Operative/Perioperative Care
IDPT 7050

Curriculum & Course OVERVIEW
The following information provides an overview of the 2019-2020 Academic year for the Operative/Perioperative Care Curriculum.

All course information will be found on the Operative/Perioperative Care CANVAS site. The CANVAS site includes the learning materials and requirements.

Note: The sole purpose of this document is to provide an OVERVIEW of the Operative/Perioperative Care Clerkship. Specific course and curriculum requirements are housed on the Operative/Perioperative Care Clerkship CANVAS pages, which supersede any and all information included in this document.

Operative/Perioperative Care Faculty & Staff Contact Information

Anesthesia Co-Director: Scott Vogel, DO (Scott.Vogel@cuanschutz.edu)
Anesthesia Assistant Director: Jason Papazian, MD (Jason.Papazian@cuanschutz.edu)

Anesthesia Coordinator: Sarah Lesko (Sarah.M.Lesko@cuanschutz.edu)

Surgery Co-Director: Paul Montero, MD (Paul.Montero@cuanschutz.edu)
Surgery Assistant Director: Teresa Jones, MD (Teresa.Jones@cuanschutz.edu)
Surgery Coordinator: Mary Kay Anderson (MaryKay.Anderson@cuanschutz.edu)

Disclaimer:
This handbook/syllabus does not constitute a contract, either expressed or implied, with the University of Colorado, School of Medicine and the University reserves the right at any time to change, delete or add to any of the provisions at its sole discretion. Furthermore, the provisions of this document are designed by the University to serve as guidelines rather than absolute rules, and exceptions may be made on the basis of particular circumstances.
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Welcome

Welcome to your Operative/Perioperative Care block. This clerkship is a clinical experience that introduces students to basic principles of surgery, anesthesia, and other perioperative related problems. This curriculum is defined by learning objectives and encompasses inpatient-hospital and outpatient-office experiences. Students gain experience in clinical anesthesia, subspecialty surgery 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. During the clerkship, students evaluate and follow patients, function as members of the patient-care team providing pre- and post-operative evaluation and management, and participate in surgical and anesthetic procedures.

Rationale and Expectations

This is an eight week Clerkship that introduces students to basic principles of general surgery, subspecialty surgery, anesthesia, and other peri-operative related problems. Daily rounds and faculty/preceptor interactions give students the opportunity to discuss patient problems in detail. Faculty members and residents provide students with regular feedback, advice, and direction.

Core Clinical Conditions (Table format)

<table>
<thead>
<tr>
<th>CATEGORY</th>
<th>COMPETENCY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anesthesia</td>
<td>ANES-Bag Mask Ventilation</td>
</tr>
<tr>
<td>GI</td>
<td>GI-Hepatobiliary Disease</td>
</tr>
<tr>
<td>GI</td>
<td>GI-Hernia</td>
</tr>
<tr>
<td>Ill-defined Condition</td>
<td>Ill-Hypotension-surgery</td>
</tr>
<tr>
<td>Injury</td>
<td>INJ-Trauma Management</td>
</tr>
<tr>
<td>Neoplasm (one of the competencies is required)</td>
<td>NEO-Cancer—Colon, Kidney, Liver, Prostate, Skin, Thyroid, Lymphoma, Pancreatic, Breast, Lung</td>
</tr>
<tr>
<td>Pain (one of the competencies is required)</td>
<td>PAIN-Pain Management</td>
</tr>
<tr>
<td></td>
<td>PAIN-Pain Assessment</td>
</tr>
<tr>
<td></td>
<td>PAIN-Abdominal Pain</td>
</tr>
<tr>
<td>Skin (one of the competencies is required)</td>
<td>SKIN-Wound Care</td>
</tr>
<tr>
<td></td>
<td>SKIN-Wound Infection</td>
</tr>
<tr>
<td></td>
<td>SKIN-Burns</td>
</tr>
<tr>
<td>Women's Health</td>
<td>WOM-Breast Diseases</td>
</tr>
</tbody>
</table>

http://www.cuanschutz.edu/academics/colleges/medicalschool/education/degree_programs/MDProgram/clinicalcore/peri-operativecare/Pages/Overview.aspx

Course Goals and Objectives

The eight week Operative/Peri-Operative Care Clerkship is a clinical experience that introduces students to basic principles of surgery, anesthesia, and other peri-operative related problems. Its curriculum is
defined by learning objectives and encompasses inpatient-hospital and outpatient-office experiences. 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. During the clerkship, students evaluate and follow patients, function as members of the patient-care team providing pre-and post-operative evaluation and management, and participate in surgical and anesthetic procedures. Daily rounds and faculty/preceptor interactions give students the opportunity to discuss patient problems in detail. Faculty members and residents provide students with regular feedback, advice, and direction.

- **Operative and Perioperative Care Course Goals and Objectives**
- [http://www.cuanschutz.edu/academics/colleges/medicalschool/education/degree_programs/MD Program/clinicalcore/peri-operativecare/Pages/Overview.aspx](http://www.cuanschutz.edu/academics/colleges/medicalschool/education/degree_programs/MD Program/clinicalcore/peri-operativecare/Pages/Overview.aspx)

**General Surgery Objectives**

Understand the pathophysiology, pertinent anatomy, workup, and operative/peri-operative management of surgical diseases regarding the following:

1. Abdominal Wall Hernia
2. Acute Abdomen
3. Acute Appendicitis
4. Biliary Surgery
5. Breast Disease
6. Colon, Rectum and Anus
7. Stomach and Duodenum
8. Liver, Spleen and Pancreas
9. Peripheral Vascular Disease
10. Small Bowel
11. Surgical Infections and Intra-Abdominal Abscesses
12. Thyroid and Parathyroid Glands
13. Trauma and Emergency Management

**General Surgery Goals:**

1. The student will be able to provide a focused history and physical on a patient with surgical disease.
2. The student will be able to assess abdominal pain and prioritize work-up and management for the acute abdomen.
3. The student will be able to interpret the diagnostic workup for gallbladder disease.
4. The student will be able to demonstrate proficiency in the vascular, trauma, and abdominal exams.
5. The student will understand fundamentals of fluid and electrolyte balance.
Anesthesia Objectives:
These are not requirements but goals for your experience. Each student’s experience will vary. You may not see or experience all of these. These variations of experiences will not affect your clinical grade. The attending anesthesiologist in charge of patient care will decide your involvement in each case and you should be sensitive to the fact that these decisions are based on patient safety.

Pre-operative Skills:
- Pre-operative Airway Assessment for > 3 patients.
- Assignment of ASA classification for > 3 patients.
- Pre-operative cardiac evaluation for at least one ASA 3 patient.

Intra-operative Skills:
- Perform > 10 mask ventilations (most important)
- Attempt > 5 intubations.
- Attempt > 2 IV starts.
- Observe arterial line placement, Spinal/Epidural placement. Medical students should not expect to perform these advanced procedures.

Post-operative Goals:
- Evaluate Pain control for at least 3 patients in PACU.

Suggested Discussions:
These are suggested topics to bring up for discussion with attending physicians or residents. Often attendings and residents have particular topics they like to discuss, and your learning will be infinitely better if you encourage teaching about topics that are mutually enjoyable/beneficial.

Pre-Operative Topics:
- Cardiac evaluation – Exercise tolerance, CAD, valvular disease, arrhythmias
- Pulmonary evaluation – Asthma, COPD, OSA, smoking history
- Airway assessment – reassuring versus concerning exam findings
- Indications and contraindications for regional block placements
- Neuromuscular disease/Malignant Hyperthermia
- Multimodal analgesia

Intra-operative Topics:
- Airway management – mask ventilation, intubation
- Principles of Monitoring Instrumentation – Pulse oximetry, NIBP, ECG, capnography, arterial line, central line, pulmonary artery catheter
- Induction Methods – IV, Inhalation, RSI
- Regional – Spinal, epidural, peripheral nerve block techniques/use in OR.
- Maintenance – TIVA, inhaled gas, context sensitive half time, MAC
- Muscle Relaxants– types, method of monitoring
- Fluid Therapy – Rates of replacement, colloid vs. crystalloid
- Ventilator Management, Extubation Criteria
- Awareness – high risk procedures, methods to reduce incidence
Post-operative Topics:
- Respiratory failure – evaluation and management
- Cardiac – Post op MI/SVT/AF/Hypertension/Hypotension
- Nausea and Vomiting
- Analgesia – PO, IV, PCEA, PCA, rescue blocks

Course Format and Timeline
- The first two days and last two days of the clerkship are spent on administrative duties:
  1. Days 1 and 2 for Orientation and lectures (6:00 a.m. to 5:00 p.m.)
  2. The last two days are for Anesthesia PBLD (Thursday morning), Objective Structured Clinical Examination (OSCE), Informed Consent Class (12:30-2:00 p.m.) and Town Hall Meeting (2:00-3:30 p.m.), and NBME Surgery Shelf Exam (Friday 8:00-11:00 a.m.). Friday times are subject to change based on availability of computer labs. Check Canvas calendar for final times.
- Each student will spend four weeks on a general surgery rotation, 2 weeks on anesthesia and 2 weeks on a surgical subspecialty.
- MidPoint Review Meeting - All students are required to have a mid-clerkship review at the mid-point of their 4-week General Surgery rotation with their supervising physician (senior resident or attending). Students should complete the Student Self-Assessment portion of the form (front page) prior to this meeting. Upon signature by the attending or senior resident, the student should upload the completed form into Canvas.
- There is one paper in this course: Informed Consent due Tuesday of Week 7
- Each student will do a 10-minute presentation on a surgical or anesthesia topic.
- Each student will participate in a 1-hour Pathology, 1-hour Radiology Workshop and a 6-hour Ophthalmology Workshop on one Monday.
- The weekend at the end of Week 4 is a “golden” weekend (no call or clinic duties on Saturday and Sunday). Some students may be assigned to Trauma call that Friday night.
- UCH and VA general surgery students are assigned to a specific day for breast clinic or OR in order to meet the breast disease competency and prevent having too many students at one time.
- Students assigned to the VAMC and St. Joseph take call for one night at Denver Health Emergency Room in order to meet the trauma competency.

Attendance Policy

For unanticipated absences during the rotation, you MUST contact the Course Director, Course Coordinator, Student Life Dean and your Team to advise of your situation (one e-mail to all).
Accommodations

Please advise the Surgery Clerkship Coordinator if you need testing accommodations on the first day of Orientation. Delayed request can mean delayed test administration which can mean an IP grade until resolved.

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.cuanschutz.edu/student-services/resources/disability-resources-services/Pages/disability-resources-services.aspx) as soon as possible.

First day reporting section

Depending on your site assignments, your first day site reporting will be communicated to you by each site. See specific site information listed below:

AHEC Reporting

If you are assigned to an AHEC site, you have been registered by the Clerkship Coordinator as an AHEC student for your rotation. Please be sure to follow-up on any additional information required from the AHEC office immediately. In addition, please contact your preceptor at least one week before the beginning of your rotation. You may also need to contact the hospital(s) where your preceptor practices. If you have any questions, please contact MaryKay.Anderson@cuanschutz.edu, 303.724.2681.

You will attend orientation at CU Anschutz the first two days of the course and leave for your AHEC rotations on the third day. If you are in the first half of the course, you will return on the Friday at the end of your rotation. If you are in the second half of the course, you will return on the last Wednesday of the course, in order to attend mandatory sessions on the last Thursday and Friday.

Take your HIPAA certification, background check and current immunization records to present to your AHEC rotation. Records should include evidence of Hepatitis B vaccine, MMR immunity, and recent TB screening. Unless these records are up-to-date, students can be prohibited from any patient and OR contact. Not having your current records available on the first day of your rotation can result in valuable loss of time and experience on your clinical rotation. You have to provide your health records because of privacy constraints (FERPA), the school cannot provide these records.

There may be further paperwork for you to complete prior to or upon arrival at your preceptor’s office in order for you to work in the affiliated hospitals. The preceptor’s contact person will guide you through that process. Most hospitals require a short autobiographical statement and some also request a current photograph. Some sites require My Clinical Exchange registration.

These sites also require School of Medicine verification of your medical student status, insurance, and SOM liability coverage. A letter of good standing from the Office of Student Life will be sent to your preceptors with a copy to you.
Housing arrangements are made by the AHEC site coordinators. If you have not received confirmation/information about housing two weeks before the start of class, please contact your AHEC site coordinator.

<table>
<thead>
<tr>
<th>AHEC Sites by Town</th>
<th>Associated Hospitals</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Alamosa, Colorado</strong></td>
<td><strong>San Luis Valley Regional Medical Center</strong></td>
</tr>
<tr>
<td>David N. Geiger, DO</td>
<td>106 Blanca Avenue</td>
</tr>
<tr>
<td>Carla Christ, MD</td>
<td>Alamosa, Colorado 81101</td>
</tr>
<tr>
<td>Julian Maendel, MD</td>
<td>Contact: Jennifer Martinez</td>
</tr>
<tr>
<td>San Luis Valley Medical Clinics</td>
<td><a href="mailto:jennifer.martinez@slvrmc.org">jennifer.martinez@slvrmc.org</a></td>
</tr>
<tr>
<td>106 Blanca</td>
<td>719-589-8053</td>
</tr>
<tr>
<td>Alamosa, Colorado 81101</td>
<td>FAX: 719-587-1430</td>
</tr>
<tr>
<td>Program Contact: Dr. Geiger</td>
<td>Pam Weeks</td>
</tr>
<tr>
<td>719 589-8073</td>
<td><a href="mailto:pamncsa@hotmail.com">pamncsa@hotmail.com</a></td>
</tr>
<tr>
<td>Fax: 719 589-8112</td>
<td>970 482-6456</td>
</tr>
<tr>
<td><a href="David.Geiger@slvrmc.org">David.Geiger@slvrmc.org</a></td>
<td>970 482-3921</td>
</tr>
<tr>
<td><a href="Carla.Christ@slvrmc.org">Carla.Christ@slvrmc.org</a></td>
<td><a href="Julian.Maendeal@slvrmc.org">Julian.Maendeal@slvrmc.org</a></td>
</tr>
<tr>
<td><strong>Fort Collins, Colorado</strong></td>
<td><strong>Poudre Valley Hospital and Medical Center of the Rockies</strong></td>
</tr>
<tr>
<td>Thomas G. Chiavetta, MD</td>
<td>Medical Staff Services</td>
</tr>
<tr>
<td>Robert R. Quaid, MD</td>
<td>O: 970.495.7153 (PVH)</td>
</tr>
<tr>
<td>Craig R. Clear, MD</td>
<td>O: 970-624-1230 (MCR)</td>
</tr>
<tr>
<td>James Dickinson, MD</td>
<td>F: 970-624-1291</td>
</tr>
<tr>
<td>Stefan M. Pettine, MD</td>
<td><a href="mailto:northrotation@uchealth.org">northrotation@uchealth.org</a></td>
</tr>
<tr>
<td>Michael Roller, MD</td>
<td><a href="mailto:Tori.Berry@uchealth.org">Tori.Berry@uchealth.org</a></td>
</tr>
<tr>
<td>Northern Colorado Surgical Associates, PC</td>
<td>Harmony Ambulatory Surgery Center</td>
</tr>
<tr>
<td>2121 East Harmony Rd, Suite 250</td>
<td>2127 E. Harmony Rd. Suite #200</td>
</tr>
<tr>
<td>Fort Collins, Colorado 80528-9503</td>
<td>970 297-6300</td>
</tr>
<tr>
<td>Program Contact: Pam Weeks</td>
<td>Fax: 970 297-6329</td>
</tr>
<tr>
<td><a href="mailto:pamncsa@hotmail.com">pamncsa@hotmail.com</a></td>
<td>970 482-6456</td>
</tr>
<tr>
<td>970 482-6456</td>
<td>970 297-6329</td>
</tr>
</tbody>
</table>

AHEC AREA HEALTH EDUCATION CENTERS STUDENT SUPPORT SERVICES

**Centennial AHEC**
Ft. Collins
Nancy Schumacher
Centennial AHEC
4650 W. 20th Street, Suite A
Greeley, CO 80634
Office Phone: 970.330.3608
Fax: 970.330.3608
nschumacher@cahec.org
www.cahec.org
REPORTING INFORMATION FOR SURGICAL SUBSPECIALTIES

Burn Surgery
Report to the UCH Burn Unit (third floor) of Anschutz Inpatient Pavilion (AIP), Nurses Station at 8 a.m. Contact Anne Wagner, MD, for further information (anne.wagner@cuanschutz.edu).

Cardiothoracic Surgery
Amber Camus will send you reporting information (303.724.2822 or amber.camus@ucdenver) a few days before the rotation begins. You will be working in two hospitals, VAMC and UCH.

Contact Information for the 6 Thoracic Surgery Fellows for AY2019-2020:

- Chris Holley, Chief Fellow  
  Pager: 303-266-5451  
  Cell: 402-216-4634
- Andrew Mesher, Chief Fellow  
  Pager: 303-266-5452  
  Cell: 303-266-5452
- Neil Venardos, 2nd Year Fellow  
  Pager: 303-266-5842  
  Cell: 713-806-5060
- Vicente Valero, 2nd Year Fellow  
  Pager: 303-266-3810  
  Cell: 713-805-1334
- Yihan Lin, 1st Year Fellow  
  Pager: 303-266-5426  
  Cell: 720-320-1458
- Brandon Wojcik, 1st Year Fellow  
  Pager 303-266-2515  
  Cell: 616-723-1500
Pediatric Surgery

Michael Benge (Michael.benge@childrenscolorado.org) will email you specific instructions and documents by 9:00 a.m. the Wednesday before your rotation begins. If he is not available, you may page the 3rd Year Resident listed on Amion. Surgery Site Preceptor is Jonathan Roach, MD.

ID Badges and Electronic Medical Access: Andrea Reed (Andrea.Reed@childrenscolorado.org 303-777-8396) should have contacted you regarding your ID Badge and electronic medical records access. If she has not, please contact her today.

Scrubs: Once your badge is activated, you will be able to access the OR suite. You will need a code to get into the locker rooms; ask at the main OR desk for the code. Scrubs are in the OR suite.

Lockers: Located on the 1st floor of the Administrative Pavilion just outside of the Aspen conference room. There are also additional lockers in the 8th floor workroom.

Plastic and Reconstructive Surgery

Erin Oglesby (erin.oglesby@cuanschutz.edu) will email you specific instructions and resident contact information the Wednesday before your rotation begins. You will spend time with the Plastic & Reconstructive Surgery service at both UCH and CHCO. Before starting at CHCO, please go to Access Control on the lower level of the main hospital by the front entrance to get your badge – use the elevators to the right of the front desk by the Special Care Clinic. You are required to use your University parking while at CHCO.

For your best preparation, you may page the plastic surgery intern at 303.266.4354 the day prior to starting your rotation for more detailed instructions on where to be at what time. We will try to get you exposure to both pediatric and adult plastic and reconstructive surgery. Brooke French, MD, is the rotation director. Please let us know if you have particular interests that we can foster. We look forward to having you on service!

Transplant Surgery

Two days before you start your rotation, please contact the transplant surgery fellows (Dr. Hillary Yaffe 720-556-8575/ hillary.yaffe@cuanschutz.edu, Dr. Hunter Moore 303-378-6526, hunter.moore@cuanschutz.edu) to arrange meeting time and location. Please allow time for response as they are frequently operating. You may also page the Transplant Service pager after you complete your didactics on the first day of the rotation (303-266-1630). The Transplant Surgery Unit is located in AIP1, 6th floor.

Urology

Amber Camus or Noelle Musgrave will e-mail you reporting information and a weekly schedule. You may contact them at Amber.Camus@cuanschutz.edu or Noelle.Musgrave@cuanschutz.edu. Ty Higuchi, MD is the rotation director. Students are expected to read and apply the core content of the National Medical Student Curriculum during their rotation. The core content can be found at the following URL: https://www.auanet.org/education/education-for-medical-students.cfm.
Vascular Surgery
Donald Jacobs, MD, is the rotation director. Contact Dr. Jacobs and/or Trina Smidt by email or cell phone for reporting information Donald.L.Jacobs@cuanschutz.edu and/or Trina.Smidt@cuanschutz.edu or 720.258.5526, no later than Thursday of the week before your rotation starts.

CALL REQUIREMENTS WHILE ON GENERAL SURGERY

University of Colorado Hospital
Two overnight calls during your 4-week rotation. Call will be with the overnight TACS PGY 3 for weekdays and PGY2 or 3 and PGY5 for weekends.

Denver Health
Two overnight calls during your 4-week rotation. Please pay attention to schedule of VAMC and St. Joe’s students assigned (usually to a Friday night) so there are only one/two students on call at a time. This schedule can be found in Canvas. Alternative option is a night float “mini-rotation” where you take 4 overnight (12hr) shifts with the TACS team. If you are assigned to the TACS team for your rotation, you do not need to take call.

St. Joe’s
Two overnight calls during your 4-week rotation (a ‘trauma call night’ at Denver Health counts as one of your 2 call nights).

VAMC
No call (Denver Health Medical Center trauma night assigned).

AHEC Sites
No in-house overnight call; attendings on call may notify you if overnight operations occur (varies by site).

REPORTING INFORMATION FOR GENERAL SURGERY ROTATIONS

Denver Health Medical Center – General Surgery
Site Preceptor: Alexander Morton, MD, Alexander.Morton@dhha.org

General Surgery Site Coordinator: Kaley Batley, Kaley.Batley@dhha.org, Third Floor, Pavilion A, Main Hospital, Department of Surgery Administration Offices, Rm. # A358. Kaley’s hours are 9:00 a.m. to 5:00 p.m., Monday through Friday.

Badges, Surgical Scrubs, and Computerized Medical Records Access: Refer to the welcome email Kaley Batley sent you. Please email her your scrub size. They need to be the same size for top and bottom.

Parking: Students may park in the Rita Bass parking lot- it is $2.00 a day or there is metered parking on the streets as well. Please see the parking map in Canvas under Files/Denver Health.
DHMC students are responsible for attending one breast clinic on a Wednesday (8:00 a.m. to 4:00 p.m.) with Dr. Kshama Jaiswal, MD, in the Davis Pavilion. Wear dress clothes (nice shirt, pants and shoes, no scrubs) and your white jacket. Schedule your day with Kaley Batley, Kaley.Batley@dhha.org, by emailing her which Wednesday during your rotation you would like to accompany Dr. Jaiswal in the Breast Clinic. Breast clinic days are reserved by the order in which Kaley receives your email. One student per clinic is preferred.

You are scheduled to meet with Dr. Jaiswal every Friday of your rotation in the A370 Conference Room from 2:30 p.m. to 3:30 p.m., unless otherwise specified. Sometimes it will change to Thursdays. Bring your questions and/or interesting cases to discuss and learn from.

Below is a description for each of the Surgery Teams. Please discuss amongst yourselves which team interests you the most and let the chief resident know on the first day of clinical work. All teams see general surgery and trauma patients and also have the subspecialties listed below:

- **Blue Team**: Drs. Platnick, Cohen, Lawless, Coleman: general surgery
- **Red Team**: Drs. Jaiswal, Fox, Hoehn, Bensard, Kulungowski, Somme: pediatrics, vascular, breast
- **Gray Team**: Drs. Burlew, Moore, Campion, Pieracci, Morton: endocrine, thoracic, bariatric, general surgery
- **TACS Day/Night Teams**: Multiple Attendings; acute trauma and general surgery

**Exempla St. Joseph Hospital — General Surgery**

**Site Preceptor**: Emily Speer, MD (Office: 303.812.6433; Pager: 303.234.3615); emily.speer@sclhs.net

**General Surgery Site Coordinator**: Sarah Flores (Office: 303-812-6434) sarah.flores@sclhs.net

**Department of Surgery**: 2nd Floor of the Russell Pavilion, 1375 East 19th Avenue, Denver, CO 80218

Please report to the Sterne Elder Conference Room by 7:00 a.m. for the morning conference. After the morning conference, go to the GME office where you will meet with Sarah. The GME offices are in the Russell Pavilion on the very west side of the hospital.

**Hospital Badge**: St. Joe will issue you a Student ID Card. Sarah Flores makes arrangements for your ID card. Replacement cost is $20.

**Surgical Scrubs**: Hospital scrubs are available from the operating room. The St. Joseph Hospital policy is to dispense one set of scrubs at a time to a student. You should not wear home any scrubs. You will need your St. Joe Student ID to obtain the scrubs.

**Computerized Medical Records Access**: Sarah Flores will have your medical records access set up, if you contacted her with your birth date and last four digits of your social security number. If you have not already done so, call Sarah with this information today. If your badge is not allowing computer access, you may just need to call the IT Department on your first day as you most likely will just need direct IT help.

**Parking**: Student parking is assigned in the Russell Pavilion Garage. Contact Sarah Flores for details.

**Miscellaneous**: Student badges and SJH MD pocket are provided on your first day and must be returned at the end of your rotation. Replacements are as follows: badge ($20.00 replacement), SJH MD pocket ($16 to buy or replace).
If you have any questions, you may contact Sarah between the hours of 7 a.m. to 4 p.m. Monday to Friday or by e-mail.

University of Colorado Hospital – General Surgery

Site Preceptor: Paul Montero, MD, pager 303.266.0065, paul.montero@cuanschutz.edu.

Hospital ID Badge: All students should have a UCH ID Badge and inner and outer door, ER and OR access. If you have problems with access during this course, check with the hospital ID Access office in the Leprino Building, Room 9-020, 720.848.8356. If you continue to have problems, please notify Mary Kay Anderson at 303-724-2681.

Surgical Scrubs: Hospital scrubs are available through the scrub dispensing units in the AOP and AIP. Scrub access is added to all third year medical student badges during Transitions Week. If you have problems with the scrub machines, call Dulce at x84915 (M-F 5 am-1:30pm) or email dulce.munoz@uchealth.org. After hours leave a message on x84915 and identify which machine you are calling about. Please try one of the other 6 machines at UCH.

Electronic Medical Records Access: If you have problems logging into EPIC, call the Help Desk at 720.848.4000.

Parking: University of Colorado Hospital does not have separate parking for students. You may use the parking options provided by the University of Colorado Denver for its Anschutz Medical Campus. You can buy temporary parking access for a week at a time ($10/week for students). The access is loaded onto your school ID. Arrangements need to be made at the Parking Office, Building 500, First Floor, one day in advance. Parking Office phone number is 303.724.2555 or http://www.cuanschutz.edu/about/departments/FacilitiesManagement/ParkingMaps/Parking/Pages/PermitParking.aspx

Sleep rooms: Located on the 4th floor of the Leprino Building, north of AIP. The ID scanner is located at the north end of the hallway that runs along the west boundary of the sleep room area. Four sleep rooms are identified as “medical student/hotel space” rooms: #437 Sleep Room 30, #438 Sleep Room 31, #439 Sleep Room 32 and #440 Sleep Room 33. A locker is provided in each room, but you will need your own lock.

Lockers: Available in AIP, room #2010. The access code is 1010. There are many lockers available, but you must provide your own lock.

LOCKERS AVAILABLE FOR MEDICAL STUDENTS’ USE IN ANSCHUTZ INPATIENT PAVILION OR LOCKER ROOMS – PLEASE SHARE!

Women’s OR Locker Room
Locker # 531
Combination: 07 17 39

Men’s OR Locker Room
Lock # 1 – Locker # 424
Combination: 38 04 34 (#1)
Lock # 2 - Locker #427
Combination: 31 01 23 (#2)
Study Rooms: Every computer at UCH is directly linked to the UC Denver Health Sciences Library [http://hslibrary.cuanschutz.edu](http://hslibrary.cuanschutz.edu). You can also access the library by clicking the link on the UCH iAmaze Home page, then look for Clinical Resources, External Resources, and then Health Sciences Library.

**Veteran’s Administration Medical Center – General Surgery**

**Site Preceptor:** Teresa Jones, MD, pager 303.266.4871, Room D-3-112, [Teresa.jones@cuanschutz.edu](mailto:Teresa.jones@cuanschutz.edu)

**General Surgery Administrative Officer:** MaryEllen Winkler

**Department of Surgery:** 1700 North Wheeling, Building D, Third Floor, Room D-3-122, Aurora, Colorado, Surgery Administration: 720.723.6466

On first day of rotation, report to 4th Floor, Administration in Room D-3-122 at 6:00 a.m.

**Hospital Badge, Surgical Scrubs, Computerized Medical Records Access:** Your VA hospital badge was issued to you from the Foundations of Doctoring office in your first year of medical school. Should you need to get a badge, you need to make an appointment through Sandra Oglesby with the Personal Identity Verification office whose Standard Operating Hours are 7:30 a.m. to 3:30 p.m. M-F. Directions to the PIV office: RMR VAMC, 1700 Wheeling St., Building A is the VA building that is closest to Colfax & Wheeling, the driving/street entrance is a block north, inside fence, 1st building you see on the right, as you come into the courtyard. (5 minutes from Children’s Hospital, on foot.) In building A, go to 2nd floor, far left side of lobby from elevators, to the glass window in the wall (like at a pharmacy). Badging is on left side of lobby (HSPD-12 criteria), while HR (uses I-9 criteria) is across from them, on the right side of lobby (should a copy of WOC appointment letter be needed).

Please complete the Computer Access Request Form (CARF) and return to Sandra Oglesby ([Sandra.Oglesby@va.gov](mailto:Sandra.Oglesby@va.gov)) 720.723.6469, and/or Angelo Austin ([Angelo.Austin@va.gov](mailto:Angelo.Austin@va.gov)) at least two weeks in advance of your rotation. This form will be emailed to you from the General Surgery Coordinator and can also be found on Canvas. Your scrub cards will be issued to you by Sandra Oglesby or Angelo Austin at the VA. Be sure your TMS (HIPPA, etc.) is up-to-date. If not, complete here: [www.tms.va.gov](http://www.tms.va.gov).

**Computers:** Each PC has the medical information website “Up-to-Date.”

**Lockers:** Lockers for students are available for daily use:

- Female students can use lockers # 77 or 98 (or the resident lockers, if not already in use, which are #81 & 82)
- Male students can use lockers # 97 or 98 (or the resident lockers, if not already in use, which are #80 & 81)

**Alamosa AHEC Site – General Surgery**

**Site Preceptor:** David Geiger, DO ([David.Geiger@slvrmc.org](mailto:David.Geiger@slvrmc.org))

**General Surgery Site Coordinator:** Jennifer Martinez ([Jennifer.Martinez@slvrmc.org](mailto:Jennifer.Martinez@slvrmc.org))

**Badges, Surgical Scrubs, and Computerized Medical Records Access:** San Luis Valley Health ID badge should be obtained from Jennifer Martinez on the day of arrival. This allows locker room access and should be worn at all times on hospital premises. Scrubs are available in the OR locker room, no special
sign-out procedure is required. Scrubs should not be worn outside of the hospital. The students will be provided with access log-ins to the in-patient and out-patient EMR, there are two different systems. An orientation to the EMR system will be provided by a representative from Medical Records/Information Technology within two days of arrival. Upon arrival, the student should check-in with Jennifer Martinez. Her office is in the Administration hallway on the first floor of the hospital. After Jennifer completes the administrative check-in process, she will deliver the student to Dr. Geiger for a brief orientation and the beginning of the clinical experience.

**Parking:** Available without charge. The lot in front, west of the hospital is reserved for patients and families. The student may park in any employee lot. The lot immediately south of the clinic entrance to the hospital is the most convenient.

**Fort Collins AHEC Site – General Surgery**

**Site Preceptor:** Thomas Chiavetta, MD

**Medical Staff Services Point of Contact:** Tori Berry ([northrotation@uchealth.org](mailto:northrotation@uchealth.org))

**Badges:** All students should have a UCHealth Northern Colorado badge. Badge forms can be obtained at the Medical Staff Office at Poudre Valley Hospital or Medical Center of the Rockies. Please bring a driver’s license, passport, or school ID badge with you.

**Computerized Medical Records Access:** If you have problems logging into EPIC (please use your EPIC account through the University), call the Help Desk at 970-495-7540.

**Parking:** Poudre Valley Hospital and Medical Center of the Rockies do not have separate parking for students. Please park in Employee-designated lots only. Parking Tags can be obtained at the Medical Staff Office at Poudre Valley Hospital or Medical Center of the Rockies (Parking maps in Canvas).

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**REPORTING INFORMATION FOR ANESTHESIA ROTATIONS**

**University of Colorado Hospital - Anesthesia**

**OR Schedule:** Lauren Testa (or someone else) will email you the day before in-between 4:00 and 5:00 p.m. with your schedule for the following day. If you do not receive this email by 5:00 p.m, please reach out to block leadership. This will let you know where to report, what cases you are assigned and who you will be working with for the day. If your first day is a Monday, show up after faculty lectures (usually finished at 7:00 a.m.) in your assigned room at 7:30-7:45 a.m. Monday OR start time is 8:30 a.m. If your first day is any day other than Monday, show up in the OR to which you are assigned between 6:30-6:45 a.m. ready to go. At that time, you will compete a room set up with the in-room provider and then go to pre-op to see the patient.

**Hospital ID Badge:** All students should have a UCH ID Badge and inner and outer door, ER, OR, and Leprino call room access. If you have problems with access during this course, check with the hospital ID Access office in the Parking Garage, 720.848.8356. If you continue to have problems, please notify Sarah Lesko at 303-724-8373.

**Surgical Scrubs:** Hospital scrubs are available through the scrub dispensing units in the AOP and AIP. Scrub access is added to all third year medical student badges during Transitions Week. If you have problems with the scrub machines, call Nick Arnold or Kelsie Kelm at x84915 or email one of them at
narnold@hospitalcooperative.com or kkelm@hospitalcooperative.com. After hours leave a message on x84840 and identify which machine you are calling about. Please try one of the other 6 machines at UCH.

**Electronic Medical Records Access:** If you have problems logging into EPIC, call the Help Desk at 720.848.4000.

**Parking:** University of Colorado Hospital does not have separate parking for students. You may use the parking options provided by the University of Colorado Denver for its Anschutz Medical Campus. You can buy temporary parking access for a week at a time ($10/week for students). The access is loaded onto your school ID. Arrangements need to be made at the Parking Office, Building 500, First Floor, one day in advance. Parking Office phone number is 303.724.2555 or http://www.cuanschutz.edu/about/departments/FacilitiesManagement/ParkingMaps/Parking/Pages/PermitParking.aspx.

**Sleep rooms:** Located on the 4th floor of the Leprino Building, north of AIP. The ID scanner is located at the north end of the hallway that runs along the west boundary of the sleep room area. Four sleep rooms are identified as “medical student/hotel space” rooms: #437 Sleep Room 30, #438 Sleep Room 31, #439 Sleep Room 32 and #440 Sleep Room 33. A locker is provided in each room, but you will need your own lock.

**Lockers:** Available in AIP, room #2010. The access code is 1010. There are several lockers available, but you must provide your own lock. This room is near Elevator D. We also have day lockers now available-adjacent to the OR charge desk area.

**Study Rooms:** Every computer at UCH is directly linked to the UC Denver Health Sciences Library http://hslibrary.cuanschutz.edu . You can also access the library by clicking the link on the UCH iAmaze Home page, then look for Clinical Resources, External Resources, and then Health Sciences Library. A Faculty/Medical Student Lounge is located on the first floor of the AOP, adjacent to the Outpatient Radiology Department, room #OP-1602. It has six computers, a printer, a refrigerator, and comfortable chairs. Punch in 4444* to access the lounge.

**Children’s Hospital Colorado – Anesthesia**

**First Day:** Lindsay Baumgartner will meet with you when you arrive on your first day. If you have, any questions about your rotation reach out to her at Lindsay.Baumgartner@childrenscolorado.org or 720-777-4999.

**OR Schedule:** Latha Hinckley (or someone else) will email you the day before with your schedule for the following day. This will let you know where to report, what cases you are assigned and who you will be working with for the day.

**ID Badges and Electronic Medical Access:** Andrea Reed (Andrea.Reed@childrenscolorado.org 303-777-8396) should have contacted you regarding your ID Badge and electronic medical records access. If she has not, please contact her today.

**Parking:** Children’s Hospital Colorado does not have separate parking for students. You may use the parking options provided by the University of Colorado Denver for its Anschutz Medical Campus. You can buy temporary parking access for a week at a time ($10/week for students). The access is loaded onto your school ID. Arrangements need to be made at the Parking Office, Building 500, First Floor, one day in advance. Parking Office phone number is 303-724-2555 or
http://www.cuanschutz.edu/about/departments/FacilitiesManagement/ParkingMaps/Parking/Pages/PermitParking.aspx.

**Scrubs:** Once your badge is activated, you will be able to access the OR suite. You will need a code to get into the locker rooms; ask at the main OR desk for the code. Scrubs are in the OR suite.

**Lockers:** Located on the 1st floor of the Administrative Pavilion just outside of the Aspen conference room. There are also additional lockers in the 8th floor workroom.

**Study Rooms:** The CHC Clinical & Research Library is located on the 2nd floor, outpatient side. Their hours are 7:30 a.m.-5:30 p.m. M-F staffed, but students have 24/7 access with their CHC badge. PCs are available in the Medical Education office lounge which students can access 24/7.

**Veterans Administration Medical Center – Anesthesia**

**Daily Schedule**

All conferences held in Building G, 3rd floor, North Clinic. G3-100 or 102 (Elevator 3 to 3rd Floor)

- Monday: Grand Rounds via webcast 6:45am
- Tuesday-Friday: Morning Conference 6:30am
- OR Start Daily at 7:45 (8:30 Mondays), Pre-op anesthesia starts at 7:00 (7:45 Monday)
  
  - Daily workflow should allow you to visit as many ORs per day as possible. Focus on watching the beginning and end of cases, as this is where the most airway management will occur, the main goal of your week. 1 student per OR at a time.
  
  - IV access attempts should be supervised by an attending, resident, CRNA, or RN
  
  - Review the board/OR schedule daily with an attending to point out learning opportunities for the next day to facilitate reading and preparation.
  
  - We would like to have you each present at least one anesthesia H&P during your rotation, if you are a multi-week rotation you may present one early and one at the end.
  
  - Evaluations can be a composite evaluation from Dr. Beck, but also ask any other attendings and residents you spent significant time with. Procedure cards and observation forms should be signed by Dr. Beck on the last day of your rotation or any attending in his absence.

**Administrative contact**

Ferguson, Lavarr G. Lavarr.Ferguson@va.gov

Wray, David (Oliver) David.Wray@va.gov

Nathaniel Graff: 720-723-6273, Nathaniel.Graff@va.gov

**Clinical Contact**

Dr. Dan Beck, Daniel.beck@cuanschutz.edu or beck.dan.r@gmail.com (if you need a reply off hours/weekends)

**Badging/scrubs/OR access**
Your badging should have been initiated prior to your rotation. If you do not have a VA badge that is active, please contact Lavarr Ferguson more than 1 month prior to your rotation. This can be a timely process involving multiple appointments with the badging office.

Scrubs/OR access should go through Lavarr.Ferguson@va.gov if you do not already have access from your surgery rotation. Please email him 1-2 weeks before your rotation starts if you already have a badge to allow time for processing. Tops and bottoms need to both be the same size.

To obtain OR/Anesthesia door access, please email Mr. Ferguson your badge ID number more than 1 week prior to starting. This number can be found on the back of your VA badge.

**Exempla St. Joseph Hospital - Anesthesia**

**Site Preceptors:**
- Keri Propst, MD (keri(propst)(gmail.com))
- Kathleen Marzluf, MD (kmarlzuf@gmail.com)

Dr. Propst will send out an email a month or two months before your rotation starts with your attending schedule/attending contact information. Please email/text your assigned attending the night before you will be working with them.

**Hospital Badge:** St. Joe will issue you a Student ID Card. Sarah Flores, sarah.flores@sclhs.net, arranges your ID card. Replacement cost is $10.

**Surgical Scrubs:** Hospital scrubs are available from the operating room. The Exempla St. Joseph Hospital policy is to dispense one set of scrubs at a time to a student. You should not wear home any scrubs. You will need your St. Joe Student ID to obtain the scrubs.

**Computerized Medical Records Access:** Sarah Flores will have your medical records access set up, if you contacted her with your birth date and last four digits of your social security number. If you have not already done so, call Laurie with this information today. If your badge is not allowing computer access, you may just need to call the IT Department on your first day as you most likely will just need direct IT help.

**Credentialing:** You will also need to make sure you have completed paperwork with Sarah Flores, Medical, sarah.flores@sclhs.net, 303.812.5161.

**Parking:** Student parking is assigned in the Russell Pavilion Garage. Contact Sarah Flores for details.

**Miscellaneous**

St. Joe’s provides some meals for you. Refer to the email from Sarah Flores for details.

Student badges, keys to the call room and ESJH MD pocket are provided on your first day and must be returned at the end of your rotation. Replacements are as follow: badge ($10.00 replacement), key ($2.00 replacement) and ESJH MD pocket ($16 to buy or replace).

If you have any questions, you may contact Sarah between the hours of 7 a.m. to 4 p.m. Monday to Friday or by e-mail.
Denver Health Medical Center - Anesthesia

Site Preceptor:  Aaron Murray, MD, Aaron.murray@dhha.org

Anesthesia Site Coordinator: Veronica Gray - 303 -602-5945 - veronica.gray@dhha.org

Report to DH, 3rd floor of Pavilion A (main hospital), room A332. Veronica Gray will get your badge, scrubs and get you set up in the OR. This is best done the week prior to starting. Show up ready to work at 6:30 on your first day. Go to the OR control desk and ask where to meet your team.

Damaged Badges: If a badge is damaged, worn, faded, etc., the old badge should be exchanged for a new badge at no charge.

Replacement/Lost Badges: Lost badges will be replaced at the individual’s expense for $10.00. Another form of photo identification must also be presented. The $10.00 fee will be paid check or a receipt from the hospital cashier is accepted for individuals who are not on DHHA payroll.

Name Changes: Badges will be replaced for free for name changes if the old badge is presented. The name must first be changed with HR Records Center to receive a replacement badge.

No Student Parking:

Students are not provided parking at DH and cannot park in the Delaware Garage. Instead they can park in the Rita Bass facility for $1.50 a day, parking lots around the hospital or the streets around the property. (Though we would prefer for them to stay out of the neighborhood if at all possible.)

PVH/MCR (Ft. Collins/Loveland) Reporting information

OR Schedule: Dr. Moss will email students approximately 1 week prior to the start of the rotation with logistics and expectations. He will also email you the evening before (~1900) with your schedule for the following day. This will let you know where to report, what time and whom you will be working with for the day.

Hospital ID Badge: All students should have a UCH ID Badge. If you have problems with access during this course, check with Sue McBride in medical staff office. If you continue to have problems, please notify Sarah Lesko at 303-724-8373.

Surgical Scrubs: Hospital scrubs are available upon entering each OR locker room.

Parking: MCR/PVH does not provide specific parking for students. Please park in the main visitor lot.

Lockers: There are no specific lockers available for students. If you have valuable items, please place them in the anesthesia office at MCR or PVH. The supervising anesthesiologist can assist you.

Security, Student Safety, and Disaster Preparedness

Institutional emergency and disaster preparedness policies and plan are outlined in the “Emergency-Preparedness Quick-Reference Guide” for the Anschutz Medical Campus. The link is published in the Clinical Block Syllabus, posted on Canvas http://ucdenver.canvas.com, and located next to emergency phones (e.g., ED1 and 2) as well as many of the student lounge areas, small group rooms, and lecture
halls. Colorado Springs Branch students located have similar policies and procedures provided by the branch.

Medical Student Policies and Procedures Manual “White Book” (http://www.cuanschutz.edu/academics/colleges/medicalschool/education/studentaffairs/studentresources/Documents/StudentHandbook.pdf) publishes emergency information (section 4.1), “In an emergency, both the Office of Student Life (303-724-6407) and the Registrar’s Office (303-724-8053) will make reasonable efforts to contact a student or a student’s designated emergency contact.”

Emergency information is also found on the Student Life web site: http://www.cuanschutz.edu/academics/colleges/medicalschool/education/studentaffairs/emergencies/Pages/Emergencies.aspx

Recommended Resources

- NBME Practice Test. $20 for 50 questions - http://www.nbme.org/students/sas/masteryseries.html.

- BoardVitals: an exam prep tool through the Health Sciences Library. You can find BoardVitals on the library’s database page, or through STAT!Ref. You must register with your @cuanschutz.edu, @childrenscolorado.org or @uchealth.org email address to access BoardVitals.

Please realize that information in most large textbooks was submitted at least two years prior to publication. You will profit most by reading a smaller text, reviewing lecture notes, and using the larger texts and recent journals for references. Health Sciences Library has a few copies of “Essentials of General Surgery”

Check out Ebooks by Subject: Surgery at the HSL Library (https://hslibrary.cuanschutz.edu/ebooks/subject/Surgery)

Suggested Textbooks for Surgery

- Essentials of General Surgery

- Surgical Recall

- Other Suggested Textbooks for Surgery

  - Dr. Pestana’s Surgery Notes
    (Kindle Edition, $25)

  - Advanced Surgical Recall

  - Fundamentals of Surgery
    John E. Niederhuber, MD (ed.), 1998, Appleton & Lange (Amazon Price, Used, $6)

  - Understanding Surgical Disease – The Miami Manual of Surgery
Essentials of Surgical Specialties
Peter F. Lawrence, MD, 3rd edition, 2007, Lipincott Williams & Wilkins (Amazon Price, New, $48)
(Kindle Edition, $49)

Surgery: A Case Based Clinical Review

Suggested References for Surgery

Greenfield’s Surgery: Scientific Principles and Practice
(Kindle Edition, $154)

Current Surgical Therapy
(Kindle Edition, $120)

Sabiston’s Textbook of Surgery
*Available as an e-book from Health Sciences Library (Free)

Schwartz’s Principles of Surgery

Podcasts:
• Surgery 101
• Rocky Mountain Surgery

UWorld - https://www.uworld.com/

ACS Surgery - https://www.facs.org/education/program/simulation-based (Free)

ANESTHESIA TEXTBOOK – book is provided to students during clerkship. See link below for electronic version.

Manual of Clinical Anesthesiology
Larry Chu & Andrea Fuller
http://hslibraryguides.cuanschutz.edu/
>Click on medicine subject
>Click on Anesthesiology
>Second column, Manual of Clinical Anesthesia

Testable Reading List:
Chapter – Title
7 – PONV
20 – Endotracheal Intubation
23 – LMA
Assignments

Informed Consent Outline and Class Participation

Objectives:

At the end of this session, participants should be able to:

1. Describe the purpose of the informed consent process:
2. Describe eight elements necessary by law for a valid informed consent process;
3. Identify ethical values that support the practice of informed consent;
4. Describe the evidence, procedure and professional standard of care that Colorado Courts apply to resolve informed consent cases;
5. Describe the process for proxy decision makers for incapacitated adults in Colorado;
6. Describe informed consent for minors; and
7. Identify ethical issues raised by DNR orders in the OR.

Required Readings:

1. Overview video module by Pat O’Rourke (12 minutes and 42 seconds), found on Canvas
2. Eight Elements Necessary for Valid Informed Consent - an outline of the material for this session
3. Article: Legal and Ethical Myths About Informed Consent by Alan Meisel, JD and Mark Kuczewski, Ph.D.
4. Article: Informed Consent in Clinical Care by Yael Schenker, MD, MAS and Alan Meisel, JD
5. ASA Ethical Guidelines for the “Anesthesia Care of Patients with Do-Not-Resuscitate Orders” and sample UCH Form
6. University of Colorado Hospital Assessing Capacity form
7. Informed Consent Decisions for Adult Patients and Minor Patients – 2 Diagrams by Patrick O’Rourke

Resources:
1. Ethics Basic Concepts and Vocabulary

Required Written Assignment: Case Presentation Outline (worth up to 10 points)

Student must pass this element (receive 6/10) to pass the Perioperative Block. Assignments receiving a 5 or below must be rewritten and the final grade can only receive a total of 8/10 (2 points will be deducted for the rewrite.) Rewrites are due in two weeks.

1. Read the required readings.
2. Identify a patient story / case of your own that you have experienced on this rotation that includes a lesson about informed consent. It can be a positive example about how best to get informed consent or an example that illustrates a problem.
3. Choose one element of the eight elements in your reading and explain how this element was or was not met in your chosen story / case.
4. Prepare a case presentation outline that will be turned in and graded. Due Tuesday of week 7. This is not a paper requiring full sentences – but an outline with bullet points of key information and points of analysis. Maximum of 4 pages. A case presentation outline rubric, a sample, and the assessment rubric are provided.

Required Discussion

Held the last Thursday afternoon of the course. Check the course schedule for building and room number.

Students will meet with a faculty facilitator to present and discuss their cases.

Case Presentation Outline Rubric

- Describe a case scenario that has taught you something about informed consent.
- Clearly identify the element that you will be discussing. You can discuss any of the 8 elements, but be aware that informed consent law focuses on the disclosure of information (element #4).
- Ethical Implications: Identify the stakeholders and the ethical values of each. May include patient, family, institution, healthcare professionals, you as the student, and/or the community/society. Identify the areas of overlap among values and also the areas of tensions among values.
- Legal Implications:
  - Discuss whether the team put themselves at risk for an informed consent suit. If you select a case that is NOT problematic – use hypotheticals to demonstrate that you
You can discuss any of the 8 elements, but be aware that informed consent law focuses on the disclosure element (#4). The other elements of capacity, understanding, or language barriers (use of interpreters) are relevant in so far as they relate to the physician’s duty to get informed consent. But a lack of informed consent case is about disclosure and you may need to use hypotheticals to demonstrate your understanding of this.

- You will need to demonstrate that you understand how a lack of informed consent case would be brought, argued and won including an understanding of how the standard of care applies.
- Clearly discuss your case in the language of a tort – duty/breach/damages and causation. Make sure you include the unique causation that is part of a lack of informed consent case.
- Also – make sure to discuss the Colorado standard for disclosure – reasonable physician – and how it applies to your case.

- **References** to medical literature, ethical guidelines, and course readings as appropriate.

### Sample Case Presentation Outline – 4 page maximum

This is a case of disclosure – you can present other of the 8 elements like capacity, coercion, understanding, language barriers or authorization.

This is a sample for your information to help you to be as complete in your analysis as possible. **Do not cut and paste from this sample** – do you own work analyzing your unique case according to the components outlined in the rubric, the assessment rubric and this sample.

**Student Presentation**

This presentation is worth 7.5 points.

You will be graded on the following areas:

- Time limitation – no more than 10 minutes
- Organization/content/accuracy
- No YouTube or other Web-based videos
- Please spell-check your slides
- Slide content (not too busy, not hard to understand)
- Public speaking skills
- Diction/pronunciation
- Volume (use the microphone!)
- Eye contact with audience
- Timing of slides (don’t show a busy slide and not let your audience take it all in)
- Reference list

See sample in Canvas.

**OSCE (Objective Structured Learning Examination)**
Overview: This assignment (worth 4.5 points) will take place on the last Thursday of the month alongside the anesthesia small group Problem Based Learning Discussion.

Goal: Conduct an objective, structured clinical exam to assess student knowledge/skills with fundamental anesthesia/surgery technical skills and imaging interpretation.

Objective:
- Demonstrate appropriate techniques for airway maintenance/pre-oxygenation.
- Display appropriate techniques for fundamental open surgical skills (suturing, knot-tying, drain maintenance).
- Exhibit ability to appropriately interpret imaging (radiograph, computed tomography, or ultrasound) that may show anesthesia or surgery related diagnoses.

Direct Observation & Mid-Point Review Feedback Forms

Direct Observation Form
- Students are required to complete all 4 components of the OPC Direct Observation Form (can be an observer resident or an attending).
- Student can scribe.

Mid-Point Review Form
- All students are required to have a mid-clerkship review at the mid-point of their 4-week General Surgery rotation with their supervising physician (senior resident or attending).
- Students should complete the Student Self-Assessment portion of the form (front page) prior to this meeting. Upon signature by the attending or senior resident, the student should upload the completed form into Canvas.

Examinations
1. Anesthesia Quiz – The Anesthesia quiz is a computer based quiz consisting of 21 multiple choice questions (2 questions are on Ethics). The quiz is taken through Canvas on your own computer and becomes available 6 am Saturday after the first full week of anesthesia and remains available until the last Friday of the block. The Honor Code applies for taking this quiz (it is okay to reference books but you must take the quiz on your own). The quiz scores as follows:
   - 18-21 questions correct = 3 pts
   - 14-17 questions correct = 2 pts
   - 11-13 questions correct = 1 pt
   - 10 or less correct = fail (0 pts; the student will get one opportunity to retake the quiz and must pass but will receive 0 pts regardless of the second attempt's score). If the student fails the anesthesia quiz a second time, a remediation plan will ensue.

2. NBME Surgery Shelf Exam – last Friday of the block – 100 points (58 required to pass). NBME Policy Statement: NBME Examinations Rules and Conduct. Students who arrive 15 minutes after the actual exam start time will NOT be allowed to take the exam.
3. **Objective Structured Learning Examination (OSCE)** – Last Thursday of the month – assessment to include required or expected skills and knowledge key to safe and effective perioperative/operative management of the patient with pathology potentially requiring surgical intervention.

4. **Anesthesia Problem Based Learning Discussion (PBLD)** – Last Thursday of the month to run concurrently with surgical OSCE. Pass/fail.

   Learning Objectives:
   1) At the conclusion of the session the learner will be able to discuss the normal sequence of events for a standard uncomplicated general anesthetic induction and airway management.
   2) At the conclusion of the session the learner will be able to identify some potential patient history and physical exam findings that may complicate induction of general anesthesia and airway management.
   3) At the conclusion of the session the learner will be able to optimize induction of general anesthesia and airway management in the setting of some common minor complicating factors.

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### Evaluations and Grading

The IDPT 7050 grade is broken down between Clinical Performance and Cognitive Performance:

#### Clinical Performance (50%)

- Clinical Team Assessment 50%

#### Cognitive Performance (50%)

- Written Exam 20%
- Informed Consent Thread 10%
- Student Presentation 7.5%
- Professionalism 5%
- OSCE 4.5%
- Anesthesia Quiz 3%

100%

The Block Co-Directors use the combination of clinical assessment and cognitive assessment to assign the overall course grade.

- Students should achieve Honors designation for the clinical assessment (must achieve Honors in General Surgery OR Honors in Anesthesia AND Subspecialties) to qualify for a final grade of Honors.
- Students should achieve High Pass designation for the clinical assessment (must achieve High Pass in General Surgery OR High Pass in Anesthesia AND Subspecialties) to qualify for a final grade of High Pass.
- Students receive a final composite evaluation which includes a breakdown of clinical and cognitive performance and summary evaluation comments.
- Grade assignments will be distributed approximately 30% Honors and 30% High Pass with a combined maximum not to exceed 70% of the total grades per School of Medicine Policy.

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### CLINICAL PERFORMANCE

**Clinical Team Assessment 50%**
Members of your clinical teams provide assessments and comments about your performance on the clinical rotations. These assessments reflect your ability to work effectively with peers, residents, staff, and patients. General surgery and anesthesia knowledge, as well as your ability to apply the knowledge to clinical problems, is evaluated. Tardiness and absences from your clinical rotations will affect how your evaluators assess your performance.

The clinical evaluation grade is determined by several components:

- **General Surgery**: 60%
- **Anesthesia**: 35%
- **Surgical Subspecialties**: 5%

The course grading committee will determine the Clinical Team Assessment grade, using the assessments as completed by your evaluators. The grades are:

- **H** Student demonstrates advanced level of clinical performance and competency based on assessments of clinical course activities
- **HP** Student demonstrates above expected level of clinical performance and competency based on assessments of clinical course activities
- **P** Student demonstrates expected level of clinical performance and competency based on assessments of clinical course activities
- **F** Student does not demonstrate level of clinical performance and competency based on assessments of clinical course activities

The School of Medicine uses the RIME model of assessment. This assessment is designed to demonstrate a student’s growth developmentally during the clinical years. Beginning third year students will fall in the range of Novice Reporter to Reporter stage. Students achieve the level of Interpreter to Novice Manager by the end of their 4th year. In OPC this is used for formative feedback, not for grading.

Assessments are completed in Oasis. Please ask your evaluators if they would be willing to complete an evaluation for you (professional courtesy) and then complete the Weekly Evaluator Assignment in Canvas. Not completing this weekly assignment on time (due Sunday of each week) can result in the loss of a professionalism point.

The final Evaluator List form for listing your evaluators is in your packet. The Evaluator List form with all final evaluators is to be uploaded into Canvas the last Wednesday of the block. This allows the Surgery and Anesthesia Coordinators time to double check the evaluations have all been entered into Oasis, allowing you the greatest opportunity for great evaluations.

Here are some guidelines for specific rotations:

**ANESTHESIA**

**Exempla St. Joseph**
Dr. Propst or Dr. Marzluff will complete a composite assessment. Please give them a list of at least two attendings who you work with during your rotation. keripropst@gmail.com and kmarzluf@gmail.com

**Denver Health Medical Center**
You may ask Dr. Murray to complete a composite assessment or you may ask the faculty/residents with whom you worked. You must have AT LEAST one faculty assessment. aaron.murray@dhha.org
Children’s Hospital of Colorado
Please ask at least one attending and one resident with whom you worked and had good rapport with to complete an assessment. You may ask up to six persons to complete an assessment for you.

University of Colorado Hospital
Please ask at least one attending and one resident with whom you worked and had good rapport with to complete an assessment. You may ask up to six persons to complete an assessment for you.

Veterans Administration Medical Center
You may ask Dr. Beck to complete a composite assessment or you may ask the faculty/residents with whom you worked. You must have AT LEAST one faculty assessment. daniel.beck2@va.gov

Ft. Collins
Dr. Moss will complete a composite assessment. Please give him a list of least two attendings who you worked with during your rotation. wmoss@ncaphealth.com

SURGERY
General Surgery
Please ask six evaluators for your general surgery rotation. You must be evaluated by at least one faculty member, one chief or 4th year resident, and one other resident. The other evaluators may be faculty or residents. Exceptions are noted below.

Denver Health Medical Center
Dr. Alex Morton will complete a composite assessment. Email a list of your general surgery evaluators to Dr. Morton and the DHMC Coordinator. You evaluate all faculty and residents with whom you worked.

Ft. Collins
Dr. Chiavetetta will complete a composite assessment. You evaluate all faculty with whom you worked.

Alamosa and Montrose
The general surgeons with whom you work will evaluate you. You may have only one evaluator completing a composite evaluation. You evaluate all faculty with whom you worked.

SURGICAL SUBSPECIALTY EVALUATORS
Please note when a composite evaluation is applicable, students still need to give the Coordinators names of faculty and residents they worked with so they can be evaluated in Oasis.

**Burn Surgery:** One faculty member and one resident.
**Cardiothoracic Surgery:** One faculty member or fellow and one fellow or resident (total of two).
**Pediatric Surgery:** Attendings and/or Fellows (minimum of two).
**Reconstructive and Plastic Surgery:** One or two faculty or fellow (one is required).
**Transplant:** Attendings and/or Fellows (minimum of two).
**Urology:** Attending or chief resident and one other resident (total of two).
Vascular Surgery: An Attending and the fellow/chief resident (total of two).

COGNITIVE PERFORMANCE

Written Examination - 20%
- The NBME Shelf Exam for Surgery and surgical subspecialties is taken on the computer on the last day of the course. It is 110 questions (includes 10 BETA questions) and the student must get 58% of the questions correct in order to pass. The NBME Surgery Shelf exam allows you two and one-half hours for the exam. If you fail the Surgery Shelf exam, you will be given an IP and will have the opportunity to retake the NBME Surgery Shelf exam per school policy. If you pass on the second attempt, you will get a Pass (not eligible for High Pass or Honors). If you fail again, the highest possible grade would then be Pass with Remediation (PR).

Professionalism – 5%
Participation and attendance are essential components of this course. Course activities requiring your on time attendance include but are not limited to:
- Orientation
- Monday morning didactics
- Breast clinic at UCH, if assigned
- Assigned time at Denver Health emergency room
- Mid-Point Feedback meeting/end of course Town Hall meeting
- Informed consent session
- PBLD and small group sessions
- Written exam

The informed consent paper, mid-course review form, anesthesia book, and competency log are expected to be turned in by the deadlines. Failure to follow attendance policies and meet deadlines can result in loss of points for professionalism. If a student has lost 2.5 professionalism points, it becomes mandatory that the student meet with the Course Co-Directors. If a student has lost all 5 professionalism points, there will also be communication with the Student Life Office putting this student on their radar. This loss of professionalism points could influence the student’s overall grade. If a student has lost all 5 professionalism points and continues to have late assignments, points can also be deducted from the points appropriated to the paper.

Students are expected to:
- Contact the appropriate block faculty and student life for all voluntary and involuntary absences.
- Check email and Canvas regularly for communication about block activities and updates. Respond within 24 hours to all block emails requiring individual student response.
- Attend all block conferences and required events and arrive on time to these events.
- Complete all required coursework and evaluations.
- Use smart phones and electronic tablets with discretion.
- Wear professional dress.

Informed Consent – 10%
Required Written Assignment: - Case Presentation Outline -worth up to 10 points
Student must pass this element (receive 6/10) to pass the Perioperative Block. Assignments receiving a 5 or below must be rewritten and the final grade can only receive a total of 8/10 (2 points will be deducted for the rewrite.). Specific rubric located on Canvas.

Grades assigned for IDPT 7050 are:

- H Student demonstrates advanced level of performance/competency in course requirements.
- HP Student demonstrates above expected level of performance/competency in course requirements.
- P Student demonstrates expected level of performance/competency in course requirements.
- F Student does not demonstrate expected level of performance/competency in course requirements.
- PR Student demonstrates expected performance/competency in the course requirements after remediation.
- IP Student is unable to or does not complete course requirements during time allotted for the course.

To be eligible for overall Honors, student must have Clinical Honors in General Surgery or in both Anesthesia and Surgical Subspecialties.

School of Medicine policy limits the number of students awarded Honors and High Pass to no more than 70% over the academic year.

Per School of Medicine policy, grades are not calculated for students who do not complete evaluator, course, and site evaluations. An IP grade will be recorded until the student completes evaluations of the course, site, and faculty and residents, due two weeks after the end of the course.

All grades remain permanently on the student’s transcript except IP and I, which are replaced with the appropriate grade after the student has completed the course requirements.

GRADE REVIEW:

After all grades are assigned for the academic year, the course directors and co-directors will meet in June 2020 to review grades for the past academic year to determine IF grades can be raised for some students. If you wish to have your grade reviewed, please email the course coordinators within thirty days after you receive your grade notification. Include any information you wish to be considered. This grade review is different and separate from the grade appeals process, covered in the next section below. Requesting a grade review does not constitute a formal grade appeal.

GRADE APPEALS POLICY

The School of Medicine is committed to the ideal of academic freedom and so recognizes that the assignment of grades is a faculty responsibility. The School also recognizes that students have the right to appeal a final grade or any other academic decision. The School of Medicine has a responsibility to respond to such an appeal in a judicious and timely manner.

Criteria for Appealing a Grade
A student may appeal a final Block or Course grade on the grounds that:

1. 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
2. The faculty applied the grading criteria unfairly.

**Procedures**

Any student wishing to appeal a grade must initiate the process **within 30 calendar days** of receiving the disputed grade. An appeal letter should be sent to the Co-Course Directors identifying the Course and the grade being appealed, stating the reason(s) for the appeal, and specifying the requested change. Students are encouraged to discuss the appeal informally with the Co-Course Director(s) before submitting a formal appeal.

The Course Co-Director(s) will meet with the student to discuss the appeal within 15 calendar days of receipt of the appeal letter. Before the meeting, the student should provide the Block/Course Director with copies of all materials pertinent to the appeal, such as the Block/Course syllabus, papers, tests, write-ups, etc.

If, after meeting with the student and consulting with faculty responsible for assigning the grade, the Course Co-Directors determine that a change of grade is warranted, then the Course Co-Directors will change the grade in a timely manner. If the Course Co-Directors determine that a change of grade is not warranted, they must notify the student within 5 calendar days.

The student may appeal the decision of the Course Co-Directors to the Assistant Dean of the Clinical Core, by forwarding copies of all correspondence related to the appeal to the appropriate Assistant Dean, Curriculum, within seven calendar days of the Course Co-Directors ruling. The Assistant Dean, at his/her discretion, may meet with the student, the faculty, or the Course Directors, and may consult with the Course/Block Director Committee before making a ruling.

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.

**Hazard Exposure/Needlestick**

Posted on Canvas for OPC Course as well as delineated below.


At ALL clinical sites (exceptions below), if you experience a needlestick, sharp injury, blood/other body fluid exposure, or any other hazardous exposure, immediately follow these steps:

1. **Wash** needlesticks/cuts with soap and water
2. **Flush** splashes to the nose, mouth, or skin with water
3. **Irrigate** eyes with clean water, saline, or sterile irrigants
4. **Report** the incident to your supervisor
5. Go to the nearest **Emergency Room**
6. Questions: Call UCH ID Clinic 720-848-0191
Exceptions:

1. **University of Colorado Hospital**, 8-4pm, Monday-Friday, go to the Infectious Disease Clinic, 7th Floor. Phone: 720-848-0191. Use Emergency Room after hours.
2. **Denver Health Medical Center**, 8-3:30pm, Monday-Friday, go to Occupational Health and Safety Center, 6th and Bannock, 4th floor. Phone: 303-436-7155. Use Emergency Room after hours.
3. **Children’s Hospital of Colorado**, 7-4:30pm, Monday-Friday, go to Occupational Health Services, B260. Phone: 720-777-6577. Use Emergency Room after hours.
4. **Veteran’s Affairs**, 8-4pm, Monday-Friday, go to Occupational Health 1055 Clermont St. Phone: 720-777-2330. Use Emergency Room after hours.
5. **Memorial Hospital Colorado Springs**, 7:30-5pm, Monday-Friday, go to Occupational Health 175 S. Union Blvd Ste. 315. Phone: 719-365-6840. Use Emergency Room after hours.

Next Steps:

1. The University of Colorado provides workers’ compensation coverage for students who have a needlestick, sharps injury, blood/other body fluid exposure or any other hazardous exposure.
2. University Risk Management is responsible for payment. Send bills to: University Risk Management, 1800 Grant Street, Ste. 700 Denver, CO 80203.
3. File a claim within 4 days with University Risk Management at www.cu.edu/risk/incident-procedure.
4. For follow-up on exposure, go to one of the Designated Medical Providers listed online.

How to pick rotation site and subspecialty

A Survey Monkey is sent out six-seven weeks prior to the start of the block requesting your choices. Every effort is made to give the student their top choices, however, if there are more students than spots at a given location, a lottery method is used in the selection process.

Logger

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:

Clinical Logger Requirements

- Update the Logger at least once weekly.
- Only required to log a required clinical condition once during the block in which it is required.
- Log honestly, including truthfully reporting duty hours and patients seen.
- Provide the logger to the clerkship director or their designee via Canvas at the midpoint and end of a block, or at the end of the block for blocks less than 4 weeks in length.
Duty Hour Requirements

In addition to your clinical responsibilities, students are required to complete Phase III Foundations of Doctoring course requirements and occasional activities mandated by the Dean of Student Affairs. The CUSOM has developed a medical student “duty hours” policy based on the policy requirements for residents.


The CUSOM duty hour policy for medical students applies to all clinical sites providing education to medical students.

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:

- Students will not work more than 80 hours per week when averaged over four weeks.
- Students will have a minimum of one day in seven off, when averaged over four weeks.
- 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.
- Students should have 8 hours free of duty between work shifts.
- After a 24-hour shift, students should have 14 hours free of duty.
- 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.

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 Sunday, the survey will have one question that will ask the students to enter the number of hours they worked that day.

On 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:

- Students will not work more than 80 hours per week when averaged over four weeks.
Students will have a minimum of one day in seven off, when averaged over four weeks.
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.
Students will have 8 hours free of duty between work shifts.
After a 24-hour shift, students will have 14 hours free of duty.
Students will not have more than every 3rd night on call (excluding rotations in which students are working consecutive night or swing shifts and have days off)

(Comment box if any boxes checked): 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 3 Coordinator will monitor survey completion of the duty hour logs during the week and ensure completion. 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:

Students will not work more than 80 hours per week when averaged over four weeks.
Students will have a minimum of one day in seven off, when averaged over four weeks.
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.
Students will have 8 hours free of duty between work shifts.
After a 24-hour shift, students will have 14 hours free of duty.
Students will not have more than every 3rd night on call (excluding rotations in which students are working consecutive night or swing shifts and have days off)

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 or Duty Hours will be deemed a violation of the Student Honor Code and be referred to the Student Honor Council for further discussion.
• 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.

Professionalism - Student Expectations of Professionalism

Academic Honesty Statement

Students are expected to adhere to the Honor Code of the University of Colorado School of Medicine which states that students must not lie, cheat, steal, take unfair advantage of others, nor tolerate students who engage in these behaviors. Please check the website for information on the Medical Student Honor Code.

http://www.cuanschutz.edu/academics/colleges/medicalschool/education/studentaffairs/AcademicLife/HonorCouncil/Pages/default.aspx

Students are also expected to:

- Contact the appropriate block faculty and student life for all voluntary and involuntary absences.
- Check email and Canvas regularly for communication about block activities and updates. Respond within 24 hours to all block emails requiring individual student response.
- Attend all block conferences and required events and arrive on time to these events.
- Complete all required coursework and evaluation.
- Use smart phones and electronic tables with discretion
- Wear professional dress.

Reporting Issues of Professionalism of Others:

The Office of Professional Excellence exists to provide faculty, residents, fellows and students a resource on campus to obtain a fair and equitable treatment for all matters. Under appropriate circumstances, the office can serve as an advocate for fair and equitable treatment for faculty, residents, fellows, and students and can facilitate safe reporting of mistreatment or abuse.

The Office is available to help faculty, residents, fellows, and students with all issues and concerns and provides consultations, short-term coaching, counseling, referrals, alternative dispute resolution and facilitation. The Office can also assist faculty, students, and staff members in preparation for various meetings and conversations.

The services of the Office of Professional Excellence are provided free of charge.

Contact the office by emailing Abigail Lara, MD at ABIGAIL.LARA@CUANSCHUTZ.EDU, Jeff Druck, MD at JEFFREY.DRUCK@CUANSCHUTZ.EDU or Josette Harris at JOSETTE.HARRIS@CUANSCHUTZ.EDU. You can also report by phone at 303-724-4PRO (4776) or through the website at http://www.cuanschutz.edu/about/departments/Professionalism/Pages/default.aspx. Offsite and onsite visits are by appointment only. Building 500, 8th floor, room 8000C.

Mistreatment

If a student feels that he or she has been subject to mistreatment in the learning or clinical environment, there are a variety of options for reporting. We recognize that students may differ in how they want to address this issue, and we seek to provide a wide array of reporting options.
Please check the website for information and reporting in regards to mistreatment vs. suboptimal learning.

http://www.cuanschutz.edu/academics/colleges/medicalschool/facultyAffairs/Professionalism/Pages/DefinitionsExamples.aspx

Communication
The preferred methods of communication during OPC clerkship include:

Email: For non-urgent issues e-mail is the preferred method of communication. If urgent or after hours, you can page Course Directors.

Canvas: Canvas is used as the main source of information for this course. Please be sure to have your notifications turned on as announcements are made from Canvas. Assignments are uploaded by the student into Canvas. Various lecture and small group evaluations, as well as the Anesthesia/Informed Consent quiz are administered through Canvas. The course calendar is located in Canvas. AHEC students will participate in Monday morning didactics via Zoom in Canvas. Panopto recordings of lectures are also available.

Laptop and Mobile Device Usage: Students are required to bring laptop or tablet to Orientation and are encouraged to bring them for Monday morning didactics.

Library-supplied online databases and collections. If you assign research projects, describe your expectations for students to be able to successfully use library resources. For your student presentation please use HSL resources to access journal articles.

Attire
No scrubs in clinic unless specifically told otherwise at your site. White coats should be worn. Business attire for outpatient business.

Foundations of Doctoring Curriculum (FDC)
You will continue with the longitudinal Foundations of Doctoring Course while completing your clinical rotations in Phase III. You are required to attend a minimum of 10 sessions (40 hours) with your preceptor during Phase III. These sessions may occur at your discretion and during any of the blocks. Your block directors and clerkship teams are aware of your preceptorship requirements so please work with them to determine the best time to attend preceptor sessions. You will be excused from clinical duties while attending preceptor sessions. Please be considerate of the time you are away from each clerkship and attend NO MORE than 2 sessions during the 4-week blocks and 3 sessions during the 6-or 8-week blocks. You cannot miss required clerkship activities or go over duty hours to attend preceptor sessions.

You are also required to attend two Hidden Curriculum sessions during the clinical blocks (June & October) and IPE Clinical Transformations Simulation during the HAC block. These sessions are required but do not count as a preceptor session.

Please refer to the FDC syllabus for further details.
Course Calendar
Posted on Course Canvas site.