University of Colorado School of Medicine           Approved: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Internal Medicine Residency Program (IMRP)              Lisa Davis, MD, MSCS

Research Elective Request Form

*Note: Request must be typed; Mentors can type name and attach this form to an email to Dr. Davis as approval in lieu of signature:* *Lisa.Davis@cuanschutz.edu*

*Research Elective Month Goals and Expectations:*

1. In general, IMRP’s goals of research electives are for residents to engage in research, gain skills and experience, engage in mentoring relationships, and to produce work to add to your CV.
2. IMRP’s goals of research electives for the mentors are to guide residents to success in research projects by helping them attain skills, publications, and positive mentoring relationships.

*Acknowledgement of Research Elective Month Policies:*

1. Please complete, discuss with your mentor, and submit, this form to IMRP 60 days prior to your research elective.
2. Each resident is allowed three non-clinical months during IM residency. Research electives are considered non-clinical months.   Please note that chief resident month and parental leave also count toward non-clinical months.
3. You are expected to attend usual elective duties during your research elective, including WES, jeopardy, add-back clinics, etc.
4. Subspecialty clinics may be added at the discretion of the research mentor while on a research rotation.
5. Due to payment policies and general mentorship expectations, you are required to have at least one local mentor.
6. Research is expected to occur on/in conjunction to one of our campuses. If the research you are interested in is not offered on one of our campuses, please contact us to discuss.
7. Travel during research rotations is permitted on days that you are not scheduled for jeopardy, WES, and/or your continuity clinic. We support you doing your research and scholarship in the location that works best for you, but jeopardy, WES, and continuity clinic are requirements during a research block that cannot be missed. If you wish to ensure that a week is completely protected from jeopardy, WES, and any clinic requirements, you will need to utilize vacation time. Vacation is typically expected to be taken in seven concurrent days. If there is a reason to not take these days concurrently (e.g. you are going to a conference), please discuss this with Nicole.Canterbury-Passoth@CUAnschutz.edu.
8. Please be aware that you are eligible for jeopardy while on your research elective. If you add vacation time after the jeopardy schedule has been finalized, it is your responsibility to find someone to cover any scheduled shifts. When you have identified coverage, please email Apoorva.Ram@CUAnschutz.edu for approval.
9. Please note that you will be sent a self-evaluation towards the end of your research elective to assess your success during the elective. This will not be a “grade” but a self-assessment of setting and achieving goals. Your mentor will be sent a separate, different, evaluation on MedHub.
10. I and my mentor acknowledge and agree that as part of my research rotation I am required to present my work in some form; this might be in the form of a poster, a manuscript, an oral presentation, or potentially as an oral presentation at a WES session.
11. **Please acknowledge that you understand and agree to these rules:**

**Resident initials: \_\_\_\_\_\_\_** **Mentor’s initials: \_\_\_\_\_\_\_**

Resident:   PGY:

Research Elective Month:      Mentor:

Title of Research Project:

Is this primarily a QI project? Yes No

Has IRB Approval been obtained?    Yes          No

Brief Background (what is the research question/problem to be addressed):

Hypothesis/Hypotheses:

Specific Aims (what are the goals of the project?):

Methods:

Statistical Plan (general plan, who will perform):

Statement of work roles, goals, and milestones for the resident researcher (what specifically will be your roles, what do you intend to accomplish, and by when?):

Progress check-in plan (how many meetings? Approximately when?):

Estimated number of hours to complete the outlined project:

Intended product of the research elective (short-term, long-term):

Signature of the Resident: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of the Mentor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_