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Undergraduate Medical Education (UME) Program

2022-2023 NOSM Phase 3 (Year 4)

Clinical Educator Highlights

NOSM Phase 3 Clinical Educator Highlights

Phase 3 Overview

Phase 3 (Year 4) of the Undergraduate Medical Education program takes place at the academic health sciences centres in Sudbury or Thunder Bay.

There are 6 core rotations in the following specialties:

- Surgery
- Internal Medicine
- Children's Health
- Women's Health
- Mental Health
- Emergency Medicine

The remainder of clinical time is spent doing electives, in order to decide on a career path, prepare for CaRMS, and gain valuable clinical experience.

Phase 3 Directors and Clerkship Leads

The Assistant Dean of Clinical Education is Dr. Tara Baldisera (tbaldisera@nosm.ca). The current interm Phase 3 Co-Director is Dr. John Coccimiglio (jcoccimiglio@nosm.ca). They oversee the delivery of the Phase 3 curriculum.

There is a clerkship lead for each core rotation in Sudbury and Thunder Bay. They ensure a high-quality educational experience and that medical students are fulfilling their academic obligations during each core rotation. The clerkship leads are as follows:

Core Rotation	Sudbury Clerkship Lead	Thunder Bay Clerkship Lead
Surgery	Dr. Richard Benedict	Dr. Allan Kirk
	rbenedict@hsnsudbury.ca	aakirk1@shaw.ca
Internal Medicine	Dr. Sandra Cameron	Dr. Saleem Malik
	sjcameron@hsnsudbury.ca	smalik@shawbiz.ca
Children's Health	Dr. Tara Baron	Dr. Linda Bakovic
	tbaron@nosm.ca	lindabakovic@gmail.com
Women's Health	Dr. David Huneault	Dr. Andrew Siren
	huno.d9@gmail.com	andrew_siren@hotmail.com
Mental Health	Dr. Angelita Sanchez	Dr. Renee Vachon
	asanchez@hsnsudbury.ca	vachonr@tbh.net
Emergency Medicine	Dr. Louise Logan	Dr. Meghan Garnett
	loulogan@gmail.com	mgarnett@nosm.ca

Rotation outcomes and resources can be found on MyCurriculum: https://learn.nosm.ca/moodle/

Core Rotation Assessments

There are 2 assessment forms for each core rotation. The **Early Rotation Feedback Form** is used partway through the rotation to provide formative feedback to the student on their performance up to that point. While feedback may be verbal, it is preferred that it occur both verbally and in writing using the **Early Rotation Feedback Form**. The exception to that is Internal Medicine, which has chosen to use a weekly assessment form to provide written feedback. Any concerns or areas for improvement during the first half of the rotation should be identified on the **Early Rotation Feedback Form** so that students have an opportunity to improve.

The **End of Rotation Assessment** is completed on Elentra at the end of the rotation to provide summative feedback to the student on their performance. Comments on the **End of Rotation Assessment** form part of the Medical Student Performance Record, which becomes part of their CaRMS application to residency programs.

These forms may be filled out by the primary preceptor working with the student, or the clerkship lead based on input from all faculty who interacted with the student. Assessments must be submitted within 6 weeks of the end of rotation to comply with accreditation.

Required Clinical Learning Experiences (RCLEs) 6.2's

Required Clinical Learning Experiences (RCLEs) 6.2's are clinical conditions and procedures that medical students are expected to encounter during their rotations. Students log these on their own. Students and preceptors must discuss how the students are progressing on their RCLEs at the mid-rotation and end-of-rotation assessment. Completion of the RCLEs for any given core rotation is not a requirement to pass the rotation, as outstanding experiences may still be obtained during other core rotations or electives.

RCLEs are a requirement for medical school accreditation. On the core rotation **Early Rotation Feedback Form** and **End of Rotation Assessment**, faculty members will be asked if they reviewed the RCLEs with the medical student – It is imperative that you have discussed them, and then answer "yes" to the following question:

Student log of Standard 6.2 – Required Clinical Learning Experiences (RCLEs) reviewed or discussed with the student by you or another faculty member?

Direct Observation of Clinical Skills (DOCS)

Medical students are required to complete two **Direct Observation of Clinical Skills** (DOCS) assessments on each core rotation, where an assessor directly observes a clinical encounter. One DOCS must be a history, and the other DOCS must be a physical exam (or a mental status exam on Mental Health). During Phase 3, the assessor may be a faculty member or resident, as long they have directly observed the clinical encounter. Medical students select the clinical encounter they wish to be observed and assessed on.

The competencies that may be assessed during the clinical encounter include history taking, physical examination, communication skills, professionalism, clinical judgement, counselling, organization/efficiency, and overall competence. The assessment of the student's performance on these competencies is formative. The DOCS must be submitted in Elentra.

Journal Club

During each core rotation, students are expected to participate in Journal Club. Journal Club is lead by one medical student, supervised by a faculty member, and lasts approximately one hour. The medical student leading Journal Club is expected to perform a critical appraisal of a clinically relevant journal article. Each student will take a turn leading Journal Club throughout the year.

Medical students should follow the guidelines for presenting Journal Club as outlined in the required reading article by Schwartz et al.¹, and can access additional resources to help structure their presentation on NOSM MyCurriculum. For example, medical students may use one of the worksheets included in the JAMA Users' Guides to the Medical Literature² for each type of article.

The lead medical student should distribute a copy of the article to all Journal Club attendees and the preceptor at least one week in advance. The lead medical student should prepare a one-page summary of the journal article for the group. Following a brief presentation, the medical student will lead a discussion on the key clinical and methodological issues arising from the journal article. It is expected that all members of the group will have read and critically appraised the article prior to attending Journal Club, in order to actively contribute to the discussion.

The following types of articles should be covered during each core rotation:

Core Rotation	Type of Article	
Surgery	Student's choice	
Internal Medicine	Therapy article	
Children's Health	Student's choice	
Women's Health	Clinical practice guidelines	
Mental Health	Prognosis article	
Emergency Medicine	Diagnostic test article	

The faculty member supervising Journal Club will complete the **Phase 3 Theme 3 Student Assessment: Journal Club** form. This form must be submitted in Elentra.

Elective Assessments

There is one assessment form for electives entitled **Elective Assessment Form**, which must be completed at the end of each elective by the primary preceptor.

DOCS are not required during electives. RCLEs may be logged from elective experiences, but are not required to be reviewed by the preceptor.

Mistreatment

All individuals who interface with NOSM have the right to work and learn in an environment that is free from discrimination and harassment. For further information, please refer to the NOSM **Discrimination and Harassment Policy and Procedures**, by visiting https://culture.nosm.ca/mistreatment/. Concerns about mistreatment can be reported to any NOSM faculty or staff member, or confidentially to directorlearnersupportservices@nosm.ca.

Written Examinations

There are four Quarterly Progressive Assessments (QPAs) which take place during Year 4. The QPAs are formative, with the goal of preparing the medical students for the Medical Council of Canada Qualifying Examination (MCCQE) Part 1.

Students must be excused from clinical duties at 17h00 the evening prior to the exam. If the exam is in the afternoon, they may attend clinical duties the morning of the exam and return to clinical duties after the exam is finished.

Administrative Contacts

The administrative contacts for Phase 3 are as follows:

Administrative	Contact	Email
Phase 2 & 3 Clerkship Coordinator	Claudia Rocca	clerkship@nosm.ca
HSN UME Academic Affairs	Marilyn Hamel	mhamel@hsnsudbury.ca
TBRHSC UME Academic Affairs	Jane Varley	varleyj@tbh.net

Further information about Phase 3, including assessment forms, curriculum, and policies mentioned in this document, can be found at https://www.nosm.ca/mynosm/. You will require your NOSM username and password to access these documents.

NOSM Information Technology

NOSM Information Technology (IT) Helpdesk is available during business hours to provide technical support for undergraduate medical education.

Their contact information is as follows:

Email	helpdesk@nosm.ca	
Toll-free in Canada	1-800-461-8777	
NOSM at Laurentian	705-662-7120	
NOSM at Lakehead	807-766-7500	

References

- 1) Schwartz MD, Dowell D, Aperi J, Kalet AL. (2007). Improving journal club presentations, or, I can present that paper in under 10 minutes. *Evidence-Based Medicine (English Ed.)*, 12(3), 66-68. doi:10.1136/ebm.12.3.66-a
- 2) Guyatt G, Rennie D, Meade MO, Cook DJ. eds. *Users' Guides to the Medical Literature: A Manual for Evidence-Based Clinical Practice, 3rd ed.* McGraw-Hill; Accessed October 30, 2020. https://jamaevidence-mhmedical-com.proxy.lib.nosm.ca/content.aspx?bookid=847§ionid=69030714