Phase III
Guidebook
Class of 2023

University of Colorado School of Medicine

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Information will be sent via your cuanschutz.edu email address. It is required that you check it daily. You are responsible for reading it and responding when appropriate.
Table of Contents

1. Introduction to Phase III
   a. Welcome: pg. 3
   b. How to Use this Guide: pg. 4

2. Requirements
   a. Specific Requirements for Phase III: pg. 4
   b. Completing Step 1: pg. 6
   c. Logistics: Immunizations and Badging: pg. 8
   d. Attendance Policy Information: pg. 15

3. Scheduling and Calendar
   a. Required Courses and Phase III Requirements: pg. 17
   b. Scheduling During Third Year: pg. 18
   c. Elective Schedule and Requirements: pg. 19

4. Grading in Phase III
   a. Overview of Grading in Phase III: pg. 21
   b. NBME Shelf Exam: pg. 30
   c. Grade Appeal Process: pg. 32
   d. Feed Forward Policy: pg. 34

5. Clinical Policies and Procedures
   a. Clinical Dress Code: pg. 36
   b. Family Member as Supervisors for Medical Students Policy: pg. 38
   c. Medical Student Duty Hour Policy: pg. 38
   d. Clinical Logger Requirements: pg. 40

6. Professionalism
   a. Relationships between Students and Teachers: pg. 43

7. Academics and Student Support
   a. Academic Support and Disability Resources: pg. 44
   b. Financial Planning: pg. 46

8. Office of Student Life
   a. Staff: pg. 51
   b. Career Services: pg. 53
   c. Diversity and Inclusion: pg. 54
   d. AHEC Policies: pg. 55

9. Appendices
   a. Drug Screen Form: pg. 64
   b. Providing Feedback Form: pg. 65
   c. Block Information Summaries: pg. 67
**Introduction to Phase III:**

**Welcome Class of 2023!**

Welcome to Phase III—a true milestone in your medical training! We hope this Guidebook will prepare you for the clinical year that lies ahead.

Phase III will allow you to put two years of studying to work, challenging you to apply concepts in the clinical setting and influence patient care. You will also be privileged to care for people in ways that you have never imagined. You will experience the excitement of life-saving interventions, feelings of accomplishment when optimal outcomes are attained, and fulfillment after guiding patients and families through challenging situations. You will also face new challenges. You will be distressed when optimal outcomes are not possible, frustrated when interventions are not working, and endure sadness when you lose patients.

Throughout these encounters, you will be faced with defining your own professional identity. Your core values and beliefs will merge with the demands and expectations inherent to the practice of medicine.

We hope that all your experiences in the clinical setting are positive ones with excellent role models; however, you may encounter situations that challenge your perceptions. You may feel that certain situations call for more empathy, more professionalism, and more attention to detail. Reflecting on these incidents and asking yourself what kind of physician you want to be and conscientiously developing your own professional identity will be yet another profound experience that begins during this exciting year.

Although it may not seem like it at times, you also serve as role models during your clinical years. You will inspire those you work with to look at things with fresh eyes, to critically think, and strive to teach well. The practice of medicine is never stagnant and requires life-long learning; you bring a substantial influence to this process. Working as teams will challenge us to grow and find ways to better ourselves and our provision of care. Please recognize this role and utilize it as you start your journey to creating your own professional identity. Know that we (in the Curriculum Office and in the Office of Student Life) are here to support you along the way. Please do not hesitate to reach out to ask questions, reflect, discuss your goals, plan for residency, or just to talk.

Sincerely,

Jennifer Adams, MD  
Assistant Dean, Clinical Core

Jenna Wyrick  
Phase III Coordinator
How to use this Guide:

This is a reference guide, to give you a general sense of what to expect. There are changes that will happen over the next few months. You will receive increased detail around scheduling, expectations, etc. A safe approach: if you have questions not answered by this guide, ASK!! The Offices of Student Life and Medical Education are here to make your life easier; we know this can be confusing! Read through elements that apply to you, and then ask for clarification of anything that is unclear. You will sit through clerkship orientations throughout the year that will cover several of the issues you may have questions about, but please know - you probably won’t remember everything. This guidebook is designed to serve as a summary of material you may have heard already.

Note: that this Guidebook currently contains the latest version of the SOM Policies and Procedures.

Requirements:

Specific Requirements for Phase III

<table>
<thead>
<tr>
<th>Check off</th>
<th>Requirement (see SOM Policies and Procedures, Section 3.7 and 3.8)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall</td>
<td>Maintain status as a full-time student for a minimum of four academic years, including payment of tuition for each of the semesters of those academic years.</td>
</tr>
<tr>
<td></td>
<td>Complete the MD program in no longer than six years of academic enrollment.</td>
</tr>
<tr>
<td>End of Phase III</td>
<td>Successfully complete Phases I &amp; II required courses and achieve a passing grade in all courses, including electives. Confirm passing grades are posted on your transcript. Complete immunization information on My Record Tracker.</td>
</tr>
<tr>
<td></td>
<td>Achieve a passing score on USMLE Step 1 within the specified timeframe and guidelines.</td>
</tr>
<tr>
<td>Phase III</td>
<td>Complete the 1-week ICC 7001 course in April.</td>
</tr>
<tr>
<td></td>
<td>Complete the 1-week ICC 7002 course in December.</td>
</tr>
<tr>
<td></td>
<td>Successfully complete Phase III required clinical blocks and/or clerkships. Confirm passing grades are posted on your transcript.</td>
</tr>
<tr>
<td></td>
<td>Complete the 2-week ICC 7003 course at the end of Phase III.</td>
</tr>
<tr>
<td></td>
<td>Successfully complete the Clinical Practice Exam (CPE) at the end of Phase III.</td>
</tr>
<tr>
<td>Phase IV</td>
<td>Achieve a passing score on USMLE Step 2 CK (clinical knowledge) and Step 2CS (clinical skills) within the specified timeframe and guidelines.</td>
</tr>
<tr>
<td></td>
<td>Complete 32 weeks/64 credits of 8000 level courses, including at least one approved sub-internship at an approved site and ICC 8004 (2 weeks) and ICC 8005 (2 weeks). Confirm passing grades are posted on your transcript.</td>
</tr>
<tr>
<td></td>
<td>Successfully complete the requirements of the Mentored Scholarly Activity.</td>
</tr>
</tbody>
</table>
All Phase III blocks and clerkships must be completed within the state of Colorado at University affiliated sites, including the AHEC (Area Health Education Centers) system.

To complete Phase III, a student must complete all required Phase III clerkships with passing grades, all required Longitudinal Curriculum elements and the Clinical Practice Exam (CPE) by passing or remediating.

Because the CPE testing dates extend into the early blocks of Phase IV, courses may be initiated prior to achieving a passing score or appropriate remediation. However, students may not sit for Step 2 CS prior to passing or remediating the CPE. Students should complete all Phase 3 clinical requirements prior to taking the CPE or Step 2 CS. Failure of the CPE may result in halting of Phase IV and reporting to Student Promotions Committee.

Exceptions related to not attending a required ICC course or taking the CPE must be initiated with the Assistant Dean for Student Affairs who will work respectively, with the ICC Director or CPE Director on the student’s behalf. The Assistant Dean for Student Affairs is authorized to allow exceptions to these requirements in special circumstances.

Off-cycle students delayed in completing all required Phase III courses prior to the start of Phase IV may be allowed, under certain conditions, to enroll in selected Phase IV electives, which are longer than two weeks. Qualifications and restrictions are defined in the table below:

<table>
<thead>
<tr>
<th>Eligibility</th>
<th>Course Taking Restrictions</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Be in good academic standing</td>
<td>1. Limit 4th year elective course taking to no more than 8 weeks.</td>
</tr>
<tr>
<td>2. Be off-cycle (i.e., delayed) and unable to enroll in a clerkship due to limited availability or overlap of the schedule with required ICC.</td>
<td>2. May not enroll for Sub-internships, away electives, or electives that are like Sub-Is (e.g., DH Career elective in Emergency Medicine). The determination of “like sub-Is” is at the discretion of the OSL.</td>
</tr>
<tr>
<td>3. Need no more than 8 weeks of clerkships to complete 3rd year; However, for enrollment in Research Electives, there is no restriction regarding how many weeks of Phase 3 clerkships remain to be completed.</td>
<td>3. Must receive approval from the OSL to schedule courses. Student may not self- schedule.</td>
</tr>
<tr>
<td>4. No guarantee that a student will be enrolled in the desired elective course.</td>
<td>5. Must complete all required 3rd year courses prior to taking the Clinical Practice Exam (CPE). Must complete the CPE prior to taking Step 2 CS.</td>
</tr>
</tbody>
</table>

Once a year, the Office of Student Life will report to the Curriculum Steering Committee and the Student Life Steering Committee about the use of this policy and any other relevant outcome data.
Completing USMLE Step 1

Before students can advance to Phase III, they must achieve all the minimum requirements for Phase II. These requirements are laid out in the SOM Policies and Procedures, Section 3.7.3. Among these requirements is sitting for the USMLE Step 1 Exam.

Dates and Deadlines

From Registration to test day Timeline

<table>
<thead>
<tr>
<th>Event</th>
<th>Timeline</th>
</tr>
</thead>
<tbody>
<tr>
<td>NBME opens registration for Step 1</td>
<td>September 2020</td>
</tr>
<tr>
<td>Begin NBME registration</td>
<td>September – October 2020</td>
</tr>
<tr>
<td>Step 1 resources and logistics talk</td>
<td></td>
</tr>
<tr>
<td>Required CBSSA form 18</td>
<td>December 2020 - January 2021</td>
</tr>
<tr>
<td>Take practice tests (NBME or other)</td>
<td>December - February 2021</td>
</tr>
<tr>
<td>Dedicated study period</td>
<td>March 15 - April 30, 2021 (* at least 1 week of vacation recommended)</td>
</tr>
<tr>
<td>Required CBSSA form 20</td>
<td>Around March 13</td>
</tr>
<tr>
<td>Step 1 exam</td>
<td>Any time during dedicated study period; must sit before the first day of ICC (5/3/21)**</td>
</tr>
<tr>
<td>Integrated Clinicians Course (ICC)</td>
<td>May 3-May 7, 2021</td>
</tr>
<tr>
<td>First clerkship begins</td>
<td>May 10, 2021</td>
</tr>
</tbody>
</table>

Scheduling Your Test Appointment

1. Contact the Office of Student Life to initiate the registration process immediately.
2. Receive your Scheduling Permit by email within approximately 2 to 4 weeks of registering.
3. Contact Prometric to schedule your appointment to take the test. Go to [http://www.prometric.com](http://www.prometric.com) and follow the instructions on your Scheduling Permit. Identify a center and schedule a test date using information from your Scheduling Permit. Limitation: You have only a 3-month window in which to schedule your test date.
4. Confirm your test date one week prior to your scheduled test appointment.
5. Arrive at your center for your test appointment 30 minutes in advance.
6. Bring your Scheduling Permit and required identification on your testing date. Acceptable identification includes Passport, Driver’s license with current photo, National identity card, other government-issued ID card with photo. Limitation: Your name as it appears on the Scheduling Permit must match EXACTLY the name on your ID.
**Rescheduling and Prometric Fees**
You may reschedule your testing appointment within your 3-month window. Instructions for rescheduling your testing appointment are on your Scheduling Permit.

However, if you change your testing appointment (e.g., reschedule, cancel, and change test center location) at a Prometric Test Center 30 or fewer days before your scheduled test appointment, Prometric will charge a fee. No fee is charged if you make changes 31 or more days prior to the first day of the scheduled test.

**Delays in Passing Step 1**
To continue with Phase III, you must achieve a passing score within 12 months after completing Phases I & II. You may take Step 1 no more than three times. If you fail the exam 3 times or fail to pass the exam within 12 months, you are subject to dismissal by the Student Promotions Committee.

**Students choosing to delay Step 1**
Students who choose to sit for Step 1 beyond the 5-week study period are subject to the time limits and test attempts described above. These students cannot start third year on time with their class of origin and no sooner than the Fall Semester.

- Academic Status: The Student Promotions Committee will be notified of your delay, and you will be placed on an administrative Leave of Absence (LOA) until you have achieved a passing score. You will not be eligible for financial aid or enrollment in the Summer semester.
- Delayed Start: Your initial schedule will no longer be valid. Expect a delayed start of Phase 3 of at least until the Fall Semester and up to 1 year due to scheduling availability.
- Delayed graduation: If the Promotions Committee approves the delay, you may have graduation delayed with a responsibility for the additional tuition of an extended program.
- Students wishing to delay Step 1 must present a request in writing to the Office of Student Life no later than two weeks after the end of Phase II.
- Any student who delays sitting for Step 1 after the start date of IDPT 7001 must achieve a passing score and pass IDPT 7001 before being allowed to start any Clinical Block.
- Anyone delaying Step 1 will not be able to begin Phase III any earlier than the Fall Semester. Clinical Block start dates will depend on availability and delays will likely occur, possibly leading to a delayed graduation.
- Students previously enrolled in a Longitudinal Integrated Curriculum (LIC) will not be able to participate in the LIC in the corresponding academic year.

**Students not passing Step 1**

- If a student fails step 1, they will continue in clerkships and retake the exam at the end of Phase 3 after at least 4 weeks of studying
- Students must pass Step 1 within 12 months of their first attempt.
Students not passing Step 1 a second time
Although rare, this is a serious occurrence because the school allows a student only 3 attempts to pass this exam.

- Your Academic Status: Students who fail the exam twice remain on a Leave of Absence and are placed on “Academic Warning” status. This allows the time for an intensive and structured review.

- Develop a Study Plan: You must meet, at least once, with a remediation specialist in the Office of Student Life to develop a written study plan that must be approved by the Student Promotions Committee.

- Student Status: Students may not resume active student status (and must stop extracurricular activities) until they have achieved a passing score on the exam.

- Plan for a Delayed Graduation Date: This situation always results in a delayed graduation. Some students choose to graduate in December, following their initial graduation year. Others take more time and delay their graduation until the following May.

Confidentiality
- The School of Medicine uses scores on Step 1 and Step 2 as an indication of competency and evaluation of the educational programs and to compare our students’ performance with national standards. The School will not release any student’s individual score; however, most residency programs expect students to release individual scores to them.

- USMLE scores are not recorded on your transcript and they are not on your senior (MSPE) letter to residency programs. Only the fact that you have passed this exam will be recorded in the letter.

- Strict confidentiality is maintained for students who do not pass any USMLE exam.

Please discuss the implications of this, or any concerns, with Student Affairs.

Logistics: Immunizations and Badging
The following will walk you through the requirements for TB mask fitting, Children’s Hospital Colorado (CHCO), University of Colorado Hospital (UCH), Denver Health Medical Center, Presbyterian/St. Luke Medical Center (P/SL) and Veteran Affairs Medical Center (VA). Clerkship coordinators will facilitate the completion of necessary paperwork for additional sites you may rotate through during your clerkships.

Please read through this document carefully. The following instructions are REQUIREMENTS for each of the following locations. You will NOT be allowed to begin your clerkship rotations if each requirement is not completed.

All remaining forms to be completed will be emailed to you after the Orientation to 3rd year session.

Comply with Required Clinical Requirements
Students are expected to maintain a knowledge of and compliance with School of Medicine policies related to immunizations, BCLS and ACLS, TB testing and TB mask fitting, needle
sticks, Workers’ Compensation, drug screening, HIPAA (Health Insurance Portability and Accountability Act), and universal precautions/OSHA (Occupational Safety and Health Administration) requirements. Determined by the Clinical Requirements Committee, these policies change throughout the year, and it is the responsibility of the student to maintain compliance. The table below is provided to assist you in keeping abreast with changes in policies and procedures.

<table>
<thead>
<tr>
<th>Clinical Requirements</th>
<th>Year</th>
<th>CUSOM Policy — Website Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>Immunizations</td>
<td>Before Phase I</td>
<td>Required Pre-Matriculation: <a href="#">Immunization Certification</a></td>
</tr>
<tr>
<td>Drug Screening</td>
<td>Phase I, Phase III</td>
<td>Required prior to the start of working in a clinical site during Phase I and Phase III. For CUSOM policy go to <a href="#">Drug Screening Policy</a></td>
</tr>
<tr>
<td>TB mask fitting</td>
<td>Phase I, Phase III</td>
<td>Required once during Phase I (during FDC) and once before beginning Phase III (during ICC 7001).</td>
</tr>
<tr>
<td>Influenza Immunization</td>
<td>Phase I-IV</td>
<td>Required annually (unless medically contraindicated) through individual’s health insurance coverage.</td>
</tr>
<tr>
<td>TB testing</td>
<td>Phase I-IV</td>
<td>Required annually through individual's health insurance coverage.</td>
</tr>
<tr>
<td>Health Insurance Portability and Accountability Act (HIPAA)</td>
<td>Phase I-IV</td>
<td>Required annually. See Clinical Requirements course on Canvas.</td>
</tr>
<tr>
<td>Universal Precautions OSHA Requirements – Hazardous Materials Exposure</td>
<td>Phase I-IV</td>
<td>Required annually. See Clinical Requirements course on Canvas. For CUSOM policy go to <a href="#">Hazardous Exposure Policy</a></td>
</tr>
<tr>
<td>Blood Borne Pathogens</td>
<td>Phase I-IV</td>
<td>Required annually. See Clinical Requirements course on Canvas. For CUSOM policy go to <a href="#">Hazardous Exposure Policy</a></td>
</tr>
<tr>
<td>Needle Stick Policy</td>
<td>Phase I-IV</td>
<td>Required annually. See Clinical Requirements course on Canvas. For CUSOM policy go to <a href="#">Hazardous Exposure Policy</a></td>
</tr>
<tr>
<td>BCLS</td>
<td>Phase I, Phase III</td>
<td>Required during Phases I (during Fall in FDC I) and III (during ICC7001).</td>
</tr>
<tr>
<td>ACLS</td>
<td>Phase IV</td>
<td>Required during Phase IV (completed during ICC 8005).</td>
</tr>
<tr>
<td>Workers’ Compensation</td>
<td>As needed</td>
<td>Go to this website, and look under the “Incident Procedure” tab for further detail: <a href="#">Workers’ Compensation</a></td>
</tr>
</tbody>
</table>

Read this document for step by step process: [Needlestick & Body Fluid Exposure Process](#)
Confirm/Update Required Immunizations and Influenza shots

☐ Keeping immunizations current is your professional responsibility. PPD and Tetanus have expiration dates.

☐ The clinical sites require that your immunizations are current. They often require letters of good standing which we cannot give you if your immunizations are not up-to-date.

☐ Influenza shots are required. You must be immunized for the upcoming flu season by November 1st.

☐ The following are the recommendations: Proof of Tdap (within 10 years), Polio, HepB, Varicella, MMRs (x2), and PPD (Annually).

☐ It is your professional responsibility to maintain all documentation in My Record Tracker. If you are out of compliance, you will immediately be pulled from your rotation. This may also result in Professionalism Reports, make-up work, and considerable delays in completing Phase III.

Complete Required Drug Screen
Drug screening is required and must be completed by January 31, 2020. Instructions will also be emailed to you after this orientation to the 3rd year. Go to Appendix A for the form you need to complete and locations to get your drug screening completed.

Complete Fitting for TB Mask
1. Please show up at your appointed time during ICC1 in April.

2. If you miss this opportunity to be mask fitted, you will need to find a time to drive to the mask fitting company (ATC) and pay the $75.00 fee.

3. It is recommended that all facial hair be shaved off prior to fit test appointment, but this is not a requirement. You may still participate in the fit testing sessions; however, you will not be OSHA certified as being fit tested. Completing the mask fit session even with facial hair will fulfill the SOM requirement which is to learn how to correctly fit yourself with a mask.

ATC Disclaimer: We cannot fit test anyone with facial hair, per OSHA requirements; we can only provide a sample full face respirator and do a demonstration. Unfortunately, since the full-face masks must be fit to the individual that will be using the mask, we (ATC) cannot verify that the student will be appropriately protected in another mask. We can only fit students per the OSHA fit testing standard in the N95 masks.

myClinicalExchange (MCE)
All Phase III students are required to create a student account for myClinicalExchange (MCE), if you do not have one, please contact SOM.Badging@ucdenver.edu.

Badging Logistics by Site
☐ The following instructions will walk you through the requirements for Children’s Hospital Colorado (CHCO), University of Colorado Hospital/UCHHealth (UCH), Denver Health Medical Center, and Veteran Affairs Medical Center (VA). Clerkship coordinators will facilitate the completion of any necessary paperwork for additional sites you may rotate through during your clerkships.

☐ Please read through the following instructions carefully as they are REQUIREMENTS for each of the following locations. You will NOT be allowed to begin your clinical clerkship rotations if any of these requirements are not completed.

☐ All other forms will be emailed to you shortly after the Introduction to Phase III Orientation session.
Due Dates to Remember by Site:

<table>
<thead>
<tr>
<th>Site</th>
<th>Application Dates</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children’s Hospital of Colorado</td>
<td>Complete Application by January 29, 2021</td>
</tr>
<tr>
<td>University of Colorado Hospital</td>
<td>Sign up to take your picture more information will be sent</td>
</tr>
<tr>
<td>Denver Veterans Affairs Medical Center</td>
<td>Submit Application by February 26, 2021</td>
</tr>
<tr>
<td><strong>Please note:</strong> The timeline and process outlined is the expected timeline and process order. However specific dates and steps are subject to change as needed in ongoing coordination with our VA Badging Partners.</td>
<td>Complete Fingerprinting between February 26, 2021 and March 12, 2021</td>
</tr>
</tbody>
</table>

**Children’s Hospital of Colorado**

All students will rotate through Children’s Hospital of Colorado (CHCO) and MUST complete the following online forms. Steps 1 & 2 will authorize CHCO to set up an account for you. Without an account set up prior to your arrival, you will not receive a badge, parking assignment, computer login information, training modules for EPIC access, nor be able to work. You will receive your badge, parking assignment, and your network computer login information on the first day of your rotation at CHCO.

Complete the following forms: These forms must be completed ONLINE by January 29, 2021. **Please note, once you complete the online forms it takes approximately 10 business days to become fully on-boarded.**

1. Non-Employee Staff Entry Form (SEF) – online form: (Completed by the Trainee) [https://sef.childrenscolorado.org](https://sef.childrenscolorado.org)
   - If you have not yet received an NPI # (National Provider Identifier) please enter N/A in the NPI # field.

2. Security User Agreement (SUA) - online form (Completed by the Trainee) [https://agree.childrenscolorado.org](https://agree.childrenscolorado.org)
   - Password: Balloonboy (case sensitive)
     - Use Andrea Reed/Medical Education for staff owner/dept).
     - Trainees will not find their name in a search unless they have been previously on-boarded at Children’s. In which case please click onto “create a new security user agreement”.
     - Trainees that have been previously on boarded do not need to complete a new SUA nor override it.

3. Approximately two weeks prior to your CHCO rotation you will be emailed instructions on how to access the CHCO online mandatory Electronic Medical Record (EMR) training (referred to as Computer-based Training modules or CBTs). This training is mandatory for epic access and you will not be able to work without it. ***You must do this on your own time***
University of Colorado Hospital Badging and EPIC
The CUSOM UME Badging coordinator will be requesting EPIC access for all Phase III students. UCHealth badge access will also be requested while enrolled in the Operative/Peri-Operative, Emergency Medicine, Neurologic, Musculoskeletal Care and Ob/Gyn clerkships. Access for all other clerkships will be requested on an as-needed basis.

All UCHealth badges will grant you access to the scrub machines, sleeping rooms and the perimeter doors for after-hours access. A badge is required to access the controlled employee and patient secure elevators. To facilitate use of the facility by both clinicians and patients, we ask that providers not use the centralized guest elevators.

You will be emailed a link to sign up to have your picture taken. Please bring your picture ID; such as your student ID. At this session, you will only have your picture taken.

If you already have an UCH badge, you will not need to sign up to have your picture taken or request another one unless yours is damaged.

You will need to register for the new scrub system once you receive your badge. You will need the eight-digit badge number to register. [https://ucolorado.registerscrubxchange.com/login](https://ucolorado.registerscrubxchange.com/login)

Badging Office Location: Leprino Parking Structure, First floor, enter between Jimmy John’s and Canvas Credit Union Hours: Monday-Friday 7:30 –3:00p.m. Phone: 720-848-8356

Denver Health Medical Center
Most of you completed your Denver Health badging application as a Phase I student. However, in light of a security breach in April 2017, Denver Health has changed their badging process and as a result, all students are now required to have a photo badge on their person to gain access to Denver Health. The SOM Badging Office will reach out to those students who are missing Denver Health badging information as needed.

The SOM Badging Office will be working on setting up My Clinical Exchange (MCE) rotation requests and working to get all information in order. Please note, Denver Health requires that all students enter their full social security number in MCE as part of the badging process.

Denver Health process for "Re-activation" on computer accounts
Computer accounts stay active for “30 days” and will continue to stay active as long as they are in use without a 30-day break.

If it has been at least “30 days or longer” from the last time the students have been at Denver
Health they will need to do the following process.

Re-activation instructions below must be followed “1-2 weeks” prior to start date:

- Send an email to DenverHealthHelpDesk@dhha.org and include the following information:
  - Include your first/last name
  - Last 4 of social security number
  - Department of rotation
  - Start & end dates
  - cell/pager number
  - Women only: maiden and married name if applicable
- Unable to email; then call the helpdesk at 303-436-3777

**Security Questions Needed for future reactivation:**

When you have logged onto the computer, please go to the Denver Health Pulse

- Click on the “General Information” tab
- “Employee Directory Screen” will appear
- Type in your last then first name
- Hit “enter”
- Your name will appear in another box
- “Click on your name”
- The screen will now show your picture & profile information
- On left hand side click on the word “details”
- At the bottom of your profile there are 2 boxes, the first one will give your “4 different security questions”, choose one & in the box below and chose your answer
- Click the save button & your finished

Should you have to call or email to have your account reactivated, this is information that you will have to give.

If you should have any problems with your accounts on your first day, please call the helpdesk at 303-436-3777 for advice and/or assistance.

Contact for Denver Health Medical Center:

LaToya Hammons  
Undergraduate Education Coordinator Office of Education  
303-602-4966  
Email: LaToya.Hammons@dhha.org

**Denver Veterans Affairs Medical Center**

You will be provided the VA badging application along with specific instructions for completing the application. The message will come from CUSOM Badging at som.badging@cuanschutz.edu. Please follow the directions outlined for completing the application as they are very specific. Failing to complete the request form according to the instructions could result in a processing delay. It is IMPORTANT that you send the completed forms from your CUANSCHUTZ.EDU email to securely send your social security number. **Please submit your application by February 26, 2021.**

*Please note: The timeline and process outlined is the expected timeline and process order. However*
specific dates and steps are subject to change as needed in ongoing coordination with our VA Badging Partners.

Please pay close attention to the following badging application process requirements:

1. **Complete VA Badging Application:** To facilitate completing your VA badging paperwork, you will be receiving a message from DocuSign on behalf of Tracy Johnson, the SOM Badging Coordinator. Please open the DocuSign message to access and complete the VA Badging application. This is a long application, so you will have the option to save your progress and return to it at a later point. Save your initial DocuSign email from Tracy to return to your VA Badging application. All completed applications, along with the required training certificate are due by, **Friday, February 26, 2021.**

2. **Have Fingerprints Taken:** As part of the VA Badging process, you will need to have your fingerprints taken. Fingerprinting will need to be completed between **February 26, 2021 and March 12, 2021,** at the VA Security Office located in Building A of the VA Medical Center on the 2nd Floor. Building A can be found at the corner of Colfax and Wheeling Street. A map will be attached for your reference. Please be sure to take your **driver's license or passport** when going to get fingerprinted. The badging office is available Monday - Friday, 7:30 am to 3:30 pm, with the exception of holidays; **no appointment is required for fingerprinting.**

3. **Complete VHA Mandatory Training for Trainees and Attach Certificate of Completion:** VA badging application requires that you attach your **completed training certificate** for the VHA Mandatory Training for Trainees. This training will take approximately 2 hours to complete and is required to submit your completed VA Badging application. You will receive directions (Instructions to create a new Talent Management System) for setting up an account in the VA’s online Talent Management System, which houses the mandatory training course you will need to complete.

4. **Read Supplemental Policies:** The VA Badging application also requires you to attest that you have read the following policies during the completion of your VA Badging application (Policies will be attached to email you receive to complete your VA Badging Application).
   - Local Policy 00Q-78 Patient Abuse and Neglect
   - Local Policy 00-23 Employee/Patient Relationships
   - VA Handbook 6500, Appendix G, Department of Veterans Affairs (VA) Rules of Behavior

The VA will be swearing you in and complete the I9 verification for the Without Compensation Form (WOC). You MUST bring 1 item from column A (ex. passport) OR 2 items from column B (ex. Driver’s license & social security account number card). Naturalized citizens will also need to bring a copy of your certificate of naturalization to this session.

The final step will be to visit the VA one more time to pick up your badge. You will need to bring two forms of ID. You will need to have an item from column A and an item from column B or C. You will need the VA badge for every rotation at the VA hospital throughout your clerkships; your badge is also your key to the computer systems so please do not misplace it.
VA Badges must be picked up by June, any unclaimed badges will be destroyed, and you will have to start the entire process over.

**Leave of Absence**
Students may request to be away from the medical school curriculum for a time less than a full academic period as defined by the University. There may be a variety of reasons for granting this request, as determined by the Assistant Dean of Student Affairs. Students interested in taking time out of the curriculum must first contact one of the Assistant Dean of Student Affairs who will consider the merits of each individual case and work with the student and appropriate faculty. The policies governing a leave of absence can be found in the [SOM Policies and Procedures Handbook](#), Section 3.6.

**Attendance & Absences**
Your attendance is mandatory in every rotation. Unlike your first two years, where most lectures were optional, and few sessions required, your attendance is mandatory in every rotation. Policies governing absences can be found in the [SOM Policies and Procedures Handbook](#), Section 1.

<table>
<thead>
<tr>
<th>Phase III - Clinical Blocks &amp; Clerkships</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Expectations</strong></td>
</tr>
<tr>
<td>Attendance on clinical rotations and didactic sessions (unless otherwise specified) is required. Rotations end on the last Friday afternoon of each rotation. Every attempt must be made to schedule absences for voluntary situations outside of the required curricular elements (e.g., holidays, course breaks). Specific expectations: Presentation or attendance at conferences: limited to 48 hours including the day of presentation for any course greater than 2 weeks.</td>
</tr>
<tr>
<td><strong>PROCESS to Seek an Excused Absence or to Inform of an Involuntary Absence</strong></td>
</tr>
<tr>
<td><strong>Requested Absence</strong></td>
</tr>
<tr>
<td>Submit your request in writing to the Office of Student Life, which will forward the request to the Clinical Block/Clerkship Director for approval. Requests must be presented well in advance, in writing and reasonable documentation is required. The student must inform his or her attending and/or resident of the approved absence. EXCEPTIONS: Students enrolled in the DH-LIC, Ft. Collins LIC, or the Colorado Springs LICs use a different process. See respective syllabi for details.</td>
</tr>
<tr>
<td><strong>Involuntary Situation</strong></td>
</tr>
<tr>
<td>Student must contact his or her attending and/or resident as well as the Clinical Block Director as soon as possible or prior to missing any time. To be considered an “excused” absence, an absence for an involuntary situation must be approved by the Block or Clerkship Director. EXCEPTIONS: Students enrolled in the DH-LIC or the CSB use a different process. See respective syllabi for details.</td>
</tr>
<tr>
<td><strong>Inform Office of Student Life</strong></td>
</tr>
<tr>
<td>Student must inform the Assistant Dean of Student Affairs of any absences, excused or unexcused, involuntary or voluntary. EXCEPTIONS: DH-LIC or CSB Course leadership will inform the OSL of absences. See respective syllabi for details.</td>
</tr>
</tbody>
</table>
CONSEQUENCE OF ABSENCE (e.g., make-up work/days, remediation, professional report, grading)

If an absence (excused or unexcused) lasts for more than 2 days, the Block/Clerkship Director or the Student Coordinator, and the Assistant Dean of Student Affairs will work with the student and faculty regarding make-up time/work, issues for credit, etc.

If the agreed upon make-up session or work is not completed, not completed within the agreed upon timeframe, or not completed with satisfactory quality, then the Clinical Block/Clerkship Director will ask the Assistant Dean of the Clinical Core to convene a executive session meeting of the CBDs to discuss the assignment of a non-passing grade (an “I” or a “F”).

EXCEPTIONS: DH-LIC or CSB Course leadership will work with students to “make up” missed work. See respective syllabi for details.

All exams and assessments are required. Students are expected to take these as scheduled. All absences from scheduled exams will be reported as described in the table below. See SOM Policies and Procedures Handbook, Section 1.4.4.

| Phase III or Phase IV (Includes exams or assessments in FDC or other Longitudinal Curriculum) |
|---|---|---|
| **Phase** | **Type of Situation** | **Notification Procedures** |
| | Situation where advanced notice is possible | □ Student should notify appropriate Block, Course or Clerkship Director in advance of exam and request an “excused absence.”  
□ Block, Course, or Clerkship Director notifies Assistant Dean for Student Affairs. |
| | Situation where advanced notice is NOT possible (e.g., major emergency) | □ Notify appropriate Block, Course or Clerkship Director and the Assistant Dean of Student Affairs as soon as possible.  
**Acceptable notification** requires speaking directly to the appropriate Block, Course, or Clerkship Director and the Assistant Dean of Student Affairs. If a person is unavailable, the student should leave a phone message and immediately send an email. The student must continue to follow-up until contact is made with the appropriate persons. |
Scheduling and Phase III Calendar:

Required Courses and Phase III Requirements
During Phase III, the content from 9 required clinical blocks or clerkships are required for graduation. Most students will receive this content through traditional block rotations, while some will experience at least part of the curriculum through a Longitudinal Integrated Clerkship (LIC) or hybrid experience. If you are in the Denver Health LIC, Fort Collins LIC, or Colorado Springs Branch LIC, the course numbers will be different. Please see your LIC specific information for details regarding these course numbers and specific time requirements.

<table>
<thead>
<tr>
<th>Course #</th>
<th>Course Name</th>
<th>Weeks</th>
<th>% Ambulatory</th>
</tr>
</thead>
<tbody>
<tr>
<td>IDPT7010</td>
<td>Hospitalized Adult Care</td>
<td>8</td>
<td>0%</td>
</tr>
<tr>
<td>IDPT7020</td>
<td>Infant, Child, and Adolescent Care</td>
<td>6</td>
<td>30-100%</td>
</tr>
<tr>
<td>IDPT7030</td>
<td>Ob/Gyn</td>
<td>4</td>
<td>30-40%</td>
</tr>
<tr>
<td>IDPT7031</td>
<td>Emergency Care</td>
<td>2</td>
<td>100%</td>
</tr>
<tr>
<td>IDPT7040</td>
<td>Psychiatric Care</td>
<td>4</td>
<td>12.5-87.5%</td>
</tr>
<tr>
<td>IDPT7041</td>
<td>Neurologic Care</td>
<td>2</td>
<td>40%</td>
</tr>
<tr>
<td>IDPT7050</td>
<td>Perioperative-Operative Care</td>
<td>8</td>
<td>40%</td>
</tr>
<tr>
<td>IDPT7070</td>
<td>Community and Primary Care</td>
<td>8</td>
<td>100%</td>
</tr>
<tr>
<td>IDPT7080</td>
<td>Integrated Longitudinal Medicine Clerkship (ILMC)</td>
<td>16</td>
<td>—</td>
</tr>
<tr>
<td>Various</td>
<td>Denver Health – Longitudinal Integrated Clerkship (DH_LIC)</td>
<td>44</td>
<td>—</td>
</tr>
<tr>
<td>Various</td>
<td>Fort Collins – Longitudinal Integrated Clerkship</td>
<td>46</td>
<td>—</td>
</tr>
<tr>
<td>Various</td>
<td>Colorado Springs Mentored Integrated Clerkship (COSMIC)</td>
<td>46</td>
<td>—</td>
</tr>
<tr>
<td>—</td>
<td>Veterans Affair Sequential Training (VAST)</td>
<td>24</td>
<td>—</td>
</tr>
<tr>
<td>—</td>
<td>Colorado Community Longitudinal Integrated Clerkship (C-CLIC)</td>
<td>24</td>
<td>—</td>
</tr>
</tbody>
</table>

The end of Phase III CPE is summative (IDPT 7102), and students not passing this exam must remediate before continuing coursework in Phase IV. This summative exam seeks to “sum up” the student’s performance thus far and assess whether a student is performing at the expected level before being permitted to continue in the program. Students are expected to take and pass the end of Phase III CPE prior to taking the USMLE Step 2 CS. Please respond in a timely manner to emails regarding these assessments from the CAPE.

In addition to the clinical blocks and clerkships, all students are also enrolled in the following courses:
- **IDPT 7001, IDPT 7002, IDPT 7003, Integrated Clinician Courses (ICC):** At the beginning, middle, and end of Phase III, students are brought together to attend an Integrated Clinician Course. These courses vary in length and purpose. Student attendance is mandatory, and make-up work will be assigned to ensure students have received this important content.
<table>
<thead>
<tr>
<th>Course #</th>
<th>Primary Focus of Each ICC</th>
<th>Weeks</th>
<th>Time Period</th>
</tr>
</thead>
<tbody>
<tr>
<td>IDPT 7001</td>
<td>Orientation to Phase III</td>
<td>1</td>
<td>The beginning of Phase III</td>
</tr>
<tr>
<td>IDPT 7002</td>
<td>A Focus on Palliative Care</td>
<td>1</td>
<td>December</td>
</tr>
<tr>
<td>IDPT 7003</td>
<td>Focus on 4th Year/Career, Critical Care Skills, and Clinical Skills</td>
<td>2</td>
<td>End of Phase III</td>
</tr>
</tbody>
</table>

**Mentored Scholarly Activities (IDPT 7090) or Research Track Course (IDPT 7095):**

Students will also be enrolled in either the MSA course or Research Track course as is appropriate (MSTP students are exempt). While this will be a busy time, students are expected to meet the expectations of the relevant course. For example, students enrolled in the MSA course will still need to submit an MSA Update Form, involving a sign-off (even if by email) from the mentor of the project. Requirements for the Research Track courses (IDPT 7095) can be found at the [www.coloradoresearchtrack.org](http://www.coloradoresearchtrack.org)

A full listing and a brief description of the required courses can be found at the back of this document in Appendix C.

**Scheduling during Third Year**

While courses during Phase III are required, and scheduling for the most part randomly generated, the Office of Student Life provides students the opportunity to identify the schedules that they would like to take.

In thinking about identifying the blocks or clerkships you would like to have earlier rather than later in the year, here are some relevant considerations:

- **The Timing of Major Life Events**: Major life events can sometimes make it difficult to be fully engrossed in your clinical experience. If you know that you will have major family or other life events in the first months of the academic year, then you may consider opting for a less clinically demanding rotation.

- **Specialty and Career Interests**: Consider what will most likely help your confidence and performance in your specialty area of interest. Should you jump right into your area of interest or wait until after you have a rotation or two completed?

- **Exploring Possibilities**: Perhaps you have a couple of specialty areas under consideration, which of these would you like to consider first. Will that early experience help you clarify your interest and direct your exploration when in other blocks?

- **Consider your Elective Block**: If you know you need 2 weeks of vacation at a particular time or know you'll need a break at some point during the year, you may want to prioritize the timing of that block.

Remember, whatever the order of your blocks and clerkships, they all provide foundational knowledge that you will be able to build upon in the next rotation. Ultimately, the goal of the 3rd year is to gain the clinical experience to move forward into Phase IV.

**Scheduling Dates and Deadlines**
<table>
<thead>
<tr>
<th>Dates and Timeframes</th>
<th>Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>January 11, 2021</td>
<td>OASIS Registration Opens</td>
</tr>
<tr>
<td></td>
<td>Rank Schedule Preference</td>
</tr>
<tr>
<td></td>
<td>Submit Special Requests (Close to Home)</td>
</tr>
<tr>
<td>January 22, 2021</td>
<td>OASIS Registration Closes</td>
</tr>
<tr>
<td>February 8, 2021</td>
<td>Receive your unique Phase III schedule.</td>
</tr>
</tbody>
</table>

- **On Monday, January 11, 2021**, you will be provided instructions to rank your schedule preferences during orientation. You will use this opportunity to submit requests for your preferred schedules and to answer additional questions about special requests to stay in Denver. If you have strong reasons to stay in or near Denver, e.g. personal medical needs, small children at home, etc. you must indicate this on the survey. If you have significant events that occur in your life later in the year, contact the Office of Student Life for assistance and information about the next appropriate steps.

- This survey will remain open until 9:00 am, Friday, January 22, 2021. At that time, the Office of Student Life staff will take the data and work with the schedules.

- Phase III schedules released February 8, 2021.

- Specific site assignments are made by the clinical blocks and information regarding this will generally be sent to students 6-8 weeks prior to the start of a clerkship.

- All required Phase III clerkships (7000 level courses) must be completed with a passing grade prior to taking any Phase IV (8000 level) courses. The required blocks can only be done at official sites. The schedule created for you is not flexible. If for any reason you have issues that do not allow completion, you must talk with Deans in the Office of Student Life to discuss your options.

- Note that holidays shown on the third-year schedule may not apply at all clinical sites. If you are on a clinical rotation and your team is working, you will be expected to work as well.

**Elective Schedules and Requirements**

- Phase III Electives’ schedule
  - Electives may not conflict with required sessions in the Clinical Core, limiting student activities to the two-week enrollment.
  - Students can choose to use their 2 week elective block for extra vacation, a research elective or MSA.
  - If choosing a course with credit, this credit counts towards requirements in the 4th year.

**Absence Policy**

***Summarized from the Student Handbook, – please refer to it for additional details***

- Attendance on clinical rotations is required. Absences are generally not permitted, but unique circumstance may be considered.
Specific Attendance Expectations:
- Students may be excused for unanticipated illness or emergencies:
  - Courses 2-4 weeks in length would allow 2 absences, Courses 6-8 weeks would allow 4 absences. Additional absences require make up time and may result in an In Progress grade pending completion of required work.
  - The Course Director will work with the student regarding make-up time/work, issues for credit, etc.
  - Policy requiring completion of all Phase III coursework before starting Phase IV may be waived in some circumstances for these students.
- All absences must be requested/reported to the Office of Student Life by the student.
- Absences exceeding this limit for any reason requires a student to make up any missed time beyond that allowed. The Course Director will work with the student regarding make-up time/work, issues for credit, etc.

Add/Drop Policy
***Summarized from the Student Handbook, – please refer to it for additional details***
- A student is considered enrolled 28 days prior to the start of a course. Once a student is enrolled in a course, he or she must complete it.
- Students may drop a course at any time prior to 28 days before the start of a course. Any request to leave the course once enrolled must be approved by the Assistant Dean of Student Life.
- After the course begins, leaving a course may result in a permanent grade of “W” (e.g., withdraw) on the transcript except in extenuating circumstances. This decision will be made by the Assistant Dean of Student Life.
- Students can add a course at any time as space permits up to 45 days prior to the start of a course. If space is not available, students will be placed on a waitlist and notified if an opening becomes available allowing enrollment in that course.

Academic Calendars: All academic calendars for the School of Medicine can be found here: https://www.cuanschutz.edu/registrar/academic-calendars
Grading in the third year of medical school is different than in the first and second year. While the first two years use written exams as the primary means to determine grades, third year grades are primarily based on evaluations completed by your supervisors (residents and attending physicians) about your performance in the clinical setting. You will be evaluated by a number of different supervisors for each block/clerkship. Based on the nature of the clinical setting, each student will have a slightly different experience as he/she/they will work with different supervisors and see different patients.

Each block/clerkship uses a criterion-based grading system described below to assign the clinical grade. The clinical grade is only one part of the overall grade and overall grading for third year blocks/clerkships longer than 2-weeks is normative, which means that at the end of the year the top 30% of students are eligible for honors in each clerkship. The second 30% are eligible for high pass. However, a total of approximately 70% of students may receive honors/high pass grades in a given clerkship so there is some flexibility in the final percentages of honors and high pass grades. Throughout the year, we attempt to distribute the three overall grades into equal percentages based on overall scores. However, at the end of the year, we complete an automatic grade review to adjust grades upward if possible. We do this to account for differences across the year.

Each block/clerkship is different but there are certain grading characteristics that are the same across all of the blocks/clerkships in third year:

1. All use Oasis to gather evaluations from the faculty and residents that you work with. These evaluations include ample space for comments separated into two different sections – one section that includes summary comments of your performance and one section that is designed to encourage formative feedback for your growth.
   a. Evaluations are required from any faculty or resident that you work with for at least three sessions or with whom you have other meaningful clinical contact with. Clerkship staff will enter evaluators into the Oasis system. They may ask students to identify those supervisors they worked with for three or more sessions or have had meaningful clinical contact with. Failure to provide a complete list may be considered an Honor Code violation.
   b. Some clerkships may also collect numeric/Likert scale ratings of your performance from evaluators as well as narrative comments. Likert scale questions may differ between blocks.
   c. Narrative comments will be identified by the author’s name and title on the grade sheet.

2. There are several common required elements that do not contribute to the final grade for each block/clerkship, but must be completed in order to pass each block/clerkship. These elements include:
   a. Attendance at block orientation and any required intra-sessions/educational sessions
   b. Logger (duty hours and core clinical conditions)
   c. Mid-point feedback form
   d. Direct observation forms (exact number or requirements differ from block to block)
   e. Complete Oasis evaluations in which the student evaluates their supervisors and the block/clerkship.

3. All blocks/clerkships utilize a grading committee to determine grades. The committee includes at least four different people (generally this includes the block director(s), at least one additional faculty from the department, and the course coordinator). The names of all individuals participating in the grading committee discussion for your grade will be listed on your grading sheet.

4. All blocks/clerkships that utilize an NBME shelf exam weigh the exam score as 20% of the final grade. There are no separate NBME shelf exam score cut-offs for high pass and honors.
   a. The passing score for all NBME shelf exams is set at 2 standard deviations below the national mean.
b. Students who fail an exam will have the opportunity to retake the exam, but those students will only be eligible for a final grade of Pass regardless of the final shelf exam score or clinical grade.

5. Professionalism is a required element of all Phase III courses contributing 10% to the overall grade. Students are expected to exhibit the core attributes of professionalism (reliability, willingness to ask for help/admit limits, integrity, duty, respect, honesty, advocacy) throughout their clerkships which includes attendance and participation in didactics and clerkship activities, respectful and timely communications with all clerkship faculty/staff, timely completion of all assignments and respectful and appropriate interactions with patients, families, communities, and care teams. If students do not meet these professionalism expectations their overall course grade will be impacted. The course director is ultimately responsible for determining the level of concern of a particular professionalism lapse.
   a. First minor professionalism lapse will result in reminder and no impact to professionalism grade.
   b. Second minor lapse or any more concerning unprofessional behavior will result in loss of 5% of the total grade and professionalism feedback will be provided and documented.
   c. Third minor lapse or any highly concerning unprofessional behavior will result in loss of 10% of the total grade, the student will no longer be eligible for an overall grade of honors, and professionalism feedback will be provided and documented.
   d. Egregious concerns or a pattern of ongoing problems despite reminders may also be grounds for course failure. Examples of this include, but are not limited to untrustworthy behavior, dishonesty, endangering patients, racist, sexist, or otherwise biased behavior, and/or a significant pattern of ongoing problems despite documented feedback on multiple occasions.

6. Clerkships will provide clinical grades based on the clinical evaluations as well as overall grades that include the clinical grade and the scores on the exam and other required assignments. The clinical grade will be displayed on your Medical Student Performance Evaluation (MSPE) if it differs from the overall grade.
   a. Students must achieve a clinical grade of Honors to qualify for an overall grade of Honors.

7. All grades must be submitted by the course director to the student and the Office of Student Life within 26 days of the end of the block/clerkship.

8. For the Academic Year 2021-2022, students in Longitudinal Integrated Clerkships (LICs) will receive Semester grades for the first three semesters. These will be Pass/In-progress grades and will be noted as a Semester grade on the transcript. In the final semester, Spring 2022, students will see the Final Course Grade on the transcript. The Final Course Grade will be the grade on the MSPE and used to calculate Quartile rankings.

For more information on grading and the grading process, please reference the current University of Colorado School of Medicine handbook, available at: https://medschool.cuanschutz.edu/education/current-students/support-for-students/policies-procedures-guidelines
### Overview of Grading in Phase III

<table>
<thead>
<tr>
<th>Transcript Grades</th>
<th>Phase III – Clinical Blocks and Clerkships</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>General Info</strong></td>
<td>Grades consists of a Clinical and Cognitive Component. Requirements for each component may vary by block/clerkship. See specific Block or Clerkship syllabi for details. <a href="#">Phase III Grading Overview</a></td>
</tr>
<tr>
<td><strong>In general, some feature of Phase III grading includes the following:</strong></td>
<td></td>
</tr>
<tr>
<td>□ Clinical assessments must account for no less than 50% of overall grade (minimum=50%).</td>
<td></td>
</tr>
<tr>
<td>□ Written assessment must account for no more than 20% of overall grade (maximum=20%).</td>
<td></td>
</tr>
<tr>
<td>□ Grades assigned by Director with a Grading Committee.</td>
<td></td>
</tr>
<tr>
<td>□ An end of year review process enables the Director to increase the number of Honors and High Pass students to 30% for each category, although the total of both categories cannot exceed 70% of all assigned grades.</td>
<td></td>
</tr>
<tr>
<td>□ All 2-week blocks are graded Pass/Fail.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Honors (H)</strong></th>
<th>At a minimum, the student:</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Must achieve Honors (H) on the clinical component of the grade.</td>
<td></td>
</tr>
<tr>
<td>□ Must achieve the national mean on the written exam on the initial attempt.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>High Pass (HP)</strong></th>
<th>At a minimum, the student:</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Must achieve at least High Pass (HP) on the clinical component of the grade.</td>
<td></td>
</tr>
<tr>
<td>□ Must pass a written exam on the first attempt.</td>
<td></td>
</tr>
</tbody>
</table>

| **Pass (P)** | Must pass all required clinical and cognitive assessments, including any written exam or required project work in order to achieve a grade of Pass (P) for the block/clerkship. |

| **Pass with Remediation (PR)** | A final grade of Pass with Remediation (PR) replaces a grade of Incomplete (I) upon successfully completing remediation. |

<p>| <strong>In Progress (IP)</strong> | A grade of In Progress (IP) is assigned after the first failure of the written exam as long as the student has satisfactorily completed all other components of the block/clerkship. In this situation, the highest grade that can be assigned is Pass (P). |
|                       | A grade of IP can also be assigned in the case that students are in good standing but have not yet completed all the required clinical or cognitive requirements of the block. |
|                       | Assigned by the appropriate Block, Course or Clerkship Director in consultation with the appropriate Assistant Dean and the Associate Dean of Student Life |</p>
<table>
<thead>
<tr>
<th>Grade</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Incomplete (I)</strong></td>
<td>A grade of Incomplete (I) is assigned after the second failure of the written exam. In this situation, the highest grade that can be assigned is Pass with Remediation (PR). A grade of Incomplete (I) is assigned when a student may need remediation of the clinical components. Prior to the assignment of a grade of I, a discussion must occur at aCBD Executive Session. This discussion is advisory to the Block/Clerkship Director’s assignment of a final grade. See the description of the process below, under further detail about assigning a grade of F. A remediation plan will be developed with the Clinical Block or Clerkship Director, the remediation specialist, and the Office of Student Life. After completing remediation (for either the cognitive or clinical components), the student will be assigned a grade of Pass with Remediation or Fail. For further information see section 3.3.6.</td>
</tr>
<tr>
<td><strong>Fail (F)</strong></td>
<td>Prior to assigning a grade of Fail, a discussion must occur at CBD Executive Session. This discussion is advisory to the Block/Clerkship Director’s assignment of a final grade. The process will consist of the following: □ The Block/Clerkship Director or Associate Dean of Student Life will notify the Assistant Dean of the Clinical Core one week in advance of meeting regarding the student. □ The Block/Clerkship Director will bring documentation of student performance with the name of student redacted on any presented document. □ Student names will be anonymous to the other Block/Clerkship Directors, but not to the Associate Dean of Student Life. □ The information from the discussion may be utilized by the Office of Student Life to optimize student performance in future clinical blocks or clerkships. Students will be notified by the Office of Student Life in advance when such information is shared with future Block/Clerkship Directors. □ This executive session may include the Senior Associate Dean for Education, Associate Dean of Student Life, Assistant Dean of Student Affairs, Assistant Dean for the Clinical Core, the remediation specialist, and the CBD.</td>
</tr>
<tr>
<td><strong>Withdrawal (W)</strong></td>
<td>□ Must be recommended by appropriate Assistant Dean and approved by Associate Dean of Student Life. □ Must be in good academic standing (e.g., not in need of remediation or failing at the time of request). □ Must occur before the last 2 weeks of the Block, Course, or Clerkship. □ Student Promotions Committee must be notified by the Associate Dean of Student Life.</td>
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</tbody>
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Source: SOM Policies and Procedures, Section 3.3.5
<table>
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</table>
| Community and Primary Care (CPC) | - 65% – Clinical Evaluations  
- 25% – Community Health Assessment Project  
  - 10% End of rotation presentation  
  - 5% Service-learning project  
- 10% Reflection on importance of community and population. Health for future practice  
- 10% – Professionalism | - Consistently care for patients with common and uncommon primary care concerns, including patients who are more medically or socially complex, or patients who present with undifferentiated signs/symptoms  
- Consistently incorporate interprofessional team members and available resources into patient care plans  
- Recognize gaps in available resources and seeks out additional resources in community.  
- Recognize potential impact of social determinants of health on patient’s health and consistently considers these factors as well as patient preference when creating care plans.  
- High level of self-directed immersion into the clinical team, seeking autonomy in patient care, and soliciting and incorporating feedback into daily clinical performance | - Consistently care for patients with common primary care concerns, as well as some uncommon primary care concerns or patients who are more medically or socially complex.  
- Demonstrate awareness of the importance of interprofessional collaboration in primary care and is beginning to incorporate these team members as well as locally available resources into patient care plans  
- Recognize the potential impact of social determinants of health on patient’s health and is beginning to consider these factors when creating care plans  
- Solicit and incorporate feedback into clinical performance  
- Demonstrate ability to self-direct learning to fill knowledge gaps and is beginning to demonstrate self-directed immersion into care team and patient care. | - Consistently care for patients w/ common primary care concerns  
- Demonstrate awareness of the importance of interprofessional collaboration in primary care, identify locally available resources to include in patient care plans  
- Recognize the potential impact of social determinants of health on patient’s health  
- Receptive to feedback when provided and incorporate it into clinical performance  
- Participate in patient care and integrate into care team with guidance from team members |

| Emergency Care (EC) | **Pass/Fail only** | Clincial Evaluations  
Satisfactory completion of all required criteria for passing | N/A | N/A | Attend and engage as an active learner in clerksip’s clinical and educational activities |

| Hospitalized Adult Care (HAC) | Notes:  
- Communication domains noted here always refer to both written and oral communication  
- All domains must be demonstrated consistently  
- All domains must be met to achieve a given clinical grade. | 65% – Clinical Evaluations  
20% – NBME Shelf Exam (Passing Score ≥58 (2 standard deviations below the national mean))  
5% – TBL Sessions  
10% – Professionalism | Consistently demonstrate all criteria for high pass AND consistently demonstrate the following knowledge, skills, and attitudes:  
- Gather a symptom driven, complete history of present illness in an efficient manner  
- Perform a symptom driven, thorough, efficient physical exam related to the presenting concern  
- Re-prioritize an up-to-date problem list for hospitalized adults  
- Communicate a thorough differential diagnosis and evidence-based treatment plan with minimal help from more senior team members  
- Manage the day-to-day plan of care for hospitalized adult patients | Consistently demonstrate all criteria for pass AND consistently demonstrate the following knowledge, skills, and attitudes:  
- Efficiently gather a complete, relevant history of present illness  
- Perform a symptom driven, thorough physical exam related to the presenting concern  
- Efficiently gather relevant clinical data from all sources noted in the Pass criteria  
- Communicate a complete, prioritized problem list for hospitalized adult patients  
- Communicate a sensible differential and treatment plan with minimal to moderate help from more senior team members  
- Manage some aspects of the day-to-day plan of care for hospitalized adult patients | Consistently demonstrate the following knowledge, skills, and attitudes:  
- Gather a complete history of present illness  
- Perform a basic physical exam on initial and subsequent patient encounters  
- Gather all relevant clinical data from all sources including but not limited to the patient, outside hospital records, and EMR  
- Provide a concise summary statement for a hospitalized adult patient  
- Communicate a rudimentary differential diagnosis and treatment plan for common medical conditions in hospitalized adult patients |

Updated for: AY 2021-2022
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<td>Infant, Child and Adolescent Care (ICAC)</td>
<td>• 70% – Clinical Evaluations&lt;br&gt;• 20% – NBME Shelf Exam (Passing Score ≥63 [2 standard deviations below the national mean])&lt;br&gt;• 10% – Professionalism</td>
<td>• Demonstrate behaviors and skills that show you are a consistent, reliable reporter, routinely demonstrate behaviors and skills consistent with the interpreter role, and also demonstrate behaviors and skills consistent with manager roles based on comments in your Clinical Evaluations.</td>
<td>• Demonstrate behaviors and skills that show you are a consistent, reliable reporter and also routinely demonstrate behaviors and skills consistent with the novice interpreter/interpreter role based on comments in your Clinical Evaluations.</td>
<td>• Demonstrate behaviors and skills that show you are a consistent, reliable reporter based on comments in your clinical evaluation</td>
</tr>
<tr>
<td>Neurologic Care (NC)&lt;br&gt;<strong>Pass/Fail only</strong></td>
<td>• Clinical Evaluations&lt;br&gt;• Satisfactory completion of all required criteria for passing</td>
<td>N/A</td>
<td>N/A</td>
<td>• Attend and engage as an active learner in clerkship’s clinical and educational activities</td>
</tr>
<tr>
<td>Obstetrics and Gynecology (OB/GYN)</td>
<td>• 65% – Clinical Evaluations&lt;br&gt;• 20% – NBME Shelf Exam (Passing Score ≥62 [2 standard deviations below the national mean])&lt;br&gt;• 10% – Professionalism&lt;br&gt;• 5% – 2 H &amp; P’s</td>
<td>• Oral and written presentations follow an organized logical pattern with a complete assessment and plan for both common and some more complex OB/GYN conditions&lt;br&gt;• Articulate an outstanding level of medical knowledge of core clinical competencies including consultation of the latest relevant literature and dissemination of knowledge within the team&lt;br&gt;• Highly engaged in the clinical environment including self-directed immersion into the team and independent, passionate patient care&lt;br&gt;• Perform an accurate physical exam and able to use exam to prioritize and explore working differential diagnosis.&lt;br&gt;• Demonstrate exemplary professionalism</td>
<td>• Oral and written presentations follow an organized logical pattern with a mostly complete assessment and plan for a breadth of OB/GYN conditions&lt;br&gt;• Articulate an advanced level of medical knowledge of core clinical competencies&lt;br&gt;• Engaged in the clinical environment including immersion into the team and independent, passionate patient care&lt;br&gt;• Performs a technically accurate physical exam that targets appropriate areas and able to identify and describe normal and abnormal findings&lt;br&gt;• Demonstrate excellent professionalism</td>
<td>• Consistently gather a complete history of present illness&lt;br&gt;• Receptive to feedback when provided and incorporate it into clinical performance&lt;br&gt;• Participate in patient care and integrate into care team with guidance from team members.&lt;br&gt;• Communicate, in written and oral form, a rudimentary differential diagnosis and treatment plan for common OB/GYN conditions</td>
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| Operative and Perioperative Care (OPC) | • 50% – Clinical evaluations (30% general surgery and 10% for each subspecialty)  
20% – NBME shelf exam (Passing Score ≥58 (2 standard deviations below the national mean))  
10% – Ethics thread  
10% – Professionalism  
5% – Student presentation  
5% – OSCE | • Technical skills -- Perform skills such as mask ventilate a patient, suture and remove a drain stitch without assistance as well as attempt more advanced skills if clinically appropriate  
Clinical knowledge -- Demonstrate comprehensive knowledge of the indications, contraindications, and complications of common surgical procedures. Understand variant anatomy and abnormal physiology. Apply advanced pharmacology in non-routine clinical scenarios.  
Presentation skills -- Present patient(s) on rounds without additional team input. Develop a care plan that is appropriate, dynamic, and evidenced-based.  
Self-directed learning -- Learn independently based on clinical necessity, report back to the team and ask for feedback on additional learning opportunities as well as personal areas of weakness.  
Effort/Attitude/Progression -- Effort level consistently impresses via written and oral feedback. Attitude is not only positive but appropriate for the clinical situation. Consistently demonstrate traits found in our best clinicians such as empathy, compassion, understanding, and dedication. | • Technical skills -- Perform skills such as mask ventilate a patient, suture and remove a drain stitch with minimal assistance.  
Clinical knowledge -- Demonstrate more in-depth knowledge such as some of the indications and contraindications for common surgical procedures as well as variant anatomy, abnormal physiology, and advanced pharmacology.  
Presentation skills -- Present patient(s) on rounds with minimal assistance from other team members. Develop a more advanced care plan with multiple options. Presentation is organized and care plan is safe.  
Self-directed learning -- Learn independently based on clinical necessity and report back to the team.  
Effort/Attitude/Progression -- Demonstrate extra effort when needed, positive attitude, excellent professionalism and noticeable improvement during the block. | • Technical skills -- Perform skills such as mask ventilate a patient, suture and remove a drain stitch with moderate assistance  
Clinical knowledge -- Demonstrate basic knowledge of surgical procedures, anatomy, physiology, and pharmacology.  
Presentation skills -- Present patient(s) on rounds with some assistance from other team members.  
Self-directed learning -- Learns independently at the suggestion of the team  
Effort/Attitude/Progression -- Show up on time and prepared. Lack of attitude or professionalism concerns throughout the rotation. Demonstrates progression of skills. |
| Psychiatric Care (PC) | • 70% – Clinical Evaluations  
20% – NBME Shelf Exam (Passing Score ≥71 (2 standard deviations below the national mean))  
10% – Professionalism | • We ask faculty and residents to comment on 10 domains (e.g., interviewing skills and alliance building, presentations write ups and notes, assessment and differentials; see PC Block Syllabus “Evaluations and grading” for details). Students receiving a clinical grade of Honors generally perform above expectation in most/all domains (see PC Block Syllabus appendix B for example narrative comments). | • We ask faculty and residents to comment on 10 domains (e.g., interviewing skills and alliance building, presentations write ups and notes, assessment and differentials; see PC Block Syllabus “Evaluations and grading” for details). Students receiving a clinical grade of High Pass generally perform above expectation in several/many domains and at expected level in remaining domains (see PC Block Syllabus appendix B for example narrative comments). | • Students must:  
Demonstrate the ability to complete a psychiatric interview focusing on common diagnoses  
Demonstrate the ability to provide a basic differential diagnoses and initial plan for common psychiatric conditions (as demonstrated in their direct observation and clinical narrative evaluations). |

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| **Colorado Springs Mentored Integrated Curriculum (COSMIC)** | • Students will enroll in LIC courses corresponding to traditional blocks and grading criteria will be comparable to block rotations. Students should refer to LIC grading policy for specific questions.  
• Students will enroll in the COSMIC-LIC course each semester | • As described for each traditional block rotation.  
• COSMIC LIC course is P/F                                                                 | • As described for each traditional block rotation.  
• COSMIC LIC course is P/F                                                                 | Students will have assignments that correspond to individual block requirements described above. In addition, there are a number of unique LIC requirements listed in the course handbook. Students should refer to the LIC handbook for a detailed list of requirements and due dates as well as requirements related to patient continuity and small group participation.  
Grading for the COSMIC-LIC course will be based on timely and successful completion of requirements related to patient continuity, CSB Leading Change projects, professionalism, and small group participation. |
| **Denver Health Longitudinal Integrated Clerkship (DH-LIC)** | • Students will enroll in LIC courses corresponding to traditional blocks and grading criteria will be comparable to block rotations. Students should refer to LIC grading policy for specific questions.  
• Students will enroll in the DH-LIC course each semester | • As described for each traditional block rotation.  
• DH-LIC course is P/F                                                                 | • As described for each traditional block rotation.  
• DH-LIC course is P/F                                                                 | Students will have assignments that correspond to individual block requirements described above. In addition, there are a number of unique LIC requirements listed in the course handbook. Students should refer to the LIC handbook for a detailed list of requirements and due dates.  
Grading for the DH-LIC course will be based on successful completion of requirements related to patient continuity, DLIC projects, professionalism, and small group participation. |
| **Fort Collins Longitudinal Integrated Clerkship** | • Students will enroll in LIC courses corresponding to traditional blocks and grading criteria will be comparable to block rotations. Students should refer to LIC grading policy for specific questions.  
• Students will enroll in the Fort Collins-LIC course each semester | • As described for each traditional block rotation.  
• Fort Collins-LIC course is P/F                                                                 | • As described for each traditional block rotation.  
• Fort Collins-LIC course is P/F                                                                 | Students will have assignments that correspond to individual block requirements described above. In addition, there are a number of unique LIC requirements listed in the course handbook. Students should refer to the LIC handbook for a detailed list of requirements and due dates.  
Grading for the Fort Collins-LIC course will be based on successful completion of requirements related to patient continuity, Fort Collins LIC projects, professionalism, and small group participation. |
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| **Colorado Community Longitudinal Integrated Clerkship (CCLIC)** | • Students will enroll in courses corresponding to traditional blocks and grading criteria will be comparable to block rotations. Students should refer to ILMC/CLIC grading policy for specific questions.  
• Students will enroll in the ILMC/CLIC course each semester | • As described for each traditional block rotation.  
• CCLIC course is P/F | • As described for each traditional block rotation.  
• ILMC/CCLIC course is P/F | Students will have assignments that correspond to individual block requirements described above. In addition, there are a number of unique ILMC/ CCLIC requirements listed in the course handbook. Students should refer to the ILMC/ CCLIC handbook for a detailed list of requirements and due dates.  
Grading for the CCLIC course will be based on successful completion of requirements related to patient continuity, Fort Collins LIC projects, professionalism, and small group participation. |
| **VA Sequential Training Program (VAST)** | • Grades for the four clerkships included in the VAST Program (HAC, OPC, PC, NC) are determined using the same metrics outlined above.  
• Students will enroll in the VAST course as well. | • As described for each traditional block rotation  
• VAST course is P/F | • As described for each traditional block rotation.  
• VAST course is P/F | Grading for the VAST course will be based on successful completion of requirements related to VAST related projects, professionalism, and small group participation. |
NBME Shelf Exam

Some blocks/clerkships utilize a shelf exam by the NBME (National Board of Medical Examiners) and require a minimum score to receive honors. Students must pass the exam in order to pass the course. A grade of In Progress (IP) is assigned after first failure of the written exam if the student has satisfactorily completed all other components of the block/clerkship. In this situation, the highest final grade that can be assigned is Pass (P). A grade of Incomplete (I) is assigned after the second failure of the written exam. In this situation, the highest final grade that can be assigned is Pass with Remediation (PR). Policies governing shelf exam failures can be found in the SOM Policies and Procedures Handbook.

Examination Environment Expectations:

Arrival for Examination

- Exams will have check-in times and start times. Students are expected to arrive by the check-in time to facilitate a timely start to the exam.
- Students who arrive more than 15 minutes after the actual exam start time will NOT be allowed to take the exam and will have to reschedule their exam at a later date.

During the Examination

- Items allowed at your seat during examinations
  - Green laminated sheet/dry erase pen (for NBME exams)
  - Blank scratch paper/pen/pencil (for non-NBME exams)
  - Soft foam earplugs
- Items NOT ALLOWED at the examinee’s seat during examinations
  - Cell phones
  - iPads/tablets (unless using for testing)
  - iPods/media devices
  - Smart Watches or Watches with alarms, computer, or memory capability
  - Calculators
  - Paging devices
  - Noise-canceling headphones
  - Recording/filming devices
  - Reference materials (book, notes, papers)
  - Backpacks, briefcases, luggage
  - Coats, outer jackets, headwear (religious headwear is allowed)
  - Beverages or food of any type

No questions or requests for clarification of exam items are permitted during the examination. If a student feels there is a problem with a particular question, have them answer it to the best of their ability. The examinee can notify a proctor about a problem, and he/she can report it to the appropriate testing authority.

Technical Difficulties: If a student encounters technical problems during an exam, refer to the Chief Proctor Manual for troubleshooting solutions.

- Students may not leave the testing area during the examination, except to go to the restroom.
- Only one student will be allowed to go to the bathroom at any given time.
- For NBME exams, students must be accompanied to/from the bathroom by a proctor.
- Students should not be absent for more than 5 minutes.

- If a student begins an examination and does not complete it for any reason, their exam will still be scored and applied toward their grade.

- Irregular Behavior: Students seen to engage in any of the following behaviors will be noted and reported to the Associate Dean of Student Affairs:
  - Disrupting testing conditions of other students
  - Copying answers from another student
  - Allowing answers to be copied by another student
  - Receiving or providing unauthorized information about the examination content
  - Using notes during the examination
  - Writing on the green laminated sheets/scratch paper prior to starting the exam
  - Making notes on anything besides the green laminated sheets/scratch paper
  - Removal of green laminated sheets/scratch paper from the testing room
  - Continuing to work after time is called by the proctor

Rescheduling of Examinations

- The final decision regarding whether a student may or may not reschedule the examination rests with the Clerkship Director.

- If a student needs to reschedule an examination for any reason, the student should contact the Clerkship Coordinator and/or Clerkship Director prior to the start of the exam.

- If a student is approved to take their examination on an alternate date, the student is responsible for contacting the Clerkship Coordinator to schedule the alternate date/time.

Accommodations

To ensure disability-related concerns are properly addressed, students with disabilities who require assistance to participate in this class should contact the Office of Disability Resources and Services, Building 500, room Q20-EG305, 13001 E 17th Place, Aurora, CO 80045, 303-724-5640 to request accommodation.

Any students with disabilities or other special needs, who need special accommodations in this course, are invited to share these concerns or requests with the instructor and contact the Disability Services Office (http://www.ucdenver.edu/student-services/resources/disability-resources-services/Pages/disability-resources-services.aspx) as soon as possible).
Appeal of Grade Decision by a Block, Course, or Clerkship Director

Criteria for Appealing a Grade:
A student may appeal a final Block or Course grade on the grounds that the methods or criteria for evaluating academic or clinical performance, as stated in the Block/Course syllabus, were not applied in determining the final grade, and/or the faculty applied the grading criteria unfairly. The table below describes the procedure for appeal. Please note this policy applies only to grade appeals, not performance evaluations or any other type of assessments.

Clinical assessments contributing to grading decisions in the clinical core are subjective. Course administrators are expected to make every effort possible to collect adequate feedback from evaluators to make fair grading decisions before grades are assigned. Coordinators and Directors will proactively contact evaluators to seek additional information if written comments are inadequate to make grading decisions. Therefore, appeals cannot be made on the basis of student opinion that written comments are not fully reflective of their performance.

However, if a key member of the clinical team identified by the student failed to complete an assessment that may significantly influence the final grade after grades have been finalized, a student may appeal to request additional effort on behalf of the Director to secure a missing assessment. This constitutes an appeal and if additional assessments are received, the grading committee will reconsider the student’s final grade including that assessment. The additional assessment could influence the grading committee to lower, raise or make no change to a final grade as part of the appeal. Appeals will not be granted for requests to seek additional information or details from evaluators who have completed assessments prior to final grade assignments.

Appeals Procedures:

<table>
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<th>Timeframe</th>
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<tbody>
<tr>
<td>Within 4 weeks (28 days) of receiving grade</td>
<td>Student sends an appeal letter to the Block Director(s) within 4 weeks of receiving grade. The appeal letter will identify the Block/Course and the grade being appealed, state the reason(s) for appeal, and specify the requested change. Students are encouraged to discuss the appeal informally with the Block Director(s) before submitting a formal appeal.</td>
</tr>
<tr>
<td>Within 2 weeks of receiving appeal letter</td>
<td>The Block Director(s) will meet with the student to discuss the appeal within 2 weeks of receipt of the appeal letter. Meeting can be in person, by phone or by video-conference. Before the meeting, the student should provide the Block/Course Director or Co-Directors with copies of all materials pertinent to the appeal, such as the Block/Course syllabus, papers, tests, write-ups, evaluations, or other assessments.</td>
</tr>
<tr>
<td>Within 8 weeks of meeting with student</td>
<td>Within 8 weeks of meeting with a student, the Block, Course or Clerkship Director must inform the student of their decision regarding the grade change appeal. If a grade change is warranted, then the Block, Course, or Clerkship Director will change the grade in a timely manner. Course directors must notify Office of Student Life of all pending appeals and the deadline for appeal decision may be revised pending OSL approval*.</td>
</tr>
<tr>
<td>Within 2 weeks (14 days) of Block Director(s) ruling</td>
<td>The student may appeal the decision of the Block Director(s) to the appropriate Assistant Dean by forwarding copies of all correspondence related to the appeal within 2 weeks (14 days) of the Block Director(s) ruling. The Assistant Dean, at their discretion, may meet with the student, the faculty, or the Block Director(s), and may consult with the appropriate curriculum committee (e.g., ECBD, CBD, LCC) before making a ruling. The Assistant Dean will make a decision within 2 weeks (14 days) of receiving the request and notify the student in writing of this decision.</td>
</tr>
<tr>
<td>Within 2 weeks (14 days) of the Assistant Dean’s ruling</td>
<td>Within 2 weeks (14 days) of receiving the ruling from the appropriate Assistant Dean, the student may make a final request to the Senior Associate Dean for Education for a review of due process. The decision of the Senior Associate Dean for Education is final. The Senior Associate Dean for Education will make a judgement within 2 weeks (14 days) of the student’s final appeal and notify the student in writing of this decision.</td>
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</table>
Longitudinal Integrated Clerkships:

If a student wishes to appeal a final grade assigned in a longitudinal course, the CUSOM grading policy applies. In this case, students must submit appeals to both the LIC Director and the traditional block director of the corresponding CUSOM course. The final appeal decision will be made by the grading committee led by the traditional block director. Students are highly encouraged to discuss their questions and concerns with the LIC Director or designee before submitting an appeal.

*Appeals in the second half of the academic year will likely require decisions to be made on a shorter timeline than 8 weeks to meet student life deadlines related to VSAS and MSPE.

Feed Forward Policy

Feed Forward Definition: The sharing of information among invested faculty about students in a clinical learning environment with an overarching goal to better serve students and facilitate their learning.

Policy Purpose: To facilitate successful professional development for students who require longitudinal support from the School of Medicine that cannot be achieved within the confines of a single course by providing longitudinal feedback and deliberate support from multiple invested educators.

Background: Struggling students requiring utilization of a feed forward policy are a very small percentage of the student body, yet the medical school’s duty to those students and society mandates an intentional approach to feedback and remediation. Course directors can be trained, and systems arranged, to avoid negative bias towards struggling students. Additionally, course directors can be empowered to utilize resources within their courses to support struggling students and provide remediation with the support and guidance of expertise within the Office of Student Life (OSL).

Feed Forward Policy:
The Feed Forward Policy can be utilized in any clinical course in the SOM including Foundations of Doctoring, Clinical Clerkships, Longitudinal Integrated Clerkships, Sub-Internships and Electives. Outside the parameters defined by this policy, assessment and grading information will not be shared between clinical course directors. Students identified for feed forward intervention must fall into one of the following categories:

- Students who receive a Fail or Incomplete in a clinical course.
- Students with an active remediation plan/success team in place through the OSL.
- Students identified by a course director as demonstrating a pattern of professionalism concerns or have a significant lapse in professionalism requiring a professionalism report (course directors can choose to exclude students who have a single minor lapse at their discretion).
- Students identified by grading committees or the course director as “at risk” for failing a course.
• Students identified by OSL as “at risk” for failing to meet requirements in the clinical curriculum.
• Students can self-identify and request participation in the feed forward system. These students will submit a written request to the OSL outlining the reasons they believe they are “at risk” for successful completion of the clinical curriculum. These requests will be reviewed by the Assistant Dean of the Clinical Curriculum and a Dean from the Office of Student Life to determine if Feed Forward or other mechanisms will best meet the students’ needs.

Once identified, the Assistant Dean of the Clinical Curriculum will initiate the Feed Forward process. A meeting will be convened including the Assistant Dean of Student Affairs, the Assistant Dean of the Clinical Curriculum, the Director of the course in which student had problems identified, the director of the upcoming course, a member of remediation team, and the student. Students will be offered the opportunity to bring an advocate of their choosing to the meeting. If the student is in a Longitudinal Integrated Clerkship, the Feed Forward policy would not be necessary within the Clerkship phase, but could still be utilized as students transition from pre- clerkship to clerkship, or clerkship to post-clerkship phases of the medical school curriculum. The goal of the meeting is to discuss student’s strengths and challenges, devise a plan for clinical placements, develop a plan to be implemented by the course director with the support of the remediation team, delineate clear benchmarks for achievement, and develop a contingency plan if more advanced remediation expertise is needed. At a minimum, information will be used by the upcoming course director to strategically place students in settings or with faculty who can best support growth and learning plans and will require the course director to do more regular check in with the teaching faculty/team and with the student throughout their course. For students already receiving remediation services through OSL, a plan for continuing these services in the new learning environment will be discussed. This information and planning will be outlined on a Student Learning Prescription which will be signed by all participants.

The meeting will conclude with a plan to revisit student progress at the conclusion of the course, or a decided upon time point for longitudinal courses. At this time point, if the student and the faculty group concur that the student has progressed in her or his areas of deficiency and is no longer “at risk”, no further feed forward will occur to future courses or faculty. However, if the deficiencies are still present, a new group meeting may be convened to feed forward to the next clinical course, more formal remediation may be enacted, or other steps may be taken to support student success in the clinical environment.

It is critical that a limited number of faculty participate in oversight and information sharing to protect students from negative bias. Course directors participating in feed forward meetings will recuse themselves from grading decisions. Other faculty evaluating a student may be made aware of limited information shared in feed forward meeting with the student’s permission, recognizing that skills can often be best coached by faculty who are notified in advance of specific growth areas. While all attempts will be made to avoid situations in which a course director involved in a feed forward meeting with a student is placed in a supervisory clinical role in the future with that student, this may not be entirely avoidable in all courses. In that event, the course director will serve in only a teaching and supervisory role, and will not provide clinical evaluations.
The Dress Code Policy for Students in Clinical Settings:

As a student of the University of Colorado Anschutz Medical Campus, you are expected to adhere to appropriate attire for your work in various clinical settings. Students are encouraged to consider the patient perspective in their appearance and how they present themselves may impact the patient provider relationship. Please be advised that you should review the specific dress code policy for the clinical site and/or course as it pertains to you. Some sites have more specific or structured rules and you are responsible for being aware of those regulations. These are updated frequently, so please check the link below for the most recent information. If you are rotating at a site not included here, please ask your block director or site director for more specific information.

Faculty involved in a Block, Course or Clerkship may request that students wear appropriate professional attire for a lecture or small group session, typically for sessions that involve patients or standardized patients. Students will usually receive notice of such occasions through Canvas.

Inappropriate attire may result in the completion of a Professionalism Feedback Form and/or being asked to leave the setting to return with appropriate attire.

Guideline Areas:

Identification:
ID Badges must be worn and remain visible at all times. Most sites require the badge to be worn above the waistline and require that it is not blocked from view and can be seen in its entirety.

White Coats:
Most sites require a clean white coat to be worn over scrubs whenever possible. Most hospitals specify that staff outside of primary work areas wear white coats and students caring for patients in non-routine or emergent situations to wear white coats or other protective attire. In outpatient settings, guidelines are more variable, and students should seek guidance from their clinical supervisors.

Shoes/Footwear:
Footwear should be appropriate to the work setting, clean and in good quality. Patient care teams do not allow for open-toed shoes.

Jewelry and Messages:
Jewelry and other accessories must be professional, appropriate and not interfere with job performance or safety. Students may be prohibited from wearing clothing, pins, buttons, emblems or insignia bearing a political, controversial, inflammatory or provocative messages.

Tattoos/Body Art:
At most sites, students are expected to cover tattoos with appropriate clothing in order to
create a non-threatening, professional environment for patients and visitors. Typical coverings would include collared shirts or long-sleeve shirts, etc.

**Clothing:**
Clothing should be clean, fit properly in a length and style that does not interfere with the performance of work duties. Shirts or tops should have a modest neckline so that cleavage is not visible. Skirts and dresses need to be at an appropriate length. Clinician appearance should be neat and clean to reflect a professional image which includes clean clothes and clean shoes. Overall appearance should be professional.

**Personal Hygiene (Hair):**
Hair should be clean, groomed and kept at a reasonable length. Long hair must be maintained appropriately and tied back when necessary or required. Most sites require that hair color or style cannot be extreme.

**Personal Hygiene (Nails):**
Fingernails should be clean and of appropriate length for safety purposes and to prevent infection. Almost all of the clinical sites prohibit artificial nails.

**Personal Hygiene (Odor/Teeth):**
Body odor and bad breath can be offensive to patients and team members. Fragrances are discouraged and odors should be minimized as much as possible to avoid sensitivity reactions in those around you.

**Scrubs:**
Specific sites may require a specific color/kind of scrubs or a particular uniform dependent upon the setting. Specific blocks or departments at specific sites may allow scrubs while others do not permit scrubs at all. Please be aware that some sites have specific rules about outside contamination and may require you to change scrubs if you leave and return to the hospital.

**Specific Site Related Dress Code Policies:**
CHCO: Starting on Page 7:
Colorado Springs Branch (under frequently asked questions):
https://medschool.cuanschutz.edu/education/colorado-springs-branch
Denver Health: Denver Health Personal Appearance Dress Code
UCH: Dress Code and Professional Appearance

More information for each site, go to: The Dress Code
**Family Member or Close Personal Relationships with Preceptors Policy:**

Family members, or those with a current or former close relationship to a medical student, will not be involved in the academic assessment or promotion of a medical student. When students or their family members who are in a supervisory role are working together in a School of Medicine course, there is the potential for a conflict-of-interest in evaluating the student’s academic or clinical performance. For the purposes of this policy, family member is defined including spouses, domestic or romantic relationships, siblings, parents, grandparents, cousins, aunts, uncles, or any other close relationship through blood, marriage, or otherwise that may create a conflict of interest. If not a relative or family member described above, application of this policy will be at the discretion of the course director in consultation with the Assistant Dean of the Clinical Curriculum and/or the Associate Dean of the Office of Student Life. Course assignment at a clinical site or in a lab or classroom setting with a family member will be also avoided at the discretion of the course Director. Faculty must notify students as soon as they recognize the conflict-of-interest. Students likewise must notify their course director if they are assigned to a faculty for evaluation who has a potential conflict of interest due to a family member relationship as described above. Once identified, the course director must find an alternative placement or provide an alternative supervisor for evaluation.

**Medical Student Duty Hour Policy:**

Policy Intent: The CUSOM seeks to support students in their ability to maintain their health and well-being during their medical education. While clinical experiences necessitate demands on time within a setting, excessive hours working in a clinical setting may compromise rather than support student learning. This policy specifies the parameters under which medical students may work in clinical settings for educational purposes.

Policy Definitions:
Duty or Work Hours: Refers to hours spent on patient care and in required educational activities within the clinical setting. These hours do not include studying, reading academic preparation, or travel time.

Clinical Setting providing Medical Education: A site that a student is assigned in order to complete a clinical course.

The Policy:
An important part of medical education involves student learning while in a clinical setting. The CUSOM has developed a medical student “duty hours” policy based on the policy requirements for second year residents (e.g., PGY-2, R-2). The CUSOM duty hour policy for medical students applies to all clinical sites providing education to medical students. Briefly, the requirement is:

1. Students will not work more than 80 hours per week when averaged over four weeks.
2. Students will have a minimum of one day in seven off, when averaged over four weeks.
3. Students will not work more than 24 consecutive hours of scheduled participation during one period of time and no more than 4 additional hours to accomplish an effective transition of patient care.
4. Students should have 8 hours free of duty between work shifts.
5. After a 24-hour shift, students should have 14 hours free of duty.
6. No more than every 3rd night on call (excluding rotations in which students are working consecutive night or swing shifts and have days off)

Duty hour activities include patient care and all required educational activities. Studying, reading and academic preparation do not count towards the work hour maximums. Travel time to rotations does not count as work hours.

**Phase III Procedure:**
During Phase III, students are required to indicate whether they have complied with duty hour policy as stated above, and if unable to comply, to provide the reason(s) for non-compliance. Duty hour compliance will be assessed randomly throughout the year and at the end of select clerkships as described below. Students should contact the clinical block or clerkship director when they are approaching duty hour limits, and discuss with block directors about how to proceed including possible schedule adjustment at the clinical site.

**Snapshot Surveys:**
Periodically throughout the academic year (June, August, October, January, March), all active Phase 3 students enrolled in clerkships 4 weeks or longer will be asked to log duty hours every day for a week. Logging will be scheduled to avoid the first week of new blocks (orientation) and the last week of blocks (exams).

Each day of the week, the students will receive an email invitation to complete a Qualtrics survey. Monday through Saturday, the survey will have one question that will ask the students to enter the number of hours they worked that day.

On Sunday, the final survey day, the survey will have an additional question:

If you were not able to comply with Duty Hour Requirements during this course, please check the requirement that led to a violation of duty hour requirements:

- I worked more than 80 hours per week when averaged over four weeks.
- I did not have a minimum of one day in seven off, when averaged over four weeks.
- I worked more than 24 consecutive hours of scheduled participation during one period of time and more than 4 additional hours to accomplish an effective transition of patient care.
- I did not have 8 hours free of duty between work shifts.
- After a 24-hour shift, I did not have 14 hours free of duty.
- I had more than every 3rd night on call (excluding rotations in which I was working consecutive night or swing shifts and have days off).
- Not applicable because I complied with Duty Hour Requirements.

Comment box: Please provide explanation of any areas above that you have not been able to comply with.

The surveys will be set to send a reminder daily until each survey is complete.

The Phase III Coordinator will monitor survey completion of the duty hour logs during the
Each student will have a unique URLs which will enable correlation of the student’s schedule and duty hour logging. After the logging is completed, the survey data will be downloaded and combined with clinical site data.

**End of Block Evaluations:**
An evaluation question is included in the course evaluation for all clerkships 4 weeks and longer, and all sub-internships:

If you were not able to comply with Duty Hour Requirements during this course, please check the requirement that led to a violation of duty hour requirements:

- I worked more than 80 hours per week when averaged over four weeks.
- I did not have a minimum of one day in seven off, when averaged over four weeks.
- I worked more than 24 consecutive hours of scheduled participation during one period of time and more than 4 additional hours to accomplish an effective transition of patient care.
- I did not have 8 hours free of duty between work shifts.
- After a 24-hour shift, I did not have 14 hours free of duty.
- I had more than every 3rd night on call (excluding rotations in which I was working consecutive night or swing shifts and have days off).
- Not applicable because I complied with Duty Hour Requirements.

Comment box: Please provide explanation of any areas above that you have not been able to comply with.

For the Longitudinal Integrated Clerkships (DHLIC, COSMIC, C-CLIC, FCLIC), students will receive the end of block evaluation question by survey at the conclusion of each immersion block as well as all of the snapshot surveys given to the class as a whole. They will complete the standard course evaluation question at the conclusion of the LIC.

Compliance with logging is a professionalism expectation.

**Clinical Logger Requirements**

In order to ensure that students are seeing all of the required conditions and adhering to duty hour restrictions during Phase III, the following requirements of students and clerkship directors are in place:

Logger Requirements
- Log each required each clinical condition once during the block in which it is required.
- Log honestly.
- Provide the logger report to the clerkship director or their designee at the midpoint and end of a block, or at the end of the block for blocks less than 4 weeks in length.

Clerkship Directors or their Designee will:
- Review the student logger data at the midpoint and end of a block, or end of the block for blocks less than 4 weeks in length, to ensure students are on track to see all
required clinical conditions.

- Review aggregate data twice yearly to ensure that all required clinical conditions are seen by all students and to ensure that alternate methods are used minimally to achieve this.

Students not completing their requirements will face the following consequences:

- Dishonest Logging of Patient Encounters will be deemed a violation of the Student Honor Code and be referred to the Student Honor Council for further discussion.
- Failure to complete logging of Duty Hours when requested will be deemed a professionalism violation and may require escalation to the professionalism committee.
- Students will not receive a grade until a completed logger has been turned in at the end of the block.

Please refer to the video presentation from ICC 7001 for instructions on how to successfully use the logger if you run into technical issues or contact Matthew.N.Cook@cuanschutz.edu
Professionalism:

The Importance of Professionalism: Yours and Others
As you enter the clinical phase of your training, your professionalism and the professionalisms of others is needed for effective learning and compassionate, high quality patient care. CUSOM is committed to creating an environment of mutual respect among all those involved in the clinical setting -- students, patients, faculty, residents, and staff.

Your Professionalism
Professional behavior is expected of students throughout their medical school curriculum and is a program competency for graduation. Some expected behaviors include:

- Be conscientious, reliable and timely with required responsibilities
- Be truthful in documenting and reporting clinical and administrative information
- Accept and acknowledge personal errors
- Maintain patient confidentiality
- Recognize and respond to others’ unprofessional behavior

The Student Professionalism Committee and the Student Honor Council strive to address concerns of student professionalism with the goal of helping students to achieve and maintain the standards of behavior expected by the profession.

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<tr>
<th>Resources</th>
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<td>Professionalism Competency</td>
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<td>Student Professionalism Committee</td>
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<td>Student Professionalism – Student Feedback Form</td>
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<td>Honor Council</td>
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Professionalism of Others
In order to create an environment conducive to effective learning and patient care, it matters how those in the healthcare setting – students, faculty, residents, staff, and patients – are treated and treat each other. In the case of students, AAMC defines mistreatment as “behavior (that) shows disrespect for the dignity of others and unreasonably interferes with the learning process” whether “intentional or unintentional.” See SOM Policies and Procedures Handbook, Section 1.2. Professionalism Resources

Feedback to each other is one way that we can learn how other view our behaviors. We encourage you to report incidents of unprofessional behavior and mistreatment. There are a variety of resources to help you in thinking about any incident you are considering reporting. Feedback Options for Students

See Appendix B for details on providing feedback and for reporting incidents to the Office of Professionalism. You are also encouraged to speak to Block Directors and the Assistant/Associate Deans regarding any professionalism or mistreatment concerns. They want to hear from you!
Relationships between Students and Teachers

Students and teachers should recognize the special nature of the teacher-learner relationship, which is, in part, defined by professional role modeling, mentorship and supervision. There is a power differential, as expressed by the fact that teachers often evaluate student performance and the results of their evaluations may affect the student’s future. Conversely, students evaluate the quality of their teachers and this can, to a lesser degree, affect the teacher’s career.

Because of the special nature of this relationship, students and teachers should strive to develop a relationship that is characterized by mutual trust, acceptance and confidence. They both have an obligation to respect and maintain appropriate boundaries. Students and teachers must avoid any and all behaviors that conceivably could lead to the perception of a boundaries violation; avoiding boundary violations is crucial to a proper teacher-student relationship. There are similar boundaries between students and patients that exist because of the nature of this special and trusting relationship. Boundary violations or actions that may give the appearance of a boundary violation should routinely be avoided.

A partial list includes:
- Romantic involvements;
- Business relationships, other than those that might emerge from joint educational projects;
- Faculty or students accepting services or personal favors from each other (e.g., babysitting, house sitting, pet care, work in the office);
- Accepting substantial gifts;
- Special treatment of a student, including gifts, meals, entertainment, or social contacts that differs substantially from the usual teacher-learner relationship with other students;
- Health providers who provide health services, including psychiatric/psychological counseling, to a medical student or their primary family members will not be involved in the academic assessment or promotion of the medical student receiving those services. When students or their primary family members choose their health care providers from physicians who are on the faculty, they have the potential to be in a conflict-of-interest situation, where their provider is also evaluating their academic or clinical performance. Faculty members are not allowed to complete an evaluation for any students for whom they provide or have provided medical care including their primary family members. Conflicts arise between a faculty’s role as the student’s physician and their role as an evaluator of the student’s performance. Faculty must notify students as soon as they recognize the conflict. Students likewise must notify a faculty member if they are assigned to a physician for evaluation who is providing or has provided medical care for them or their primary family members in the past. The student must also notify the course director who will find an alternative clinical site or provide an alternative faculty member for evaluation. Students may consult the Office of Student Life for a list of physicians who do not teach students.
Academics and Student Support:

Academic Support and Disability Resources

Please reach out to the Office of Student Life! The Assistant Deans of Student Affairs are available to meet and identify resources for you.

Drs. Deb Seymour and Nida Awadallah are key learning specialists within the OSL:

Deborah Seymour, PsyD. is a clinical psychotherapist who serves as a learning specialist in the OSL. Dr. Seymour is available to help students reach their optimal level of learning, retention and academic performance in their courses as well as on USMLE/NBME exams. She offers support when students have questions such as the following:

- Why do my test scores not reflect the effort I am putting in?
- How can I study more effectively? My approach doesn't give me enough time to cover all the material.
- Is my memory inadequate? How can I improve my retention?
- Is it possible that I have an attention disorder?
- How much time do I need to prepare for Step exams and how do I make a schedule?
- I want a score two standard deviations above average. How do I reach it?

For phase III and IV students who struggle academically, Nida Awadallah, MD, is available to meet on an individual basis to assist with all matters of performance, including but not limited to:

- Medical knowledge and test taking (Shelf/subject exams)
- Clinical Reasoning
- Presentations
- Note writing
- Organization
- Interpersonal Skills and Communication

The University of Colorado Denver (UCD) is committed to providing equal opportunities and fostering the personal growth and development of all students. UCD strives to accomplish these goals on behalf of students with disabilities. The staff of the Office of Disability Resources and Services (DRS) is available to aid students with disabilities and arrange for reasonable accommodations. They also work continuously with members of the campus community to identify solutions to attitudinal and architectural barriers that might impede the successful completion of studies by a student with a disability.

The staff of the Office of Disability Resources and Services (DRS) can serve most efficiently and effectively when an aid or service is requested well in advance by a student. Students are encouraged to take the following important steps to obtain accommodations:

- First: Make an appointment, with the Coordinator of DRS, a minimum of six weeks before services are required.
• Second: If possible, provide the Coordinator with documentation of the disability at the first appointment.

Examples of aids and services available to School of Medicine students include:

• Priority registration.

• Assistance in identifying note takers.

• Alternative testing for classroom examinations, which may include: Extended time, private room, reader, scribe and/or computer.

• Interpreters (oral / sign language) or captioning services.

• Assistance in identifying community resources such as Learning Ally, Department of Vocational Rehabilitation Services, etc.

• Referral to on-campus support services, i.e. Writing Center, Tutoring, Student Mental Health Services.

• Textbooks in alternate format (E-Text, Braille, Audio, and Enlarged Print).

• General advice and assistance in working with campus policies and practices, personal and academic concerns, as well as referrals to other Campus resources.
Financial Planning

Class of 2023,

We hope this section helps you navigate the complexities of financial matters specific to your clerkship year at the University of Colorado School of Medicine. If you have questions or concerns about your financial aid please call, email or visit me. The information included in this section is accurate as of November 16, 2018 and is subject to change without notification.

A friendly reminder: when in doubt or if you’re even just a little curious about something related to financial aid or student debt, please ask! I want you to receive accurate information possible to make informed decisions.

My office is conveniently located in the Office of Student Life of the Fitzsimons Building where I am able to offer dedicated support to Medical students. Students are welcome to schedule a phone or in-person appointment using the online calendar here. My door is also open to students who choose to walk into the office. If you need to discuss your financial aid outside of our normal business hours, please send me an email to identify an alternative time. I will do my best to accommodate early morning or evening requests for assistance.

Sincerely, Deedee Colussy Financial Aid Program Manager
deedee.colussy@ucdenver.edu Direct Phone: 303-724-9117

Contacting Financial Aid
If you need general financial aid assistance, you’re welcome to contact the main Anschutz Campus Financial Aid and Scholarships Office.

- Advising and Walk-in Hours: Monday, Wednesday & Friday: 8 AM to 3 PM; Tuesday & Thursday: 8AM to 1PM.* Office of Student Life, 1st Floor, Fitzsimons Building
- Phone: 303-724-8039 (They are available by phone during our advising hours.)
- Email: financial.aid@ucdenver.edu (Student ID number must be included.)

Living Expense Refunds
The disbursement dates are posted in UCD Access for student planning. However, please remember the date posted online and in your loan disclosure statement(s) is approximately ten days before the new semester begins, this is not the date you will receive the funds in your direct deposit account.

Students should expect to receive their living expense deposit the first week of classes each new semester. Students are required to be registered and in good standing with the CU School of Medicine, and all necessary financial aid information and/or paperwork must be complete. Missing or incomplete requests will delay your living expense refund and your account is subject to service (late) fees if it is not paid by the due date established by the
Bursar's Office (bursar@udenver.edu or 303-724-8032). The Bursar's Office sends email
notifications regarding billing statements and due dates. Students are assessed late fees
when their account is unpaid by their bill due date and a hold is placed on their account to
prevent registration (drop/add) and transcript requests.

Common issues that will delay your refund:

1. Missing FAFSA application and/or additional documentation. You can view your current
award and application status in UCD Access in the Student Center.
   a. www.ucdenver.edu/ucdaccess
   b. You will need to submit the 20-21 FAFSA for your Fall 2020, Spring and Summer
2021 semesters. This application was made available at www.fafsa.ed.gov. Your
2019 tax information will be used to complete this application.
   c. Your Student Center “To Do List” details FAFSA receipt and unresolved items.

2. The financial aid offer has not been accepted. Student loans must be accepted by you for
CU to begin processing the funds. You are notified via email when an award offer is
available for you to accept.
   a. Note: Institutional loans (Perkins, Loans to Disadvantaged Students, CU Medical
School Loan, etc.) can take longer to process.
   b. Be sure to contact Debt Management at 303-315-1830, if you have questions
about these loans.
   c. If you accept an institutional loan, watch for an email message from ECSI (it is
often found in your junk/spam folder) for directions to complete the entrance
counseling and promissory note online.

3. Enrollment: You are expected to be a full-time student each semester. If you are not
enrolled or your registration is delayed, this will prevent your financial aid funds from
disbursing.

Direct deposit gives you the quickest access to living expense refunds. Sign up for direct
deposit in the “Deposit” hyperlink of UCD Access’ Student Center page. If you have any
issues, please contact the Bursar’s Office for assistance.

When you receive your refund, plan your finances carefully to last you until your next deposit.
If you do not have a personal budget or need to revise your plan, you can obtain a
comprehensive worksheet from the AAMC – FIRST website below or through their
partnership with SALT. A free electronic option is mint.com to set and track your spending
plan, financial goals and bill due dates.

A suggested method to manage your living expense refund is to have your entire deposit
sent to your savings account, and then schedule a monthly transfer for your living allowance
($2100 or less - for the 2020 - 2021 academic year) to avoid overspending. Students are encouraged account for non-monthly/irregular expenses (example: car insurance, maintenance, and registration fees) when establishing the monthly transfer amount to ensure the funds are available when those expenses are incurred. Here are the estimated refund dates for each semester of Phase III and the months covered by the accompanying living expense refund.

- **Summer 2020:** week of June 15th (July and August)
- **Fall 2020:** week of August 17th (September through January)
- **Spring 2021:** week of January 4th (February through June)

Students can reduce the amount they borrow each semester. You have 45 days from the time you receive a financial aid disbursement to contact Financial Aid to request an adjustment to lower your principle borrowing. Returning unneeded loan funds during this time will reverse loan origination fees and interest.

### Unusual Circumstances

Occasionally, a medical student experiences unforeseen health care and/or automobile expense. We can consider unusual expenses for medical, dental, pharmaceutical, optical, and major car repair charges with itemized documentation. It is advisable for students to contact Financial Aid to discuss their situation prior to submitting their request for an increase, to better understand the required documentation. Health related appeals will require Explanation of Benefit (EOB) statements from your insurance company. Credit card receipts do not detail the necessary information needed for budget increase appeals. Car related expenses can only be considered for major repairs. Maintenance (oil changes, mileage service, etc.) cannot be considered, as they (along with insurance and registration) are covered by the personal transportation allowance incorporated into the living allowance. Approved increases will be processed as a reimbursement.

### Locating Essential Information

- **UCD Access:** [ucdenver.edu/ucdaccess](ucdenver.edu/ucdaccess)
- **Financial Aid for Medical Students** [webpage](webpage)
- Information is regularly updated on this site specific to CU medical students
- Resources including upcoming webinars, dates, loan repayment & online appointment scheduling.
- **National Student Loan Data System**
- Managing Your Finances During Medical School [AAMC](AAMC)
- AAMC’s **FIRST** (Financial Information, Resources, Services, and Tools)
- Annual Credit Report [website](website)
  - This federally sponsored website allows you to obtain your three free credit reports.
  - The reports do not provide your credit score without paying a fee, but it is more important you’re reviewing the information for accuracy. It is advisable to review one of the three reports every four months to have an ongoing look at your credit history throughout the year. If you find an error or incorrect information you need to follow the dispute directions detailed in the report.
  - It is important to remember your federal Graduate PLUS loans require
“adverse-free credit history” for you to receive this type of funding. As a rule: delinquencies, bankruptcies, court judgements against you, or other negatively perceived financial information about your ability to repay a debt could prevent or delay your ability to borrow this type of loan.

- In light of recent data breaches many consumers are concerned about protecting their personal identity and placing a credit freeze on their consumer credit files. Generally, this does not pose a problem for student aid, however, you should be aware that you will need to unfreeze your report for a credit check to be completed when you accept a PLUS loan. Most students will undergo a credit check twice per academic year, if they opt to borrow this type of financing.

**Spring IDPT 8005 and 8006**
During ICC 8005 (Prior to Match Day) you will be required to attend a loan repayment strategy session to help coach you on the options available to manage your educational debt after graduation. You will have the opportunity, if you wish, to meet with Financial Aid for an hour to discuss your loan repayment strategy, as it relates to your future career plans and financial matters. Individual loan repayment counseling will be scheduled after you have completed the required homework.

Optional sessions will be hosted throughout the remainder of the Spring semester prior to graduation. Topics covered in these recommended sessions include: financing a home purchase and estate planning. *Watch for additional information during the Spring of 2022. *Subject to change based upon student interest and availability of subject matter expert presenters.

**Student Resources**
The [Student Resources link](#) will provide several resources, including: Health and Wellness, Campus Services, Professionalism Resources, Career Advising, School of Medicine Requirements, Student Groups, throughout Anschutz Medical campus.
Office of Student Life:

The Office of Student Life is located in the Fitzsimons Building, on the first floor, room N1219. The primary mission of the Office of Student Life is to assist medical students from the time they applied to medical school, to the first day of matriculation, through graduation and beyond.

Dr. Brian Dwinnell, Associate Dean of Student Life; Dr. Jeff Druck, Assistant Dean of Student Affairs, Dr. Amira Del Pino-Jones, Assistant Dean of Student Affairs and Dr. Jeffery Soohoo, Assistant Dean of Admissions, and the rest of the Student Life team are always available to answer questions and address your concerns. Our doors are always open.
Office of Student Life

Brian Dwinnell, MD  
Associate Dean of Student Life

Jeff Druck, MD  
Assistant Dean of Student Affairs  
- Verifications  
- Good Student Standing Letters  
- Shadowing Information  
- Advisory College Program  
- Organization of Student Reps

Amira Del Pino Jones, MD  
Assistant Dean of Student Affairs  
- Phase III and IV absences  
- Scheduling Phase 3  
- Scheduling Phase 4  
- Medical Student Council

Deborah Seymour, PsyD  
Interim Assistant Dean of Student Affairs / Education and Learning Specialist  
- Phase III and IV absences  
- Scheduling Phase 3  
- Scheduling Phase 4  
- Medical Student Council  
- Step 1 Preparation  
- Study Skills

Nida Awadallah, MD  
Learning Specialist  
- Clinical Remediation  
- Clinical Assistance  
- Step Preparation

Haylee Shacklock  
Director of Medical Education and Student  
- Oversees Office of Student Life

Joint Responsibilities  
- MSPE  
- VSLO  
- Residency Prep  
- Step 1 tracking/support programs  
- Step 2 tracking/support programs  
- Remediation Coordination - Assisting Students through Personal and Academic Issues
Student Life Office Staff

Lamar Cherry
(P) 303-724-8662
(E) lamar.cherry@cuanschutz.edu
- Admissions Events

Chris Read
(E) christopher.read@cuanschutz.edu
- Data management and student information tracking

Erin McKay
(E) erin.mckay@cuanschutz.edu
- Advisory College Program
- Visiting Students
- Awards/Scholarships

Regina Kireva
(P) 303-724-4590
(E) regina.kireva@cuanschutz.edu
- Letters of Good Standing
- My Record Tracker
- Academic Verifications
- Licensing Verification
- Absences

Deborah Jackson
(P) 303-724-6404
(E) deborah.jackson@cuanschutz.edu
- Phase I-III Registration/Grades
  - Grade Issues/Changes
- Transcript Assistance
- MSA/Research Track Registration
- Database Management

Jordan Coulter
(E): Jordan.coulter@cuanschutz.edu
- VSLO
- Phase IV Registration/Grades
- MSPE Coordination
- GHHS/AOA
- Composite Photos
The Office of Student Life is strongly committed to assisting our students with career and professional development. Beginning with orientation, personnel in this office are responsible for assisting students with providing unbiased information about medical specialties, residency application, preparation for interviews, and their participation in various residency matching services.

Career planning is an interactive process: we can assist students in setting and achieving academic, professional, and personal goals that are consistent with their own interests, values, abilities, degree requirements, and career expectations. The Office of Student Affairs provides a wide range of information and resources to students and may refer them to other appropriate campus resources. There are many factors involved with planning a medical career and our office can assist students in understanding each of those factors and help in the decision-making process.

We coordinate with the AAMC Careers in Medicine program, an online resource, which aids students in understanding their personality types, skills, interests, and values. This program is designed to assist students in a logical process of self-assessment and career planning. To schedule a one-on-one session about career advising, please call the Office of Student Life at 303-724-6407 or email Ingrid.Summers@UCDenver.edu

**Need a jump start when thinking about careers?**

- Careers in Medicine website. This site has tools that enable you to identify career goals, create a personal profile identifying skills, interests, personality, values, lifestyle choices, and other personal experiences that affect career choice, provides information about 128 specialties and subspecialties, provide match, training and workforce information and the personal characteristics of physicians in each specialty.
- Check out specialty organizations and resources
- Talk with an Assistant Dean in Student Affairs
- Meet up with your Foundations of Doctoring Preceptor
- Have a chat with the faculty or student mentor in your Advisory College
The School of Medicine Office of Diversity & Inclusion

The School of Medicine Office of Diversity & Inclusion is here to connect you with services and departments throughout the university system and in the community that will assist and support your academic and professional success.

We believe diversity enhances the learning environment, strengthens the visibility and ties to nearby communities, and contributes to the community’s overall health through programs and trainings focused on decreasing health disparities and increasing health equity in accordance with the mission of the medical school.

We also work to develop a respectful, diverse and inclusive environment in the School of Medicine and across the Anschutz Medical Campus where all members of the community feel supported to be successful in achieving the mission of health through our educational programs, patient care and research.

Shanta Zimmer, MD
Associate Dean for Office of Diversity & Inclusion
Email: shanta.zimmer@ucdenver.edu

Krista Walker
Director for Office of Diversity and Inclusion
Email: krista.walker@cuanschutz.edu

Christy Angerhofer, MA
Diversity and Inclusion Professional
Email: christy.angerhofer@cuanschutz.edu

Contact Us:
Office of Diversity and Inclusion
Anschutz Medical Campus Box C292
13001 East 17th Place, Fitzsimons Building
Aurora, CO 80045
These policies are applicable to all Health Professions students on the University of Colorado Anschutz Medical Campus as well as Non-CU Anschutz Health Professions students taking part in unpaid educational and experiential opportunities in rural and medically underserved areas who are eligible for Colorado AHEC housing. Colorado AHEC housing is for secondary housing purposes only. Students may NOT use AHEC housing as a primary residence.

For the purposes of the policy, educational and experiential opportunities shall be referred to as Rotations. The University of Colorado (CU) does not discriminate in housing based on race, color, religion, gender, national origin, age, disability, creed, sexual orientation, gender identity or veteran status.

These policies do not apply to medical Residents or those participating in paid internships. Residents and paid interns are not eligible for Colorado AHEC housing.

**University of Colorado/Anschutz Medical Campus Academic AHEC Program Liaisons**

- College of Nursing: Allison Moravec-Rice (Allison.Moravec-Rice@ucdenver.edu) 303-724-8311 (office)
- Physician Assistant Program: Tanya Fernandez (tanya.fernandez@ucdenver.edu) 303-724-1345
- Physical Therapy Program: Cindy Armstrong (cynthia.armstrong@ucdenver.edu) 303-724-8927 (AHEC office) 303-888-0580 (mobile)
- School of Dental Medicine: Tamara Tobey (tamara.tobey@ucdenver.edu) 303-724-7033 (mobile) **concurrent** with Karen Tawara (karen.tawara@ucdenver.edu) 303-724-7030 (office)
- School of Pharmacy: Wendy Anderson (wendy.anderson@ucdenver.edu) 303-724-2619 (office) **concurrent** with Wes Nuffer (wesley.nuffer@ucdenver.edu) 303-724-2654 (office)
- School of Medicine: Jeff Druck (Jeffrey.druck@ucdenver.edu) 303-724-6407 (office)
- Anesthesiologist Assistant Program: Ann-Michael Holland (AnneMichael.HollandBurnett@ucdenver.edu) 252.414.1042 (mobile) concurrently with Carlos Rodriguez (Carlos.R.Rodriguez@ucdenver.edu) 303.724.7164 (office)

The Colorado AHEC Program Office **cannot guarantee** housing will be available in every community, especially in mountain towns during peak tourist seasons, or in rural communities during harvest. It is especially difficult to accommodate housing requests with notice of less than six (6) weeks prior to the commencement of the rotation, however every effort will be made to secure appropriate accommodations. Although rare, due to variability of clinical rotations and Host housing, there are occasions when housing may not be immediately available at the start of the rotation. If this situation arises, the Regional Housing Coordinator will notify the student a minimum of two (2) weeks prior to the start of the rotation and the Colorado AHEC Program Office will contact the student to discuss alternative housing options.
Students must acknowledge and sign the **Student Housing Contract** when registering. Upon receipt of the student housing contract by the Regional AHEC Office Housing Coordinator, housing will be arranged. Once the contract has been received from the student and the housing has been confirmed, the Regional AHEC Housing Coordinator will contact the student directly with their housing information a minimum of two weeks (10 business days) prior to the start of the rotation.

**Regional AHEC Housing Coordinators**

- Centennial AHEC (CAHEC): Nancy Schumacher (nschumacher@cahec.org) 970.330.3608
- Central Colorado AHEC (CCAHEC): Mitch Fittro (Careers@centralcoahec.org) 720-863-8199
- San Luis Valley AHEC (SLVAHEC): Lisa Lucero (lisa@slvahec.org) 719.589.4977; 719.588.5363 mobile
- Southeastern Colorado AHEC (SECAHEC): Debra Ball (debra.ball@secahec.org) 719.544.7833
- Southwestern Colorado AHEC (SWCAHEC): Jeanette Abella (jeanette.abella@swcahec.org) 970.903.3126
- Western Colorado AHEC (WCAHEC): Nicole Heil (nheil@wcahec.org) 970.434.5474 ext. 3; 970.201.9565 (mobile)

**Student Responsibilities:**

Students must register using their official student CU Anschutz e-mail address (personal e-mail addresses are not acceptable) or applicable official University e-mail address if a non-CU Anschutz student.

The majority of AHEC housing occurs in Host homes although a few of the Regional AHEC Offices have owned / leased houses and apartments. For most of the state, the Regional AHEC Office provides Host housing in private homes. Students must be flexible and accepting of housing provided.

Students may arrive one day prior to the start date of their rotation and vacate the housing the day following the end of their rotation. The Colorado AHEC Program Office will reimburse for the length of a student’s rotation only and will not fund housing for students who choose to arrive early or stay longer than one day prior or one night after their assigned rotation. Any additional days would be at the expense of the student, arranged by the Regional Housing Coordinator and up to the discretion of the Host. Students are not to discuss additional days with their host directly without consulting the regional housing coordinator to avoid conflict by putting the host in an uncomfortable situation.

Once the host housing has been confirmed, it is the responsibility of the student to contact the Host at least two (2) weeks prior to the rotation’s start date to confirm arrival and finalize any special arrangements that may be needed (such as obtaining keys, etc.)

Students who stay in Colorado AHEC housing must abide in full of any required housing rules, including the housing rules of the Host, and must acknowledge and sign the **Student Housing Contract** prior to placement. As a guest in the Host’s home, students are expected...
to inquire about and abide by any additional house rules established by the Host. The Colorado AHEC Program Policy prohibits visitors and/or overnight guests (including family and friends) in any Host or Regional AHEC owned/leased housing.

The Colorado AHEC Program Policy prohibits smoking of any kind (including marijuana), recreational drugs (including edibles) or the use of alcohol in any Host or Regional AHEC owned/leased housing.

The Colorado AHEC Program Policy prohibits pets in any Host or Regional AHEC owned/leased housing.

The Colorado AHEC Program Policy prohibits the possession of any weapon within AHEC housing. This includes items such as firearms, knives, explosives (fireworks, ammunition, etc.) bow and arrows, paint or BB guns, or any item that is a reasonable facsimile.

Students are responsible for providing their own transportation to and from their Host homes as well as to and from their rotation site and in the community. Students need to make their own arrangements with their rotation site in the event of inclement weather (which may include 4-wheel drive or chains in the winter). It is NOT the responsibility of the Host to provide transportation to students during their rotation.

Students are responsible for discussing parking with the Host. Any costs associated with parking or being towed for parking in a restricted area is the responsibility of the student. Any costs related to parking or being towed will NOT be reimbursed by AHEC.

Students are expected to use their own cell phone for communication while on rotation. Prior to arrival they should discuss other conveniences with the Host, such as television, the use of other electronic devices, internet access, etc.

Students are expected to provide their own bed linens and it is the student’s responsibility to inquire as to whether this is necessary. Students are required to bring their own towels and toiletries.

Students are responsible for keeping their living area clean and making sure the area is clean before departure. Any costs related to cleaning or damage to AHEC housing and will be charged to the student accordingly.

If a rotation is changed or cancelled, the student must notify the Regional AHEC Housing Coordinator and the Colorado AHEC Program Office immediately. In addition, if changes occur within two (2) weeks of the start date the student AND the student’s Academic Program Liaison must notify the Regional AHEC Housing Coordinator and the Colorado AHEC Program Office immediately. Failure to provide notice of cancellation within two (2) weeks of the start of the rotation may result in charges to the student and/or the student’s Academic program and the inability for the student to request Colorado AHEC housing in the future. The student’s Academic program will determine the need for any further action toward the student.
AHEC responsibilities:

Colorado AHEC Host housing provides students with a single, private sleeping room, however the bathroom may be shared with the Host family or other students. Students are expected to purchase their own food and prepare their own meals unless previously arranged with the Host. Any costs for food are at the expense of the student and will NOT be reimbursed by AHEC. The Host family will share space in their kitchen and may share other living space in the home which should be discussed with the Host upon arrival.

Colorado AHEC owned / leased houses, apartments and condos may be coed (male/female). Colorado AHEC provides students with a single, private sleeping room; however, the bathroom may be shared. Additionally, all common areas; kitchen, living, and dining areas may be shared with other students.

Some Regional AHEC owned / leased housing have washers and dryers. In Host homes, arrangement for the use of laundry facilities are made with the Host, however students are expected to access laundry facilities in the community.

Internet access is NOT guaranteed. If Internet service is not available at the housing location, the student will be notified prior to the rotation and the Regional AHEC Office will assist the student in locating internet access in the community. It is the student’s responsibility to communicate with their Academic Program on the Anschutz Medical Campus should internet access not be available. Bandwidth is a limited in many rural areas. Students are asked to limit their internet usage to Academic Program related activity while residing in Colorado AHEC Housing.

AHEC housing for students who require service or emotional support animals will be considered on a case by case basis. Issues related to liability and damage will be handled individually with assistance of the Office of Disability Resources and Services (DRS), the University of Colorado legal department and the Colorado AHEC Program Office on the CU Anschutz campus or equivalent University sanctioned office and Regional AHEC program office if the student is a non-CU Anschutz health professions student. There is NO guarantee that Regional AHEC Offices will be able to accommodate these requests due to lack of availability in many rural areas. Students who require service or emotional support animals are asked to provide proof of need from a qualified licensed healthcare professional and must submit their requests a minimum of eight (8) weeks or longer to allow time to locate appropriate housing. Students who require service or emotional support animals are also encouraged to arrange their own housing and apply for reimbursement as outlined in the student found housing upon the completion of their rotation.

Complaints and concerns regarding Colorado AHEC housing should go directly to the Regional AHEC Office. If not satisfactorily addressed, students should contact the Colorado AHEC Program Office (coahechousing@ucdenver.edu). If a student believes they are in immediate danger, the student should leave the home, call 911, and contact the Regional AHEC Office and their Academic Program coordinator immediately.
2021 COLORADO AHEC STUDENT ROTATION POLICY

1. Effective date of this policy:
   
   This policy will be in effect for those rotations which begin on or after the effective date of Jan. 1, 2021. Rotations in place before the effective date will be reimbursed according to the policy in effect at the time the rotation began.

2. ROTATION DEFINED:

   A ROTATION is defined as an unpaid supervised educational experience approved by a participating Health Professions Academic Program. Such rotations shall take place in Colorado rural areas. Participants may take part in multiple rural rotations during the time they are a health professions student.

3. GEOGRAPHIC REQUIREMENTS FOR ELIGIBILITY:

   Eligible rotations are in communities located further than a 40-mile radius from the Anschutz Medical Campus. Areas within a forty (40) mile radius of the Anschutz Medical Campus are NOT eligible (thus, communities such as Boulder, Golden, Castle Rock, Evergreen, and Brighton are NOT eligible) even if the community is considered to be a medically underserved area. AHEC provided/supported housing and the lodging reimbursement only applies when the student chooses to live in the community during the rotation. There is no per diem for meals, travel or mileage reimbursement. Funding support is limited to AHEC housing only according to the policies and payment parameters herein.

4. HOUSING PAYMENT PARAMETERS:

   A. AHEC Provided Housing:
   Housing (including the night prior and the night following the rotation) will be provided for students who choose to complete their rotation and live in a rural Colorado community. AHEC will provide housing for a minimum of a two-week length of stay and only consecutive days will be considered regardless of the students’ clinic or academic schedule. AHEC will reimburse for the length of a student’s rotation only and will not fund housing for students who choose to arrive early or stay longer than one day prior or one night following their assigned rotation. Any additional days would be at the expense of the student, coordinated by the Regional Housing Coordinator, and up to the discretion of the Host.

   Requests for housing will be coordinated by the designated Regional AHEC Housing Coordinator at each of the Regional AHEC Offices.

   There are three (3) possible options for housing and each option is dependent on the location and timing of the rotation. These options may include:

   • Accommodations owned / leased by the Regional AHEC Office
   • Regional AHEC Host Housing
   • Student Found Housing

   AHEC Owned or Leased Housing: Housing may be provided in AHEC owned or leased housing in certain regions. Only consecutive days will be considered regardless of the
student’s clinic or academic schedule. Students who would like to arrive early or stay longer than their assigned rotation will be allowed to do so at the discretion of the Regional AHEC Office and any costs associated with an extended stay will be at the student’s expense. No student visitors, family members or pets are allowed. Smoking (including marijuana), recreational drugs (including edibles), alcohol or weapons of any kind are prohibited in the housing or on the property.

Safety checks in leased / owned housing must be completed by the Regional AHEC Office annually. Following the initial safety check, documentation for maintenance of smoke detectors and carbon monoxide detectors including battery changes must be completed by the regional AHEC office on an annual basis. Physical inspection of the leased/owned must occur every three years or more frequently at the discretion of the regional office.

**Host Housing:** The majority of AHEC housing is provided by Hosts. For those students who reside in Host housing that has been arranged by the Regional AHEC Offices, housing payment for the length of the rotation will be paid to the Host during the first week of the rotation once the student is physically present in the Host home. Hosts will receive between $10 and $15 per night as determined by the agreement with the Regional AHEC Office. No visitors, student family members or pets are allowed. Smoking (including marijuana), recreational drugs (including edibles), alcohol and weapons of any kind are prohibited in Host homes.

If the student fails to show or the housing is cancelled after it has been assigned, the host will be paid in full and the students’ academic program will be billed for the length of the rotation unless the Regional housing coordinator is able to place another student with the same Host during the previously assigned time. If another student is placed with the same host, payment to the Host will be paid at a prorated rate and will include the balance for the second student’s rotation. Whether the originally assigned student is responsible for the costs incurred is determined by the students’ Academic program.

Student safety is a priority. Background checks will be conducted by the Regional AHEC Office for all adults eighteen (18+) or older who reside in the Regional AHEC Host Home during any time of the students stay. Hosts must agree to, and complete, a background check before hosting students. Safety checks of Host homes must be completed by the Regional AHEC office upon acceptance into the AHEC housing program. Following the initial safety check, documentation of smoke detectors and carbon monoxide detectors including proof of annual battery changes must be submitted to the regional AHEC offices. Physical inspection of Host housing shall occur every three years or more frequently at the discretion of the regional AHEC office. All Host homes must comply with basic safety recommendations including smoke detectors, carbon monoxide detectors, emergency ladders and designated escape routes. Hosts are asked to take the time to review their fire escape plan with the student and show the student where emergency lights and where accessible doors are located in the home upon arrival.

**Student Found Housing.** CU Anschutz students may choose to find his/her own housing and request reimbursement as outlined below. Students who find his/her own housing must respond to the original email from the AHEC program office that no housing is needed a minimum of six (6) weeks in advance of their rotation.

**Reimbursement:** $21/day will be reimbursed at the completion of the rotation. Students will only be reimbursed up to the number of days of their rotation regardless of when he/she
chooses to arrive or to leave.

At the **END** of the rotation, students must properly complete an Official Colorado AHEC Program Rent Receipt found on the Colorado AHEC Program website (www.ucdenver.edu/coahec) and submit it to the Colorado AHEC Program Office (COAHECHousing@ucdenver.edu) no later than forty-five (45) calendar days following the completion of the rotation to receive reimbursement. Reimbursement checks will be mailed directly to the student from the Colorado AHEC Program Office.

Students who arrange for his/her own housing are responsible for any payments required during the length of their stay. No reimbursement will be made for students who reside with immediate family members (parents or siblings). No advance of funds can be made to students to pay for housing. No background checks or other support is provided by the Colorado AHEC Program Office for student found housing.

Students who request AHEC housing when they register and are assigned AHEC housing but cancel or no show after their housing has been arranged (due to making their own housing arrangements) will NOT be eligible for future AHEC housing or for AHEC reimbursement. The student’s Academic Program will be billed for the entire length of the rotation. Whether the student is subsequently held responsible for costs incurred due to a late cancellation or no show is between the academic program and the individual student.

5. **REGISTRATION FOR ROTATION(S):**

**Method:** All students participating in a rural rotation experience must register (coahechousing@ucdenver.edu) using their official student CU Anschutz e-mail address whether or not housing is requested or required.

**Timely Registration:** Students who require housing while on rotation **MUST** respond to the email and complete the online registration **AND** provide an electronic signature on the student contract included in the AHEC housing registration, at least six (6) weeks prior (more if possible) to the beginning of the rotation. Exceptions may be made in the event of a rotation cancellation with confirmation from the student’s Academic program, as placement may be more difficult.

6. **ADHERENCE TO RULES AND REGULATIONS:**

Students who stay in housing that has been provided or arranged for by the Regional AHEC Offices must abide in full of any required housing rules or regulations and must acknowledge and sign the **Student Housing Contract** prior to placement. Any student who is dismissed from AHEC housing will NOT be reassigned to another location during the rotation or for any later rotations. The Regional AHEC Office and the student’s Academic program will be notified of the dismissal. The student’s Academic Program will be responsible for any changes necessary in reassigning the student.

Students are responsible for all charges associated with any damages or additional cleaning of Colorado AHEC housing.

Colorado AHEC Program Office funds housing for students during their rotation **ONLY** and will not fund any additional days. Any student who would like to stay for days beyond their
rotation, either before or after, is responsible for making their own arrangements with the Host home. The student is responsible for any and all costs, at a rate set by the Host home, for any additional days.

7. **OUT-OF-STATE PAYMENT LIMITATIONS:**

**Expenses:** Housing cannot be reimbursed for those clinical sites outside of the State of Colorado. In certain circumstances the Regional AHEC Office may be able to provide assistance in locating host housing in sites outside Colorado but cannot provide payment to host housing that is not within the state. There is no per diem, travel or mileage reimbursement for any rotation outside the State of Colorado.

8. **NON-UNIVERSITY OF COLORADO HEALTH PROFESSIONS STUDENTS**

It is understood that Health Professions Students from the University of Colorado Anschutz Medical Campus will be given priority for Colorado AHEC Housing. In the event that housing is not being utilized by a health professions student from the University of Colorado Anschutz Medical Campus, non-University of Colorado Health Professions students may be considered for Colorado AHEC housing at the discretion of the Regional AHEC Offices. For students to be considered for Colorado AHEC housing, the policy is as follows:

- The student must have proof of enrollment of an accredited Health Professions Program.
- The student must register using an official University e-mail address.
- The student must provide contact information for an individual within their Academic Health Professions Program overseeing their clinical rotation.
- The student must have proof of acceptance by a rural Colorado clinical rotation site.
- The student must have proof of personal health insurance.
- The student must have had a background check upon matriculation into their Health Professions Program (or more recently) and provide a copy to the Regional AHEC Office.
- The student or his/her Health Professions Program will negotiate with the Regional AHEC Office the cost for the housing stay and pay the Regional AHEC Office directly.
- The student may be required to pay a $200 deposit directly to the Regional AHEC Office which will apply to any damage/cleaning requirements. This deposit is above the amount charged for the housing by the Regional AHEC Office. Balance of the deposit will be returned to the student within 30 days following the end of the rotation, when a deposit is requested.
- The student must acknowledge and sign the Student Housing Contract and agree to abide by all Host home house rules.

**END OF POLICY**
Appendices:

Appendix A – Drug Screening Forms & Locations
Appendix B - Options for Providing Feedback
Appendix C - Phase III Required Courses
  • IDPT 7000 – Foundations of Doctoring
  • IDPT 7010 – Hospitalized Adult Care
  • IDPT 7020 – Infant, Child and Adolescent Care
  • IDPT 7021 - Musculoskeletal Care
  • IDPT 7030 – Obstetrics and Gynecology
  • IDPT 7031 – Emergency Care
  • IDPT 7040 – Psychiatric Care
  • IDPT 7041 – Neurologic Care
  • IDPT 7050 – Peri/Operative Care
  • IDPT 7070 – Community and Primary Care
  • IDPT 7080 - Integrated Longitudinal Medicine Clerkship
  • Denver Health Longitudinal Integrated Clerkship
  • Colorado Springs Mentored Integrated Curriculum
  • VA Sequential Training
  • Mentored Scholarly Activity
  • Tracks for Medical Students
  • ICC
Appendix A – Drug Screening Forms & Locations

AUTHORIZATION INFO
Authorized by (signature) ________________________________
Authorized by (print name) Jeffrey Druck
Authorizer’s Phone Number 303-724-6407
Date of Authorization January 01, 2020

EMPLOYER INFO
Company Name University of Colorado School of Medicine
Company Phone 303-724-6407
Company Fax 303-724-6409
Address 13001 East 17th Place, C292
Aurora, CO 80045

PATIENT INFO
Patient Name ________________________________
Job Title MD Student
SS# ________________________________
Date of Birth ________________________________
☐ Check if employee is to pay for service

Thank you for choosing CareNow Urgent Care

SERVICES AUTHORIZED
WORK RELATED INJURY
☐ Are you seeking treatment for a work related injury?
☐ Yes ☐ No Date of Injury __________________________
☐ Do you require a drug screen with injury?
☐ Yes ☐ No

DRUG SCREENS (CareNow to Perform)
☐ Standard 10 panel drug screen
☐ Standard 5 panel Non-DOT drug screen
☐ Instant 10 panel drug screen
☐ Instant 5 panel drug screen
☐ DOT drug screen
☐ Breath Alcohol test
☐ Hair Follicle drug screen

REASON
☐ COLLECTION ONLY FOR TPA
☐ COLLECTION TYPE
☐ DOT
☐ Non-DOT

For DOT Drug Screen or Collection—DOT Agency is Required:
☐ FMCSA ☐ FAA ☐ FRA ☐ FTA ☐ PHMSA ☐ USCG

PHYSICALS
☐ Basic Physical (if drug screen needed, check box above)
☐ DOT Physical (if drug screen needed, check box above)
☐ Guard Physical
☐ Other Physical (describe) ________________________________

OTHER SERVICES
☐ Pulmonary Function (Spirometry)
☐ Other (Describe) ________________________________

CONVENIENT DENVER LOCATIONS
Open Every Day

1. Greenwood Village
5950 S. University Blvd
Greenwood Village, CO 80121
Phone: (720) 446-5890
Fax: (303) 767-5650

2. Aurora
6620 S. Parker Rd.
Aurora, CO 80016
Phone: (720) 446-5893
Fax: (303) 690-2810

3. Highlands Ranch
7120 E. County Line Rd.
Highlands Ranch, CO 80126
Phone: (720) 446-6891
Fax: (303) 220-9888

4. Parker
11336 S. Plikes Peak Dr.
Parker, CO 80138
Phone: (720) 588-4000
Fax: (303) 841-2888

5. Stapleton
3001 N. Havana St.
Denver, CO 80238
720-446-8826

6. DU
1405 E. Evans Ave.
Denver, CO 80210
720-449-8050

7. Arvada
641 Figs St.
Arvada, CO 80027
720-449-9086

Visit us at www.CareNowDenver.com
for detailed maps to each location
Appendix B – Options for Providing Feedback

University of Colorado School of Medicine Feedback Options 2020

1) The multiple ways of providing feedback to teachers:

- Contact teacher directly
- Contact appropriate student representative*
- Contact Block, Clerkship or Course Director
- Contact Assistant Dean (Clinical Core, Longitudinal, Clinical)
- Use block, clerkship or course evaluations

| Timely Feedback/Resolution Identifiable |

- Use individual faculty evaluations within block, clerkship or course
- Report to Office of Professionalism
  www.medschool.ucdenver.edu/professionalism

| Delayed Feedback/Resolution Confidential |

* If the feedback relates to Clinical Core blocks, CBD representative(s) may be contacted. If longitudinal courses, their respective student representative(s) may be contacted. If the feedback relates to professionalism concerns, the class Student Professionalism Committee representative may be contacted. If feedback relates to advisory and student life concerns, contact your academic College representative.

Office of Professionalism
Its mission is to promote a respectful and compassionate learning, clinical care and research environment. The Office provides medical students, graduate students and others a confidential, safe, free, “rapid response” resource for reporting any episode of mistreatment or unprofessional behavior by faculty, fellows or residents, no matter what kind or where it occurs (classroom, laboratory or clinical setting). The Office of Professionalism is a “first-choice” for reporting mistreatment, and direct emails to professionalism@ucdenver.edu or telephone calls 303-724-4PRO (4776) are encouraged. Visit the professionalism website www.medschool.ucdenver.edu/professionalism for more information.

Professionalism Web Site
This site is a comprehensive resource for students, residents and faculty members. The site includes a statement of the School’s commitment to building and sustaining a respectful and supportive learning and clinical care environment. It provides direct links to the Office of Professionalism and the online mistreatment reporting form. Also, there are links to the Teacher-Learner Agreement, the Student Honor Council, Student Professionalism and the Faculty Professionalism Code of Conduct. The web site also includes documents outlining the definitions of mistreatment and sub-optimal learning environment.

Reporting Options
The professionalism web site includes a list of the options that are available for reporting mistreatment, including an online mistreatment reporting form. Visit the professionalism web site or go directly to the Reporting Form. Reports of mistreatment using this online form are delivered and kept confidential. Note: Students may continue to report mistreatment using any of the available pathways, including the end-of-block evaluations, but we are encouraging reports to be directed to the Office of Professionalism as the first choice.
2) The multiple ways of providing feedback between students:

- Contact your peer directly
- Contact small group faculty leader
- Contact appropriate student representative*
- Contact block or course director
- Contact Assistant Dean for the core Occasional use of peer evaluations

Use individual faculty evaluations within block, clerkship or course Report to Office of Professionalism

*If the feedback relates to professionalism concerns, contact the class Student Professionalism Committee representative. If related to Honor Council concerns (e.g., cheating, unfair advantage), contact your Honor Council representative. If feedback relates to advisory and student life concerns, contact your academic College representative.

Feedback Tips: (Adapted from: Berquist & Phillips, A Handbook for Faculty Development, 1975)

- Feedback should be timely: Given to peers as soon as possible after an incident.
- Feedback should be descriptive and not evaluative: describe what actually happened, not stating that something was “bad” or “done wrong”.
- Feedback should be specific: clearly state what actually was problematic, instead of using generalities.
- Consider including something that was positive in addition to raising a concern.

Example phrasing of constructive peer feedback:

- “I felt like when you were talking during class this morning, I had a hard time hearing the lecturer,” as opposed to “You should try to not talk during lectures.”
- “I felt uncomfortable when you clarified the plan of care in the room, it would have been more helpful to do so privately”, as opposed to “you shouldn’t say anything negative about my plan of care in front of others.”

Further guidance on selecting feedback mechanism can be provided by the Office of Student Life as well as the Anschutz Medical Campus’ Ombuds Office, located on the 7th floor of Fitzsimons Building, phone 303-724-2950. The Ombuds Office can provide informal conflict resolution and a forum for prompt, impartial and confidential discussions. The primary goal of the Ombuds person is to ensure that employees and students receive fair and equitable treatment. Ombuds Office – Conflict Resolution & Management Experts.
Course Description:
Focused on the care of the adult inpatient.

Mission:
Provide innovative and individualized training for the future leaders of medicine to excel in their roles as clinicians, researchers, teachers, and community physicians.

Length of Course:
8 Weeks

Teaching Sites:
- Denver Health
- St. Joseph Hospital
- Presbyterian/St. Luke’s
- UCHealth
- Veteran Affairs

Clerkship Contact:
Department of Medicine
Education Office – AO1
Room 8507
12631 E. 17th Place, B166
Aurora, CO 80045
303-724-1790

Course Introduction:
During Hospitalized Adult Care (HAC), you will be expected to gain the basic knowledge, skills, and attitudes needed to provide medical care for hospitalized adult patients. You will learn to hone and refine your history taking, physical exam, and presentation skills while becoming an integral member of the patient care team. Direct patient care under the guidance and supervision of your intern, resident, and/or attending is the most important aspect of this rotation. The more responsibility you take for your patients, the more you will learn. Reading background articles pertaining to your patients, asking questions when you don’t understand something, and knowing your patients better than anyone else on your team will help to ensure your success during your time on HAC.

Course Structure:
1. This 8-week rotation is divided into two 4-week segments.
2. The last Friday of the first four weeks, students will participate in an intra-session in the afternoon, during which important threads, material, and clinical skills will be taught.
3. The last Friday of the second half of the block is the written examination.

Course Logistics:
Site Requests: Approximately 6 weeks prior to the clerkship, students are emailed a site request form where you may express your preferences regarding which hospitals you rotate at. In order to be fair in making assignments, we use a lottery system which gives each student an equal chance at their top choices.

Didactics Schedule: Students will have approximately one day off per week of clinical duty, with the vast majority of days off falling on weekends. Students should never expect to have 2 days off in a row during their clinical time. Students are granted Saturday and Sunday off after the Intra-session. Time off on holidays depends upon what is occurring in the hospital. In general, you will NOT have University holidays off.

Clerkship Contacts:

Christopher King, MD
Block Director
christopher.king@cuanschutz.edu

Juan Lessing, MD
Assistant Block Director
Juan.lessing@cuanschutz.edu

Angie Duet
Clerkship Coordinator
Angie.duet@cuanschutz.edu
Course Description:
Focused on care of Pediatric patients from birth through adolescence.

Mission:
Provide an outstanding clinical experience that fosters increased knowledge and skills to care for pediatric patients.

Length of Course:
6 Weeks

Teaching Sites:
- Children’s Hospital Colorado
- Denver Health Medical Center
- Urgent Care Sites
- Child Health Clinic at Children’s Hospital
- Private Practices
- Rural Sites

Clerkship Contact:
Children’s Hospital Colorado
13123 E. 16th Ave, B158
Aurora, CO 80045

Course Introduction:
The Infant, Child and Adolescent Care Clerkship (ICAC) will provide clinical and educational experiences to allow students to achieve defined competencies in the medical care of children, ranging in age from newborn to adolescence. All students will have experiences in newborn, outpatient, and inpatient/urgent care settings. They will be exposed to well child care and development, acute care and the management of hospitalized patients and those with chronic diseases.

Course Structure:
During the 6-week ICAC clerkship students will complete 2-3 weeks of outpatient pediatrics, variable time in newborn nursery (during outpatient portion), and 2-4 weeks of inpatient or urgent care.

Course Logistics:
- **Site Requests** - Approximately 8 weeks prior to the clerkship the ICAC coordinator sends out a site request form. Students are asked to rank up to 8 potential combinations. We make every attempt to assign students to one of their top 3 choices, but this is not guaranteed. Depending on availability of preceptors, you may be assigned to a rural site.

- **Clerkship Didactics Schedule** - During ICAC, all students are together on campus for 4 full days:
  - Orientation (first day of the rotation)
  - Intrasession (1) which is on Friday of week 3
  - Intrasession (2) which is on Monday of week 4
  - Final exam and group discussion (last day of the rotation)

- **Clerkship Clinical Schedule and On-Call Responsibilities:**
  Schedules and on-call responsibilities vary by site but may include overnight call or night shifts and weekends.
Course Description:
Focused on the care of Obstetrical and Gynecologic patients.

Mission:
Our goal is to provide every medical student the experience, basic knowledge and understanding of women’s health and enable them to provide care for female patients.

Length of Course:
4 Weeks

Teaching Site:
- University of Colorado
- St. Joseph Hospital
- Denver Health Medical Center
- Delta County Memorial
- UCH Health-Memorial Hospital
- Veteran Affairs Medical Center (Gyn Only)

Clerkship Contact:
Department of Obstetrics & Gynecology
Academic Office I
12631 E. 17th Ave,
4th floor, Room 4011
Aurora, CO 80045
303-724-2034

Course Introduction:
Ob/Gyn Clerkship provides clinical experiences both inpatient and outpatient, serving patients ranging in age from adolescent to the end of life.

Course Structure:
All students are required to attend a one-day Ob/Gyn Orientation the first day of the 4-week rotation. On the beginning of the first day of Orientation, the Directors and Clerkship Coordinator will give an overview of required assignments, grading and attendance policy, and Procedure Logger requirements. Students will then attend lectures that cover a range of APGO approved topics delivered by faculty, visiting doctors and residents.

Course Logistics:
- **Site Requests** - Students are e-mailed a site request form to express hospital rotation preferences. In order to be fair in making assignments, we use a lottery system that gives each student an equal chance at their top site choice.

- **Clerkship Didactics Schedule**: Didactics are provided based on the clerkship site. For example, Denver Health has didactic teaching for medical students on Monday afternoons. This includes simulation, lecture, and discussion. Students are required to work one week (Sunday night through Thursday night) of obstetrics night call. This provides exposure to a higher volume of deliveries and more personal teaching.

- All students are on leave from Friday morning to Monday morning following their week of OB night call. There is an intersession on the second Friday of the rotation; all students are required to attend. Students at AHEC sites are required to attend as well. Students are excused from clinical duties after completing the shelf examination on the last day of the rotation. In general, students will not have University holidays off.

Clerkship Contacts:

- Jill Liss, MD
  Block Director
  Jill.liss@cuanschutz.edu

- Amy Markese, MD
  Co-Block Director
  Amy.markese@cuanschutz.edu

- Courtney Furstenberg
  Clerkship Coordinator
  Courtney.Furstenberg@cuanschutz.edu
Course Description:
Focused on the care and management of patients in an emergency department setting.

Mission:
To provide a dynamic, integrated curriculum of clinical care experiences, educational sessions, and supporting educational materials to enable you to successfully complete the requirements for the clerkship and to assess if a career in emergency medicine is right for you.

Length of Course: 2 Weeks

Teaching Site:
• Saint Mary’s Hospital
• Children’s Hospital
• University of Colorado

Clerkship Contact:
Department of Emergency Medicine
Leprino Building, 7th Floor
Campus Box B-215
12401 E. 17th Avenue
Aurora, CO 80045
720-848-6793

Course Introduction:
Our vision is to expose you to the pre-hospital and emergency department environment to allow you to better understand the challenges for patients and providers to provide outstanding clinical care to those who are in need of acute medical care.

Course Structure:
The Emergency Care (EC) Clerkship is a two-week curriculum, or longitudinal experience, during the third year at the University of Colorado School of Medicine (CU-SOM) to showcase the specialty of Emergency Medicine and your approach to patients with emergent or urgent complaints.

Course Logistics:
- Site Requests - Site requests will be sent to you approximately 3 months in advance of your scheduled rotation. Because of clerkship logistics, student enrollment, and student special needs, site requests are always considered and preferred for your experience during the Emergency Care Clerkship but may not be available or possible for certain rotations.

- Clerkship Didactics Schedule - There are several required educational sessions for all medical students distributed throughout the EC Clerkship. You will have educational sessions on the first day of the clerkship from 9:00 am-1:00 pm and the two Wednesdays of the clerkship from Noon-3:00 pm (if you are scheduled on the Anschutz Medical Campus). Grand Junction medical students have educational sessions on a semi-daily basis as detailed on your clinical schedule.

- On the last Friday of your rotation, you will participate in a case simulation at the CAPE which is in the Education 1 Building, 4th floor. This simulation will take place from 8:00 am-Noon. Each student will be expected to participate in the case and briefing and debriefing activities for the simulations as well as be an effective team member of an interprofessional team to complete course requirements.

Clerkship Contacts:

Kelley Roswell, MD
Director
Kelley.roswell@cuanschutz.edu

Michael Overbeck, MD
Co-Director
Michael.Overbeck@cuanschutz.edu

Juliana Wilson, MD
Co-Director
Juliana.Wilson@cuanschutz.edu

Claudia Smith
Clerkship Coordinator
Emergencycareclerkship@cuanschutz.edu
Course Description:
Focused on the management and psychiatric care of patients.

Mission:
To train the next generation of physicians insuring exposure to and development of competence in the basic evaluation and treatment of psychiatric conditions, regardless of future specialty selection.

Length of Course:
4 Weeks

Teaching Sites:
- Grand Junction VA
- Mountain Crest Hospital
- Children’s Hospital
- University of Colorado
  o CeDAR
  o Psychiatry
  o Psychiatry Outpatient
- Veteran Affairs Medical Center
- Valor Point Domiciliary
- Denver Health Medical Center
- St. Anthony’s Hospital
- Colorado Department of Corrections

Clerkship Contact:
Department of Psychiatry
Fitzsimons Building,
13001 E. 17th Place,
Floor 2 East,
Aurora CO 80045

Campus

School of Medicine
UNIVERSITY OF COLORADO
ANSchutz MEDICAL CAMPUS

Course Introduction:
Our core psychiatry curriculum will provide you with the clinical understanding and tools for this reality. Our Psychiatric Care Clerkship provides supervised clinical experiences, in-person and online didactics and reflective writing small groups in which to hone your skills, expand knowledge in psychiatry and thoughtfully consider difficult or challenging experiences. Psychiatry grows each year in the effective treatments that it offers patients, while it retains its essential interest in the individuality of their lives. You will become part of both the growth and the tradition of education in our field. We look forward to working with you.

Course Structure:
We intentionally attempt to keep students at a single site and with a single team across the month as we believe this leads to higher quality learning experiences and allows students to acclimate to team dynamics and demonstrate their abilities and growth. Students can select to work with children, adolescents, adults, and elderly patients in inpatient, outpatient and emergency settings. During this block, students also attend four weekly Reflective Writing small groups, providing a structured approach to help students to consider and grow from challenging clinical experiences. Students also attend four Wednesday afternoon didactic sessions, which focus on a broad range of clinically-relevant topic areas. Students take the shelf exam on the final Friday of the course.

Course Logistics:
- Site Requests - About 6-8 weeks prior to the start of the block, students are emailed a site request form. We attempt to give all students one of their top 3 choices when possible. When students do not complete the site request form in a timely fashion, they are assigned to a site not requested by another student.

- Clerkship Didactics Schedule - The clerkship schedule is generally 8-5 Monday through Friday. We do not ask students to take call while on the PC block as we have not found those experiences to be of high educational value. A general rule regarding holidays is when your team is working, you are working.

Clerkship Contacts:

Joseph Sakai, MD
Director
Joseph.Sakai@cuanschutz.edu

Austin Butterfield, MD
Associate Director
Austin.Butterfield@cuanschutz.edu

Tiffany Hamilton
Clerkship Coordinator
Tiffany.Hamilton@cuanschutz.edu

Sharon Campbell
Clerkship Coordinator
Sharon.Campbell@cuanschutz.edu
Neurologic Care will help you learn about the function of the human nervous system, disorders to which it is susceptible, diagnostic tests, treatments, and prognosis.

Course goals include:
- Develop the knowledge and skills necessary to care for Neurology patients in the inpatient and outpatient setting.
- Develop the skills to work effectively within a multi-disciplinary health care team or network for patients with Neurologic disease.
- Develop Patient-Centered Clinical Skills and Reasoning in Neurologic Care.
- Communicate effectively both verbally and in writing with colleagues including physicians, nurses, medical assistants, and other Interprofessional team members in the Neurology Inpatient and Outpatient setting.
- Form clinical questions, retrieve, and interpret high-quality evidence to advance patient care.
- Develop knowledge of the procedural skills and diagnostic studies involved in the treatment of common Neurologic conditions and emergencies.

Course Structure:
This 4-week block is spent primarily with the inpatient or outpatient team at the students’ respective sites with various mandatory clerkship activities spread throughout the 4 weeks including:
- Clerkship Orientation on the first day
- 3 PBL (Problem Based Learning) sessions which typically occur on Mondays or Wednesday throughout the block
- CAPE Clinical Assessment: This is designed to give you the opportunity to demonstrate your neurological screening examination skills, but is graded for participation only.
- Shelf Exam on the last Friday of the block

Course Logistics:
- **Site Requests** - Approximately 6 weeks prior to the clerkship, students are e-mailed information regarding site requests and are asked to respond directly to the e-mail with requests as soon as possible.
Course Description:
Focused on care of adults who present with symptoms or problems commonly seen in general surgery.

Mission:
The OPC block is designed to provide wide exposure to surgery-related fields, surgical diseases and anatomy, and fundamental principles of surgical disease with which all physicians should be familiar.

Length of Course:
8 Weeks

Teaching Sites:
- Northern Colorado Surgical Associates
- St. Joseph Hospital
- Montrose Surgical Associates
- Denver Health Medical Center
- Veteran Affairs Medical Center
- UCHealth
- San Luis Valley Medical Clinic
- Children’s Hospital Colorado

Clerkship Contact:
Department of Surgery
Education Office
AO1, Room 5402
12631 E. 17th Avenue, C291
Aurora, Colorado 80045
Phone: 303-724-2681

Department of Anesthesia
Education Office
AO1, Room 2001
12631 E. 17th Avenue, 8202
Aurora, CO 80045
Phone: 303-724-8373

Course Introduction:
The OPC Clerkship is a clinical experience that introduces students to basic principles of surgery, anesthesia and other peri-operative related problems. Students gain experience in clinical anesthesiology and general surgery while studying surgical disease processes and therapeutic procedures in the perioperative setting. The course focuses on the assessment and perioperative management of patients undergoing routine surgery from initial referral to discharge.

Course Structure:
This 8-week block is divided into two 4-week segments. The course begins with two days of mandatory orientation and ends with two days of mandatory sessions and exams. Course requirements are four weeks of general surgery, two weeks of anesthesia and two weeks of a core surgical subspecialty.

Course Logistics:
- **Site Requests** - Site Requests: Approximately 7 weeks prior to the clerkship, students are emailed a Survey Monkey requesting site and subspecialty preferences. In order to be fair in making assignments, we use a lottery system which gives each student an equal chance at their top choices.
- **Clerkship Schedule**: Students will have approximately one day off per week of clinical duty, with the vast majority of days off falling on the weekends. Students are granted Saturday and Sunday off at the four week break between general surgery and anesthesia/subspecialties. This clerkship honors the School of Medicine holidays.

Clerkship Contacts:

- **Paul Montero, MD**
  Surgery Co-Director
  [Paul.montero@cuanschutz.edu](mailto:Paul.montero@cuanschutz.edu)

- **Teresa Jones, MD**
  Co-Director
  [Teresa.jones@cuanschutz.edu](mailto:Teresa.jones@cuanschutz.edu)

- **Mary Kay Anderson**
  Clerkship Coordinator
  [Marykay.anderson@cuanschutz.edu](mailto:Marykay.anderson@cuanschutz.edu)

- **Jason Papazian, MD**
  Anesthesia Assistant Director
  [Jason.papazian@cuanschutz.edu](mailto:Jason.papazian@cuanschutz.edu)

- **Scott Vogel, MD**
  Anesthesia Block Director
  [Scott.vogel@cuanschutz.edu](mailto:Scott.vogel@cuanschutz.edu)

- **Bertha Moua**
  Clerkship Coordinator
  [Bertha.Moua@cuanschutz.edu](mailto:Bertha.Moua@cuanschutz.edu)
Course Introduction:
During your 8-week Community and Primary Care (CPC) clinical experience, you will learn the elements of patient-centered clinical care and apply it to all patient interactions. We want you to see how community care, chronic care, and preventive care are provided and how the context of patients and the context of the preceptor’s practice can influence care.

Course Structure:
Students are placed in community and primary care office settings throughout the Denver metro area. They will work with internal medicine or family medicine physicians providing primary care.

You will follow your clinic's schedule: typically, Monday through Friday. Office hours vary by clinic site but are typically 8:00 am-5:30 pm.

A wellness session will be held between 9:00 am and noon on the second Tuesday of each block, the afternoon will be held open for students to complete a wellness activity of their choosing, i.e., medical or dental appt., exercise, reading for pleasure, etc.

Some weeks didactic sessions may start later in the morning – students are required to check canvas and email for updates daily. Students should also schedule two FDC half-day sessions.

Clerkship Contacts:

Director
Brandy Deffenbacher, MD
Academic Office 1, Room 3121
12631 E. 17th Avenue F496
Aurora, CO 80045
Phone: (303) 724-5961
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Assistant Director
Janna Hardland
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12631 E. 17th Avenue B179
Aurora, CO 80045
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Preceptor Coordinator
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Phone (303) 724-8917
Catherine.Lemay@cuanschutz.edu

Clerkship Coordinator
Lu Heimer
Phone (303) 724-5090
Luhelmer@cuanschutz.edu
Course Description:
Focused on how chronic care, preventive care and hospital care are coordinated in a community and how the preceptor's practice and social factors within the context of the community influence care.

Mission:
Provide students an outstanding real-world educational experience in integrated ambulatory and inpatient care in a community setting.

Length of Course:
8 Weeks

Teaching Sites:
Students as assigned to a variety of internal medicine and family medicine clinics in Denver and the surrounding metro area. This includes academic, private, underserved, and HMO sites.

Clerkship Contact:
Department of Medicine
12631 E. 17th Avenue
Aurora, CO 80045
303-724-1798

Course Introduction:
The ILMC is a unique 16-week experience that fulfills all requirements of the Hospitalized Adult Care (HAC) and Community and Primary Care (CPC) clerkships. Students experience how primary care, hospital care, and community care are integrated and how physicians and their teams impact the health of a community. The course emphasizes continuous, comprehensive, coordinated care and longitudinal relationships between students, patients and faculty preceptors. Extended immersion into a community as a bona fide healthcare team member sets this educational experience apart.

Course Structure:
The 16-week block is divided into two sections: Students spend the first 4 weeks immersed on a traditional adult inpatient medicine team at a large metropolitan academic teaching hospital (University of Colorado Hospital, Denver Health Medical Center, or Veterans Affairs Medical Center). Students then spend the remaining 12 weeks at a single learning site/community. During those 12 weeks, ambulatory and hospital care are integrated, and students are encouraged to follow patients beyond their hospitalization to clinic and home visits. Students participate in intrasession activities following weeks 4 and 12 on the Anschutz Medical Campus. Students will take exams that correspond to the HAC and CPC Clerkships.

Course Logistics:
- Site Requests - For the hospital experience in Denver, students will be contacted by the HAC coordinator to complete a site request form approximately 6 weeks prior to the start of the rotation. The placement for the longitudinal site is made prior to the start of the academic year.
- Clerkship Didactics Schedule - Students will follow the HAC clerkship schedule during the first 4-weeks. During the remaining 12-weeks, students will go between primary care and hospital settings. Students will be expected to work some weekends.

Clerkship Contacts:

Roberto Silva, MD
Block Director
Mark Deutchman, MD
Co-Block Director
Melanie DeHerrera, MPA
Clerkship Coordinator

75
Course Introduction:
The Denver Health Longitudinal Integrated Clerkship is a one-year integrated clerkship for 9 CU School of Medicine third-year students launched in April of 2014. This longitudinal clerkship provides clinical training to address mastery of core competencies for Medicine, Surgery, Family Medicine, Pediatrics, Obstetrics and Gynecology, Emergency Medicine, Musculoskeletal Medicine, Neurology and Psychiatry. There will be additional focus on areas including radiology, pathology, community health, quality and safety, and caring for an urban underserved population.

Course Structure:
The DH LIC will give students:
- Authentic roles in patient care
- Experience of the whole illness through transitions in care
- Emphasis on exposure to “undifferentiated” patients
- Direct teaching from experienced and excellent faculty teachers
- Longitudinal evaluation and mentorship
- Progressive didactic learning with frequent reinforcement of core material
- Unstructured time for independent learning, professional development and career exploration.
- Support for personal and professional well-being through minimization of the negative hidden curriculum and creation of strong peer and mentor relationships

Course Logistics:
- **Clerkship Didactics Schedule** - Each week and day in the DH LIC can be different. Throughout the year, students will spend 15 weeks on inpatient immersions in Surgery, Medicine, Neurology OB/GYN, Pediatrics, and Psychiatry. There will be 35 weeks of integrated clinical time. Students will work continuously with a set group of 10 preceptors: Medicine, Neurology, Pediatrics, Ob/Gyn, Psychiatry, Family Med, Anesthesia, Surgery, Radiology and Emergency/Urgent Care. Students will have days with independent time that can be used for following cohort patients, studying or pursuing individual interests.

- LIC students will be asked to complete a demographic sheet following the SOM 2nd year student retreat. Students will be informed about special areas that represent unique areas of clinical focus for some of our preceptors. They are asked to notify LIC administration via the demographic sheet if they have interest in any special areas offered. Students will be spread out over the Denver Metro area, at our main campus, and health centers for a majority of their experiences.
Course Structure:
During their third year at the CSB, students will engage in approximately 8 weeks of inpatient concentrated ‘immersion’ experiences throughout the year in specialties including: Internal Medicine, Surgery, Anesthesia, Pediatrics, OB/Gyn, and Psychiatry. Students will spend the remainder of the year longitudinally working with the same preceptors and patients in the core specialties of Internal Medicine, Surgery, Pediatrics, Obstetrics and Gynecology, Psychiatry, Family Medicine, Emergency Care, Musculoskeletal Medicine, and Neurologic Care for two to four half-days per month participating in hospital-based experiences in the mornings, evenings, and weekends. Learning experiences include rounding on admitted patients, professor rounds, radiology rounds, and acute care shifts. Students engage in two to three half-days per week of self-directed learning and lead three to four hours of didactics per week on non-testing weeks (each student leads 1-2 afternoons per year). Students participate in three to five simulation/standardized patient experiences per year, and will have several special experiences throughout the year, including an Emergency Medical Services ride-along, palliative care experience, and ethics discussions.

Course Logistics:

COSMIC Didactics Schedule - CSB students during Phase III will participate in the Colorado Springs Mentored Integrated Curriculum (COSMIC). COSMIC is a version of a Longitudinal Integrated Clerkship (LIC) model. Although the structure of COSMIC is quite different from the traditional specialty block model for most Anschutz Medical Campus (AMC) students, all CSB students are evaluated based on the same learning objectives, goals, competencies, and clinical conditions as AMC students.

During these experiences, instructional methods will include:
- Direct patient-oriented, learner-centered clinical teaching will occur with preceptors on inpatient immersion experiences
- Longitudinal clinical teaching during clinical half-day experiences with preceptors and during hospital-based experiences including patient rounds, professor rounds, and radiology rounds
- Formative feedback will be provided by all immersion, LIC, and hospital-based preceptors on a regular basis
- Didactic instruction will occur regularly during weekly academic half-days and on immersions, and will include frequent low-stakes quizzes
- Self-directed learning will be directed via individualized learning plans for each student and occur during protected half-days and between scheduled clinical learning activities
- Simulation experiences in Ob/Gyn, neurologic care, emergency care, and mid-year formative feedback

Clerkship Contacts:

Erik Wallace, MD
Associate Dean
Erik.Wallace@cuanschutz.edu

Chad Stickrath, MD
Assistant Dean
Chad.Stickrath@cuanschutz.edu

Valerie Navarro
Clerkship Coordinator
Valerie.navarro@cuanschutz.edu
VA Sequential Training

Course Introduction:
Each year, 12 students are selected into the VA Sequential Training (VAST) Program. One cohort of 6 students will complete the VAST immersion in the first half of the year. A second cohort of six students will complete the immersion in the second half of the year. The VAST program will supplement the clerkships with three curricular components: Longitudinal Clinical Preceptors, Longitudinal Care Encounters (LCE), and Weekly VAST Cohort Meetings.

Course Structure:
VAST students complete their Operative/Peri-Operative Care, Neurologic Care, Psychiatric Care, and Hospitalized Adult Care clerkships in one sequential six-month immersion at the Denver Veteran Affairs Medical Center (DVAMC). This immersion also includes structured longitudinal time with core faculty, patients, and a consistent peer group.

Course Logistics:
- **Site Requests** - For clerkships within the VAST Program, students will be assigned to rotations at DVAMC. During the Operative Care block, students will complete Anesthesia and surgical specialties as available. If a student wishes to complete a surgical subspecialty not provided at the VA, he or she will be able to take part in that subspecialty at an alternate site.

- **Clerkship Didactics Schedule** - In addition to the scheduled components within the traditional clerkships, VAST students will participate in weekly Cohort Meetings which will occur each Thursday from 1200-1300.

Clerkship Contacts:

**Additional Contacts:**
- Adrienne Mann, MD
  Assistant Director
  Adrienne.Mann@cuanschutz.edu

- Kate Jennings, MD
  Assistant Director
  Kate.Jennings@cuanschutz.edu

Eric Young, MD
Block Director
Eric.young@cuanschutz.edu
Mentored Scholarly Activity

Course Introduction:
The Mentored Scholarly Activity (MSA) project is a four-year requirement for all undergraduate medical students. The project culminates in a capstone presentation in Phase IV prior to graduation. The goal of the MSA curriculum is to foster self-directed, life-long learning over the course of the medical student career. The MSA requires students to identify and work with a mentor to complete their projects, which also prepares them for working with mentors in their careers and serving as mentors to others in the medical profession.

Course Logistics:
- Attend MSA lectures during ICC weeks
- Utilize non-class time or intersessions and other times for investigation or refinement of project
- Communicate regularly with mentor regarding progress on project
- Communicate with your Associate Director by the end of the Fall semester (during Integrated Clinician Course)
- Submit MSA Phase III Project Update Form

Course Requirements and Timeline:
- Meet with mentor as necessary
- Meet with Associate Director by the end of the Fall semester (during ICC)
- Serve as student evaluator at Annual Student Research Forum in December
- Submit MSA Phase III Project Update Form
  - Final exam equivalent for the MSA course
- Complete a new Phase I Project Outline Form - if you have a new project
- Complete the Phase III Project Update Form - if you have same project from Phase II
- If you do not have a project and need assistance, contact your Associate Director.
- If you have questions or problems that are not answered through the student FAQ's please email som.msa@ucdenver.edu for assistance or to request a meeting with one of the Associate Directors.
- Completion of your updated Phase III Project Update Form will aid in your residency applications during Phase IV.

Clerkship Contacts:

Kristen Nadeau, MD
Block Director
Kristen.nadeau@emailchildrenscolorado.org

Zachary Lundquist
Clerkship Coordinator
Zachary.Lundquist@cuanschutz.edu

Thematic Areas and Associate Director:
Laboratory (Basic) Science–John Tentler, PhD john.tentler@cuanschutz.edu
Bioethics, Humanities, Arts, & Education:
Daniel Goldberg, JD, PhD Daniel.Goldberg@cuanschutz.edu
Clinical Science:
Kristen Nadeau, MD, MS Kristen.Nadeau@childrenscolorado.org
Jeff Galinkin, MD Jeffrey.Galinkin@cuanschutz.edu
Epidemiology, Public & Community Health:
Rita Lee, MD Rita.Lee@cuanschutz.edu
Global Health:
Madiha Abdel-Maksoud, MD, PhD, MSPH Madiha.Abdel-Maksoud@cuanschutz.edu
Leana May, DO, MPH Leana.May@childrenscolorado.org
Medical students with a special area of interest elect to participate in a track. Tracks provide additional opportunities to enhance learning and practice for students through special lectures, tailored clinical and research experiences, and sponsored mentored projects. Students are given the knowledge and level appropriate responsibilities in each of the four years of medical school.

**Global Health Track**
International medicine with classroom and global experiences.

**Leadership, Education and Advocacy Development Scholarship (LEADS)**
Emphasizing the social, cultural & economic antecedents of health and illness and provide our health profession students with the vision and skills to work effectively in their communities to promote health.

**Research Track**
Providing students with in-depth long-term exposure to research.

**Rural Track**
Giving students a broad and rich experience in rural medicine.

**Urban Underserved Track**
The track will provide the skills and support needed for future health care providers serving those urban populations.
Course Introduction:
The Integrated Clinicians Course (ICC) is a series of five 1-2 week "mini-courses" that are spread out over the 3rd and 4th years of medical school. ICC brings together an entire class with two specific goals. The first goal is to provide important skills and knowledge in areas that are vital to the practice of medicine but are often difficult to teach or not uniformly taught in the clinical setting. ICC topics include health policy, ethics, professionalism, clinical decision-making, culturally effective care, clinically relevant basic science material, and advanced clinical skills. The second, but no less important goal, is to provide students with the time and opportunity to reflect on and discuss the process of becoming a physician. ICCs which occur in Phase III are IDPT 7001, IDPT 7002, and IDPT 7003.

IDPT 7001
IDPT 7001 is scheduled prior to the start of Phase III Clerkships and serves to provide students with fundamental skills, including presentation and procedural skills, critical for their clinical rotations. The course is composed of hands-on workshops, small and large group sessions, on-line tutorials, and independent work. We have also integrated many logistical tasks which are non-curricular and required for entry into the clinical setting of rotations and are best accomplished when all students are together.

IDPT 7002
IDPT 7002 is scheduled during the third year of medical school, around winter break. This session is designed to develop students' advanced communication skills essential to care for patients with progressive illness. Large and small group sessions will be used to compliment sessions with standardized patients in the Center for Advancing Professional Excellence (CAPE) that focus on both breaking serious news and conducting a family meeting. Students will also explore relevant medicolegal and ethical topics. Additionally, students will continue to develop their professional identity through career exploration and advising, planning for the 4th year of medical school, self-reflection, and resilience training.

IDPT 7003
IDPT 7003 occurs prior to the transition to Phase IV. Through hands-on workshops, small and large group sessions, and independent work, students will further develop their knowledge, skills, and attitudes necessary to care for critically ill patients, begin their sub-internships with confidence and success, and prepare for the residency application and interview process.

Clerkship Contacts:
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Course Director
amira.delpino-jones@ucdenver.edu

Anna Neumeier, MD
Associate Course Director
Anna.neumeir@cuanschutz.edu

Mary Teel
Clerkship Coordinator
Mary.Teel@cuanschutz.edu
<table>
<thead>
<tr>
<th>Campus</th>
<th>Mailing Address</th>
<th>Physical Address</th>
<th>Phone/Email</th>
</tr>
</thead>
<tbody>
<tr>
<td>CU Anschutz Medical Campus</td>
<td>13001 E. 17th Pl. Aurora, CO 80045</td>
<td>Please contact a specific department, school or college listed below.</td>
<td>303-724-5000</td>
</tr>
<tr>
<td>CU Denver</td>
<td>1201 Larimer St. Denver, CO 80204</td>
<td>Please contact a specific department, school or college listed below.</td>
<td>303-315-5969 (LYNX)</td>
</tr>
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**Admissions**

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<td>Please contact the specific College or School (listed below)</td>
<td>Please contact a specific department, school or college listed below.</td>
<td>303-724-5000</td>
</tr>
<tr>
<td>CU Denver</td>
<td>Office of Admissions Campus Box 167</td>
<td>1201 Larimer St. Ste. 1007 Denver, CO 80204</td>
<td>303-315-2601</td>
</tr>
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**Bursar's Office**

<table>
<thead>
<tr>
<th>Campus</th>
<th>Mailing Address</th>
<th>Physical Address</th>
<th>Phone/Email</th>
</tr>
</thead>
<tbody>
<tr>
<td>CU Anschutz Medical Campus</td>
<td>13120 East 19th Ave. Campus Box A098 Aurora, CO 80045</td>
<td>Education 2 North</td>
<td>303-315-1800 <a href="mailto:bursar@ucdenver.edu">bursar@ucdenver.edu</a></td>
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**CU Foundation**

<table>
<thead>
<tr>
<th>Mailing Address</th>
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<tbody>
<tr>
<td>University of Colorado Foundation 1800 Grant St., Suite 725 Denver, CO 80203</td>
<td>Online support: <a href="mailto:advancement.info@cu.edu">advancement.info@cu.edu</a></td>
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**Financial Aid & Scholarships**

<table>
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<tbody>
<tr>
<td>CU Anschutz Medical Campus</td>
<td>Box A-008 13120 East 19th Ave. Aurora, CO 80045</td>
<td>Education 2 North (Building P-26) Third Floor, Student Services Area</td>
<td>303-724-8019 <a href="mailto:financial.aid@ucdenver.edu">financial.aid@ucdenver.edu</a></td>
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**Human Resources**

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<tbody>
<tr>
<td>P.O. Box 173364 Campus Box 130 1350 Lawrence St. Suite 1050</td>
<td>303-515-2700 Inter-campus Mail: A005/120 Human Resources website</td>
<td>Phone: 303-724-8059 fax: 303-724-8060 <a href="mailto:cuAnschutz.Registrar@ucdenver.edu">cuAnschutz.Registrar@ucdenver.edu</a></td>
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**Registrar**

<table>
<thead>
<tr>
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<tbody>
<tr>
<td>CU Anschutz Medical Campus</td>
<td>Box A-008 13120 East 19th Ave. Aurora, CO 80045</td>
<td>13120 E. 19th Ave.</td>
<td>303-724-8059</td>
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**CU Anschutz Medical Campus Schools and Colleges**

<table>
<thead>
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<th>Campus</th>
<th>Mailing Address</th>
<th>Physical Address</th>
<th>Phone/Email</th>
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</thead>
<tbody>
<tr>
<td>School of Dental Medicine</td>
<td>Mail Stop FE33 13065 E. 17th Ave., Rm. 310 Aurora, CO 80045</td>
<td>13065 E. 17th Ave.</td>
<td>Phone (General Inquiries): 303-724-6900 Dental Patients: 303-724-6900 Admissions: 303-724-8025 <a href="mailto:somadmin@ucdenver.edu">somadmin@ucdenver.edu</a></td>
</tr>
<tr>
<td>School of Medicine</td>
<td>Campus Box C290</td>
<td>Building 500 Room E155 13001 E. 17th Place Aurora, CO 80045</td>
<td>303-724-7122</td>
</tr>
<tr>
<td>College of Nursing</td>
<td>Mail Stop C288 13120 E. 19th Ave. Aurora, CO 80045</td>
<td>13120 E. 19th Ave.</td>
<td>Phone: 303-724-1812 <a href="mailto:Nursing.Admissions@ucdenver.edu">Nursing.Admissions@ucdenver.edu</a></td>
</tr>
<tr>
<td>Skaggs School of Pharmacy and Pharmaceutical Sciences</td>
<td>Mail Stop C238</td>
<td>Pharmacy and Pharmaceutical Sciences Building 12850 E. Montview Blvd. Aurora, CO 80045</td>
<td>303-724-2882 Dean's Office: 303-724-1234 <a href="mailto:PharmD.info@ucdenver.edu">PharmD.info@ucdenver.edu</a></td>
</tr>
<tr>
<td>Colorado School of Public Health</td>
<td>Campus Box B119</td>
<td>Bldg 500, 3rd Floor, C3000</td>
<td>Phone: 303-724-4585 <a href="mailto:Colorado.SPH@ucdenver.edu">Colorado.SPH@ucdenver.edu</a></td>
</tr>
<tr>
<td>Graduate School</td>
<td>Mail Stop C296</td>
<td>12651 E. 17th Ave., Rm. 1503</td>
<td>Phone: 303-724-2915 Fax: 303-724-2816 <a href="mailto:graduate.school@ucdenver.edu">graduate.school@ucdenver.edu</a></td>
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