provided in the third year. The only required clerkship rotation in fourth year is Emergency Medicine. Hospice & Palliative Care can be officially an OMS-IV clerkship rotation, but it may be completed during third or fourth year. Fourth year experiences are in settings where more demands for independence can be expected of the senior medical student. Electives will allow students to travel to locations other than their core site for clerkship rotations in their chosen specialty in preparation for application to residency programs.

## Classification of Clerkship Rotations

Clerkship Rotations are classified as core, required, or elective:

- a. **Core Clerkship Rotations:** Core clerkship rotations must be completed at the assigned core site and are assigned by ACOM – they cannot be changed by the student.
  - In the unusual situation that a student’s core site is unable to provide a scheduled core clerkship rotation, then that student may be assigned by the appropriate Regional Coordinator to the nearest available core site, with approval by the Associate Dean of Clinical Sciences.
- b. **Required Clerkship Rotations:** Required clerkship rotations do not have to be completed at a core site but are required to be taken in the appropriate OMS year.
- c. **Elective Clerkship Rotations:** Students have the opportunity to complete many elective clerkship rotations in the third and fourth years. Electives can be in any specialty and at any medical facility. Preceptors for elective clerkship rotations may be any licensed, practicing physician approved by ACOM; they are not required to be a member of the ACOM Clinical Faculty. Students are encouraged to schedule elective clerkship rotations in a variety of clinical practice areas for broad-based clinical exposure.
  - Core site coordinators cannot require a student to complete a particular elective; however, they can regulate if/when a particular elective may be taken at their core site. This decision is based on preceptor availability and the student’s core clerkship rotation schedule.
  - Medical education directors may require a student to complete a particular elective based on identified preceptor and/or student needs and availability.
  - Students must work with their core site coordinator for scheduling assistance if a particular elective is not available at a student’s core site.
  - Students who choose to complete elective clerkship rotations at locations outside the ACOM network must follow the out-of-network application process.

## OMS-III Clerkship Rotations

- a. Students are encouraged, but not required, to complete most of their core clerkship rotations early in their OMS-III year.

OMS-III		
Course #	Course Name	Credit Hours
DO CLIN 801	Core: Psychiatry	4
DO CLIN 802	Core: Internal Medicine I	4
DO CLIN 803	Core: Internal Medicine II	4
DO CLIN 804	Core: Obstetrics/Gynecology	4
DO CLIN 805	Core: General Surgery	4
DO CLIN 806	Core: Pediatrics	4
DO CLIN 807	Core: Family Medicine	4
DO CLIN 833	Core: ACOM Rural Health Clinic	4
DO CLIN 840-899	*Electives	12
<b>Total Credit Hours</b>		<b>44</b>

### Elective Choices:

Refer to the Academic Catalog for the full list of elective choices.

See the Limits on Clerkship Rotations section for further details.

## OMS-IV Clerkship Rotations

- a. Students should complete both required clerkship rotations listed below no later than rotation period 8 (February) of the OMS-IV year. These clerkship rotations may be completed at the core site or other approved site. Required Hospice & Palliative Care may be completed during the third or fourth year.

OMS-IV		
Course #	Name	Credit Hours
DO CLIN 903	Required: Emergency Medicine	4
DO CLIN 908	Required: Hospice & Palliative Care <ul style="list-style-type: none"> <li>• May be completed as an OMS-III or OMS-IV clerkship rotation.</li> </ul>	4
DO CLIN 940-999	*Electives	32
<b>Total Credit Hours</b>		<b>40</b>

### Elective Choices:

Refer to the Academic Catalog for the full list of elective choices.  
See the Limits on Clerkship Rotations section for further details.

### Clerkship Rotation Descriptions:

Refer to the Academic Catalog for clerkship rotation descriptions.

### Locating Elective Clerkship Rotations

- a. **In Network.** Students interested in an elective clerkship rotation *within the ACOM network*, should contact their assigned Core Site Coordinator by email. The assigned Core Site Coordinator will work with the appropriate Core Site and Regional Coordinators to fulfill the request. The majority of ACOM preceptors are clinicians with busy practices, so they may not always be available at the time for which the clerkship rotation is requested.
- b. **Out of Network.** If a student is interested in completing a clerkship rotation at another medical school or graduate medical education program, the student should follow the Out of Network Request process, listed in the following pages.
- These clerkship rotations are often used to "audition" for residency programs. It is strongly recommended that each student perform audition rotations in at least three (3) residency programs in which they are interested. Doing so will improve residency match competitiveness, allow opportunities to connect with the healthcare teams at interested programs, allow identification of physicians who can write Letters of Recommendation, and increase understanding of specialty residency program expectations. The usual audition rotation season opens in June of the OMS-III year and concludes in February of the OMS-IV year.
  - Students may find the following websites helpful in locating clerkship rotations at graduate medical education programs:
    - **FRIEDA Online** is an online database maintained by the ACGME of accredited GME programs. <http://www.ama-assn.org/ama/pub/education-careers/graduate-medical-education/freida-online.page>
    - **AAMC-Member Program** <https://mec.aamc.org/cim-cr-web/#/user>

- **Visiting Student Learning Opportunities (VSLO)** Some programs require students to apply through VSLO. Details can be found at <https://students-residents.aamc.org/visiting-student-learning-opportunities/visiting-student-learning-opportunities-1>
- Students may also **contact programs directly** or review their website(s).

## Applying for Out-of-Network Clerkship Rotations

Students may apply for clerkship rotations at other training sites, including medical schools and graduate medical education programs. Each training site will have its own application guidelines and processes, which typically can be found on the institution's or program's website and/or through the Visiting Student Learning Opportunities (VSLO). Please note that the application process will vary with different programs and can be very time-consuming. Students must work with Student Credentialing and the appropriate Regional Coordinator to coordinate all out-of-network clerkship rotations.

**Regular communication between students, Student Credentialing, and Regional Coordinators is essential to the out-of-network (OON) application process.** As a reminder, students are responsible for securing housing and for all costs associated with these clerkship rotations.

Clerkship rotations at medical education programs should be set and confirmed by the rotation site AND requested through ACOM at least 45 days in advance to allow time to complete the necessary processes. Applications received less than 45 days prior to the start date of the clerkship rotation may not be approved by ACOM. **All out-of-network clerkship rotations must be set and confirmed by the rotation site 45 days prior to the start of the clerkship rotation and by ACOM 28 days prior to the start of the clerkship rotation. If these deadlines are not met, the student may be assigned to a clerkship rotation by the Regional Coordinator.**

(Note: Active-Duty Military clerkship rotations will follow these procedures as well.)

## Application Process Out-of-Network (OON) Clerkship Rotations

1. Find a rotation and identify how to apply (email, VSLO, Clinical Nexus, USPS mail).
2. Complete the student portion of the application. If signed documents, LOGS, COI, and/or Affiliation Agreement(s) are needed, contact [studentcredentialing@acom.edu](mailto:studentcredentialing@acom.edu).
  - a) If the program/facility wants all documents submitted with the application as one combined document, send all portions of the completed application, including the checklist of additional documents required, to [studentcredentialing@acom.edu](mailto:studentcredentialing@acom.edu). Student Credentialing will then send the completed application packet, along with any additional required documentation, to the program/facility.
  - b) If there is an application fee, the student must include payment with the application.
  - c) If the rotation dates do not match ACOM's dates, the student should request dates that will match. If the program cannot provide dates that match, the student should contact Student Credentialing to discuss options before submitting the OON request.
3. Once the rotation is approved by the program/facility, fill out the OON request form. Make sure to list all facilities (hospitals, clinics, surgery centers, etc.) at which clinical duties will be performed to allow appropriate credentialing to be completed.
4. Contact the program 4 weeks before the rotation to confirm all required documents have been received. If the program has provided a specific date regarding contact, follow their rules.
5. Once the OON request form is approved by ACOM and all necessary information from the student is submitted to the program/facility, register for the rotation in eValue.
  - a) The eValue registration deadline is 28 days prior to the start of the rotation, as noted in the previous section.

## Documents and Additional Materials Needed for Audition Rotations

Below is a list of documents that may be requested of students by a program or host institution. It is the student's responsibility to ensure all necessary documents are obtained and submitted. This list is to help students know where to find necessary information and who to request help from if needed. **\*\*Please note, all documents in this list may not be required for every program.**

Document / Information	Process for Obtaining Document / Information
ACLS/BLS training/certification	Student cards are sent via email. Students must upload them to CastleBranch. If a student didn't receive their cards, below is the contact information to get another copy. Current documentation must be uploaded to CastleBranch for verification. <a href="mailto:Randy.Boone@carepointresources.com">Randy Boone, CEO   877-242-2527   randy@carepointresources.com</a>
Affiliation Agreement	<b>Students have no responsibility for affiliation agreements and are not to get involved in this legal matter.</b> To find out the status of an AA, contact <a href="mailto:studentcredentialing@acom.edu">studentcredentialing@acom.edu</a> .
Class Rank	Contact <a href="mailto:registrar@acom.edu">registrar@acom.edu</a> for this information
COMLEX Score	Can be pulled by student from NBOME account
Course Syllabi	Can be downloaded by student from eValue homepage
Criminal Background	Can be pulled by student from CastleBranch. If a program requires a more current one, student must obtain at own expense per the appropriate state's requirements. Contact <a href="mailto:studentcredentialing@acom.edu">studentcredentialing@acom.edu</a> for instructions.
COVID Vaccine documentation	Current documentation must be uploaded to CastleBranch for verification. While not currently required by ACOM, most core sites require vaccination and documentation.
CV / Personal Statement	Student must provide this information.
10 Panel Chain of Custody Drug Screen	Can be pulled by student from CastleBranch. If a program requires a more current one, student must obtain at own expense per the appropriate state's requirements. Contact <a href="mailto:studentcredentialing@acom.edu">studentcredentialing@acom.edu</a> for instructions.
Flu shot documentation	Current documentation must be uploaded to CastleBranch for verification.
GPA	Can be viewed through Self-Service on unofficial transcript
HIPAA training/certification	Done prior to starting OMS-III via IPS course in the CITI Program. Can also be obtained at core site hospital. Current documentation must be uploaded to CastleBranch for verification.
Immunization / Immunity Records	Records can be pulled by student from CastleBranch. If a signature of a healthcare provider or school official is required, student has two options: (1) have it signed by a healthcare provider at core site, or (2) send a completed, scanned copy to <a href="mailto:studentcredentialing@acom.edu">studentcredentialing@acom.edu</a> .
Infection Control training/certification	Done prior to starting OMS-III via BSS course in the CITI Program. Can also be obtained at core site hospital. Current documentation must be uploaded to CastleBranch for verification.
Learning Agreement form - blank	Can be downloaded by student from eValue homepage
Letter of Good Standing (LoGS)	If a program requires, please send a request to <a href="mailto:studentcredentialing@acom.edu">studentcredentialing@acom.edu</a> Program name, city, state, discipline, dates of rotation, and program contact must be provided with the request.
Liability Insurance Verification form (not applicable to all programs)	Send request to <a href="mailto:studentcredentialing@acom.edu">studentcredentialing@acom.edu</a> . Appropriate signature will be obtained and sent back to the student via email.
Malpractice Certificate of Insurance (COI)	Student Credentialing will send this to programs who are non-VSLO participants. If applying through VSLO, students must let <a href="mailto:studentcredentialing@acom.edu">studentcredentialing@acom.edu</a> know to upload it on their behalf. <b>Students are not authorized to release this under any circumstances.</b>
Mask Fit test (yearly)	Done prior to starting OMS-III. Can also be obtained at core site hospital. Current documentation must be uploaded to CastleBranch for verification.
Out of Network Request form	Must be completed electronically through Office365 Forms.
OSHA training/certification	Done prior to starting OMS-III via BSS course in the CITI Program. Can also be obtained at core site hospital. Current documentation must be uploaded to CastleBranch for verification.
Personal Health Insurance	Current documentation must be uploaded to CastleBranch for verification.
Physical Exam within 12 months of rotation date	Student must go to personal healthcare provider to obtain this information.
2-step PPD test for tuberculosis documentation (yearly)	Current documentation must be uploaded to CastleBranch for verification.
Preceptor Evaluation form - blank	Can be downloaded by student from eValue homepage
TDaP immunization (current <10 years)	Current documentation must be uploaded to CastleBranch for verification.
Transcript - Official	All requests are made through PowerCampus Self Service. For a VSLO program, students' official transcript will be uploaded on their behalf. For non-VSLO programs, the official transcript will be sent for students on their behalf.

## Clerkship Rotation Information for Military Students

### Military Rotations

- HPSP students are required to complete at least 2 rotations with military programs. Students should think of these as audition rotations.
  - It is recommended that students begin looking into scheduling audition rotations at the beginning of spring semester of OMS-III year.
  - Most students will defer their 3<sup>rd</sup> Active Duty Tour until their OMS-IV year, and complete two Active Duty Tours (ADTs) while rotating in these military programs.
  - Students completing clerkship rotations at military programs are still expected to follow the application process for Out-of-Network clerkship rotations.
- ✓ **Students are strongly encouraged complete officer training prior to arranging to rotate at a military facility.**
- ✓ **If officer training has already been completed, students should make sure to review military customs and courtesies and be prepared to represent themselves and their school as an officer.**

### Matching to a Residency

- HPSP students are required to apply to both the military and civilian match.
- If a student matches with a military residency, he/she must withdraw from the civilian match.
  - Match results are released in December each year – earlier than civilian match.
- If a student matches to a civilian residency and is approved by the appropriate branch, the student will usually go on reserve status until the completion of that residency.
- If a student does not match with the military and is not given permission to continue with a civilian match, the student will typically complete a one-year general internship with the appropriate branch and reapply the following year.
- ✓ **\*Please refer to the appropriate branch's portal for instructions, requirements, and deadlines specific to that service branch.**

## Participating in Out-of-Network (OON) Clerkship Rotations

### a. Student Responsibilities

- Student identifies OON preceptor, residency program, or other training facility.
- Student completes appropriate application(s), contacting Student Credentialing as needed for any required documents (forms requiring school signature, LOGS, COI, Affiliation Agreements, etc.).
  - i. If an affiliation agreement is required, the student **DOES NOT** negotiate it.
- Student submits OON request form once the program approves the clerkship rotation.
- Student ensures the program received all required documentation prior to the start of the clerkship rotation.
- Student registers for the clerkship rotation in eValue once the OON request is approved by ACOM and the program/facility confirms receipt of all necessary documents.
- If a change is required after the registration deadline (which should be rare), the student must submit drop/add forms as needed in a timely manner.
- During the clerkship rotation, the student follows all curricular guidelines listed in the appropriate clerkship rotation syllabus, including ensuring submission to ACOM of all required assessments by the specified deadlines.

### b. ACOM Responsibilities

- Approves or denies OON requests and eValue registration.
- Provides credentialing documents as requested by the student (forms requiring school signature, LOGS, COI, etc.)

- Processes Affiliation Agreements, including negotiation (as needed) and electronic approval.
- c. **Key Assumptions to Guide and Direct Out-of-Network Activities**
- A completed submission to ACOM or the host institution does not guarantee approval or acceptance.
  - Regular communication between students, Student Credentialing, and Regional Coordinators is essential to the out-of-network (OON) application process.
  - All out-of-network clerkship rotations must be set and confirmed by the rotation site 45 days prior to the start of the clerkship rotation and by ACOM 28 days prior to the start of the clerkship rotation. If these deadlines are not met, the student may be assigned to a clerkship rotation by the Regional Coordinator.
    - i. When these deadlines are not followed, the probability of completing all necessary requirements in time to start the clerkship rotation is significantly decreased.

## **Additional Options for Elective Clerkship Rotations**

Students may also consider the following options when planning elective clerkship rotations. Refer to the Academic Catalog for clerkship rotation descriptions.

- a. **Advanced Clinical Skills Training**
- b. **Clinical Integration**
  - Please note: students who score below a 70% on three (3) or more COMATs may be required to complete this elective prior to taking COMLEX 2-CE.
- c. **International Medicine**
- d. **Medical Spanish**
- e. **Public Health**
- f. **Research Elective**
- g. **Wilderness Medicine**
- h. **Off-Cycle Clerkship Rotations**

## **Limits on Clerkship Rotations**

- a. There is no limit on the number of credit hours students may complete in a particular discipline; however, students should endeavor to make smart, strategic choices when planning their elective schedules. Students are encouraged to seek out and follow the guidance from ACOM Faculty and Medical Education Directors.
- b. Students may not complete more than eight credit hours of clerkship rotations, core or elective, with the same supervising physician or at the same residency program in the same discipline over the combination of the clinical years without special permission from the Associate Dean of Clinical Sciences.
- c. Students may not complete more than four credit hours of off-cycle clerkship rotations without special permission from the Associate Dean of Clinical Sciences.
- d. Students may complete only four credit hours with a preceptor who is a member of the student's family. A clerkship rotation completed with a family member must be an elective clerkship rotation.
- e. Students may not complete more than eight credit hours of distance education electives over the combination of the clinical years without special permission from the Associate Dean of Clinical Sciences. Students who choose to take these electives should schedule them strategically. Students are not allowed to take all eight credit hours during spring semester of fourth year.
  - a. For clarification, distance education electives in this instance refer to electives that use certain technologies to deliver instruction and didactic assignments to students who are separated from the instructor or instructors and to support regular and substantive interaction between the students and the instructor or instructors. If students are unsure

whether a virtual experience counts toward this limit, they should contact the clinical curriculum team prior to completing the experience.

- f. Students may not complete more than eight credit hours of Research electives or International Medicine electives over the combination of the clinical years without special permission from the Associate Dean of Clinical Sciences.
- g. Students may not complete more than four credit hours of the Wilderness Medicine elective.
- h. Guidelines on student participation in clinical activities while on clerkship rotations are included in this document as Appendix B. They are meant to be recommendations for policies concerning student involvement in the clinical setting at all clerkship rotation venues.

## Communication to Prepare for Upcoming Clerkship Rotation Assignments

For any clerkship rotation occurring at an ACOM core site, it is essential that students work with the Core Site Coordinator to ensure accurate registration and confirmation of the clerkship rotation. Closer to the start of the clerkship rotation, students must also communicate appropriately to ensure awareness of clerkship rotation details. Some core sites ask that students not contact preceptors directly. The student should confer with the coordinator at their core site to determine the best method to introduce themselves to the preceptor and obtain clerkship rotations details (i.e., start time, dress code, housing arrangements, special instructions or preceptor-assigned readings). This communication should occur about seven days prior to the start of each clerkship rotation.

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## Patient Care Activities

The clerkship rotation site will define the degree of student involvement in patient care activities at that facility. Students must comply with all of the general and specific rules and medical ethics established by the hospital, clinic, or facility at which they are being trained.

A medical student is not legally or ethically permitted to practice medicine or assume responsibility for patient care. A student may be involved in assisting in the care of a patient, but **only under the supervision of a licensed physician**. The attending physician is responsible for the medical care of the patient. A student may not administer therapy or perform procedures, except under the supervision of a licensed physician.

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## Medical Records/Charting

Policies regarding documentation by medical students in medical records will vary among hospitals and clinics. These notes should be approved and signed by the supervising physician in accordance with that clinical entity's bylaws governing chart documentation. Students are responsible for proactively obtaining charting/documentation instructions from the preceptor or site coordinator at each clerkship rotation site. The student must always sign and date all entries into the medical record by name and educational status, such as John Smith, OMS-III.

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## Competency Portfolio

Students must record clinical thinking and procedural skills witnessed by their preceptors in the **Competency Portfolio** in the Case Logs section of eValue. Each skill will be listed as "performed," "assisted," or "observed." Students should access the portfolio daily while on each clerkship rotation in order to record each clinical skill. Skills are self-reported by students and verified randomly by ACOM staff. **Students must make sure they are accurately recording their experiences with each symptom/problem and**

**clinical skill during their OMS-III year.** Doing so is important because ACOM will use this information to populate the Medical Student Performance Evaluation (MSPE; formerly called Dean’s Letter). This MSPE is a vital part of each student’s residency application. The more complete the portfolio, the better a program director will understand the depth of the student’s training. It is, therefore, in the student’s best interest to populate the portfolio as accurately and completely as possible. If the competency portfolio is incomplete, potential Residency Program Directors will not be able to see a true picture of the student’s abilities. Competency portfolios will continue to be important throughout students’ careers.

**Continuing to populate the portfolio during their OMS-IV year will lead to a more complete representation of student exposure to the clinical skill sets they will be expected to perform on their first day of residency.** ACOM strongly recommends at least three logs of each symptom/problem listed in Appendix A by graduation.

Students must log at least one “Case Log” into their Competency Portfolio in eValue by Thursday each week of a rotation period in order to demonstrate attendance on the clerkship rotation for that week. Failure to consistently document on a weekly basis may result in a change of enrollment status.

The portfolio will serve as a method for students to track their performance of common skills typically encountered during clinical clerkship rotations. As such, this portfolio will become an important asset to the student when applying for residency. In addition, the portfolio will serve as a tool to assist ACOM to evaluate the clinical experiences received by students at various training sites.

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## Clinical Competency Committee

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The goal of the Clinical Competency Committee (CCC) is to help students reach their highest level of competitiveness as they prepare for residency placement and performance. A necessary component to achieve this goal is helping students ensure their preparedness for passing COMLEX 2-CE and PE on their first try, as well as help them obtain as many residency auditions and interviews as needed in order to match into residency.

In order to reach these goals, the CCC has identified some criteria listed below which are key Opportunities for Improvement that may result in an in-depth student performance review by the CCC. These opportunities are listed below.

- Delay first COMLEX 1-CE or 2-CE past deadline published by Student Services each year
- Fail COMLEX 1, 2-CE, or 2-PE (if offered by NBOME)
- Score below 70% (87 NBOME standard score) on 2 or more COMATs
- Fail a clerkship rotation
- Clinical Skills are evaluated as “Needs Immediate Improvement”
- Professional behaviors are evaluated by preceptor as “Does Not Meet Expectations”
- Referred by Pre-Clinical Competency Committee
- Recommendation from Clerkship Director
- Receive feedback from Medical Education Director, Core Site Coordinator, or Regional Coordinator regarding concerning behavior and/or professionalism violations

Students who choose not to comply with recommendations from this Committee may be referred to the Professionalism and Ethics Committee for additional guidance.

It is the CCC’s sincere wish that as they reach out to students to offer time management strategies, study skills, test-taking tips, or anything else they think will assist students as they progress through the clinical curriculum, students will utilize the help offered and work with the CCC to achieve their goals. The entire ACOM family wants students to achieve their dream of matching into their desired residency.

## Grading Guidelines for Clerkship Rotations

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### Assignment of Grades

A grade for each clerkship rotation will be assigned by the appropriate Clerkship Director. Details regarding specific grading elements can be found in each clerkship rotation syllabus. For additional information regarding grading guidelines, including the topics mentioned below, refer to the Student Handbook.

- **Assignment of Final Grades.**
- **Grading Scale.**
- **Incomplete Clerkship Rotations.**
- **Preceptor Evaluation Reconsideration.** These are to be directed to the Clerkship Director only. Students are **never** to contact the supervising physician who evaluated them.
- **Final Grade Appeals.** These are to be directed to the Clerkship Director only. Students are **never** to contact the supervising physician who evaluated them.

## Student Evaluations

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### Competency Based Evaluation

A student evaluation will be completed by the supervising physician at the completion of each clerkship rotation. The evaluation will be based on the student's behaviors, knowledge, and skills observed by the preceptor and other members of the healthcare team in each of the following core competencies:

- **OSTEOPATHIC PHILOSOPHY AND OSTEOPATHIC MANIPULATIVE MEDICINE**
  - OMM Knowledge:** Articulates and demonstrates an understanding of the osteopathic approach to patient care.
  - OMM Treatment:** Demonstrates an ability to formulate an OMM treatment plan.
- **MEDICAL KNOWLEDGE**
  - Professional Knowledge:** Demonstrates effective use of medical knowledge necessary for patient care and accesses information through consultations and/or literature searches.
- **PATIENT CARE**
  - History Taking:** Obtains relevant information and performs a complete and accurate history.
  - Physical Exam and Documentation:** Performs a complete and accurate physical examination and provides accurate and meaningful documentation.
  - Diagnosis:** Synthesizes clinical findings and/or laboratory data to formulate an appropriate differential diagnosis.
  - Treatment Plan:** Writes an appropriate treatment plan.
  - Skills and Procedures:** Uses instruments and performs simple procedures correctly.
- **INTERPERSONAL AND COMMUNICATION SKILLS**
  - Interpersonal Communication and Interaction:** Demonstrates effective listening, questioning, and narrative skills to communicate with patients, families, and other healthcare professionals, being sensitive to cultural, religious, and language issues.
  - Presentation Skills:** Organizes and reports case presentation information in a logical and meaningful format.

- **PROFESSIONALISM**  
**Motivation and Professionalism:** Demonstrates willingness to learn and accept instruction; maintains professional, respectful, and cooperative relationships with others (preceptors, staff, patients, and families).
- **PRACTICE-BASED LEARNING AND IMPROVEMENT**  
**Diagnostic and Therapeutic Effectiveness:** Uses reliable and current information in diagnosis and treatment; demonstrates the ability to extract and apply evidence; makes self-improvements as needed.
- **SYSTEMS-BASED PRACTICE**  
**Knowledge of Healthcare Delivery Systems:** Understands the basic business applications in a medical practice; shows operational knowledge of healthcare organizations; understands the role of the student as a member of the healthcare team; attends and participates in local meetings.  
**Local Healthcare Advocacy:** Understands local healthcare needs and challenges; makes appropriate use of local medical resources on behalf of patients.

At ACOM these competencies are defined within the following standards statements, as articulated in the following table.

AAMC (Association of American Medical Colleges) EPA (Core Entrustable Professional Activities for Entering Residency) Legend:	
<b>EPA 1</b>	Gather a history and perform a physical examination
<b>EPA 2</b>	Develop a prioritized differential diagnosis and select a working diagnosis following a patient encounter
<b>EPA 3</b>	Recommend and interpret common diagnostic and screening tests
<b>EPA 4</b>	Enter and discuss patient orders/prescriptions
<b>EPA 5</b>	Provide documentation of a clinical encounter in written or electronic format
<b>EPA 6</b>	Provide an oral presentation/summary of a patient encounter
<b>EPA 7</b>	Form clinical questions and retrieve evidence to advance patient care
<b>EPA 8</b>	Give or receive a patient handover to transition care responsibility to another health care provider or team
<b>EPA 9</b>	Participate as a contributing and integrated member of an interprofessional team
<b>EPA 10</b>	Recognize a patient requiring urgent or emergent care, initiate evaluation and treatment, and seek help
<b>EPA 11</b>	Obtain informed consent for tests and/or procedures
<b>EPA 12</b>	Perform general procedures of a physician
<b>EPA 13</b>	Identify system failures and contribute to a culture of safety and improvement

The Preceptor Evaluation of the Student is a list of observable behaviors directly referencing these Core Entrustable Professional Activities for Entering Residency.

### Student Responsibility for Preceptor’s Evaluations

**It is the responsibility of the student** to ensure that preceptors’ evaluations are submitted to the core site coordinator or other appropriate ACOM staff member **at the completion of each clerkship rotation.** ACOM staff will assist with obtaining the evaluation if a preceptor is neglectful in completing the evaluation form, but **the responsibility rests with the student.** If a student has difficulty in getting an evaluation submitted, he/she should inform his/her core site coordinator or regional coordinator **at the end of the clerkship rotation.** The more time that passes after a clerkship rotation is completed, the more difficult it

becomes to receive an accurate evaluation. The student's transcript will not be complete until all evaluations have been posted. Application for Graduate Medical Education (GME) programs cannot be submitted nor diplomas issued without a complete transcript.

Preceptors may complete an online evaluation through eValue. In instances when a paper evaluation is requested **by the preceptor**, one will be sent to the training site. Students may also give a copy of the evaluation to the preceptor. The evaluation can be faxed, mailed, or sent by email to the appropriate core site coordinator or ACOM staff member. Please note that **evaluations received directly from students will not be accepted. The evaluation must be received from the preceptor or training site.**

**Preceptors for Core Clerkship Rotations:** The coordinator at each core site will ensure ACOM has current preceptor information. The preceptor listed for a core clerkship rotation may not be the primary preceptor, but the supervising physician who oversees the core clerkship rotation. The student should address any concerns regarding the preceptor listed for core clerkship rotations with his/her Site Coordinator by the second week of the clerkship rotation.

**Individual Preceptors:** The student should also make certain that ACOM has a correct email address for the preceptor, or the person who should receive the email notice that an evaluation is due (such as a practice manager). ***This information should be received by the student's Regional Coordinator by the second week of the clerkship rotation.***

**Preceptors at Medical Education Programs:** When on a clerkship rotation at another medical school or GME program, the student should consult with the medical education coordinator at that program regarding their procedures for preceptor's evaluations. Evaluation procedures may vary at each site. In some cases, one preceptor may complete the evaluation online. In other cases, students may work with multiple preceptors who contribute to the evaluation. In this case, the coordinator or supervising physician at the host site will combine the input received from all evaluators and submit one overall evaluation to ACOM.

Please note: while nurses, advanced practice providers, and resident physicians may offer feedback to the preceptor of record regarding student performance, those individuals may not serve as the preceptor of record, and therefore cannot submit a Preceptor Evaluation of Student form to ACOM.

***It is the responsibility of the student to determine the evaluation process at the host site and provide that information, along with the name and contact information of the preceptor of record, to ACOM. This information should be received by the student's Regional Coordinator by the second week of the clerkship rotation.***

## Evaluation Process

- a. The evaluation process should begin during the first week of the clerkship rotation. Students should meet their preceptor at the beginning of the clerkship rotation to discuss expectations for clinical and academic performance and complete a Learning Agreement (See Appendix K). This provides the student with the opportunity to become familiar with and meet preceptor expectations and avoid being surprised by the evaluation at the end of the clerkship rotation. Students should not hesitate to request clarification of anything that is not made clear by the preceptor. The student should provide the preceptor with a copy of the *Mid-Rotation Evaluation Form*. If the preceptor does not have a copy of the clerkship rotation syllabus, the student should provide a copy at the beginning of the clerkship rotation.
- b. Two weeks into the clerkship rotation, the student should ask for an informal mid-rotation evaluation. The student should review the Mid-Rotation Evaluation Form with the preceptor, discuss areas of competency that will be evaluated at the conclusion of the clerkship rotation, and ask for their input on his or her performance to date and specific recommendations for

improvement. This is not intended to be a formal evaluation. These forms should be submitted in eValue, either by the preceptor electronically filling out the form or by the student uploading the completed and signed form.

- c. It is the responsibility of the student to ensure that evaluation forms are completed and submitted online or turned into the core site coordinator or other appropriate ACOM staff member at the completion of the clerkship rotation. Students should inform ACOM of any difficulty in obtaining an evaluation by the preceptor at the end of that clerkship rotation.
- d. There are two narrative feedback sections of the evaluation form. The first section is designed to identify the student's strengths and areas for improvement. The second section is designed to allow preceptors to share feedback about student performance with potential program directors. Comments from this section **will be** used as content for the Medical Student Performance Evaluation (MSPE) for the residency match program. Students are encouraged to inform the preceptor about the importance of making specific comments about their clinical performance.

### **Student Evaluation of the Preceptor | Site | Clerkship Rotation Experience**

Students are required to complete evaluations regarding their clerkship rotation experience. Student feedback received from the evaluations will assist in the overall assessment and improvement of clerkship rotations and future faculty development programs. In order to assist core sites to improve student experiences, a summary of student ratings and comments will be reported anonymously, in redacted form, to those training sites and preceptors on an annual basis. The following evaluations are to be completed on the last day of each clerkship rotation.

1. *Evaluation of Preceptor*: Provides feedback that can be used to assess and improve the teaching of up to three preceptors for each clerkship rotation.
2. *Evaluation of Site*: Provides feedback that can be used to assess and improve learning opportunities and the learning environment of specific clerkship rotation sites.
3. *Evaluation of Clerkship Rotation Experience*: Provides feedback that can be used to assess and improve the clerkship rotation syllabus, learning materials, assignments, activities, and the instructional/support efforts of the clerkship director.

### **Observed Patient Clinical Encounter (OPCE) Evaluations**

Students must ask their supervising physician to observe their performance as they complete a patient history and physical examination. Students must have a total of four (4) of these evaluations completed and submitted in eValue by the end of their OMS-III year. All four will be incorporated into didactic assignments within core clerkship rotations.

## COMAT and COMLEX Exams

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### OMS-III COMAT Exams

OMS-III students completing core clerkship rotations in Psychiatry, Internal Medicine II, OB/GYN, General Surgery, Pediatrics and Family Medicine will take the COMAT (Comprehensive Osteopathic Medical Achievement Tests) subject examination provided by the National Board of Osteopathic Examiners (NBOME). There are no COMAT exams for IM I or elective clerkship rotations. Before beginning clerkship rotations, students will receive instructions from the appropriate ACOM staff member on how to download the NBOME browser and run a systems check on their computers in order to access COMAT exams.

The OPP COMAT will be administered at the end of the Core ACOM Rural Health Clinic clerkship rotation. Students have the option to take the Emergency Medicine COMAT any time prior to taking the COMLEX 2 CE exam by following the instructions below.

COMAT exams are administered online on the last day of the clerkship rotation in accordance with NBOME guidelines. The exams are proctored by the core site coordinator or their designee at each core site. Students will receive instructions from the site coordinator regarding the time and place to report for the exam. COMAT exams must be taken on the day that they are scheduled. Please note: students must inform both their core site coordinator and the clinical curriculum team regarding if/when they would like to take the Emergency Medicine exam at least two (2) weeks prior to the anticipated exam date.

COMAT examination structure, content outlines and practice exams for each subject can be found at <http://www.nbome.org/comat>. Students who wish to request accommodations on COMAT exams must follow the accommodations request process outlined in the Student Handbook.

While students are not required to pass all required COMATs before taking COMLEX Level 2-CE, it should be noted that COMAT performance is indicative of how students will perform on Level 2-CE; therefore, COMBANK 2 has been purchased for student use in preparing for each COMAT. It is strongly recommended that students complete practice questions in each COMBANK discipline, which will greatly help in preparing for each COMAT. Please be advised that students who score below 70% on three (3) or more COMATs will be required to complete the Clinical Integration elective prior to taking COMLEX 2-CE.

### OMS-IV COMAT Exams

There are no COMAT exams for required Emergency Medicine, Hospice, or elective clerkship rotations.

### COMLEX Exams

The COMLEX-USA series, administered by the NBOME, is an examination sequence with three levels. While all examination levels have the same two-dimensional content structure, the depth and emphasis of each level parallels the educational experiences of the candidate. This progressive nature of the COMLEX-USA examinations ensures the consistency and continuity of the measurement objectives of the osteopathic medical licensing examinations ([www.nbome.org](http://www.nbome.org)).

For additional information regarding student responsibilities for passing COMLEX Level 1, Level 2-CE, and Level 2-PE, please refer to the Student Handbook.

## Additional Guidelines

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- Regular communication is essential to success in medical school.
- Read all policies/procedures and course syllabi and make sure you understand all clerkship rotation requirements **before** beginning a clerkship rotation.
- Be proactive – you are responsible for your schedule; you should know what is expected of you, complete all forms, evaluations, etc. on time and respond promptly to phone calls, e-mails, and any other correspondence.
- Adhere to time frames, especially for course registration, schedule changes, gaps in participation, etc.
- Clerkship rotations in medical school are a full-time commitment. Non-clerkship rotation activities must not supersede or conflict with your clinical duties and academic assignments.
- Failure of the student to follow all specified policies may result in approaching a graduation date with requirements unfulfilled, which would impact the ability to participate in commencement, on-time graduation, and/or date of beginning post-graduate training.
- For issues arising at a core site regarding in-house matters, work with local staff using appropriate procedures to resolve the issue locally.
- If advice is needed regarding curricular or other requirements, seek that from appropriate staff or faculty; we do **not** recommend seeking clarity from classmates or non-ACOM affiliated core site, hospital, or other personnel. Remain fully aware that no allowances can be made for receiving incorrect advice from inappropriate sources.
- During clerkship rotations, students are considered to be part of the patient care team at the applicable training site; as such, the student is a professional-in-training, has duties, responsibilities, and a level of expectation regarding performance that is significantly different, often higher, than during the first two years of medical school. Student behavior is to be above reproach at all times.
- The Alabama College of Osteopathic Medicine recognizes, values, and affirms that diversity contributes richness to the College and enhances the quality of education. Students, faculty, staff, and administrators are valued for their diversity. ACOM is committed to providing an academic and employment environment in which students and employees are treated with courtesy, respect, and dignity. It is the policy of ACOM that no student or employee shall be excluded from participating in, be denied the benefits of, or be subjected to discrimination in any program sponsored by ACOM. For additional information, please refer to the Student Handbook or contact the Title IX Coordinator.
- ACOM is committed to maintaining a safe and healthy educational and work environment free from discriminatory harassment based on age, race, color, sex, gender, sexual orientation, religion or creed, national or ethnic origin, or disability. Sexual or other discriminatory harassment of ACOM students is prohibited; likewise, students are prohibited from engaging in harassing behavior directed at ACOM's employees, visitors, vendors and contractors. All students and employees are expected to comply with ACOM's Title IX policy and take appropriate measures to create an atmosphere free of harassment and discrimination. Please refer to ACOM's website or contact the Title IX Coordinator for the full policy.

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Corporate Compliance Officer  
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<https://www.acom.edu/report/>
- Students are directly accountable to their assigned clinical preceptor(s) for carrying out all patient care and academic assignments in a timely, professional, and high-quality manner. The student is also accountable to the Medical Education Director or Site Supervisor for being aware of and complying with general and site-specific policies/procedures, in addition to those of ACOM in general.
- Students who are ill or experience an emergency situation that renders them unable to fulfill clerkship rotation requirements and which necessitates absence must fill out the Participation Tracking Form on eValue **AND** contact the clinical supervisors/preceptor **and** core site coordinator **and** their ACOM Regional Coordinator.

## Tips on Making the Most of Each Clerkship Rotation

*(taken in part from the American Academy of Family Physicians Division of Medical Resources)*

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**Be familiar with and able to apply the core content of the clerkship rotation specialty.** Before your clerkship rotation begins, take time to review one or two relevant textbooks and other primary resources and go over any notes you may have. Be sure to draw on this body of knowledge as you demonstrate your diagnostic skills.

**Read as much as you can about the illnesses of the patients you are seeing.** Monitor your patients' charts daily. Research patient problems using journals, reference manuals, and internet sources, such as UpToDate. Ask your preceptor to recommend resources to enhance your understanding.

**Be a team player.** Get to know your patient care team – who they are, what they do, and how your role interacts with theirs. True standouts evenly share responsibility, are well-liked, and communicate effectively with other team members.

**Dress professionally, be on time, and be enthusiastic.** Attitude and appearance count. Take extra care on your clerkship rotations to look your best. Unless you know that scrubs are acceptable attire, do not wear them. Make sure your style of dress is appropriate for the setting. Showing up early or staying late can also score you points – as long as you are being productive and learning in the process (not just "hanging out"). Finally, in everything you do, show enthusiasm.

**Establish a learning agreement with your preceptor at the beginning of each clerkship rotation.** This exercise affords you and the supervising physician a touchstone for you to learn the clinical decision-making and procedural skills you want from the clerkship rotation. Agreeing on goals and understanding how information will be taught ensures that your clinical experience is valuable.

**Keep your eValue competency portfolio up to date for each clerkship rotation.** Record such things as the number of patients you see every day, the types of illnesses your patients have, any of your medical "firsts" (i.e., the first physical you perform, the first baby you deliver, etc.), and any expectations you have for the clerkship rotation before you begin. This will help you remember your experiences and process your feelings. When it is time to choose a specialty, your competency portfolio will help you reconcile your experiences with your expectations and goals.

**Learn to capitalize on learning moments by asking enough questions to satisfy your hunger for knowledge without monopolizing precious time.** Although you don't want to stifle an important question, it is necessary to make the most of limited time with preceptors. Pay attention to other health professionals, as well as other students, and learn from all of them.

**Maximize time spent waiting during clerkship rotations.** Since you never know when you will have extra time, don't go anywhere without something to read. Keeping journal articles or reference materials with you will afford you the opportunity to study, read up on a patient, or prepare for your next set of rounds.

**During down time, resist the urge to engage in excessive non-clerkship rotation tasks, such as texting, web surfing, or personal phone calls.** Your preceptor may interpret this as boredom, distraction or disinterest. Instead, check out online resources, complete clerkship rotation assignments, read about your patients, or prepare for other didactics or the COMAT examination.

## Clerkship Rotation Core Site List *(current as of June 2022)*

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### NORTHERN REGION

CITY	HOSPITAL
Boaz, AL	Marshall Medical Center South
Cullman, AL	Cullman Regional Medical Center
Decatur, AL	Decatur Morgan Hospital
Florence, AL	North Alabama Medical Center
Gadsden, AL	Gadsden Regional Medical Center
Guntersville, AL	Marshall Medical Center North
Huntsville, AL	Crestwood Medical Center
Sheffield, AL	Helen Keller Hospital

### CENTRAL REGION

CITY	HOSPITAL
Alexander City, AL	Russell Medical
Anniston, AL	Regional Medical Center
Birmingham, AL	St. Vincent's East
Dothan, AL	Southeast Health
Montgomery, AL	Jackson Hospital
Selma, AL	Vaughan Regional Medical Center
Sylacauga, AL	Coosa Valley Medical Center

### SOUTHERN REGION

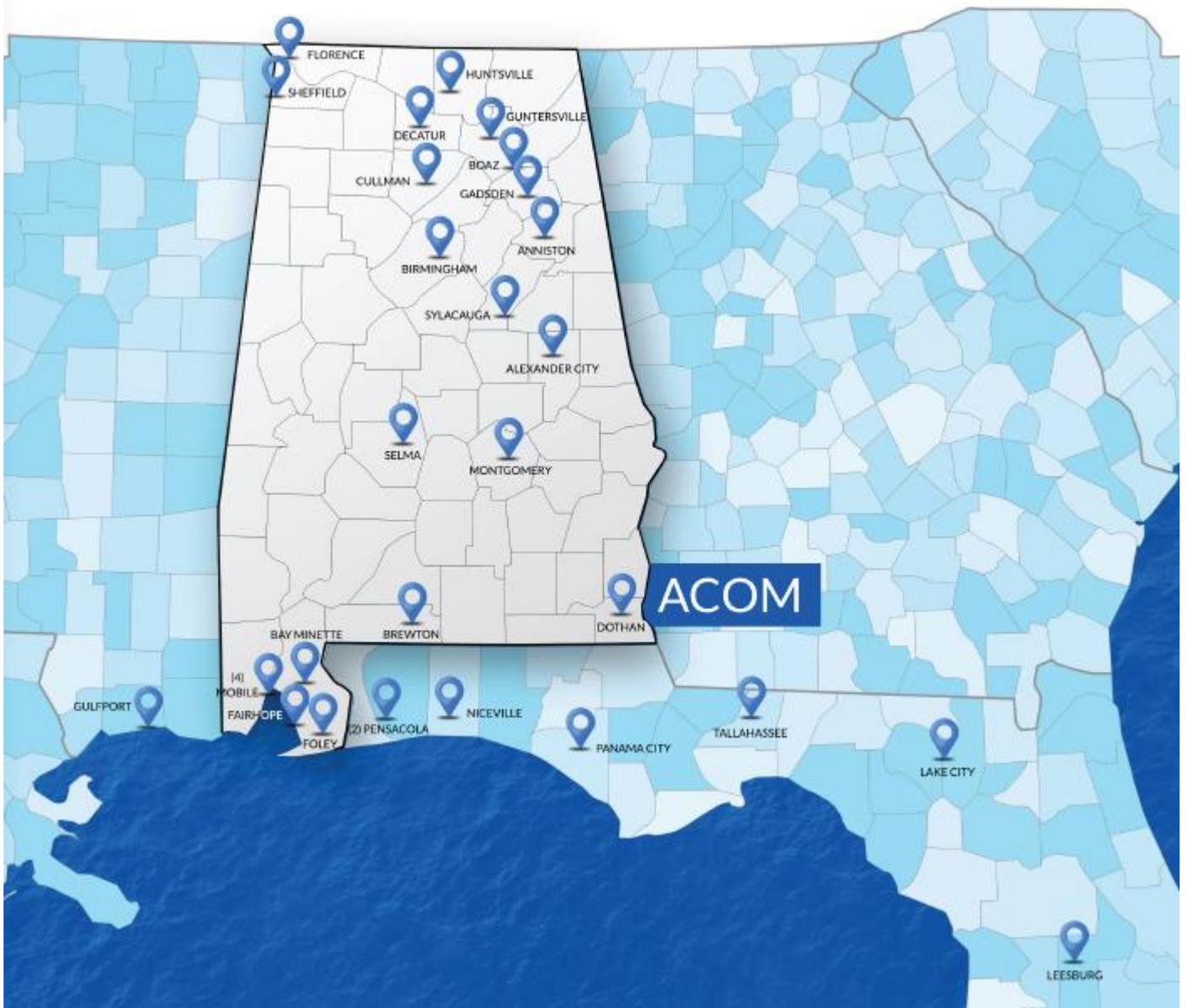
CITY	HOSPITAL
Bay Minette, AL	North Baldwin Infirmary
Brewton, AL	D.W. McMillan Memorial Hospital
Fairhope, AL	Thomas Hospital
Foley, AL	South Baldwin Regional Medical Center
Gulfport, MS	Memorial Hospital and Physician Clinics
Mobile, AL	AltaPointe
Mobile, AL	Franklin Primary Healthcare Centers
Mobile, AL	Mobile Infirmary
Mobile, AL	Springhill Medical Center
Pensacola, FL	Santa Rosa Medical Center
Pensacola, FL	West Florida Hospital

### SOUTHEASTERN REGION

CITY	HOSPITAL
Lake City, FL	Lake City Medical Center
Leesburg, FL	UF Health Leesburg Hospital
Niceville, FL	Twin Cities Hospital
Panama City, FL	Gulf Coast Regional Medical Center
Tallahassee, FL	Capital Regional Medical Center

# Clerkship Rotation Core Site Map

(current as of June 2022)



## CORE PROBLEMS LIST

**Core Problems/Diagnoses:** Students should diagnose, treat, and record the following health concerns in their eValue portfolios.

1. Abdominal Distension
  - 1.1. Bowel Distention
  - 1.2. Ascites
  - 1.3. Other Causes
2. Abdominal Pain/Mass
  - 2.1. Acute – Diffuse
  - 2.2. Acute – Localized
  - 2.3. Acute -- Pediatric
  - 2.4. Chronic – Constant
  - 2.5. Chronic – Crampy/Fleeting
  - 2.6. Chronic – Post-Prandial
3. Abnormal ECG
4. Abnormal Genital Bleeding
5. Abnormal Serum Lipid Profile
  - 5.1. Combined and Decreased HDL
  - 5.2. Increased LDL and Increased Triglycerides
6. Abnormal Serum TSH
7. Acid Base Disorders
8. Apparent Life Threatening Event (Pediatric)
  - 8.1. Acute Illness
  - 8.2. Witnessed Choking Spell
  - 8.3. Injury
  - 8.4. Apnea
9. Adrenal Mass
  - 9.1. Benign
  - 9.2. Malignant
10. Allergic Reactions
11. Altered Level of Consciousness
  - 11.1. Overall Approach to Altered Level of Consciousness
  - 11.2. GCS  $\leq$  7
12. Anemia/Pallor
  - 12.1. Overall Approach to Anemia
  - 12.2. Anemia with Elevated MCV
  - 12.3. Anemia with Normal MCV
  - 12.4. Anemia with Low MCV
13. Anorectal Pain
14. Autoimmune Diseases
  - 14.1. Infectious
  - 14.2. Congenital
15. Back Pain
16. Benign Prostatic Hypertrophy
17. Bleeding/Bruising
  - 17.1. Coagulation Proteins
  - 17.2. Platelets and Vascular System
18. Bone Lesion
19. Breast Discharge
20. Breast Disorders
  - 20.1. Infection
  - 20.2. Mass
  - 20.3. Gynecomastia
    - 20.3.1. Increased Estrogen and Increased HCG
    - 20.3.2. Increased LH and Decreased Testosterone
21. Burns
22. Chest Discomfort
  - 22.1. Cardiovascular (Angina Pectoris)
  - 22.2. Pulmonary/Mediastinal
    - 22.2.1. Pulmonary Embolus
    - 22.2.2. Pulmonary Hypertension
    - 22.2.3. Pleural Effusion
  - 22.3. Other
23. Chest Trauma
24. Cognitive Impairment
  - 24.1. Dementias
25. Congenital Abnormalities/Deformities/Limbs
26. Cough
  - 26.1. Chronic (Adult)
  - 26.2. Dyspnea and Fever
  - 26.3. Acute (Pediatric)
  - 26.4. Chronic (Pediatric)
27. Deep Vein Thrombosis
28. Dialysis
29. Diarrhea/Constipation
  - 29.1. Acute Diarrhea (Adult)
  - 29.2. Chronic Diarrhea (Adult): Small Bowel
  - 29.3. Chronic Diarrhea (Adult): Steatorrhea and Large Bowel
  - 29.4. Diarrhea (Pediatric)
  - 29.5. Constipation (Adult): Altered Bowel Function and Idiopathic
  - 29.6. Constipation (Adult): Secondary Causes
  - 29.7. Constipation (Pediatric)
  - 29.8. Stool Incontinence
30. Difficulty Swallowing (Deglutition Disorders)

- 31. Dizziness/Vertigo
- 32. Domestic Violence
- 33. Dyspnea/Breathlessness
  - 33.1. Acute
  - 33.2. Chronic – Cardiac
  - 33.3. Chronic – Pulmonary/Other
  - 33.4. Pediatric
- 34. Ear Pain, Hearing Loss, Deafness
  - 34.1. Hearing Loss
    - 34.1.1. Conductive
    - 34.1.2. Sensorineural
  - 34.2. Otalgia
  - 34.3. Tinnitus
    - 34.3.1. Objective
    - 34.3.2. Subjective
- 35. Electrolyte Disorders
  - 35.1. Hypercalcemia
    - 35.1.1. Low PTH
    - 35.1.2. Normal/High PTH
  - 35.2. Hypocalcemia
    - 35.2.1. High Phosphate
    - 35.2.2. Low Phosphate
    - 35.2.3. High/Low PTH
  - 35.3. Hyperkalemia
    - 35.3.1. Intracellular Shift
    - 35.3.2. Reduced Excretion
  - 35.4. Hypokalemia
  - 35.5. Hyponatremia
  - 35.6. Hyponatremia
  - 35.7. Hyperphosphatemia
  - 35.8. Hypophosphatemia
- 36. Elevated Liver Enzymes
- 37. End-of-Life/Palliative Care
- 38. Excessive Daytime Sleepiness
- 39. Eyes/Vision
  - 39.1. Acute Vision Loss
    - 39.1.1. Bilateral
    - 39.1.2. Unilateral
  - 39.2. Chronic Vision Loss
    - 39.2.1. Anatomic
  - 39.3. Amblyopia
  - 39.4. Diplopia
  - 39.5. Pupillary Abnormalities
    - 39.5.1. Isocoria
    - 39.5.2. Anisocoria
  - 39.6. Red Eye
    - 39.6.1. Atraumatic
    - 39.6.2. Traumatic
  - 39.7. Strabismus
    - 39.7.1. Ocular Misalignment
  - 39.8. Neuro-Ophthalmology
    - 39.8.1. Visual Field Defects
- 40. Falls in the Elderly
- 41. Fatigue
- 42. Fever/Chills
  - 42.1. Acute Fever
  - 42.2. Fever of Unknown Origin/Chronic Fever
- 43. Fractures
  - 43.1. Pathologic/Fragility Fractures
  - 43.2. Fracture Healing
  - 43.3. Pediatric Fractures
    - 43.3.1. Salter Harris Physeal Injury Classification System
- 44. Gait Disturbance
- 45. Gastrointestinal Bleeding
  - 45.1. Upper Gastrointestinal Bleed (Hematemesis/Melena)
  - 45.2. Lower Gastrointestinal Bleed
- 46. Genetic Disorders
- 47. Genital Lesion
- 48. Hair Loss (Alopecia)
  - 48.1. Diffuse
  - 48.2. Localized (focal)
- 49. Headache
  - 49.1. Primary
  - 49.2. Secondary with Red Flag Symptoms
  - 49.3. Secondary without Red Flag Symptoms
- 50. Heart Failure
  - 50.1. Left-Sided
  - 50.2. Right-Sided
- 51. Hematuria
- 52. Hemiplegia
  - 52.1. Upper Motor Neuron Weakness
- 53. Hemoptysis
- 54. Hepatomegaly
- 55. Hirsutism
  - 55.1. Hirsutism and Virilization
    - 55.1.1. Androgen Excess
    - 55.1.2. Hypertrichosis
- 56. Hyperglycemia/Diabetes Mellitus
- 57. Hypertension
  - 57.1. Pulmonary
  - 57.2. In Pregnancy
- 58. Hyperthyroidism
- 59. Hypoglycemia
- 60. Hypothyroidism
- 61. Hypoxemia
- 62. Immunocompromised/Immunodeficiency
  - 62.1. Fever in the Immunocompromised Host

- 63. Infertility and Contraception
  - 63.1. Female
  - 63.2. Male
- 64. Jaundice
  - 64.1. Adult
  - 64.2. Infant and Neonatal
- 65. Joint Pain
  - 65.1. Acute Joint Pain – Vitamin CD
  - 65.2. Chronic/Degenerative Change
  - 65.3. Infectious Joint Pain
  - 65.4. Inflammatory Joint Pain
  - 65.5. Vascular Joint Pain
- 66. Kidney Disease/Injury
  - 66.1. Chronic
  - 66.2. Acute
- 67. Leukocytosis/Leukopenia
- 68. Liver Mass
- 69. Lung Nodule
- 70. Lymphadenopathy
  - 70.1. Diffuse
  - 70.2. Localized
- 71. Myofascial Pain Syndrome
  - 71.1. Somatic Dysfunction
  - 71.2. Fibromyalgia
  - 71.3. Other
- 72. Mediastinal Mass
- 73. Menorrhagia
  - 73.1. Amenorrhagia
    - 73.1.1. Primary
    - 73.1.2. Secondary
  - 73.2. Dysmenorrhagia
  - 73.3. Altered Menses
  - 73.4. Abnormal Vaginal Bleeding
- 74. Metabolic Acidosis
  - 74.1. Elevated Anion Gap
  - 74.2. Normal Anion Gap
- 75. Metabolic Alkalosis
- 76. Mood/Neurobehavioral Disorders/Anxiety/Depression
  - 76.1. Anxiety Disorders
    - 76.1.1. Associated with Panic
    - 76.1.2. Recurrent Anxious Thoughts
  - 76.2. Trauma- and Stressor-Related Disorders
  - 76.3. Obsessive-Compulsive and Related Disorders
  - 76.4. Personality Disorders
  - 76.5. Elevated Mood
  - 76.6. Depressed Mood
  - 76.7. Psychotic Disorders
  - 76.8. Somatoform Disorders
- 76.9. Pediatric Mood and Anxiety Disorders (ADHD, autism, learning disorders)
- 77. Mouth Disorders
  - 77.1. Adult and Elderly
  - 77.2. Mucous Membrane Disorder (Oral Cavity)
  - 77.3. Pediatric
- 78. Movement Disorders
  - 78.1. Hyperkinetic
  - 78.2. Tremor
  - 78.3. Bradykinetic
- 79. Murmur/Abnormal Heart Sounds
  - 79.1. Abnormal Rhythm
    - 79.1.1. Abnormal Rhythm 1 (Types of Arrhythmia)
    - 79.1.2. Abnormal Rhythm 2 (Causes of Arrhythmia)
  - 79.2. Diastolic Murmur
  - 79.3. Systolic Murmur
    - 79.3.1. Benign and Stenotic
    - 79.3.2. Valvular and Other
- 80. Nail Disorders
  - 80.1. Primary Dermatologic Disease
  - 80.2. Systemic Disease
    - 80.2.1. Clubbing
- 81. Nausea and Vomiting
  - 81.1. Gastrointestinal Disease (Adult and Pediatric)
  - 81.2. Other Systemic Disease (Adult and Pediatric)
- 82. Neck Mass
- 83. Nephrolithiasis
- 84. Neutrophilia
- 85. Neutropenia
  - 85.1. Decreased Neutrophils Only
  - 85.2. Bicytopenia and Pancytopenia
- 86. Numbness/Tingling/Paresthesia/Painful Limb
- 87. Osteoporosis
- 88. Ovarian Mass
- 89. Pap Abnormality
- 90. Pelvic Mass/Pain
  - 90.1. Acute
  - 90.2. Chronic
- 91. Pelvic Organ Prolapse
- 92. Peripheral Weakness
  - 92.1. Weakness
  - 92.2. Sensory Changes
    - 92.2.1. Objective Lower Motor Neuron Weakness

- 93. Pigmentation Disorders
  - 93.1. Hyperpigmentation
  - 93.2. Hypopigmentation
- 94. Pleural Effusion
- 95. Polycythemia
- 96. Pregnancy/Delivery/Newborns
  - 96.1. Antenatal Care
  - 96.2. Bleeding in Pregnancy
    - 96.2.1. < 20 weeks
    - 96.2.2. 2<sup>nd</sup> and 3<sup>rd</sup> Trimesters
  - 96.3. Growth Discrepancy
    - 96.3.1. Small for Gestational Age/Intrauterine Growth Restriction
    - 96.3.2. Large for Gestational Age
  - 96.4. Intrapartum Factors that may affect Fetal Oxygenation
  - 96.5. Intrapartum Abnormal Fetal Heart Rate Tracing
    - 96.5.1. Variability and Decelerations
    - 96.5.2. Baseline
  - 96.6. Postpartum Hemorrhage
  - 96.7. Recurrent Pregnancy Loss
  - 96.8. Dermatoses in Pregnancy
    - 96.8.1. Physiologic Changes
    - 96.8.2. Specific Skin Conditions
  - 96.9. Preterm Infant Complications
  - 96.10. Failure to Thrive
    - 96.10.1. Adequate Calorie Consumption
    - 96.10.2. Inadequate Calorie Consumption
  - 96.11. Hypotonic Infant (Floppy Newborn)
  - 96.12. Depressed/Lethargic Newborn
  - 96.13. Cyanosis in the Newborn
    - 96.13.1. Respiratory
    - 96.13.2. Non-Respiratory
  - 96.14. Respiratory Distress in the Newborn
  - 96.15. Sudden Unexpected Death in Infancy (SUDI)
- 97. Preventive Health Care
  - 97.1. Vaccinations
  - 97.2. Cancer Screening
  - 97.3. STI Screening
- 98. Prolonged PT (INR)
  - 98.1. Prolonged PTT
  - 98.2. Normal PTT
- 99. Prolonged PTT, Normal PT (INR)
  - 99.1. Bleeding Tendency
  - 99.2. No Bleeding Tendency
- 100. Proteinuria
- 101. Pruritus
  - 101.1. Primary Skin Lesion
  - 101.2. No Primary Skin Lesion
- 102. Pulmonary Disorders
  - 102.1. Spirometry
- 103. Pulmonary Embolus
- 104. Pulse Abnormalities
- 105. Renal Cancer
- 106. Renal Failure
  - 106.1. Acute
  - 106.2. Chronic
- 107. Renal Mass
  - 107.1. Solid
  - 107.2. Cystic
- 108. Respiratory Sounds
  - 108.1. Noisy Breathing
    - 108.1.1. Wheezing (Pediatric)
    - 108.1.2. Stridor (Pediatric)
- 109. Scrotal Mass/Pain
- 110. Seizures/Spells
  - 110.1. Epileptic Seizure
  - 110.2. Secondary Organic Seizure
  - 110.3. Other
  - 110.4. Pediatric Seizure
    - 110.4.1. Unprovoked
    - 110.4.2. Provoked
    - 110.4.3. Spells
- 111. Sellar/Pituitary Mass
- 112. Sexual Dysfunction
  - 112.1. Erectile Dysfunction
- 113. Shock/Hypotension
- 114. Skin Lesions
  - 114.1. Primary Skin Lesion
  - 114.2. Secondary Skin Lesion
- 115. Skin Rash
  - 115.1. Eczematous
  - 115.2. Papulosquamous
  - 115.3. Pustular
  - 115.4. Reactive
  - 115.5. Vesiculobullous
- 116. Skin Ulcer by Etiology
  - 116.1. Physical
  - 116.2. Vascular
  - 116.3. Hematologic
  - 116.4. Neoplastic
  - 116.5. Neurological
  - 116.6. Infectious
  - 116.7. Metabolic
  - 116.8. Drugs
- 117. Skin Ulcer by Location
  - 117.1. Genitals
  - 117.2. Head and Neck

- |   |   |
|---|---|
| 117.3. Lower Legs/Feet                                    | 123.1. Intracerebral Hemorrhage                   |
| 117.4. Oral Ulcers  | 123.2. Ischemia                                   |
| 117.5. Trunk/Sacral Region                                | 123.3. Subarachnoid Hemorrhage                    |
| 118. Smell Dysfunction                                    | 124. Substance Abuse/Drug<br>Addiction/Withdrawal |
| 119. Soft Tissue  | 125. Syncope                                      |
| 119.1. Septic   | 126. Thrombocytopenia                             |
| 119.2. Aseptic  | 127. Thrombocytosis                               |
| 120. Sore Throat/Rhinorrhea/Sinus and Nasal<br>Congestion | 128. Tumor  |
| 121. Speech/Language Abnormalities                        | 128.1. Metastatic                                 |
| 121.1. Dysarthria   | 128.2. Primary                                    |
| 121.2. Aphasia  | 129. Urinary                                      |
| 121.2.1. Fluent   | 129.1. Urinary Incontinence                       |
| 121.2.2. Non-Fluent                                       | 129.2. Increased Urinary Frequency                |
| 121.3. Hoarseness   | 129.3. Dysuria                                    |
| 121.3.1. Acute  | 129.4. Urinary Tract Obstruction                  |
| 121.3.2. Non-Acute  | 129.5. Enuresis (Pediatric)                       |
| 122. Stature  | 130. Vaginal Discharge                            |
| 122.1. Short  | 131. Vascular Lesions                             |
| 122.2. Tall   | 132. Weight Gain/Loss                             |
| 123. Stroke   |   |

**The Portfolio Process:** Each of the health concerns listed above has several core entrustable professional activities (EPAs) that students must self-check. The more problems/diagnoses logged using EPAs, the better a student's MSPE will be.

1. Gather a history and perform a physical examination
2. Develop a prioritized differential diagnosis and select a working diagnosis following a patient encounter
3. Recommend and interpret common diagnostic and screening tests
4. Enter and discuss patient orders/prescriptions
5. Provide documentation of a clinical encounter in written or electronic format
6. Provide an oral presentation/summary of a patient encounter
7. Form clinical questions and retrieve evidence to advance patient care
8. Give or receive a patient handover to transition care responsibility to another health care provider or team
9. Participate as a contributing and integrated member of an interprofessional team
10. Recognize a patient requiring urgent or emergent care, initiate evaluation and treatment, and seek help
11. Obtain informed consent for tests and/or procedures
12. Perform general procedures of a physician
13. Identify system failures and contribute to a culture of safety and improvement

**Procedures:** Students should record procedures into their E\*Value portfolios.

- Airway Management (specify type in notes section, i.e. nasotracheal, oropharyngeal, etc.)
- APGAR and Dubowitz/Ballard Assessment
- Arterial puncture – for blood gases (ABG)
- Arthrocentesis
- Breast Exam

- Caesarean Section
- Calculate medication dosage by weight and write a prescription; signed by physician
- Cardiac ultrasound and Doppler studies
- Casting/Splinting, Elbow
- Casting/Splinting, Knee/Ankle
- Casting/Splinting, Lower Extremity
- Casting/Splinting, Other (Specify in Notes Section)
- Casting/Splinting, Shoulder
- Casting/Splinting, Thumb Spica
- Casting/Splinting, Upper Extremity
- Casting/Splinting, Wrist/Hand
- Circumcision
- Colposcopy
- Digital Rectal Exam
- Ear, Evaluation and Treatment – Cerumen Removal
- Ear, Evaluation and Treatment, EAC foreign body removal/wick insertion
- Echocardiography
- EKG Interpretation
- Electroencephalogram
- Endoscopy (specify type in notes section)
- Episiotomy and repair
- Eye, Evaluation and Treatment – Evaluation of Corneal Abrasion
- Eye, Evaluation and Treatment – Evaluation of foreign body with lid eversion
- Eye, Evaluation and Treatment – slip lamp use
- Eye, Evaluation and Treatment – Tonometry
- Eye, Evaluation and Treatment of conjunctival foreign body
- Eye, Evaluation and Treatment of corneal foreign body
- Female Pelvic Exam, Bimanual Exam (enter specific pathology found in notes section)
- Female Pelvic Exam, PAP Smear (enter specific pathology found in notes section)
- H&P Prevention / Health Maintenance
- Hernia examination
- History and Physical – Complete/Comprehensive
- Injection – Sub-Q/Intradermal, IM (specify in notes section)
- Intravascular Access, Central Line (specify location in notes section)
- Intravascular Access, Central Line/Subclavian
- Intravascular Access, Intraosseous
- Intravascular Access, Peripheral
- Lumbar Puncture
- Male Genital Exam
- Mental Status Exam
- Mouth/Dental Evaluation and Treatment – regional Dental Block
- Mouth/Dental Evaluation and Treatment – Treatment of Aphthous Ulcers
- Mouth/Dental Evaluation and Treatment – treatment of Dry Socket S/P Extraction
- Nasogastric Tube Placement
- Newborn Management, Uncomplicated Delivery
- Newborn Management – Newborn Resuscitation
- Nose, Evaluation and Treatment – foreign body removal
- Nose, Evaluation and Treatment, Epistaxis Control (specify method used in notes section)
- Office Encounter, Chronic Complex Care
- Office Encounter, Routine Acute Problem
- Osteopathic Manipulation Treatment (OMT)
- Osteopathic Structural Exam

- Other Procedures (specify in notes section)
- Paracentesis
- Perform OPP autonomics
- Perform OPP lymphatics
- Peritoneal Lavage, Diagnostic
- Pre-Natal Care
- Provide Health Promotion / Disease Prevention
- Psychiatric Assessment (describe in notes section)
- Pulmonary Function Tests
- Remove sutures or staples
- Resuscitation Team Member (specify role in notes section, i.e. Leader, Compressor, etc.)
- Skin Lesion Excision
- Stress Testing
- Surgical Assist (specify type in notes section)
- Suturing, extremities (indicate type of anesthesia in notes section)
- Suturing, Face (indicate type of anesthesia in notes section)
- Suturing, Hand/digits (specify type of anesthesia in notes section)
- Thoracentesis
- Thoracostomy, Tube or Needle (specify in notes section)
- Ultrasound, bedside – FAST (Focused Assessment with Sonography for Trauma)
- Ultrasound, Other than FAST (specify in comments section)
- Urinalysis by Dipstick
- Urinary Catheter Insertion
- Vaginal Delivery – Spontaneous / Induced / Vacuum Extraction / Forceps (specify in notes section)
- Vaginal Delivery, Spontaneous
- Venipuncture
- Vision Screening
- Well Child Development Exam
- X-Ray Studies (specify type in notes section, i.e. chest, abdominal series, etc.)

## ACOM GUIDELINES FOR STUDENT PARTICIPATION IN THE CLINICAL SETTING

**These Medical Student Patient Care Duties represent minimum guidelines to be considered by a policy-making body at your health care organization. If your hospital policy is more restrictive, then ACOM students must adhere to your policy as you direct. To the extent the recommendations that follow are not applicable to or appropriate for your health care, please modify these recommended guidelines accordingly.**

### Medical Student Patient Care Duties permitted and prohibited

#### I. Definitions:

Direct Physician Supervision:	The physician must be present in their office suite or in the hospital department and be immediately available to furnish assistance and direction throughout the performance of the function/procedure. It does not mean that the physician must be present in the room when the function/procedure is performed.
Personal Physician Supervision:	The physician must be in attendance in the room from beginning to end, without interruption, during the performance of the function/procedure.
Limited Physical Exam:	This includes such components as the head/neck, skin, respiratory , cardiac, abdominal, neurologic and musculoskeletal exams; this specifically excludes genitourinary, breast and rectal exams.

#### II. Scope of Duties Permitted:

Medical Students will be supervised by ACOM credentialed attending physicians while on ACOM clerkship rotations. Each student's essential **learning task** while on clerkship rotations is to improve the ability to do the following:

- Perform an accurate medical **history and physical** exam based on the presenting complaint and appropriate to the clinical setting.
- Formulate a **differential diagnosis** appropriate to the patient and the clinical setting.
- Order and accurately interpret tests and procedures in order to narrow the differential diagnosis to a **working diagnosis**.
- Accurately describe or perform **procedures** to diagnose and treat the patient's problem.
- Craft a **treatment** plan appropriate to the patient's problems and situation.
- Work with patients and members of the healthcare team **ethically and professionally**.

By student year, the scope of duties medical students may perform in order to complete the above learning tasks are:

**First Year Students:**

First Year Students are permitted to perform the following functions only:

- Observation and follow only
- History taking under Personal Physician Supervision

**Second Year Students:**

Second Year Students are permitted to perform the following functions only:

- All functions permitted for First Year Students, as stated above
- History taking under direct physician supervision
- Limited Physical Examination under personal physician supervision until physician determines competency, after which student may perform Limited Physical Examination under direct physician supervision;

**Third and Fourth Year Students:**

Third and Fourth Year students are permitted to perform the following functions only:

- All functions permitted for First and Second Year Students, as stated above
- Under direct physician supervision, may 'round' on patients, to include
  - Gathering lab, radiology, nursing and other information/results
  - Obtaining history
  - Performing Limited Physical Exam
  - Developing interim assessments and recommendations
- For genitourinary, breast or rectal exam, student may perform exam under personal physician supervision, if the supervising physician determines the student's readiness and a gender-appropriate chaperone is present, as indicated.
- Under direct physician supervision, may write student notes regarding E/M services or procedures:
  - If such student notes are to be placed in the patient chart, they must be clearly labeled as student notes and co-signed by the supervising physician within 48 hours; these student notes are just that – student notes. They are not the progress note for the patient and never stand alone as such.
  - If such notes are strictly for the educational experience of the student and will not be placed in the chart, they must not use patient identifiers and should be shredded as consistent with hospital HIPAA policies.
- May write orders on the chart which must be immediately reviewed and countersigned by supervising physician before any action is taken based on those orders.
- The following procedures may be performed by 3<sup>rd</sup> or 4<sup>th</sup> year medical students only if (a) the supervising physician determines the student's readiness to start to perform the procedure under personal supervision, and (b) the supervising physician has the appropriate privileges, competency and teaching proficiency to perform and educate medical students in their performance, and (c) upon obtaining appropriate patient consent.
  - The following procedures must be performed under the personal supervision of the physician until the physician determines the student is competent to perform the procedure under direct physician supervision:

- Perform insertion of IVs or draw blood – stick attempts limited to two (2) per patient
  - Ocular Exam with Slit-Lamp
  - Wart treatment
  - Insertion of Foley catheter
- The following procedures must always be performed by the student under personal physician supervision:
- Airway Management (i.e. nasotracheal, oropharyngeal, etc.)
  - APGAR and Dubowitz/Ballard Assessment
  - Arterial puncture – for blood gases (ABG)
  - Arthrocentesis
  - Breast Exam
  - Cardiac ultrasound and Doppler studies
  - Casting/Splinting, Elbow
  - Casting/Splinting, Knee/Ankle
  - Casting/Splinting, Lower Extremity
  - Casting/Splinting, Other
  - Casting/Splinting, Shoulder
  - Casting/Splinting, Thumb Spica
  - Casting/Splinting, Upper Extremity
  - Casting/Splinting, Wrist/Hand
  - Colposcopy
  - Ear, Evaluation and Treatment – Cerumen Removal
  - Ear, Evaluation and Treatment, EAC foreign body removal/wick insertion
  - Echocardiography
  - EKG Interpretation
  - Electroencephalogram
  - Episiotomy and repair
  - Eye, Evaluation and Treatment – Evaluation of Corneal Abrasion
  - Eye, Evaluation and Treatment – Evaluation of foreign body with lid eversion
  - Eye, Evaluation and Treatment – Tonometry
  - Eye, Evaluation and Treatment of conjunctival foreign body
  - Intravascular Access, Peripheral
  - Intravascular Access, Central
  - Lumbar Puncture
  - Mouth/Dental Evaluation and Treatment – Treatment of Aphthous Ulcers
  - Nasogastric Tube Placement
  - Newborn Management, Uncomplicated Delivery
  - Newborn Management – Newborn Resuscitation
  - Nose, Evaluation and Treatment – foreign body removal
  - Nose, Evaluation and Treatment, Epistaxis Control
  - Osteopathic Manipulation Treatment (OMT)
  - Provide Health Promotion / Disease Prevention
  - Psychiatric Assessment
  - Pulmonary Function Tests
  - Remove sutures or staples
  - Resuscitation Team Member (specify role i.e. Leader, Compressor, etc.)
  - Skin Lesion Excision
  - Surgical Assist
  - Suturing, extremities (indicate type of anesthesia)
  - Suturing, Face (indicate type of anesthesia)

- Suturing, Hand/digits (indicate type of anesthesia)
- Ultrasound, bedside – FAST (Focused Assessment with Sonography for Trauma)
- Ultrasound, Other than FAST
- Urinalysis by Dipstick
- Urinary Catheter Insertion
- Vaginal Delivery, Spontaneous
- Well Child Development Exam
- X-Ray Studies (i.e. chest, abdominal series, etc.)

The above notwithstanding, duties and activities of students must not conflict with hospital policies.

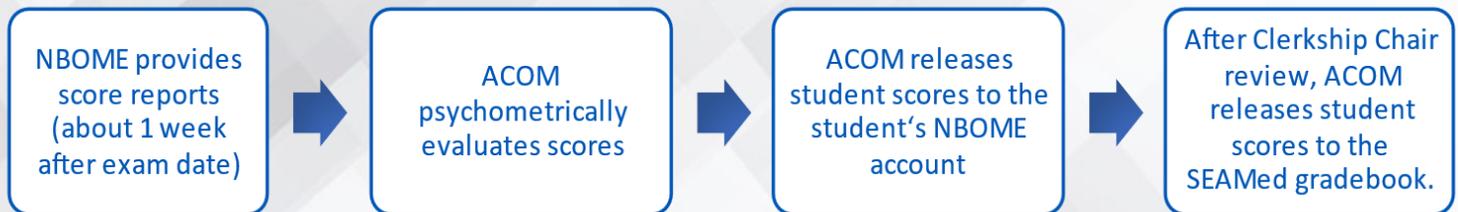
### **III. Scope of Duties Prohibited**

Medical Students are strictly prohibited from performing any and all functions that are not specifically permitted. Additionally, medical students are specifically prohibited from performing the following:

- Give verbal or telephone orders.
- Write orders regarding end-of-life, such as DNR

## COMAT SCORE RELEASE PROCESS

# COMAT Score Release Process



### Interpreting Scores

- Students can use the COMAT Clinical Subjects / Percentile Scores table to locate their standard score and the corresponding percentile, which will allow them to see the relative rank of their COMAT performance compared to others who took the examination nationally.

<https://www.nbome.org/exams -assessments/comat/clinicalsubjects/scoretranscripts/comatpercentile-score-conversion-table/>

- If a student's standard score is 115 with a 93 percentile, that means the student scored better than 93% of all testtakers nationally. It also means that 7% of national testtakers scored the same or better than the student.

**WHAT TO BRING ON AUDITION ROTATIONS**

## What to Bring on Out-of-Network Clerkship Rotations

- It is the sole responsibility of the student to obtain and submit their completed **Learning Agreement** from the preceptor on the first day of the rotation.
- Students must also bring the appropriate elective **syllabus** with them to their out of network rotation
- It is also the students responsibility to obtain and submit to Priscilla Mixon the completed **Preceptor Evaluation** from their preceptor before they leave that rotation

## SCHEDULING AUDITION ROTATIONS & APPLYING FOR RESIDENCY: OMS-III DETAILED TIMELINE

<p>June-July July/ August August</p>	<ul style="list-style-type: none"> <li>• Take COMLEX Level 1</li> <li>• Begin CORE Rotations</li> <li>• Begin researching residency programs and become familiar with residency and audition rotation application dates</li> </ul>
<p>October - March</p>	<ul style="list-style-type: none"> <li>• Continue working on Curriculum Vitae (CV)</li> <li>• Evaluate competitiveness – compare board scores to discipline minimums, look at program requirements, etc.</li> </ul>
<p>December - April</p>	<ul style="list-style-type: none"> <li>• Write Personal Statement(s)</li> <li>• Visit the <a href="#">ERAS Website</a> to get familiarized with the timeline, homepage, and other important information</li> </ul>
<p>December 31</p>	<ul style="list-style-type: none"> <li>• <b>Deadline*</b> for students to ensure sure all evaluations from Fall Semester have been submitted</li> </ul>
<p>January</p>	<ul style="list-style-type: none"> <li>• Continue researching programs regarding audition rotation availability and important dates</li> <li>• MyERAS tokens are issued with access to the Letters of Recommendation function ONLY</li> <li>• Begin requesting Letters of Recommendation (LoRs) and inform authors of the <a href="#">LoR process</a> for ERAS</li> </ul>
<p>January - February March – December March</p>	<ul style="list-style-type: none"> <li>• VSLO registration invitations sent</li> <li>• Season opens for COMLEX Level 2-PE (if reinstated by NBOME)</li> <li>• Begin applying for VSLO away audition rotations (if applicable)</li> </ul>
<p>April-June May</p>	<ul style="list-style-type: none"> <li>• Put final touches on CV and Personal Statement</li> <li>• Submit MSPE Noteworthy Characteristics Form and Residency Documents Release Form</li> </ul>
<p>June</p>	<ul style="list-style-type: none"> <li>• All ERAS functions become available. Students may begin working on their applications.</li> </ul>
<p>June/July July July 1</p>	<ul style="list-style-type: none"> <li>• Take COMLEX Level 2-CE</li> <li>• Audition Rotation season begins</li> <li>• <b>Deadline**</b> for students to ensure sure all evaluations from Spring Semester has been submitted</li> <li>• <b>Deadline**</b> for students to have observed patient clinical encounter (OPCE) evaluations complete and submitted</li> </ul>

\*Failure to meet deadline may prevent student from receiving VSLO access on time.

\*\*Failure to meet deadline may delay the release of the MSPE.

## SCHEDULING AUDITION ROTATIONS & APPLYING FOR RESIDENCY: OMS-IV DETAILED TIMELINE

Early September	<ul style="list-style-type: none"> <li>• Applicants can start applying to residency programs in ERAS</li> </ul>
Mid-September	<ul style="list-style-type: none"> <li>• Students may make an appointment to view their Medical Student Performance Evaluation (MSPE) on campus</li> </ul>
End of September	<ul style="list-style-type: none"> <li>• Residency programs start receiving ERAS applications</li> </ul>
October	<ul style="list-style-type: none"> <li>• Students may make an appointment to view their Medical Student Performance Evaluation (MSPE) on Zoom</li> </ul>
End of November	<ul style="list-style-type: none"> <li>• NRMP Match Applicant Registration Deadline – after this date students will have to pay a \$50 late registration fee</li> </ul>
Mid-December	<ul style="list-style-type: none"> <li>• Military Match results released</li> </ul>
December 31	<ul style="list-style-type: none"> <li>• <b>Deadline*</b> for students to ensure sure all evaluations from Fall Semester have been submitted</li> </ul>
Mid-January	<ul style="list-style-type: none"> <li>• NRMP Match Rank Order List entry opens at 12:00 p.m. ET</li> </ul>
Late February	<ul style="list-style-type: none"> <li>• NRMP Match Late Registration Deadline</li> <li>• Rank Order List Deadline</li> </ul>
March 1	<ul style="list-style-type: none"> <li>• <b>Deadline*</b> for students to ensure evaluations from first 2 rotations from Spring Semester have been submitted</li> </ul>
Mid-March	<ul style="list-style-type: none"> <li>• Match Week</li> <li>• Applicants learn whether or not they matched via email</li> <li>• Supplemental Offer and Acceptance Program (SOAP) begins</li> <li>• Match Day – results of the Match are released to all participants</li> </ul>
Late March	<ul style="list-style-type: none"> <li>• Scramble – Final Opportunity for students who have not matched/placed into a residency program may apply and seek placement into any open position</li> </ul>
April 1	<ul style="list-style-type: none"> <li>• <b>Deadline**</b> for students to ensure evaluation from 3<sup>rd</sup> rotation of Spring Semester has been submitted</li> </ul>
May 1	<ul style="list-style-type: none"> <li>• <b>Deadline**</b> for students to ensure all remaining evaluations from Spring Semester have been submitted</li> </ul>
May	<ul style="list-style-type: none"> <li>• Graduation</li> </ul>

\*Failure to meet deadline may disqualify students from participating in the residency match.

\*\*Failure to meet deadline may prevent students from participating in graduation activities.

## MILESTONES CHECKLIST

### Class of 2024

- Successfully complete OMS-I and OMS-II coursework
- Take and Pass COMLEX Level 1
- Ensure all immunizations and immunity records are up to date and meet ACOM's requirements
- Participate in the Clinical Transition Dean's Hour
- Download and review Clerkship Rotation Manual, Student Handbook, and Academic Catalog
- Complete required CITI Training modules (if not already completed during assigned coursework)
- Attend all required hospital orientations and ensure student credentialing documents are provided to the appropriate person(s) in a timely manner
- Ensure all evaluations from OMS-III Fall semester are submitted **(12/31 deadline)**
  - **Failure to meet deadline may prevent students from receiving VSLO access on time**
- Complete MSPE Noteworthy Characteristics form and Residency Documents Release form
- Register for MyERAS
- Ensure all evaluations from OMS-III Spring semester are submitted **(7/1 deadline)**
  - **Failure to meet deadline may delay the release of student's MSPE**
- Ensure all 5 required Observed Patient Clinical Encounter (OPCE) forms are completed and submitted **(7/1 deadline)**
- Take and Pass COMLEX Level 2-CE
- Take and Pass COMLEX Level 2-PE (if reinstated by NBOME)
- Ensure all required competencies have been entered in eValue competency log (preferably be the end of OMS-III year because this information goes into the MSPE)
  - Continuing to populate the portfolio during the OMS-IV year will lead to a more complete representation of student exposure to the clinical skill sets they will be expected to perform on their first day of residency.
- Apply to residency programs in ERAS
- Register for National Resident Matching Program (NRMP)
- Ensure all evaluations from OMS-IV Fall semester are submitted **(12/31 deadline)**
  - **Failure to meet this deadline may disqualify student from participating in the match**
  - **Failure to meet this deadline may prevent student from participating in graduation activities**
- Submit Rank Order List for residency match
- Ensure all evaluations from the first 2 OMS-IV rotations in Spring semester are submitted **(3/1 deadline)**
  - **Failure to meet this deadline may disqualify student from participating in the match**
- Match to a residency program
- Ensure evaluation for 3<sup>rd</sup> OMS-IV rotation in Spring Semester is submitted **(4/1 deadline)**
  - **Failure to meet this deadline may prevent student from participating in graduation activities**
- Ensure evaluation for all remaining OMS-IV rotations in Spring Semester are submitted **(5/1 deadline)**
  - **Failure to meet this deadline may prevent student from participating in graduation activities**
- Ensure any other requirements are met for GRADUATION

**\*\*Note:** Students should be researching residency programs, updating and revising their CV and Personal Statement, contacting programs for auditions, and applying for auditions continuously during their OMS-III year. Please see the OMS-III and OMS-IV Timeline for more detailed information.

## COURSE COMPLETION CHECKLIST

### Class of 2024

#### OMS-III Clerkship Rotations & Requirements

<input type="checkbox"/> 801P Core Psychiatry	4 Credits
<input type="checkbox"/> 802 Core Internal Medicine I	4 Credits
<input type="checkbox"/> 803 Core Internal Medicine II	4 Credits
<input type="checkbox"/> 804 Core Obstetrics/Gynecology	4 Credits
<input type="checkbox"/> 805 Core General Surgery	4 Credits
<input type="checkbox"/> 806 Core Pediatrics	4 Credits
<input type="checkbox"/> 807 Core Family Medicine	4 Credits
<input type="checkbox"/> 833 Core ACOM Rural Health Clinic	4 Credits
<input type="checkbox"/> 800-Numbered Elective	4 Credits
<input type="checkbox"/> 800-Numbered Elective	4 Credits
<input type="checkbox"/> 800-Numbered Elective	4 Credits
	<b>44 Credits Total</b>

- One core clerkship rotation must be completed at a residency program
- At least two core clerkship rotations must include inpatient experience
- At least one core clerkship rotation must be completed with a DO preceptor (usually ACOM Rural Health Clinic)

#### OMS-IV Clerkship Rotations & Requirements

<input type="checkbox"/> 903 Core Emergency Medicine	4 Credits
<input type="checkbox"/> 908 Core Hospice and Palliative Care*	4 Credits
<input type="checkbox"/> 900-Numbered Elective	4 Credits
<input type="checkbox"/> 900-Numbered Elective	4 Credits
<input type="checkbox"/> 900-Numbered Elective	4 Credits
<input type="checkbox"/> 900-Numbered Elective	4 Credits
<input type="checkbox"/> 900-Numbered Elective	4 Credits
<input type="checkbox"/> 900-Numbered Elective	4 Credits
<input type="checkbox"/> 900-Numbered Elective	4 Credits
<input type="checkbox"/> 900-Numbered Elective	4 Credits
	<b>40 Credits Total</b>

\*Core Hospice & Palliative Care can be completed during the OMS-III or OMS-IV year. Regardless, students will register for 908 Core Hospice & Palliative Care.

## TERMS TO KNOW

<b>AA</b>	An <b>Affiliation Agreement</b> is between an institution and another entity for purposes of providing an educational opportunity for students generally in a supervisory situation.
<b>AACOM</b>	The <b>American Association of Colleges of Osteopathic Medicine</b> is a non-profit organization that supports colleges of osteopathic medicine in the United States and serves as a unifying voice for osteopathic medical resources. <a href="http://www.aacom.org/">http://www.aacom.org/</a>
<b>AAFP</b>	The <b>American Academy of Family Physicians</b> is the national association of family doctors. <a href="http://www.aafp.org">http://www.aafp.org</a>
<b>AAMC</b>	The <b>Association of American Medical Colleges</b> is a non-profit organization based in Washington, DC and established in 1876. It administers the Medical College Admission Test. The AAMC operates the American Medical College Application Service and the Electronic Residency Application Service which facilitate students applying to medical schools and residency programs, respectively. <a href="https://www.aamc.org/">https://www.aamc.org/</a>
<b>ACGME</b>	The <b>Accreditation Council for Graduate Medical Education</b> is responsible for the accreditation of post-MD/DO medical training (residency) programs within the United States. <a href="http://www.acgme.org/acgmeweb/">http://www.acgme.org/acgmeweb/</a>
<b>ACLS</b>	<b>Advanced Cardiac Life Support.</b>
<b>ACOM</b>	<b>Alabama College of Osteopathic Medicine</b>
<b>AHEC</b>	<b>Alabama Health Education Centers</b>
<b>Allopathic Medicine</b>	The system of medical practice that treats disease by the use of remedies which produce effects different from those produced by the disease under treatment. MDs practice <b>allopathic medicine</b> .
<b>ALOMA</b>	The <b>Alabama Osteopathic Medical Association</b> is a non-profit professional organization comprising osteopathic physicians, residents, interns, and medical students. <a href="http://aloma.org/">http://aloma.org/</a>
<b>AMA</b>	<b>American Medical Association.</b> <a href="http://www.ama-assn.org">http://www.ama-assn.org</a>
<b>AMEC</b>	<b>Alabama Medical Education Consortium.</b> <a href="http://www.amecdo.com">http://www.amecdo.com</a>
<b>AOA</b>	The <b>American Osteopathic Association</b> is the main representative organization for osteopathic physicians in the United States. <a href="http://www.osteopathic.org/">http://www.osteopathic.org/</a>
<b>Archival List</b>	The <b>archival list</b> of preceptors kept by the ACOM Clinical Resources department which tracks the status of all preceptors, whether active, inactive or other.
<b>Audition Rotation</b>	<b>Audition rotations</b> are elective clerkship rotations during the third and fourth years at sites with residency programs in which a student is interested.
<b>BLS</b>	<b>Basic Life Support.</b>
<b>Clerkship Rotation</b>	A <b>clerkship rotation</b> is 2- or 4-week period of training in clinical setting.
<b>CME</b>	<b>Continuing Medical Education.</b>

<b>CITI</b>	<b>Collaborative Institutional Training Initiative.</b> Students use this system to obtain additional training in OSHA, HIPAA, Universal Precautions, Sterile Technique, etc.
<b>COCA</b>	The AOA <b>Commission on Osteopathic College Accreditation</b> serves the public by establishing, maintaining, and applying accreditation standards and procedures to ensure that academic quality and continuous quality improvement delivered by the colleges of osteopathic medicine (COMs) reflect the evolving practice of osteopathic medicine. The scope of the COCA encompasses the accreditation of COMs. <a href="https://osteopathic.org/accreditation/">https://osteopathic.org/accreditation/</a>
<b>COI</b>	<b>Certificate of Insurance.</b> Refers to professional liability insurance for healthcare professionals, including medical students.
<b>COMAT</b>	<b>Comprehensive Osteopathic Medical Achievement Test.</b> A series of examinations designed to assess osteopathic medical students' core knowledge and elements of osteopathic principles and practice essential for pre-doctoral training. This is equivalent to shelf exams provided in MD programs.
<b>COMLEX-USA</b>	<p>The <b>Comprehensive Osteopathic Medical Licensing Examination</b> of the United States is a three-level, national standardized licensure examination designed to assess osteopathic medical knowledge, knowledge fluency, clinical skills, and other competencies essential for practice as an osteopathic generalist physician. <a href="http://www.nbome.org/exams-assessments/comlex-usa/">http://www.nbome.org/exams-assessments/comlex-usa/</a></p> <p>Level 1 – Computer-based application of osteopathic medical knowledge concepts related to foundational sciences, patient presentations, and physician tasks.</p> <p>Level 2-CE – (Cognitive Examination) Computer-based application of osteopathic medical knowledge concepts related to clinical sciences, patient presentations, and physician tasks.</p> <p>Level 2-PE – (Performance Examination) Standardized patient-based assessment of fundamental clinical skills essential for osteopathic patient care.</p> <p>Level 3 – Two-day computer-based application of osteopathic medical knowledge concepts related to clinical sciences, patient safety and independent practice, foundational competency domains and clinical presentations.</p>
<b>COMSAE</b>	<b>Comprehensive Osteopathic Medical Self-Assessment Examinations</b> are used by osteopathic students and residents to assess readiness for the COMLEX-USA cognitive examination. ACOM administers these exams several times before students take COMLEX-USA Level 1.
<b>Core Clerkship Rotations</b>	Four weeks of clinical training in specified disciplines, which must be completed at a <b>Core Site location</b> .
<b>Core Site</b>	<p>A <b>core site</b> is a medical facility committed to providing sufficient resources to meet curriculum requirements for the third- and fourth-year students.</p> <p>The <b>home</b> core site is the site to which students are assigned during spring semester of their OMS-II year.</p> <p><b>Visiting</b> core site refers to a different core site within ACOM's network where a student completes a clerkship rotation.</p>
<b>Core Site Connections</b>	Refers to initial meetings between MEDs, CSCs, and students assigned to their core sites. <b>Core Site Connections</b> meetings are held in the spring of the OMSII year.
<b>CRNA</b>	<b>Certified Registered Nurse Anesthetist.</b>

<b>CRNP</b>	<b>Certified Registered Nurse Practitioner.</b>
<b>CSC</b>	<b>Core Site Coordinator</b> , who manages the day-to-day activities of students, such as preceptor assignment, evaluations, lectures and COMAT exams.
<b>CSE</b>	<b>Clinical Skills Educator.</b>
<b>CV</b>	A <b>curriculum vitae</b> is like a resumé, but also includes detailed and comprehensive description of academic and professional history.
<b>Dean's Letter</b>	See MSPE.
<b>Didactics</b>	<b>Didactics</b> are forms of systematic instruction. Examples include lectures, readings, assignments, self-directed learning, independent learning, discussion boards, video conferences, grand rounds, and journal clubs.
<b>Differential Diagnosis</b>	The process of weighing the probability of one condition versus that of others, possibly accounting for a patient's situation. For example, the <b>differential diagnosis</b> of rhinitis (a runny nose) includes allergic rhinitis (hay fever), the abuse of nasal decongestants, and the common cold.
<b>DIO</b>	<b>Designated Institutional Officer.</b> The individual who oversees all Graduate Medical Education at an institution.
<b>DO</b>	<b>Doctor of Osteopathic Medicine.</b>
<b>Elective Clerkship Rotations</b>	<b>Elective clerkship rotations</b> are 2 or 4 weeks of clinical training in any specialty at an ACOM-approved medical facility.
<b>EMR (EHR)</b>	<b>Electronic Medical Records</b> or Electronic Health Records.
<b>ERAS</b>	The <b>Electronic Residency Application Service</b> is produced by AAMC to transmit residency applications, letters of recommendation, Dean's Letters, transcripts, and other supporting documents to residency program directors via the Internet. <a href="https://www.aamc.org/services/eras/">https://www.aamc.org/services/eras/</a>
<b>eValue</b>	Software used to manage third- and fourth-year clerkship rotations. <b>E*Value</b> holds rotation evaluations, participation logs, and rotation registrations.
<b>FERPA</b>	The <b>Family Educational Rights and Privacy Act</b> of 1974. Defines the privacy rights of students in academic settings.
<b>FOSCE</b>	<b>Formative Objective Structured Clinical Examination.</b>
<b>FQHC</b>	<b>Federally Qualified Health Centers</b> are community-based health centers that provide primary and preventative care services in underserved areas regardless of ability to pay or health insurance
<b>FREIDA</b>	<b>Fellow and Residency Electronic Interactive Database.</b> FREIDA Online is a database with more than 7,800 graduate medical education programs accredited by ACGME as well as more than 200 combined specialty programs. <a href="http://www.ama-assn.org/ama/pub/education-careers/graduate-medical-education/freida-online.page">http://www.ama-assn.org/ama/pub/education-careers/graduate-medical-education/freida-online.page</a>
<b>GME</b>	<b>Graduate Medical Education.</b> Formal medical education that includes internship, residency, subspecialty and fellowship programs accredited by ACGME.
<b>Grand Rounds</b>	A formal meeting at which physicians discuss the clinical case of one or more patients. <b>Grand rounds</b> originated as part of residency training wherein new information was taught and clinical reasoning skills were enhanced. Grand rounds today are an integral component of medical education. They present clinical problems in medicine by focusing on current or interesting cases. They are also sometimes utilized for dissemination of new research information.
<b>H&amp;P</b>	Shorthand for <b>history and physical</b> , the initial clinical evaluation and examination of the patient.

<b>HCHCA</b>	The <b>Houston County Health Care Authority</b> is the umbrella organization which owns ACOM and Southeast Health.
<b>HIPAA</b>	The <b>Health Insurance Portability and Accountability Act</b> of 1996 which defines the privacy rights of patients and health care information.
<b>ICD-10</b>	ICD-10 is the 10th revision of the <b>International Statistical Classification of Diseases and Related Health Problems</b> (ICD), a medical classification list by the World Health Organization (WHO). It contains codes for diseases, signs and symptoms, abnormal findings, complaints, social circumstances, and external causes of injury or diseases.
<b>ILA</b>	<b>Independent learning activity.</b>
<b>IRB</b>	An <b>institutional review board</b> , also known as an independent ethics committee (IEC), ethical review board (ERB) or research ethics board (REB), is a committee that has been formally designated to approve, monitor, and review biomedical and behavioral research involving humans.
<b>IS</b>	<b>Integrated Session.</b> Presents defined material in an interactive format to demonstrate clinical significance.
<b>IT (IS)</b>	<b>Information Technology</b> (Information Systems).
<b>Journal Club</b>	A <b>journal club</b> is a form of education in which a group of physicians discuss, analyze, and review a limited number of articles from medical journals, often on a weekly or monthly basis.
<b>Learning Agreement</b>	A <b>learning agreement</b> is a document that the student and preceptor create together at the beginning of a clerkship rotation to define learning goals.
<b>Lecture</b>	A <b>lecture</b> is a didactic presentation given by a faculty member, medical education director, or preceptor.
<b>Letter of Good Standing (LoGS)</b>	Official document from the school that states that a student is in <b>good academic standing</b> and has no issues preventing the student from starting clerkship rotations.
<b>LoR</b>	<b>Letter of Recommendation</b>
<b>LMS</b>	<b>Learning Management System.</b> Software used by ACOM students to access curricular information.
<b>LRC</b>	<b>Learning Resource Center</b>
<b>The Match</b>	The <b>Match</b> process is a uniform system by which residency candidates and residency programs simultaneously “match” to fill first-year and second-year post-graduate training positions accredited by ACGME. NRMP instituted and maintains The Match system.
<b>Match Day</b>	The date when students find out if they have <b>matched</b> to a residency program.
<b>MD</b>	<b>Doctor of Medicine.</b>
<b>MED</b>	<b>Medical Education Director</b> (formerly known as core site director). Manages a Core Site and its operation, as well as directing interaction with the college regarding the student performance. The required minimum qualifications are MD/DO.
<b>MOA (MOU)</b>	A <b>Memorandum of Agreement</b> (Memorandum of Understanding) is an agreement between two or more parties outlining the terms and details of an understanding, including each party’s requirements and responsibilities.

<b>MSPE</b>	The <b>Medical Student Performance Evaluation</b> (formerly known as the Dean's Letter) is a comprehensive assessment of medical school performance generally through third year of medical school. Includes grade comparison graphs, class rank for top quartile students for years 1 and 2 and preceptor comments from clerkship rotations.
<b>NBME</b>	The <b>National Board of Medical Examiners</b> is an independent, not-for-profit organization that serves the public through its high-quality assessments of healthcare professionals. <a href="http://www.nbme.org/">http://www.nbme.org/</a>
<b>NBOME</b>	The <b>National Board of Osteopathic Medical Examiners</b> is the leading assessment organization for the osteopathic medical profession. Its mission is to protect the public by providing the means to assess competencies for osteopathic medicine and related health care professions. The NBOME COMLEX-USA examination series provides the pathway to licensure for osteopathic physicians in the United States. <a href="http://www.nbome.org">http://www.nbome.org</a>
<b>NRMP</b>	The <b>National Resident Matching Program</b> which is a national process to match medical students and other applicants with programs to obtain internships and residencies. Applicants submit a confidential list to the NRMP ranking their desired place of residency. Participating hospitals also enter a confidential list of those most desired applicants. On a uniform date (mid-March), all of the applicants and programs are informed of the results of the match. <a href="http://www.nrmp.org">http://www.nrmp.org</a>
<b>OMS</b>	<b>Osteopathic Medical Student</b> (OMS-I, OMS-II, OMS-III, and OMS-IV)
<b>OMM (OMT)</b>	<b>Osteopathic Manipulative Medicine (OMM)</b> , also known as Osteopathic Manipulative Treatment (OMT), is a core set of techniques of osteopathy and osteopathic medicine distinguishing these fields from allopathic medicine.
<b>OON</b>	<b>Out of Network.</b> This refers to rotations that are done outside of ACOM's clinical network.
<b>OPP</b>	<b>Osteopathic Principles and Practices</b> is the title of the course where students learn OMM (OMT).
<b>OPCE</b>	<b>Observed Patient Clinical Encounter.</b>
<b>OPTI</b>	All OGME programs are part of an <b>Osteopathic Postdoctoral Training Institution</b> . Each OPTI is a community-based training consortium comprised of at least one college of osteopathic medicine and one hospital and may include additional hospitals and ambulatory training facilities. <a href="http://www.osteopathic.org/inside-aoa/Education/OGME-development-initiative/Pages/what-is-an-opti.aspx">http://www.osteopathic.org/inside-aoa/Education/OGME-development-initiative/Pages/what-is-an-opti.aspx</a>
<b>OSCE</b>	<b>Objective Structured Clinical Examination.</b>
<b>OSHA</b>	The <b>Occupational Safety and Health Administration</b> is an agency of the United States Department of Labor. OSHA's mission is to "assure safe and healthful working conditions for working men and women by setting and enforcing standards and by providing training, outreach, education and assistance." <a href="https://www.osha.gov/">https://www.osha.gov/</a>
<b>PA</b>	<b>Physician Assistant.</b>
<b>PALS</b>	<b>Pediatric Advanced Life Support.</b>
<b>Personal Statement</b>	The <b>personal statement</b> is created by the student and consists of information about the student's professional background, academic and clinical qualifications, how the decision was made to pursue medicine, chosen specialty, and career goals.
<b>PCS</b>	<b>Primary Clinical Skills.</b> A set of courses students complete during each term of their OMS-I and OMS- II years.
<b>PGY</b>	<b>Post Graduate Year.</b>

<b>Preliminary Year</b>	A <b>preliminary year</b> is one-year position in a given field (e.g., Internal Medicine or Surgery), usually preceding training in another specialty.
<b>Preceptor</b>	A practicing physician who provides excellent learning opportunities in clinical settings and delivers quality assessments of students throughout their clinical training.
<b>PRN</b>	Abbreviation for <b>pro re nata</b> , a Latin phrase meaning “as needed.”
<b>Program Director</b>	The individual who oversees graduate medical education in a specified discipline at a specific institution.
<b>RC</b>	<b>Regional Coordinator</b> coordinates core site development and assists core site staff in managing students’ educational experiences within specified geographic regions.
<b>Required Clerkship Rotation</b>	Four weeks of clinical training in a specified OMS year that does not have to be completed at a core site.
<b>ROL</b>	<b>Rank Order List.</b>
<b>SARHA</b>	The <b>Southeast Alabama Rural Health Associates</b> is a private, non-profit corporation established in 1983 to ensure the availability of quality medical services to all residents of southeast Alabama. SARHA currently provides primary and preventive health services to the residents of Barbour, Coffee, Crenshaw, Dale, Geneva, Henry, Houston, Pike and surrounding counties. <a href="http://www.sarhaonline.com/">http://www.sarhaonline.com/</a>
<b>SDL</b>	<b>Self-directed learning.</b>
<b>Shelf Exam</b>	See COMAT or NBME.
<b>SIM Lab</b>	Interactive session with either <b>simulated</b> “patients” or standardized patients.
<b>Skills Lab</b>	<b>Skills labs</b> provide an opportunity for students to learn and practice patient interview skills, physical examination skills, and osteopathic manipulative treatment under faculty supervision and instruction.
<b>SOAP</b>	The <b>Supplemental Offer and Acceptance Program</b> is a process for unmatched students in the NRMP match to find residency programs. <a href="http://www.nrmp.org/residency/soap/">http://www.nrmp.org/residency/soap/</a>
<b>SOAP note</b>	The <b>SOAP (i.e., subjective, objective, assessment, and plan) note</b> is a method of documentation employed by health care providers to record notes in a patient’s chart.
<b>SPC</b>	<b>Student Progress Committee</b> (an Appeal Board).
<b>SP / SPE</b>	<b>Standardized Patient / Standardized Patient Educator.</b>
<b>TBL</b>	<b>Team-Based Learning.</b> Consists of sessions that must include the following components: advance preparation assignment, individual readiness assessment test (iRAT), group readiness assessment test (gRAT), application of course content, and peer evaluation (when applicable).
<b>Transitional Year</b>	One-year position with rotations through various disciplines (e.g. Internal Medicine, Surgery, etc.); also precedes training in other specialties.
<b>TruTouch</b>	Refers to the hardware with multiple functionalities to allow for teaching and collaboration between groups in different facilities, including an interactive multi-touch display that integrates smoothly with all major video/web conferencing solutions. This hardware replaced the VCU at many core site locations.

<b>USMLE</b>	The <b>United States Medical Licensing Examination</b> is a three-step examination for medical licensure in the U.S. The USMLE assesses a physician’s ability to apply knowledge, concepts, and principles and to demonstrate fundamental patient-centered skills that are important in health and disease and that constitute the basis of safe and effective patient care. Osteopathic students are encouraged and may be required to take the USMLE if they intend to apply for allopathic residency programs. <a href="http://www.usmle.org">http://www.usmle.org</a>
<b>USMLE Step 2 CK</b>	<b>Clinical Knowledge</b> Exam (MD Equivalent to CE Exam).
<b>USMLE Step 2 CS</b>	<b>Clinical Skills</b> Exam (MD Equivalent to PE Exam)
<b>VCU</b>	<b>Video Conferencing Unit</b> refers to the hardware that allows for a conference between two or more participants at different sites.
<b>Visiting Student</b>	A student who is “away” from their home core site while completing clerkship rotations.
<b>VSLO (formerly known as VSAS)</b>	<b>Visiting Student Learning Opportunities</b> is an AAMC application designed to streamline the application process for senior “away” electives. This service requires students to submit just one application for all institutions, effectively reducing paperwork, miscommunication, and time. All COCA-accredited AACOM member colleges with rising fourth-year classes are VSAS home schools. Students in accredited schools may use VSAS to submit applications. ACOM students will have access to VSAS beginning in March of their third year. <a href="http://www.aamc.org/students/medstudents/vsas/">http://www.aamc.org/students/medstudents/vsas/</a>

APPENDIX I: OMS-II COMPETENCIES

**OMS-II COMPETENCIES**

**By the end of their second year, ACOM students have been trained to meet all ACOM program requirements in the areas listed below, as performed and evaluated in a live or simulated environment and documented through coursework, especially within the Primary Clinical Skills and Foundations of Modern Healthcare courses.**

COMPETENCIES	DESCRIPTION
<b><i>Professionalism &amp; Lifelong Learning</i></b>	
Appearance, attire, and behavior	Demonstrates professional appearance, attire, and behavior during all standardized patient encounters, simulation sessions, and all other workplace environments
Medical ethics	Understand and critically analyze medical ethics terms (beneficence, non-maleficence, autonomy, informed consent) and issues
Proper use of social media	Demonstrate proper use of social media
Self-reflection	Demonstrates the ability to self-reflect in an accurate and meaningful manner
Teamwork	Demonstrates the ability to work as a team with other students
<b><i>Communication Skills</i></b>	
Patient-centered communication	Utilizes specific patient-centered skills in every patient encounter
Adapting to the pediatric interview	Utilizes specific patient-centered skills that are appropriate to the pediatric patient
<b><i>The History and Physical Examination</i></b>	
Focused history and physical exam appropriate for the patient’s chief concern	Performs an accurate and efficient focused history and physical exam including a HPI, PMFSH, and ROS
Comprehensive history and physical exam	Performs a complete and accurate history and physical exam as appropriate for the patient including a HPI, comprehensive PMFSH including a sexual and reproductive history, complete ROS, and head to toe physical exam (w/o GU exam)
The adolescent interview	Performs an appropriate adolescent medical interview
The pediatrics well-child history and physical exam	Utilizes appropriate resources to plot a growth chart, determine a pediatric patient’s immunizations needs, and provide anticipatory guidance
The geriatric exam	Performs an appropriate geriatric medical interview and exam including the evaluation of mental status, depression, abuse, and functional status
<b><i>Advanced Medical Interviewing Skills</i></b>	
Responding to strong emotions	Demonstrates appropriate techniques to managing a patient exhibiting strong emotions including the use of statements demonstrating empathy, respect, support/partnership
Communicating with depressed or anxious patients	Demonstrates appropriate techniques when communicating with patients who are depressed or anxious
Communicating with patients about tobacco, alcohol, and substance use	Demonstrates appropriate techniques to communicate with patients about tobacco, alcohol, and substance use including the administration and interpretation of validated tools
Advance directives	Demonstrates the ability to discuss advanced directives with a patient
Giving bad news	Demonstrates appropriate techniques when communicating with patients about bad news
End of life care and communication	Demonstrates appropriate techniques when communicating with patients who are near the end of life
<b><i>Physical Exam Skills</i></b>	
General observation	Demonstrates the ability to make accurate and meaningful observations regarding patients
Mental status	Demonstrates the ability to evaluate the mental status of a patient including the administration and interpretation of validated tools
Vital signs	Obtains accurate vital signs and interprets the results
Skin, Hair, and Nails	Performs an accurate and thorough examination of the skin, hair, and nails
HEENT	Performs an accurate and thorough examination of the head, eyes, ears, nose, and throat
Neck	Performs an accurate and thorough examination of the neck
Lymph nodes	Performs an accurate and thorough examination of the lymph nodes
Chest and lungs	Performs an accurate and thorough examination of the chest lungs

COMPETENCIES	DESCRIPTION
<b><i>Professionalism &amp; Lifelong Learning</i></b>	
Cardiovascular and peripheral vascular	Performs an accurate and thorough examination of the cardiovascular and peripheral vascular systems
Abdomen	Performs an accurate and thorough examination of the abdomen including an evaluation for peritoneal signs
Anus, rectum, and prostate (task trainers* and standardized patients)	Performs an accurate and thorough examination of the anus, rectum, and prostate including fecal occult blood testing when indicated
Musculoskeletal including orthopedic maneuvers	Performs an accurate and thorough examination of the musculoskeletal system including the appropriate use of orthopedic maneuvers
Breast (task trainers* and standardized patients)	Performs an accurate and thorough examination of the breasts
Screening neuro exam	Performs an accurate and thorough examination of neurological system including the evaluation of the cranial nerves with a fundoscopic exam, motor and sensory exam, DTR's, and evaluation of coordination and gait
Female genitalia and pelvic including speculum and bimanual (task trainers* and standardized patients)	Performs an accurate and thorough examination of the female genitalia
Male genitalia (standardized patients)	Performs an accurate and thorough examination of the male genitalia
<b><i>OMM</i></b>	
Structural screening exam	Incorporates an osteopathic structural screening exam efficiently into the physical exam
Treatment	Provides safe and effective osteopathic manipulative treatment in the appropriate patient
<b><i>Procedural Skills</i></b>	
Basic and advanced airway management	Understands basic principles related to airway management including special considerations related to COVID-19.
Bladder catheterization (task trainer*)	Demonstrates the appropriate technique for performing a bladder catheterization on a male and female patient
Casting and splinting	Demonstrates the appropriate technique for casting and splinting an extremity
Central line placement using ultrasound	Demonstrate technique in placing subclavical central line using ultrasound guidance
Chest x-ray interpretation	Demonstrate ability to accurately read and interpret a chest x-ray.
EKG interpretation	Demonstrate ability to accurately read and interpret EKG results.
Lumbar puncture (task trainers*)	Demonstrates the appropriate technique for performing a lumbar puncture
Nasogastric tube insertion	Demonstrates the appropriate technique for performing a nasogastric tube insertion
Sterile technique	Demonstrates the appropriate use of sterile technique, including donning a sterile gown and gloves
Surgical knot tying	Demonstrates ability to do one-handed and two-handed knot tie
Suturing	Demonstrates the appropriate technique for suturing a wound and instrument tie
Vascular including IV and IA puncture (task trainers*)	Demonstrates the appropriate technique for performing an intravenous and intra-arterial puncture
<b><i>Written &amp; Oral Communication</i></b>	
SOAP notes	Documents the subjective, objective, assessment and plan portions of a patient's note accurately and concisely
Oral case presentation	Provides an accurate and concise oral case presentation
<b><i>Clinical Reasoning</i></b>	
Differential diagnosis	Utilizes electronic resources to create an appropriate differential diagnosis based on a patient's presenting problems

COMPETENCIES	DESCRIPTION
<b><i>Information Mastery</i></b>	
Researching & evaluating available resources	Demonstrates how to access and critically analyze journal articles, PubMed, and other reference sources.
Point-of-care resources	Demonstrates the appropriate use of point-of-care resources to answer clinical questions including Dynamed, Epocrates, and UpToDate
<b><i>Life Support Courses</i></b>	
Basic Life Support (BLS)	Understands and demonstrates basic life support protocol
Advanced Cardiac Life Support (ACLS)	Understands and demonstrates advanced cardiac life support protocol
<b><i>Guidelines for Healthcare Professionals</i></b>	
Biostatistics and epidemiology	Understands basic biostatistics and epidemiological concepts to be able to make critical judgements about risk and odds, sensitivity and specificity as well as understand the importance of population health.
Infection control	Understands the appropriate use of universal precautions for preventing the transmission of blood borne infections.
Isolation precautions	Understands the appropriate use of isolation precautions to prevent the transmission of infections such as tuberculosis and MRSA in healthcare settings.
Child abuse reporting	Understands signs of child abuse, a physician's obligation to report, and basic reporting procedures
Legal jurisprudence	Demonstrate understanding of legal issues in the medical profession
HIPAA	Demonstrate understanding of laws and guidelines associated with HIPAA

**\*Most task trainers are lifelike models of body parts, such as an arm or pelvis. All task trainers have the ability to break down a specific skill into its individual steps as new skills are taught and learned.**

**\*\*For additional information regarding performance and assessment of these competencies, please refer to the Primary Clinical Skills and Foundations of Modern Healthcare course curricula.**

**OBSERVED PATIENT CLINICAL ENCOUNTER**

*Please observe the student as he/she performs a patient history and physical examination and evaluate the following components while keeping in mind where the student is in his/her medical education (first month of 3<sup>rd</sup> year vs. 4<sup>th</sup> year, 1<sup>st</sup> week of pediatrics vs. 2<sup>nd</sup> month of internal medicine).*

**Introduction and History Taking**

**1. Warmly introduces self by first and last name and describes role.**

Done                      Not Done

**2. Obtains patient’s full name and age or date of birth.**

Done                      Not Done

**3. Elicits chief concern in patient’s own words (vs. reading off chart).**

Done                      Not Done

**4. Asks about any other concerns or needs for this visit.** (Refills, work excuse, other medical concerns, etc.)

Done                      Not Done

**5. Begins with patient-centered questioning.** (Examples: “Tell me more about this ...How is this impacting your life? How are you doing with this? How does this make you feel? How has this affected you emotionally? How has this affected your life? What has your illness been like for your family? What do you think might be causing your...? What made you decide to come in now?”)

Proficient                      Needs Improvement                      Not Done

**6. Transitions to doctor-centered interview.** (Indicates change in question style from open-ended questions about the patient’s concerns to specific questions related to the HPI and past medical, family, and social history.)

Done                      Not Done

**7. Obtains a chronological description of the history of the present illness (OPPQRST-A), using focusing skills as appropriate to learn about patient’s symptom story.**

Proficient                      Needs Improvement                      Not Done

**8. Obtains an appropriate focused past medical history:** (Must *always* ask medical problems, medications, allergies with reaction, and surgeries)

Proficient                      Needs Improvement                      Not Done

**9. Obtains an appropriate focused social history:** (Must *always* ask tobacco, alcohol, substance use/drugs)

Proficient                      Needs Improvement                      Not Done

**10. Obtains an appropriate focused family history:** (Pertinent to the chief complaint)

Proficient                      Needs Improvement                      Not Done

**11. Obtains an appropriate focused review of systems:** (Gives a time frame, asks in an organized fashion, pauses between each symptom. Symptoms asked are appropriate for the chief complaint.)

Proficient                      Needs Improvement                      Not Done

**12. Demonstrates nonverbal encouragement and responds appropriately to patient’s feelings and emotions throughout history taking.**

Proficient                      Needs Improvement                      Not Done

## **Physical Exam**

**13. Selects focused physical exams appropriate to the history.**

Proficient                      Needs Improvement                      Not Done

**14. Performs selected physical exams appropriately.**

Proficient                      Needs Improvement                      Not Done

## **Assessment and Plan**

**15. Discusses diagnostic possibilities with the patient-either a working diagnosis or a differential diagnosis.**

Proficient                      Needs Improvement                      Not Done

**16. Discusses an appropriate plan with the patient.**

Proficient                      Needs Improvement                      Not Done

**17. Asks if patient has questions.**

Done                      Not Done

**18. Discusses follow-up plan with patient.**

Done                      Not Done

**19. End of the interview:** (Orients patient to the end of the interview, offers support before saying goodbye, "I'll talk to my preceptor," thanks patient for coming in, etc.)

Done                      Not Done

## **General**

**20. Communicates clearly with patient.** (Speaks clearly, not too fast or too soft, uses vocabulary patient can understand)

Proficient                      Needs Improvement                      Not Done

**21. Student was attentive to patient comfort and safety throughout the encounter.** (Includes drape use)

Proficient                      Needs Improvement                      Not Done

**22. Professionalism:** (Attitude, demeanor, behavior, appearance)

Proficient                      Needs Improvement                      Not Done

## **Comments:** (Optional)

\_\_\_\_\_  
Preceptor Signature (Required)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student Printed Name

\_\_\_\_\_  
Date

***Students are required to submit this document electronically on the appropriate software platform and strongly encouraged to keep a copy for their records.***

## ACOM Learning Agreement for Clerkship Rotations

To develop a set of mutually-agreed-upon learning objectives, students and preceptors should discuss the questions below on the first or second day of the clerkship rotation.

Student: \_\_\_\_\_

Preceptor: \_\_\_\_\_

Rotation Discipline: \_\_\_\_\_

Site: \_\_\_\_\_

### I. What skills or knowledge does the student hope to learn in this clerkship rotation?

*(This section may be completed prior to meeting.)*

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

### II. What skills or knowledge does the preceptor think the student most needs to learn in this clerkship rotation?

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

### III. Based on the two sets of goals above, what specific learning objectives\* do the student and preceptor agree should be accomplished in this clerkship rotation? (Please list at least three)

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

*\*Please note that learning objectives need to describe what the student will be able to **do** on completing the clerkship rotation. Please use objectives within this clerkship rotation syllabus.*

### IV. What activities will most help the student accomplish the above learning objectives?

*(rounds, pre-rounds, day start, day end, grand rounds, expected readings, journal clubs, etc.)*

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

\*\*Student has read and understands [ACOM's Splash & Sharps Exposure Policies & Procedures](#). Student has provided this information to the preceptor.

### SIGNATURES

Student: \_\_\_\_\_

Preceptor: \_\_\_\_\_

Date: \_\_\_\_\_

*Students are required to submit this document electronically on the appropriate software platform and strongly encouraged to keep the signed learning agreement for their records.*

APPENDIX L: CLERKSHIP ROTATION EVALUATIONS

## Alabama College of Osteopathic Medicine Preceptor Evaluation of OMS-III Student

Please complete this evaluation within 3 days of the student’s last day with you. The student may need this evaluation completed in order to be eligible for certain elective rotations. Please note that completion of the student evaluation indicates adequate student participation. We strongly encourage you to utilize the comments to highlight or clarify student performance.

*Thank you* for being a student mentor and giving back to the profession. For additional information regarding student expectations, please review the [Entrustable Professional Activities](#).

If you would like CME credits for precepting this student, please go to the link below:  
[https://acomedu.libinsight.com/cme\\_reporting](https://acomedu.libinsight.com/cme_reporting)

**Section I – Core Competencies:**

Please provide feedback regarding the performance of this medical student *in consideration of current level of training*. Your responses will help the student improve by identifying strengths and weaknesses.

Observable Behavior(s)	Student Exceeds Expectations	Student Meets Expectations	Student Needs Improvement	Student Does Not Meet Expectations	Not Applicable to Setting
Performs an accurate history and physical	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Presents a concise, accurate oral report	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Prepares a concise, accurate written SOAP note	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Uses labs and imaging appropriately to evaluate a patient	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Creates an appropriate differential diagnosis based on the patient's signs and symptoms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Applies clinical pathways and evidence-based medicine as appropriate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recognizes critical lab/test results	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recognizes acuity / severity of patient’s condition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Applies fund of knowledge to address a patient’s clinical problem(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates appropriate use of available electronic resources without compromising interaction with the patient	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Projects a professional attitude, including punctuality, attire, and readiness to complete tasks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates high ethical standards	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates ability to self-evaluate accurately	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates understanding of social determinants affecting health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates compassionate care for all patients equally	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Interacts with all members of the healthcare team respectfully	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Section II – OPP Competencies:**

Observable Behavior(s)	Student Exceeds Expectations	Student Meets Expectations	Student Needs Improvement	Student Does Not Meet Expectations	Not Applicable to Setting
Performs <a href="#">osteopathic structural exam (OSE)</a>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Seeks out opportunities to incorporate <a href="#">osteopathic manipulative treatment (OMT)</a>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Documents <a href="#">OSE</a> findings and <a href="#">OMT</a> when performed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Section III – Narrative Comments:**

Please provide details of at least one area where the student exceeded expectations.

Please provide details of at least one area where the student needs to improve.

**Section IV – Noteworthy Characteristics for the Student’s Medical Student Performance Evaluation (MSPE)** Formerly known as the *Dean’s Letter of Evaluation for Residency Applications*

**What comments would you like to include in the student’s MSPE?**  
[*ALL* comments noted in this section **will** be included in the MSPE]

**Section V – Clinical Performance Check**

(For students who earn “Below Average” or “Needs Immediate Improvement” please be sure to **provide comments** for students regarding areas for improvement in Section II above.)

**Overall, how do you rate this student’s clinical skills (e.g., patient interviews, physical exams, professional behaviors)?**

<b>Above Average</b>	<b>Average</b>	<b>Below Average</b>	<b>Needs Immediate Improvement</b>
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\_\_\_\_\_  
Preceptor Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

*Thank you for the time and hard work you devote toward the education of ACOM students.  
Your feedback is highly valuable to the program.*

APPENDIX K: CLERKSHIP ROTATION EVALUATIONS

## Alabama College of Osteopathic Medicine Preceptor Evaluation of OMS-IV Student

Please complete this evaluation within 3 days of the student’s last day with you. The student may need this evaluation completed in order to be eligible for certain elective rotations. Please note that completion of the student evaluation indicates adequate student participation. We strongly encourage you to utilize the comments to highlight or clarify student performance.

*Thank you* for being a student mentor and giving back to the profession. For additional information regarding student expectations, please review the [Entrustable Professional Activities](#).

If you would like CME credits for precepting this student, please go to the link below:  
[https://acomedu.libinsight.com/cme\\_reporting](https://acomedu.libinsight.com/cme_reporting)

**Section I – Core Competencies:**

Please provide feedback regarding the performance of this medical student *in consideration of current level of training*. Your responses will help the student improve by identifying strengths and weaknesses.

Observable Behavior(s)	Student Exceeds Expectations	Student Meets Expectations	Student Needs Improvement	Student Does Not Meet Expectations	Not Applicable to Setting
Performs an accurate history and physical	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Presents a concise, accurate oral report	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Prepares a concise, accurate written SOAP note	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Uses labs and imaging appropriately to evaluate a patient	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Creates an appropriate differential diagnosis based on the patient's signs and symptoms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Applies clinical pathways and evidence-based medicine as appropriate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recognizes critical lab/test results	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recognizes acuity / severity of patient’s condition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Applies fund of knowledge to address a patient’s clinical problem(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates appropriate use of available electronic resources without compromising interaction with the patient	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Projects a professional attitude, including punctuality, attire, and readiness to complete tasks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates high ethical standards	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates ability to self-evaluate accurately	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates understanding of social determinants affecting health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates compassionate care for all patients equally	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Interacts with all members of the healthcare team respectfully	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Section II – OPP Competencies:**

Observable Behavior(s)	Student Exceeds Expectations	Student Meets Expectations	Student Needs Improvement	Student Does Not Meet Expectations	Not Applicable to Setting
Performs <a href="#">osteopathic structural exam (OSE)</a>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Seeks out opportunities to incorporate <a href="#">osteopathic manipulative treatment (OMT)</a>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Documents <a href="#">OSE</a> findings and <a href="#">OMT</a> when performed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Section III – Narrative Comments:**

Please provide details of at least one area where the student exceeded expectations.

Please provide details of at least one area where the student needs to improve.

**Section IV – Narrative Comments regarding Residency Preparedness**

Please share your comments regarding the student’s preparedness to enter residency.

**Section V – Clinical Performance Check**

*(For students who earn “Below Average” or “Needs Immediate Improvement” please be sure to **provide comments** for students regarding areas for improvement in Section II above.)*

**Overall, how do you rate this student’s clinical skills (e.g., patient interviews, physical exams, professional behaviors)?**

<b>Above Average</b>	<b>Average</b>	<b>Below Average</b>	<b>Needs Immediate Improvement</b>
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Preceptor Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

*Thank you for the time and hard work you devote toward the education of ACOM students.  
Your feedback is highly valuable to the program.*



## Alabama College of Osteopathic Medicine

### Mid-Rotation Preceptor Evaluation of Student



*Thank you* for being a student mentor and giving back to the profession. For additional information regarding student expectations, please review the [Entrustable Professional Activities](#).

#### **Section I – Core Competencies:**

Please provide feedback regarding the performance of this medical student *in consideration of current level of training*. Your responses will help the student improve by identifying strengths and weaknesses.

Observable Behavior(s)	Student Exceeds Expectations	Student Meets Expectations	Student Needs Improvement	Student Does Not Meet Expectations	Not Applicable to Setting
Performs an accurate history and physical	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Presents a concise, accurate oral report	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Prepares a concise, accurate written SOAP note	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Uses labs and imaging appropriately to evaluate a patient	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Creates an appropriate differential diagnosis based on the patient's signs and symptoms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Applies clinical pathways and evidence-based medicine as appropriate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recognizes critical lab/test results	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recognizes acuity / severity of patient's condition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Applies fund of knowledge to address a patient's clinical problem(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates appropriate use of available electronic resources without compromising interaction with the patient	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Projects a professional attitude, including punctuality, attire, and readiness to complete tasks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates high ethical standards	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates ability to self-evaluate accurately	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates understanding of social determinants affecting health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates compassionate care for all patients equally	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Interacts with all members of the healthcare team respectfully	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### **Section II – OPP Competencies:**

Observable Behavior(s)	Student Exceeds Expectations	Student Meets Expectations	Student Needs Improvement	Student Does Not Meet Expectations	Not Applicable to Setting
Performs <a href="#">osteopathic structural exam (OSE)</a>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Seeks out opportunities to incorporate <a href="#">osteopathic manipulative treatment (OMT)</a>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Documents <a href="#">OSE</a> findings and <a href="#">OMT</a> when performed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Section III – Narrative Comments:**

Please provide details of at least one area where the student exceeded expectations.

Please provide details of at least one area where the student needs to improve.

**Section V – Clinical Performance Check**

*(For students who earn “Below Average” or “Needs Immediate Improvement” please be sure to **provide comments** for students regarding areas for improvement in Section II above.)*

**Overall, how do you rate this student’s clinical skills (e.g., patient interviews, physical exams, professional behaviors)?**

<b>Above Average</b>	<b>Average</b>	<b>Below Average</b>	<b>Needs Immediate Improvement</b>
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\_\_\_\_\_  
Preceptor Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

***Thank you for the time and hard work you devote toward the education of ACOM students.  
Your feedback is highly valuable to the program.***

APPENDIX K: CLERKSHIP ROTATION EVALUATIONS

**Alabama College of Osteopathic Medicine**  
**Preceptor Evaluation of OMS-III Student**  
**Indirect Patient Care**

Please complete this evaluation within 3 days of the student’s last day with you. The student may need this evaluation completed in order to be eligible for certain elective rotations. Please note that completion of the student evaluation indicates adequate student participation. We strongly encourage you to utilize the comments to highlight or clarify student performance.

*Thank you* for being a student mentor and giving back to the profession. For additional information regarding student expectations, please review the [Entrustable Professional Activities](#).

If you would like CME credits for precepting this student, please go to the link below:  
[https://acomedu.libinsight.com/cme\\_reporting](https://acomedu.libinsight.com/cme_reporting)

**Section I – Core Competencies:**

Please provide feedback regarding the performance of this medical student *in consideration of current level of training*. Your responses will help the student improve by identifying strengths and weaknesses.

Observable Behavior(s)	Student Exceeds Expectations	Student Meets Expectations	Student Needs Improvement	Student Does Not Meet Expectations	Not Applicable to Setting
Performs an appropriate history and physical for this discipline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Presents an accurate oral summary of patient presentation(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Creates an accurate report including appropriate findings, treatment plan, etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Uses labs and imaging appropriately to evaluate a patient	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Creates an appropriate differential diagnosis based on available patient information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Applies clinical pathways and evidence-based medicine as appropriate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recognizes acuity / severity of patient’s condition or diagnosis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates appropriate manual dexterity when performing procedures applicable to this discipline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Applies fund of knowledge to address a patient’s clinical problem(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates appropriate use of available electronic resources without compromising interaction with the patient	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Projects a professional attitude, including punctuality, attire, and readiness to complete tasks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates high ethical standards	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates ability to self-evaluate accurately	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates understanding of social determinants affecting health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates compassionate care for all patients equally	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Interacts with all members of the healthcare team respectfully	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Section II – OPP Competencies:**

Observable Behavior(s)	Student Exceeds Expectations	Student Meets Expectations	Student Needs Improvement	Student Does Not Meet Expectations	Not Applicable to Setting
Seeks out opportunities to incorporate osteopathic principles and/or <a href="#">osteopathic manipulative treatment</a> when indicated	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Section III – Narrative Comments:**

Please provide details of at least one area where the student exceeded expectations.

Please provide details of at least one area where the student needs to improve.

**Section IV – Noteworthy Characteristics for the Student’s Medical Student Performance Evaluation (MSPE)** Formerly known as the *Dean’s Letter of Evaluation for Residency Applications*

**What comments would you like to include in the student’s MSPE?**  
[*ALL* comments noted in this section **will** be included in the MSPE]

**Section V – Clinical Performance Check**

*(For students who earn “Below Average” or “Needs Immediate Improvement” please be sure to **provide comments** for students regarding areas for improvement in Section II above.)*

**Overall, how do you rate this student’s clinical skills (e.g., patient interviews, physical exams, professional behaviors)?**

<b>Above Average</b>	<b>Average</b>	<b>Below Average</b>	<b>Needs Immediate Improvement</b>
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\_\_\_\_\_  
Preceptor Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

*Thank you for the time and hard work you devote toward the education of ACOM students.  
Your feedback is highly valuable to the program.*

APPENDIX K: CLERKSHIP ROTATION EVALUATIONS

**Alabama College of Osteopathic Medicine**  
**Preceptor Evaluation of OMS-III Student**  
**Indirect Patient Care**

Please complete this evaluation within 3 days of the student’s last day with you. The student may need this evaluation completed in order to be eligible for certain elective rotations. Please note that completion of the student evaluation indicates adequate student participation. We strongly encourage you to utilize the comments to highlight or clarify student performance.

*Thank you* for being a student mentor and giving back to the profession. For additional information regarding student expectations, please review the [Entrustable Professional Activities](#).

If you would like CME credits for precepting this student, please go to the link below:  
[https://acomedu.libinsight.com/cme\\_reporting](https://acomedu.libinsight.com/cme_reporting)

**Section I – Core Competencies:**

Please provide feedback regarding the performance of this medical student *in consideration of current level of training*. Your responses will help the student improve by identifying strengths and weaknesses.

Observable Behavior(s)	Student Exceeds Expectations	Student Meets Expectations	Student Needs Improvement	Student Does Not Meet Expectations	Not Applicable to Setting
Performs an appropriate history and physical for this discipline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Presents an accurate oral summary of patient presentation(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Creates an accurate report including appropriate findings, treatment plan, etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Uses labs and imaging appropriately to evaluate a patient	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Creates an appropriate differential diagnosis based on available patient information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Applies clinical pathways and evidence-based medicine as appropriate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recognizes acuity / severity of patient’s condition or diagnosis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates appropriate manual dexterity when performing procedures applicable to this discipline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Applies fund of knowledge to address a patient’s clinical problem(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates appropriate use of available electronic resources without compromising interaction with the patient	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Projects a professional attitude, including punctuality, attire, and readiness to complete tasks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates high ethical standards	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates ability to self-evaluate accurately	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates understanding of social determinants affecting health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates compassionate care for all patients equally	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Interacts with all members of the healthcare team respectfully	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Section II – OPP Competencies:**

Observable Behavior(s)	Student Exceeds Expectations	Student Meets Expectations	Student Needs Improvement	Student Does Not Meet Expectations	Not Applicable to Setting
Seeks out opportunities to incorporate osteopathic principles and/or <a href="#">osteopathic manipulative treatment</a> when indicated	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Section III – Narrative Comments:**

Please provide details of at least one area where the student exceeded expectations.

Please provide details of at least one area where the student needs to improve.

**Section IV – Narrative Comments regarding Patient Care in this Discipline**

Please share your comments regarding how this clerkship rotation enhanced the student’s understanding of patient care in this discipline.

**Section V – Clinical Performance Check**

*(For students who earn “Below Average” or “Needs Immediate Improvement” please be sure to **provide comments** for students regarding areas for improvement in Section II above.)*

**Overall, how do you rate this student’s clinical skills (e.g., patient interviews, physical exams, professional behaviors)?**

<b>Above Average</b>	<b>Average</b>	<b>Below Average</b>	<b>Needs Immediate Improvement</b>
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\_\_\_\_\_  
Preceptor Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

*Thank you for the time and hard work you devote toward the education of ACOM students.  
Your feedback is highly valuable to the program.*



## Alabama College of Osteopathic Medicine

### Mid-Rotation Preceptor Evaluation of Student Indirect Patient Care



*Thank you* for being a student mentor and giving back to the profession. For additional information regarding student expectations, please review the [Entrustable Professional Activities](#).

If you would like CME credits for precepting this student, please go to the link below:  
[https://acomedu.libinsight.com/cme\\_reporting](https://acomedu.libinsight.com/cme_reporting)

**Section I – Core Competencies:**

Please provide feedback regarding the performance of this medical student *in consideration of current level of training*. Your responses will help the student improve by identifying strengths and weaknesses.

Observable Behavior(s)	Student Exceeds Expectations	Student Meets Expectations	Student Needs Improvement	Student Does Not Meet Expectations	Not Applicable to Setting
Performs an appropriate history and physical for this discipline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Presents an accurate oral summary of patient presentation(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Creates an accurate report including appropriate findings, treatment plan, etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Uses labs and imaging appropriately to evaluate a patient	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Creates an appropriate differential diagnosis based on available patient information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Applies clinical pathways and evidence-based medicine as appropriate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recognizes acuity / severity of patient’s condition or diagnosis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates appropriate manual dexterity when performing procedures applicable to this discipline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Applies fund of knowledge to address a patient’s clinical problem(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates appropriate use of available electronic resources without compromising interaction with the patient	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Projects a professional attitude, including punctuality, attire, and readiness to complete tasks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates high ethical standards	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates ability to self-evaluate accurately	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates understanding of social determinants affecting health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates compassionate care for all patients equally	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Interacts with all members of the healthcare team respectfully	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Section II – OPP Competencies:**

Observable Behavior(s)	Student Exceeds Expectations	Student Meets Expectations	Student Needs Improvement	Student Does Not Meet Expectations	Not Applicable to Setting
Seeks out opportunities to incorporate osteopathic principles and/or <a href="#">osteopathic manipulative treatment</a> when indicated	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Section III – Narrative Comments:**

Please provide details of at least one area where the student exceeded expectations.

Please provide details of at least one area where the student needs to improve.

**Section V – Clinical Performance Check**

*(For students who earn “Below Average” or “Needs Immediate Improvement” please be sure to **provide comments** for students regarding areas for improvement in Section II above.)*

**Overall, how do you rate this student’s clinical skills (e.g., patient interviews, physical exams, professional behaviors)?**

<b>Above Average</b>	<b>Average</b>	<b>Below Average</b>	<b>Needs Immediate Improvement</b>
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Preceptor Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

***Thank you for the time and hard work you devote toward the education of ACOM students.  
Your feedback is highly valuable to the program.***

APPENDIX K: CLERKSHIP ROTATION EVALUATIONS

## Alabama College of Osteopathic Medicine Preceptor Evaluation of **Hospice** Student

Please complete this evaluation within 3 days of the student’s last day with you. The student may need this evaluation completed in order to be eligible for certain elective rotations. Please note that completion of the student evaluation indicates adequate student participation. We strongly encourage you to utilize the comments to highlight or clarify student performance.

*Thank you* for being a student mentor and giving back to the profession. For additional information regarding student expectations, please review the [Entrustable Professional Activities](#).

If you would like CME credits for precepting this student, please go to the link below:  
[https://acomedu.libinsight.com/cme\\_reporting](https://acomedu.libinsight.com/cme_reporting)

**Section I – Core Competencies:**

Please provide feedback regarding the performance of this medical student *in consideration of current level of training*. Your responses will help the student improve by identifying strengths and weaknesses.

Observable Behavior(s)	Student Exceeds Expectations	Student Meets Expectations	Student Needs Improvement	Student Does Not Meet Expectations	Not Applicable to Setting
Performs an accurate history and physical	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Displays knowledge of 5 stages of death and dying	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recognizes signs and symptoms of transitioning to end of life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Applies fund of knowledge to address a patient’s clinical problem(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Seeks out and utilizes opportunities to expand knowledge and skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Presents a concise, accurate oral report	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Prepares a concise, accurate written SOAP note	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Offers patients adequate opportunities to express their needs, feelings, and preferences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Understands and appreciates the individual roles of the interdisciplinary team	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Enhances patient care by effectively communicating with patients, caregivers, family members, and other members of the healthcare team	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Takes initiative to participate as a member of the healthcare team	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Interacts with all members of the healthcare team respectfully	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Projects a professional attitude, including punctuality, attire, and readiness to complete tasks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates high ethical standards	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates ability to self-evaluate accurately	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates understanding of social determinants when providing hospice and palliative care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates compassionate care for all patients equally	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Section II – OPP Competencies:**

Observable Behavior(s)	Student Exceeds Expectations	Student Meets Expectations	Student Needs Improvement	Student Does Not Meet Expectations	Not Applicable to Setting
Seeks out opportunities to incorporate osteopathic principles and/or <a href="#">osteopathic manipulative treatment</a> when indicated	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Section III – Narrative Comments:**

Please provide details of at least one area where the student exceeded expectations.

Please provide details of at least one area where the student needs to improve.

**Section IV – Narrative Comments regarding Hospice & Palliative Care**

Please share your comments regarding the student’s increased awareness of Hospice & Palliative care after participating in this clerkship rotation.

**Section V – Clinical Performance Check**

*(For students who earn “Below Average” or “Needs Immediate Improvement” please be sure to **provide comments** for students regarding areas for improvement in Section II above.)*

**Overall, how do you rate this student’s clinical skills (e.g., patient interviews, physical exams, professional behaviors)?**

**Above Average      Average      Below Average      Needs Immediate Improvement**

\_\_\_\_\_  
Preceptor Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

*Thank you for the time and hard work you devote toward the education of ACOM students.  
Your feedback is highly valuable to the program.*

APPENDIX K: CLERKSHIP ROTATION EVALUATIONS



**Alabama College of Osteopathic Medicine**  
**Mid-Rotation Preceptor Evaluation of Hospice Student**



*Thank you* for being a student mentor and giving back to the profession. For additional information regarding student expectations, please review the [Entrustable Professional Activities](#).

If you would like CME credits for precepting this student, please go to the link below:  
[https://acomedu.libinsight.com/cme\\_reporting](https://acomedu.libinsight.com/cme_reporting)

**Section I – Core Competencies:**

Please provide feedback regarding the performance of this medical student *in consideration of current level of training*. Your responses will help the student improve by identifying strengths and weaknesses.

Observable Behavior(s)	Student Exceeds Expectations	Student Meets Expectations	Student Needs Improvement	Student Does Not Meet Expectations	Not Applicable to Setting
Performs an accurate history and physical	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Displays knowledge of 5 stages of death and dying	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recognizes signs and symptoms of transitioning to end of life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Applies fund of knowledge to address a patient’s clinical problem(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Seeks out and utilizes opportunities to expand knowledge and skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Presents a concise, accurate oral report	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Prepares a concise, accurate written SOAP note	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Offers patients adequate opportunities to express their needs, feelings, and preferences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Understands and appreciates the individual roles of the interdisciplinary team	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Enhances patient care by effectively communicating with patients, caregivers, family members, and other members of the healthcare team	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Takes initiative to participate as a member of the healthcare team	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Interacts with all members of the healthcare team respectfully	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Projects a professional attitude, including punctuality, attire, and readiness to complete tasks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates high ethical standards	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates ability to self-evaluate accurately	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates understanding of social determinants when providing hospice and palliative care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates compassionate care for all patients equally	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Section II – OPP Competencies:**

Observable Behavior(s)	Student Exceeds Expectations	Student Meets Expectations	Student Needs Improvement	Student Does Not Meet Expectations	Not Applicable to Setting
Seeks out opportunities to incorporate osteopathic principles and/or <a href="#">osteopathic manipulative treatment</a> when indicated	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Section III – Narrative Comments:**

Please provide details of at least one area where the student exceeded expectations.

Please provide details of at least one area where the student needs to improve.

**Section V – Clinical Performance Check**

*(For students who earn “Below Average” or “Needs Immediate Improvement” please be sure to **provide comments** for students regarding areas for improvement in Section II above.)*

**Overall, how do you rate this student’s clinical skills (e.g., patient interviews, physical exams, professional behaviors)?**

<b>Above Average</b>	<b>Average</b>	<b>Below Average</b>	<b>Needs Immediate Improvement</b>
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\_\_\_\_\_  
Preceptor Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

***Thank you for the time and hard work you devote toward the education of ACOM students.  
Your feedback is highly valuable to the program.***

APPENDIX K: CLERKSHIP ROTATION EVALUATIONS

## Alabama College of Osteopathic Medicine Preceptor Evaluation of **Research Student**

Please complete this evaluation within 3 days of the student’s last day with you. The student may need this evaluation completed in order to be eligible for certain elective rotations. Please note that completion of the student evaluation indicates adequate student participation. We strongly encourage you to utilize the comments to highlight or clarify student performance.

*Thank you* for being a student mentor and giving back to the profession. For additional information regarding student expectations, please review the [Entrustable Professional Activities](#).

If you would like CME credits for precepting this student, please go to the link below:  
[https://acomedu.libinsight.com/cme\\_reporting](https://acomedu.libinsight.com/cme_reporting)

**Section I – Core Competencies:**

Please provide feedback regarding the performance of this medical student ***in consideration of current level of training***. Your responses will help the student improve by identifying strengths and weaknesses.

Observable Behavior(s)	Student Exceeds Expectations	Student Meets Expectations	Student Needs Improvement	Student Does Not Meet Expectations	Not Applicable to Setting
Outlines rational plan for research investigation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates reasonable depth of knowledge of the research project	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Applies fund of knowledge to address the research question(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Understands scope and impact of research project	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Uses applicable research methods	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Retrieves, critically appraises, and integrates relevant literature	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Takes initiative to troubleshoot any research obstacles	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Analyzes, interprets, and assimilates study findings accurately	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Documents research findings accurately	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Manages time spent on research activities effectively	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates ethical research behavior and compliance with all applicable guidelines	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Follows appropriate safety protocols	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Takes initiative to participate as a member of the research team	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communicates effectively with the research team and others as needed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Projects a professional attitude, including punctuality, attire, and readiness to complete tasks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Interacts with all members of the research team respectfully	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Section II – Narrative Comments:**

If a student exceeded expectations in any of the above observable behaviors, please explain below.

In what areas does the student need to improve? PLEASE list any deficits that the student should address immediately.

**Section III – Narrative Comments regarding Research Impact**

Please share your comments regarding the student’s awareness of the scope and impact of the research project after participating in this clerkship rotation.

**Section IV – Research Performance Check**

*(For students who earn “Below Average” or “Needs Immediate Improvement” please be sure to **provide comments** for students regarding areas for improvement in Section II above.)*

**Overall, how do you rate this student’s clinical skills (e.g., literature search, research methodology, professional behaviors)?**

**Above Average      Average      Below Average      Needs Immediate Improvement**

\_\_\_\_\_  
Preceptor Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

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## Alabama College of Osteopathic Medicine

### Mid-Rotation Preceptor Evaluation of Hospice Student



*Thank you* for being a student mentor and giving back to the profession. For additional information regarding student expectations, please review the [Entrustable Professional Activities](#).

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#### **Section I – Core Competencies:**

Please provide feedback regarding the performance of this medical student *in consideration of current level of training*. Your responses will help the student improve by identifying strengths and weaknesses.

Observable Behavior(s)	Student Exceeds Expectations	Student Meets Expectations	Student Needs Improvement	Student Does Not Meet Expectations	Not Applicable to Setting
Outlines rational plan for research investigation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates reasonable depth of knowledge of the research project	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Applies fund of knowledge to address the research question(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Understands scope and impact of research project	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Uses applicable research methods	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Retrieves, critically appraises, and integrates relevant literature	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Takes initiative to troubleshoot any research obstacles	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Analyzes, interprets, and assimilates study findings accurately	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Documents research findings accurately	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Manages time spent on research activities effectively	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates ethical research behavior and compliance with all applicable guidelines	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Follows appropriate safety protocols	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Takes initiative to participate as a member of the research team	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communicates effectively with the research team and others as needed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Projects a professional attitude, including punctuality, attire, and readiness to complete tasks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Interacts with all members of the research team respectfully	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Section II – Narrative Comments:**

Please provide details of at least one area where the student exceeded expectations.

Please provide details of at least one area where the student needs to improve.

**Section IV – Research Performance Check**

*(For students who earn “Below Average” or “Needs Immediate Improvement” please be sure to **provide comments** for students regarding areas for improvement in Section II above.)*

<b>Overall, how do you rate this student’s clinical skills (e.g., literature search, research methodology, professional behaviors)?</b>	<b>Above Average</b>	<b>Average</b>	<b>Below Average</b>	<b>Needs Immediate Improvement</b>
---	----------------------	----------------	----------------------	------------------------------------

\_\_\_\_\_  
Preceptor Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

*Thank you for the time and hard work you devote toward the education of ACOM students.  
Your feedback is highly valuable to the program.*

## Alabama College of Osteopathic Medicine End-of-Clerkship Survey

Please complete this survey by 3pm on the last day of each core rotation.

*Please rate your level of agreement with the following items. This questionnaire consists of items on a 7-point scale ranging from 1 (strongly disagree), 4 (neutral), to 7 (strongly agree).*

***Please rate your predominant training site during this clerkship rotation.***

1. Please state the name of the facility where you *predominantly* performed patient care (i.e., clinic name or hospital name).
  
2. This clerkship rotation was ***predominantly*** completed in which of the following practice locations?
 

a) Hospital setting	e) Surgery Center
b) Clinic or Office setting	f) Online Modules and/or Telemedicine
c) Combination of Hospital and Office	g) Other
d) Hospice setting(s)	
  
3. This training site provided me with adequate resources and support to allow me to function as a part of the healthcare team. 1 2 3 4 5 6 7
  
4. I had sufficient access to each patient’s record and/or EHR system to support patient care at this practice location. 1 2 3 4 5 6 7
  
5. I had the opportunity to regularly write progress notes either in the EHR or on paper. 1 2 3 4 5 6 7
  
6. I felt safe during my training at this practice location. 1 2 3 4 5 6 7

***Please rate your preceptor of record during this clerkship rotation.***

7. My preceptor used the learning agreement and an orientation to set educational objectives and clinical expectations. 1 2 3 4 5 6 7
  
8. My preceptor consistently displayed enthusiasm as a clinical teacher. 1 2 3 4 5 6 7
  
9. My preceptor provided enough feedback and coaching, including a mid-rotation evaluation, which helped me enhance my medical knowledge and clinical skills. 1 2 3 4 5 6 7
  
10. My preceptor effectively modeled expert clinical reasoning skills. 1 2 3 4 5 6 7
  
11. My preceptor gave me patient care responsibilities that were challenging and appropriate to my level of training. 1 2 3 4 5 6 7
  
12. My preceptor assigned appropriate readings and/or didactic activities to prepare me for performing patient care. 1 2 3 4 5 6 7
  
13. My preceptor consistently modeled professional behavior. 1 2 3 4 5 6 7

***Please rate your clerkship rotation experience.***

- |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|
| 14. The scope of patient problems was adequate for a complete, clinically relevant experience in this discipline.   | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 15. My opportunities to perform patient care / procedures / documentation were adequate for me to meet the educational objectives of this course.         | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 16. Any travel that was required for me to meet my preceptor's expectations was reasonable.   | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 17. I had the opportunity to work enough shifts/hours with my preceptor and/or other practice partners to meet the educational objectives of this course. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 18. The ACOM-assigned didactic activities and assignments enhanced my understanding of the clinical knowledge and skills required in this discipline.     | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 19. The Pathway to Residency didactics significantly enhanced my readiness to participate in auditions and otherwise prepared for the residency match.    | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 20. I had the opportunity to incorporate osteopathic principles and practices, including an osteopathic structural exam, into the diagnoses of patients.  | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 21. I was encouraged to perform OMT on patients as needed.  | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 22. My access to ACOM library resources was sufficient in supporting my educational and/or patient care needs.  | 1 | 2 | 3 | 4 | 5 | 6 | 7 |

***Please answer the following questions about your clerkship rotation experience as a whole:***

23. Provide feedback regarding your preceptor of record's strengths.
24. Provide feedback regarding any areas your preceptor of record could improve.
25. Provide any additional feedback you have regarding your clerkship rotation as a whole, including your experiences with additional preceptors and/or healthcare team members.
26. Provide any other clarifying feedback you have to the questions above, especially with regards to any unique aspects of your clerkship rotation (e.g., research opportunities, OMT opportunities, FQHC environment, experience with residents).

***Thank you for your participation.  
Your feedback helps us work continuously to improve your educational experience.***

# Alabama College of Osteopathic Medicine

## Annual Site Survey

Please complete this survey by June 1.

Core Site: \_\_\_\_\_

***Please rate your level of agreement with the following items based on your experiences at your core site. This questionnaire consists of items on a 7-point scale ranging from 1 (strongly disagree), 4 (neutral), to 7 (strongly agree).***

- |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|
| 1. My Medical Education Director was actively involved in teaching, advising, and mentoring.  | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 2. My Medical Education Director was available when I needed support or guidance.   | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 3. My Core Site Coordinator provided my schedule, including preceptor information, in a timely manner.  | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 4. My Core Site Coordinator was available when I needed support or had questions.   | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 5. Preceptors at this site gave me an appropriate amount of patient care responsibilities, including procedures and documentation, for me to develop my clinical skills each month. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 6. The site didactics (e.g., journal clubs, morning reports, grand rounds, tumor boards) were meaningful and added value to my educational experience.                              | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 7. The student lounge or other designated area for study, COMAT testing, and didactic activities was adequate for my needs.   | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 8. I had adequate access to Wi-Fi to fulfill the clinical duties expected of me.  | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 9. I had adequate access to the electronic health records (EHR) to fulfill the clinical duties expected of me.  | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 10. Osteopathic principles and practices were adequately supported and encouraged at this site.   | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 11. The orientation I received at my core site adequately prepared me to participate in clinical activities at this site.   | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 12. I was able to find reasonably priced housing near my site.  | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 13. I felt safe during my time at this site.  | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 14. There were plenty of opportunities to interact with the local community, including participating in volunteer experiences.  | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 15. Overall, my core site had everything I needed to develop the clinical skills necessary for me to excel during audition rotations.   | 1 | 2 | 3 | 4 | 5 | 6 | 7 |

***Please answer the following questions:***

16. Please provide at least three (3) overall strengths of this clerkship rotation site.
17. Please provide at least three (3) improvement opportunities for this clerkship rotation site.
18. Please provide any feedback you have regarding preceptors at this site.
19. Please provide any feedback you have regarding your Medical Education Director.
20. Please provide any feedback you have regarding your Core Site Coordinator.
21. Please describe the opportunities you had for learning at this site (e.g., journal club, morning report, tumor board, grand rounds, volunteer opportunities).
22. Please describe any noteworthy experiences regarding technology at this site.
23. Please describe your experiences regarding access to necessary areas of the site (e.g., ICU, NICU, cath lab, OR, Psych ward).
24. Please describe the space and equipment available for you to practice your OMT skills on a consistent basis.
25. Do you have any other relevant feedback to share? If so, please state it here.

***Thank you for your participation.  
Your feedback helps us work continuously to improve your educational experience.***