

# Curriculum 2.0: Immersion Phase

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Congratulations!

# Welcome

Immersion Phase Website

<https://medschool.vanderbilt.edu/ume/IP>





# What we'll cover today:

- Program Evaluation & Lessons
- Portfolio Cycles, Promotions, AOA
- Immersion Phase Course Types
- ACE requirements (Student Learning Plan, Practice-based Learning)
- Assessment (milestones, EPAs, Compass, Grading)
- Attendance Policy
- Dual degrees
- Research
- Learning Communities & Foundations of Healthcare Delivery (FHD)
- Ombudsman: Professional Accountability
- Enrollment (Aways, add/drops, special studies, degree audit)
- Preparing for USMLE Step 2 Clinical Skills Examination





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## Use ONE word to describe the Immersion Phase

Respond at [PollEv.com/lourdesestra209](https://PollEv.com/lourdesestra209)

Text **LOURDESESTRA209** to **22333** once to join, then text your message

almostthere #lit exciting confusing  
focused sciatica  
#blessed kwaku great  
angst donewithstep1 smashville  
customizable electives  
unique

Logout



# Curriculum 2.0: Immersion Phase

A highly individualized post-clerkship phase that uses clinical context to build upon prior learning

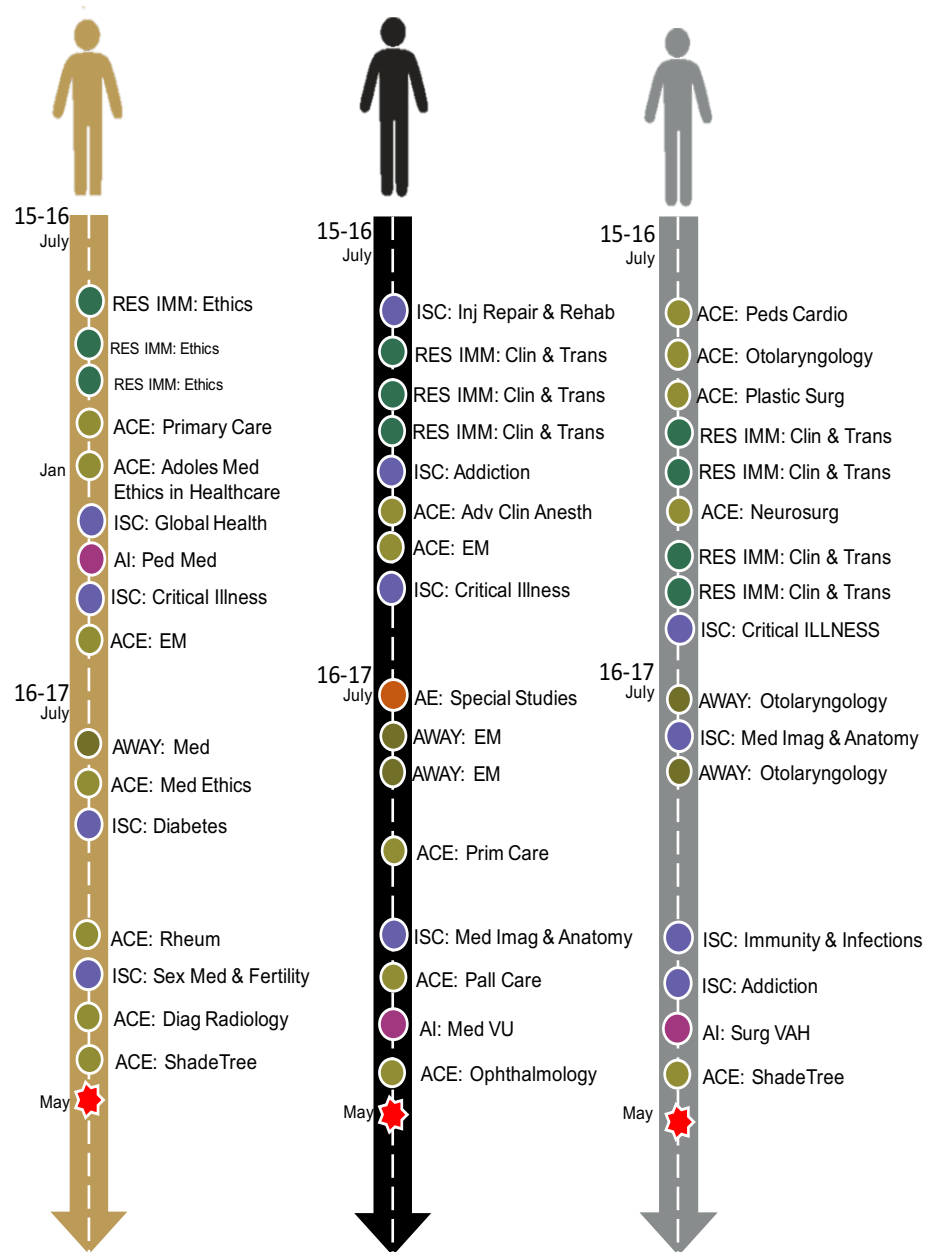


## IMMERSION PHASE GOALS

- Deepen **FOUNDATIONAL SCIENCE KNOWLEDGE** during meaningful clinical engagement
- Solidify **CLINICAL SKILLS**
- Enhance **PRACTICE-BASED LEARNING SKILLS**
- Ensure readiness for **INTERN ROLE/RESIDENCY**
- Expand knowledge and skills regarding **SCHOLARSHIP**
- Further grow knowledge and skills regarding **LEADERSHIP**
- Encourage **PROFESSIONAL DEVELOPMENT**

ITERATIVE  
LEARNING

# Individualization



# What to expect?



# Reminders on your IP Planning Approach

- Plan for a minimum of 2 (max of 3) ISCs
- Acting Internships (AI) will happen between March of Y3 and September of Y4
- Recognize that you will make many changes to your schedule



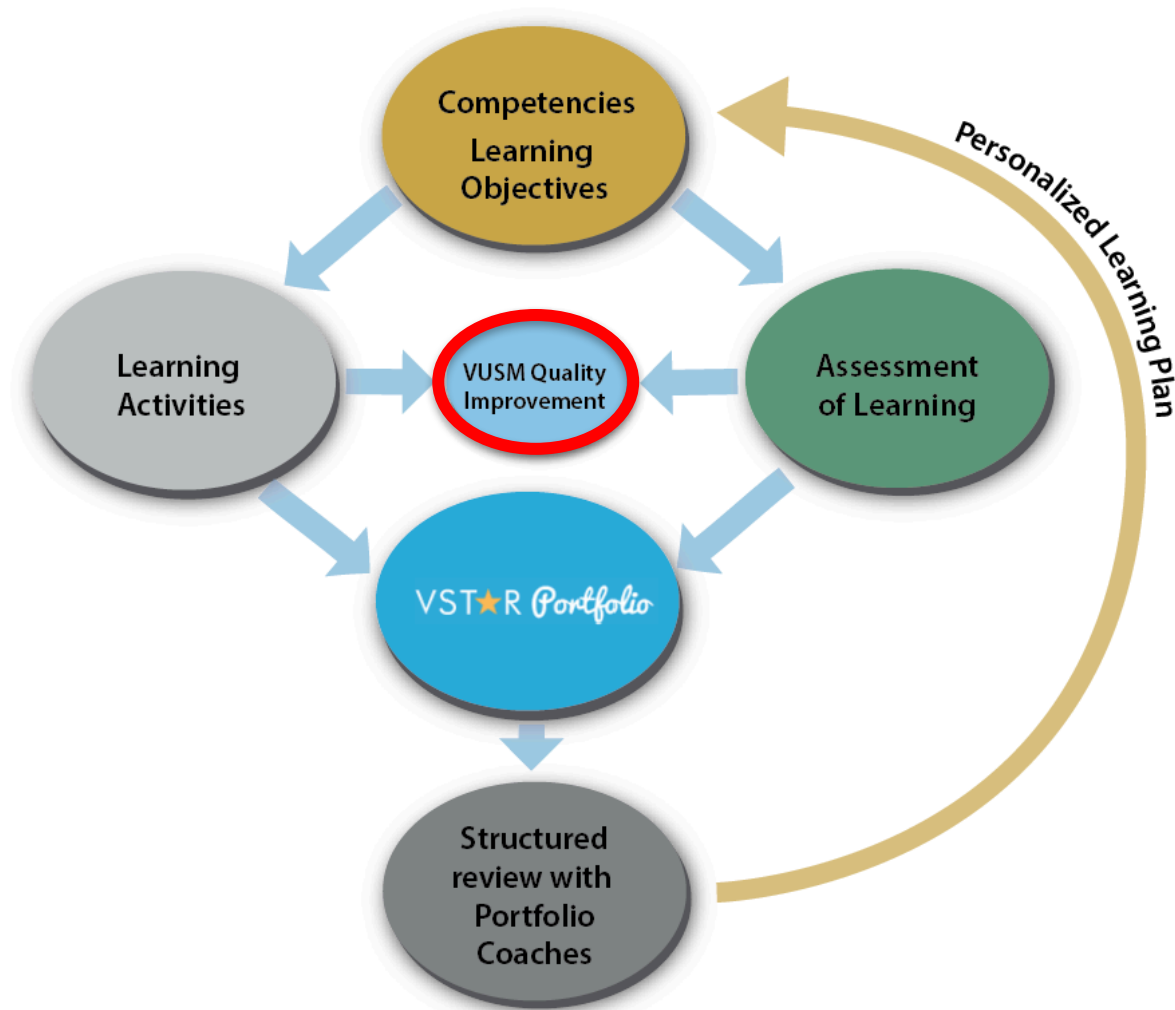
# VA Access

- Students who rotate at the Veteran's Affairs Hospital need to initiate the process to gain computer access at least six weeks in advance of their rotation
- Our team will prompt you four weeks before your rotation to make sure you have started this process
- Details regarding what you need to do: <https://medschool.vanderbilt.edu/ume/va-rotations>





# Program Evaluation & Lessons Learned



# Program Evaluation & Lessons

- Tools
  - Course evaluations data
  - Rapid cycle with student curriculum committee
- How do we use the information?
  - Make improvements, clarify, streamline
  - Protect your privacy



# Exploration

- *“I can just say that the exploring aspect helps me a lot... I came in [to medical school and I] thought I knew what I wanted, and then second year, I just enjoyed so many things [...]*
- *“[...] my first rotation of this year was something that I thought could be what I wanted to do and it was very confirming for me. It was like, “Whoa, this is it.” I wouldn't have known that unless I spent a month doing it.”*
- *“[...] I'm a lot more confident going into my application. I think my personal statement will be better and my confidence in interviews. It's just that I have more of a purpose than I think I would've had with a traditional curriculum.”*

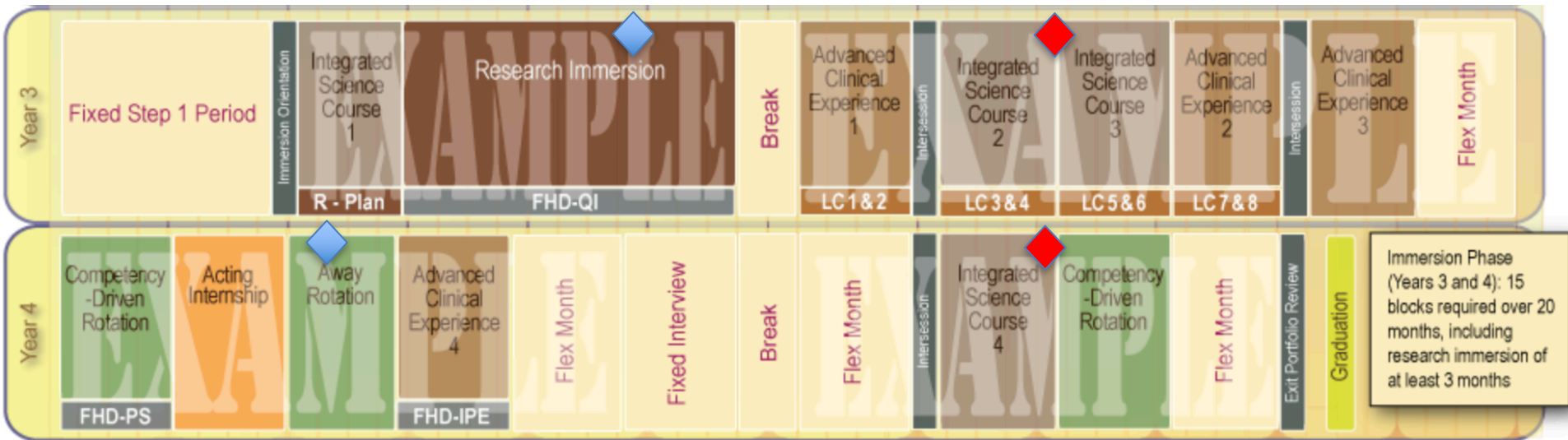


# Professionalism, Portfolio cycles

Dean Amy Fleming



# Portfolio Cycle



# Grades, Promotions & Distinctions

Dr. Geoffrey Fleming





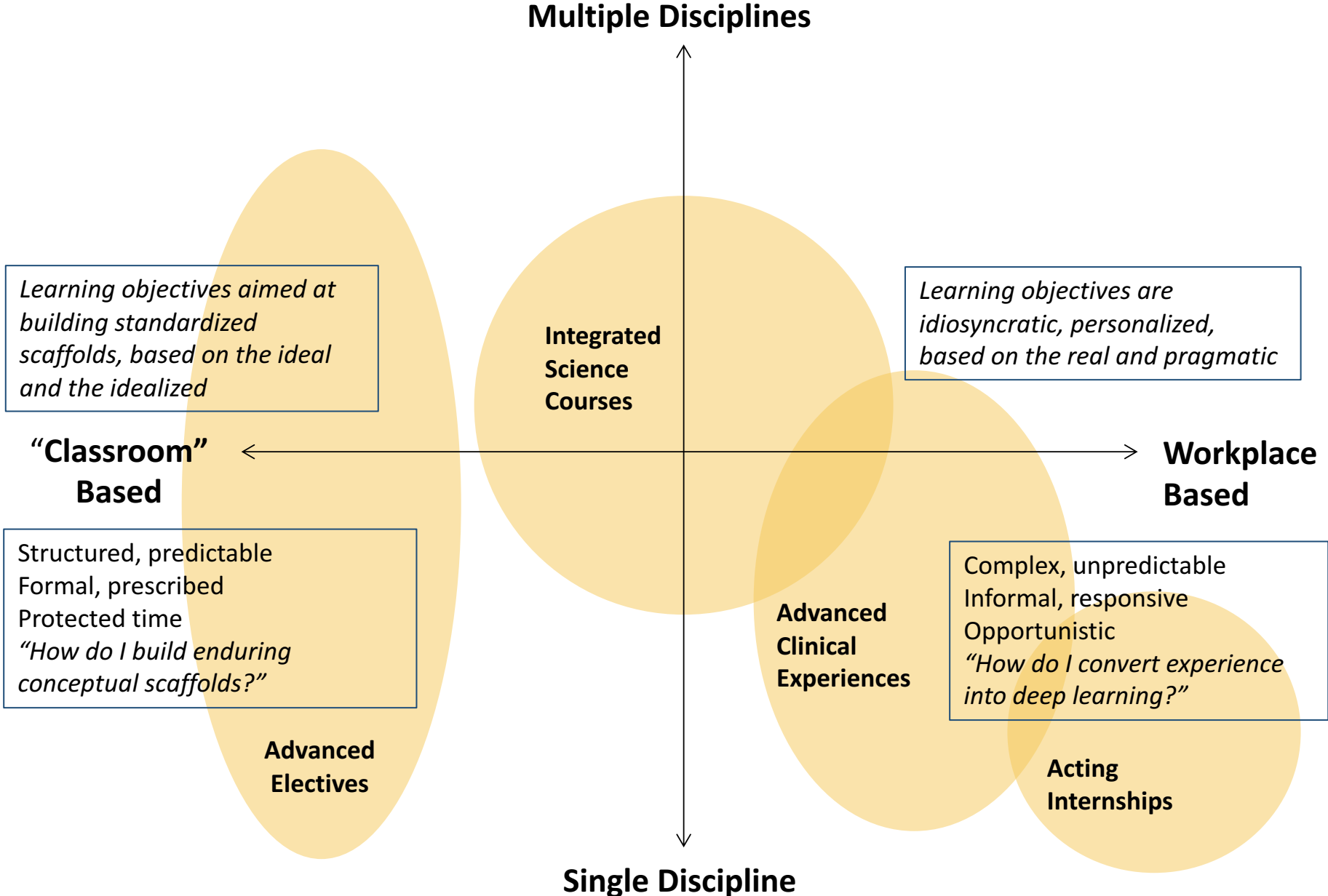
# Course types and what should you expect?

Immersion Phase Website

<https://medschool.vanderbilt.edu/ume/IP>



# Immersion Phase Conceptual Framework:



# Curriculum 2.0: Immersion Phase

*A highly individualized post-clerkship phase that uses clinical context to build upon prior learning*

- Advanced Clinical Experiences (ACE)  
*rigorous clinical rotations*
- Integrated Science Courses (ISC)  
*mixed didactic and clinical experiences*
- Acting Internships (AI)  
*supervised intern-level responsibilities*
- Advanced Electives (AE)
  - *competency- or interest-driven rotations in nonclinical settings*
- Special Studies
  - *competency- or interest-driven rotations*

Existing courses  
in the catalogue

Tailored courses  
not in catalogue



# Advanced Clinical Experiences (ACE)

- 4-week clinical rotations designed to develop clinical and practice-based learning skills
- Common ACE course-type learning objectives
- The **final grade is assigned on an H/HP/P/F** basis based on milestones and formative comments



# Integrative Science Courses (ISC)



- 4-week mixed didactic/clinical rotations designed to reinforce and advance the foundational sciences\* underlying clinical medicine (the why)
- Innovative mixed design with multiple learning activities (CELA, CBL, TBL, lectures, conferences, community clinics, etc.)
- Common ISC course-type learning objectives
- The **final grade is assigned on an H/HP/P/F** basis based on quantitative scores, competency milestones, and formative comments.

*\*traditional pre-clinical sciences as well as social and behavioral sciences, health services and population science, quantitative methods and informatics.*



# Acting Internships (AI)

- An intensive, inpatient experience designed to provide the student supervised intern-level responsibilities.
- All time devoted to this rotation; no longitudinal units (PLAN or LC) can be paired with AI.
- **Final grade will be assigned as H/HP/P/F** based on milestones, Entrustable Professional Activities (EPAs), and formative comments.
- Will be offered March - September.



*In November, we will communicate the process for enrollment.*





# Acting Internships (AI)

- As the Acting Intern, you can expect to:
  - Write daily notes, perform H&Ps, discharge summaries where appropriate.
  - Discuss and enter patient orders, under the oversight of residents where appropriate.
  - Learn how to triage cross-cover concerns where appropriate.
  - Perform handovers under the supervision of a resident where appropriate.
  - Assume ownership of a level of patient census closer to that of an intern.
  - Respond to calls (such as through paging) for patient care needs under the supervision of a physician.



# Advanced Electives (AE)

- 4-week courses that are usually “classroom”-based
- These courses will meet the competency- and interest-driven requirement

AE: Child Abuse Pediatric Medicine

AE: Ethics in Health Care: Theological and Philosophical Perspectives

AE: Forensic Pathology

AE: Fundamentals of Quality Improvement

AE: Global Health

AE: Med School 101

AE: Preparation for Internship

AE: Preparation for Surgical Internship

AE: Students as Teachers

- Final grade will be assigned as P/F



# Special Studies

- Courses that are uniquely designed by the student **in collaboration with Vanderbilt faculty**
- These must be courses not in our current catalog
- Courses must be 4-week long experiences to receive credit with learning goals and multiple assessment modalities
- Fulfill a “competency/interest-driven” requirement
- Final grade will be assigned as **P/F**  
(Exception—7100 AWAY Clinical Rotations graded as H/HP/P/F)
- Enrollment will explain the process for petition and review

Form #	Course
Form 6100	Petition for Clinical Special Study (at VUSM)
Form 6200	Petition for Non-Clinical Special Study
Form 6150	Petition for Research Special Study (at VUSM)
Form 7100	Petition for Clinical Rotation (Away)
Form 7150	Petition for Research Special Study (Away)



# C 2.0 Immersion Phase Requirements

Minimum C2.0 Requirements (in Months)		
On-Campus	4	Integrated Science Courses (ISCs)
	1	Acting Internship (AI)
	4	Advanced Clinical Experiences (ACEs)
On-Campus or Away (away with approval)	3	Research Immersion
	3	Competency and Interest-Driven Rotations (can be ISCs, ACEs, AIs or Electives) <i>*1 must be clinical</i>
15 required months	Must include: 1 Primary Care course (either ACE or ISC) 1 Acute Care course (EM or ICU-based course)	
4+2+1	<i>Flex months (4 + 2 mo for Step 1 + 1 for interviews)</i>	

Impact of Increasing Research Months
<b>3 months of research:</b> Complete 15 course requirements
<b>To extend research beyond 3 months:</b> <i>Student must be in good academic standing and complete an approval process with the Office of Medical Student Research.</i>
<b>4 months:</b> Additional research month fulfills one competency/interest-driven rotation
<b>5 months:</b> Additional research months fulfill two competency/interest-driven rotations
<b>6 months:</b> Additional research months fulfill two competency/interest-driven rotations and requires the use of one flex month

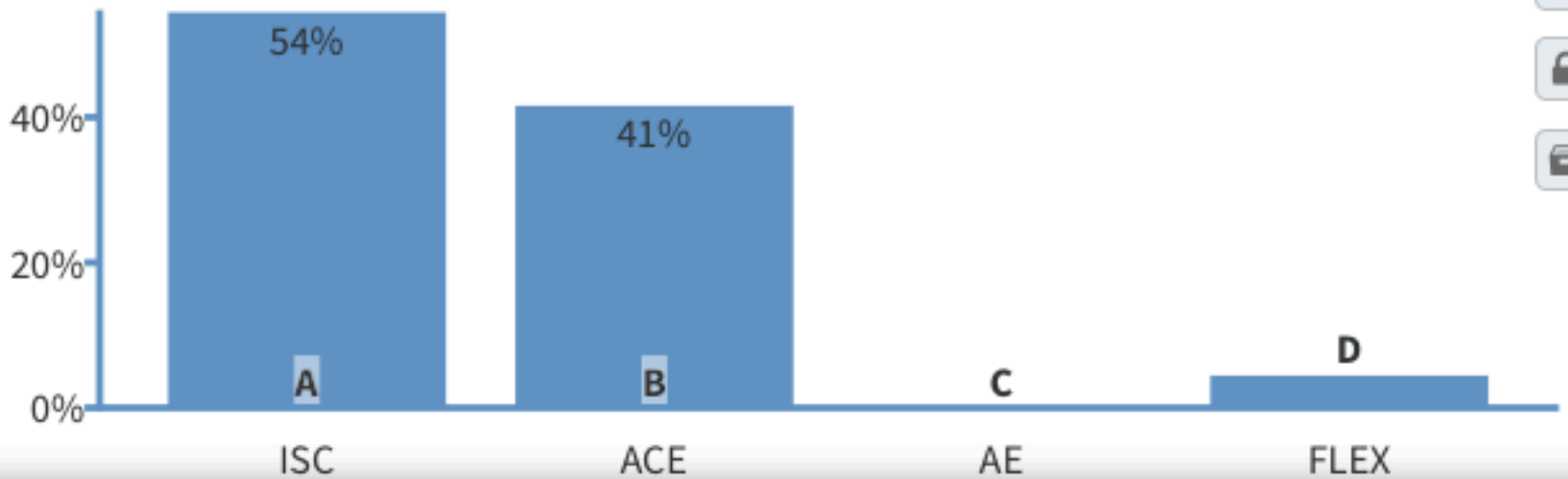
Longitudinal Courses
Foundation of Health Care Delivery (11 units) <ul style="list-style-type: none"> <li>• 6 units taken during intersessions</li> <li>• 5 units take longitudinally, paired with other courses during the Immersion Phase</li> </ul>
Learning Communities (8 units)

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## Which of the following course types will be your first Immersion Phase rotation?

Respond at [PollEv.com/lourdesestra209](https://PollEv.com/lourdesestra209)

Text **LOURDESESTRA209** to **22333** once to join, then **A, B, C, or D**



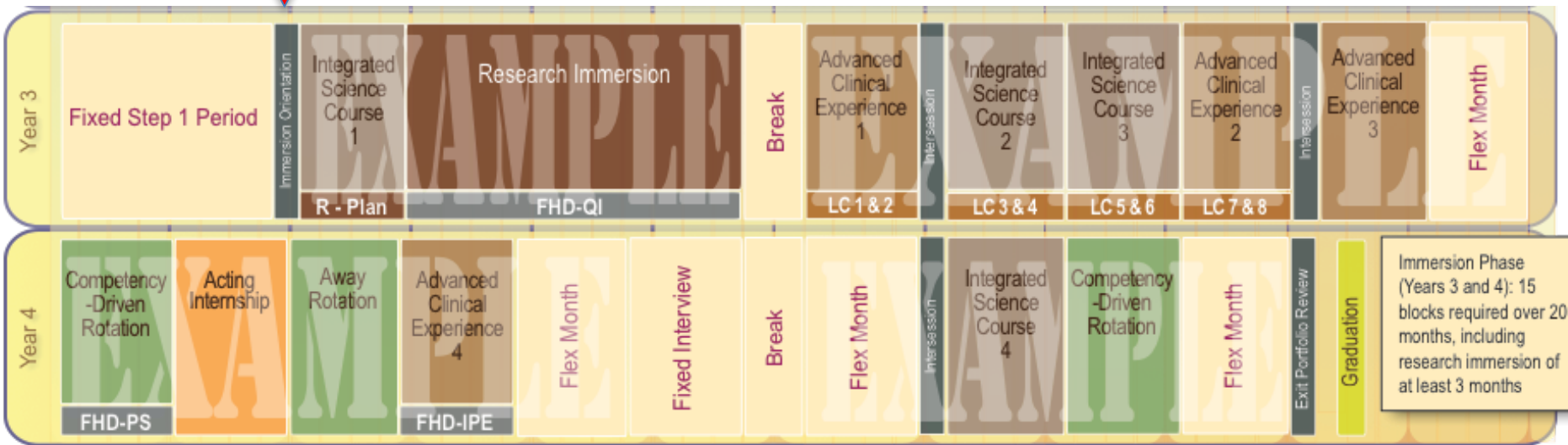
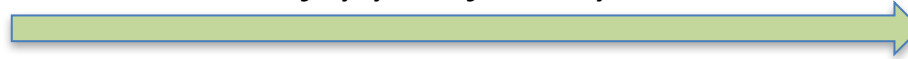
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You are here



Enjoy your journey!

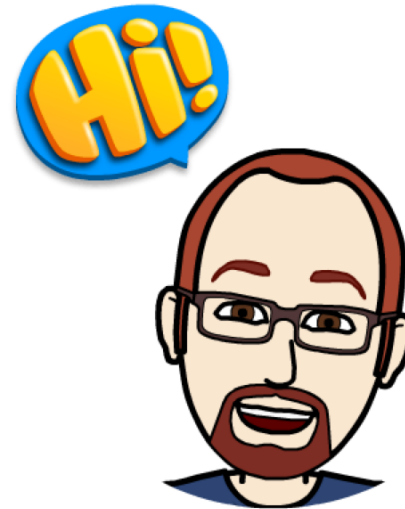


Immersion Phase (Years 3 and 4): 15 blocks required over 20 months, including research immersion of at least 3 months





# ACE Overview



Immersion Phase Website

<https://medschool.vanderbilt.edu/ume/IP>



# ACE Overview

Overarching Goals for ACEs

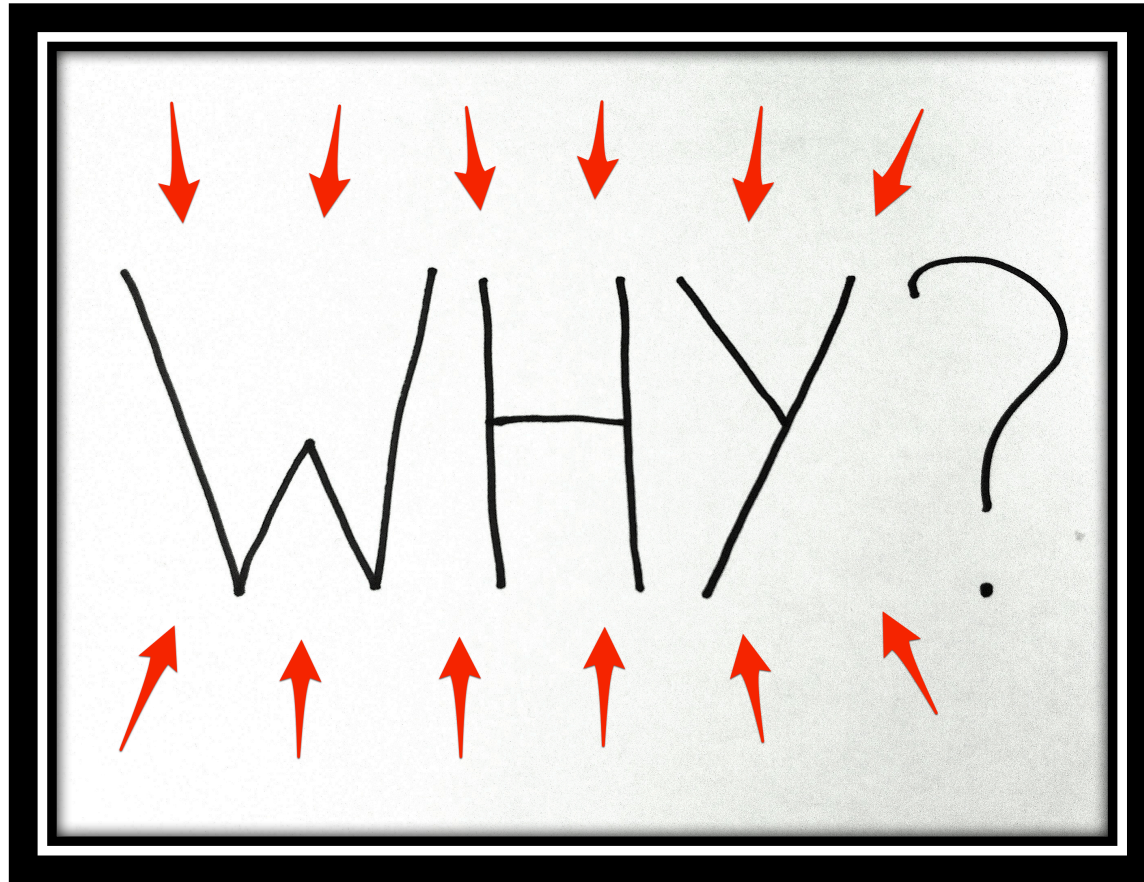
- 1) Solidify Clinical Skills
- 2) Enhance Practice-Based Learning Skills

Focus on Developing Skills:

- 1) Creating and discussing your learning plan
- 2) Practice-Based Learning and Improvement

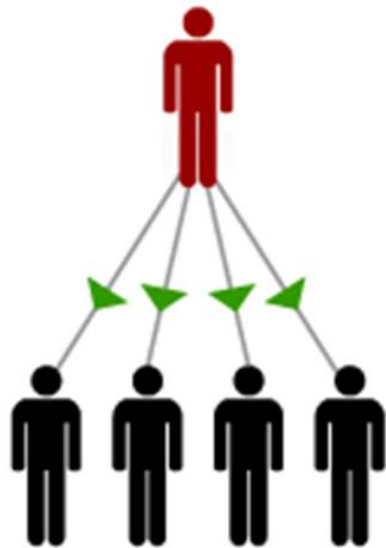


# 1) Student Learning Plan

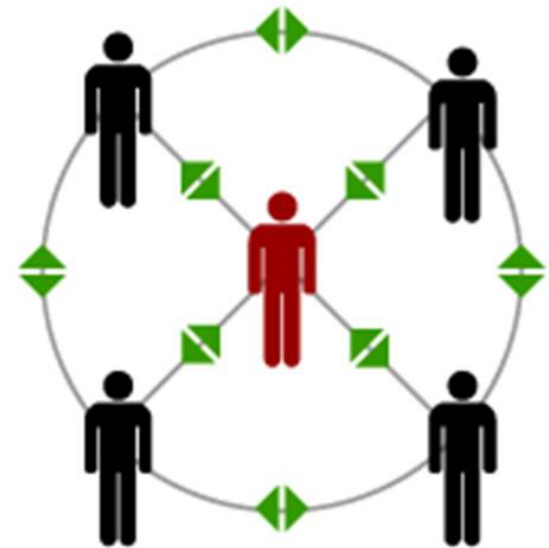


# 1) Student Learning Plan

Teacher Directed



Learner Directed



tension.net



# 1) Student Learning Plan

How To...

1. In VSTAR-Learn, go to the ACE you are about to start
2. Click on ACE Student Learning Plan
3. Fill out the form (next slide)
4. Print the form and take to your ACE Day 1
5. Have a discussion with clinical preceptor (attending, resident)



## ACE STUDENT LEARNING PLAN

Please complete this form, print and take with you to your clinical rotation. This form will facilitate the conversation with the frontline clinical faculty that will provide you with learning experiences and potentially assess your progress.

Advanced Clinical Experiences (ACEs) are rigorous clinical experiences that are designed to:

1. Solidify clinical skills
2. Enhance practice-based learning skills

Please create 2-5 learning goals for this rotation.

1

After you have discussed your learning goals with the frontline clinical faculty, please ask the following questions:

- (1) What clinical experiences would be most helpful to achieve these goals?
- (2) What additional goals do you think I should focus on this month?
- (3) What are your expectations for me during this month?

# 1) Student Learning Plan

## Tips for the conversation with the clinical faculty

1. Have the conversation with whoever will be your primary clinical faculty during week 1 (attending, resident)
2. Initiate the conversation with something like...  
“I am very excited for this rotation and would like to do everything I can to get the most out of it”
3. Be confident but not brash. Be open to feedback and redirection if there are other/different goals they want you to focus on



# 1) Student Learning Plan

## Advantages to the Student Learning Plan Process

- Think Through Your Own Learning
- Develop Shared Expectations with Faculty
- Gain insight into How to Achieve your Goals
- Gain insight into How to be Successful in that Environment
- Develop the habit (VERY LITTLE DIRECTION IN GME)



TAKE OWNERSHIP.



## 2) Practice-Based Learning Exercise

Has been a course requirement  
in each Advanced Clinical  
Experience (ACE)



# Medicine today...

## Continually changing practice context

- Changing patient demographics
- Changing expectations of society/patients/profession
- Increasing rates of chronic disease
- New Diseases/Re-emergence of “old” diseases
- Shifting standards of care and practice guidelines
- Improving health information technology
- Skyrocketing costs
- Advances in medical science → Expanding knowledge base



**What We Do**

**What is Known**

Average time lag of 17 years to translate discovery into clinical practice

Morris et al (2011) *J R Soc Med*



# Medicine today...

- Learning in this environment is different
- Individual patient encounters routinely highlight knowledge gaps for medical students and practicing physicians, but...

 Further investigation often thwarted in the fast-paced clinical environment



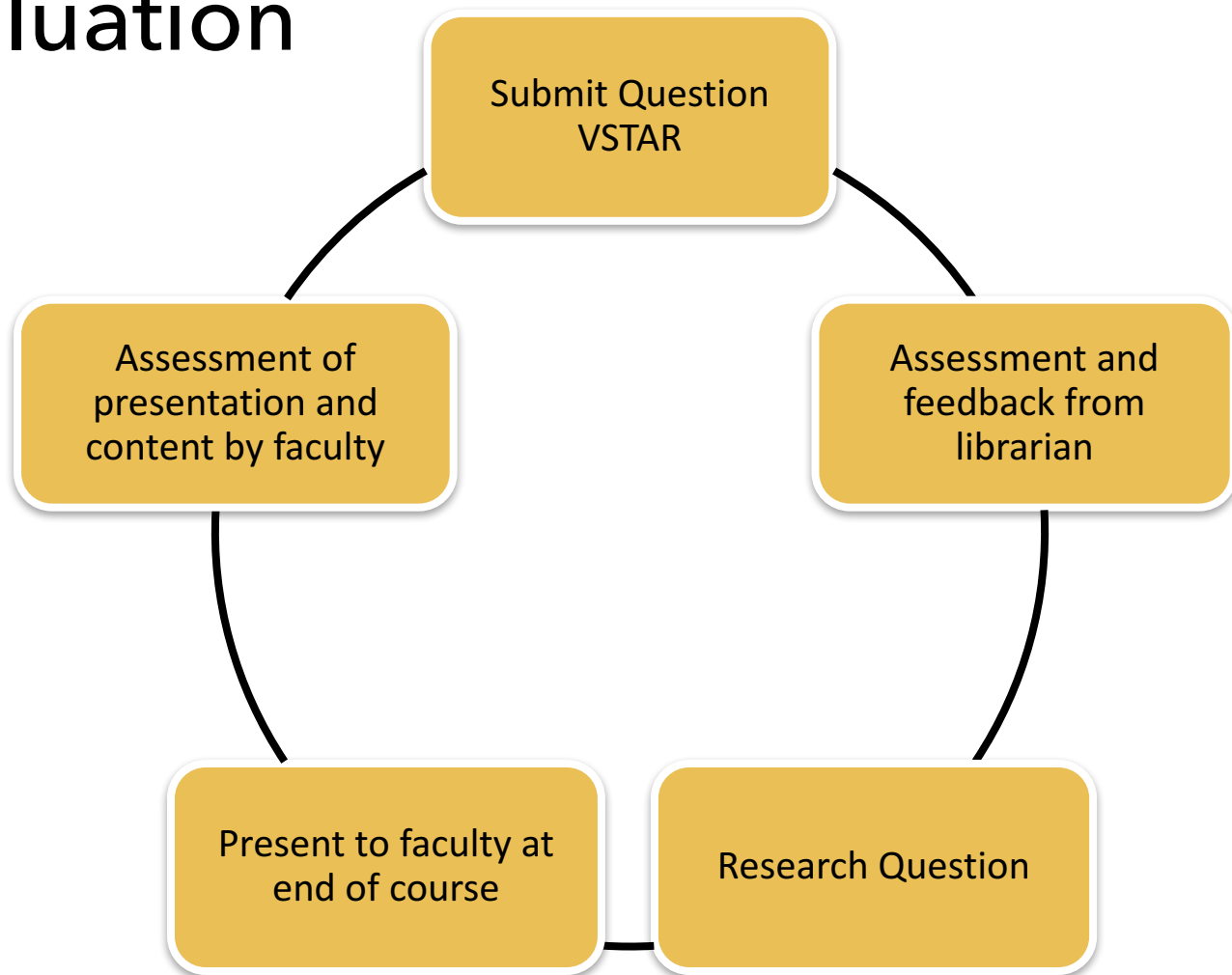
# Learning in the Workplace

- Being able to ask and answer questions that come up in the routine daily care of patients is an essential skill for medical students, residents, and practicing physicians alike.
- This “practice-based learning” was ideally triggered by your patients and hopefully followed up with enough time to truly learn from the experience.

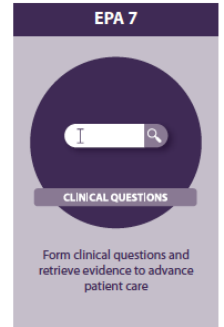
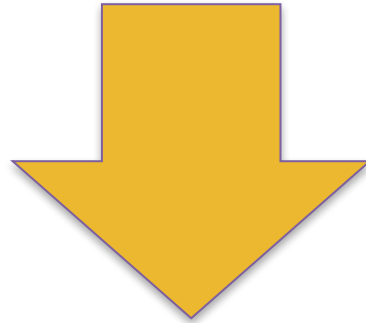


# Assignment Changes Based on Course Evaluation

- The assignment felt like “busy work”... Did not feel authentic.
- Feedback from librarian was not valuable
- Minimal understanding and buy-in from clinical faculty



## 2) Practice-Based Learning Exercise



**EPA 7:** Form a clinical question and retrieve evidence to advance patient care



# What is an EPA?

- Tasks or responsibilities that trainees (i.e. YOU) are entrusted to perform unsupervised once you have attained sufficient competence
- The activities are independently
  - Executable
  - Observable
  - Measurable
- It is our goal for faculty and residents to directly observe your abilities in these areas





# What is an EPA?

- You will continue to be supervised during your medical school activities, but...
- **THE GOAL** is for you to be able to do all of these activities **unsupervised on Day 1 of Residency**



### EPA 1



#### HISTORY AND EXAMINATION

Gather a history and perform a physical examination

### EPA 2



#### DIFFERENTIAL DIAGNOSIS

Prioritize a differential diagnosis following a clinical encounter

### EPA 3



#### COMMON TESTS

Recommend and interpret common diagnostic and screening tests

### EPA 4



#### ENTER ORDERS

Enter and discuss orders and prescriptions

### EPA 5



#### DOCUMENT ENCOUNTER

Document a clinical encounter in the patient record

### EPA 6



#### ORAL PRESENTATION

Provide an oral presentation of a clinical encounter

### EPA 7



#### CLINICAL QUESTIONS

Form clinical questions and retrieve evidence to advance patient care

### EPA 8



#### PATIENT HANDOVER

Give or receive a patient handover to transition care responsibility

### EPA 9



#### INTERPROFESSIONAL TEAM

Collaborate as a member of an interprofessional team

### EPA 10



#### EMERGENT CARE

Recognize a patient requiring urgent or emergent care and initiate evaluation and management

### EPA 11



#### OBTAIN CONSENT

Obtain informed consent for tests and/or procedures

### EPA 12



#### PERFORM PROCEDURES

Perform general procedures of a physician

### EPA 13



#### SAFETY AND IMPROVEMENT

Identify system failures and contribute to a culture of safety and improvement

# STEP 1: a Clinical Question

- As you go through the ACE, pay attention to the different questions that come up related to your patient care.
- Identify a real knowledge gap in caring for an actual patient
- Pick a gap and generate a well-formed **PICO** question to address the knowledge gap
  - **P**atient-**I**ntervention-**C**omparison-**O**utcome



## STEP 2:

ACQUIRE

## Evidence

- Find evidence to find the answer(s) to the question
- Select an appropriate resource to answer the question (Summary/Guideline vs. Pre-synthesized resource vs. Primary literature)



# STEP 3:



APPRAISE

# Evidence

- Identify both strength(s) and weakness(es) of the selected study
- Cite evidence applicable to the patient



# STEP 4:

## ADVISE

- Verbalize clear recommendation(s) to the provider(s) for practice based on study findings
  - Attending, resident, team
  - During rounds or one-on-one discussions



# STEP 5: Request Assessment via Compass

Embedded in the standard VSTAR-Portfolio activity for each ACE

## **EPA7: Form a clinical question and retrieve evidence to advance patient care**

1. In supervising this student in ASKING and ANSWERING this clinical question, how much did you participate in the task?
  - I did it
  - I talked them through it
  - I directed them from time to time
  - I was available just in case
2. With regards to the student's ability to FORM a clinical question and RETRIEVE evidence that **would actually change a patient's medical care**, which would you most likely tell them...
  - I'll double check all of your findings
  - I'll double check your key findings
  - I feel comfortable acting on your findings without checking.
3. What does this student need to work on to become more independent or to allow you to act upon their findings?





# VSTAR Learn



Announcements



MED 5785 syllabus 3.30.17 27.1KB Word 2007 document



Required: Student Learning Plan



How to Use Compass 456.9KB PDF document



News forum



IP Absence Request Form 1MB PDF document

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## First Day of Course

Students should page Dr. Oluwole, the course director, at 615-835-5031 to confirm a meeting place for 8:15 am on the first day of the course.

*Additional information can be found in the [IP Catalog \(Google Version\)](#).*

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## Form a clinical question and retrieve evidence to advance patient care

Student participation is expected to include the following characteristics.

### ASK

- Identification a real knowledge gap in caring for an actual patient
- Generation of a well-formed **PICO** question (**P**atient-**I**ntervention-**C**omparison-**O**utcome) to address the knowledge gap

### ACQUIRE

- Use of evidence to find the answer(s) to the question
- Selection of an appropriate resource to answer the question (Summary/Guideline vs. Pre-synthesized resource vs. Primary literature)

### APPRAISE

- Identification of both strength(s) and weakness(es) of the selected study
- Citation of evidence applicable to the patient

### ADVISE

- Verbalization of clear recommendation(s) to the provider(s) for practice based on study findings

# Assessment

Immersion Phase Website

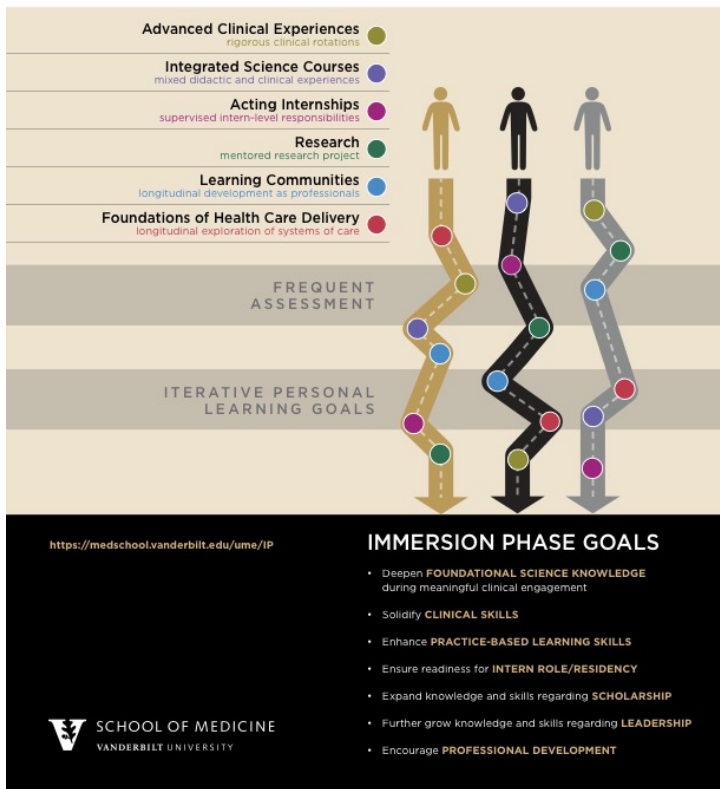
<https://medschool.vanderbilt.edu/ume/IP>



# Goals of Immersion Assessments

## Curriculum 2.0: Immersion Phase

A highly individualized post-clerkship phase that uses clinical context to build upon prior learning



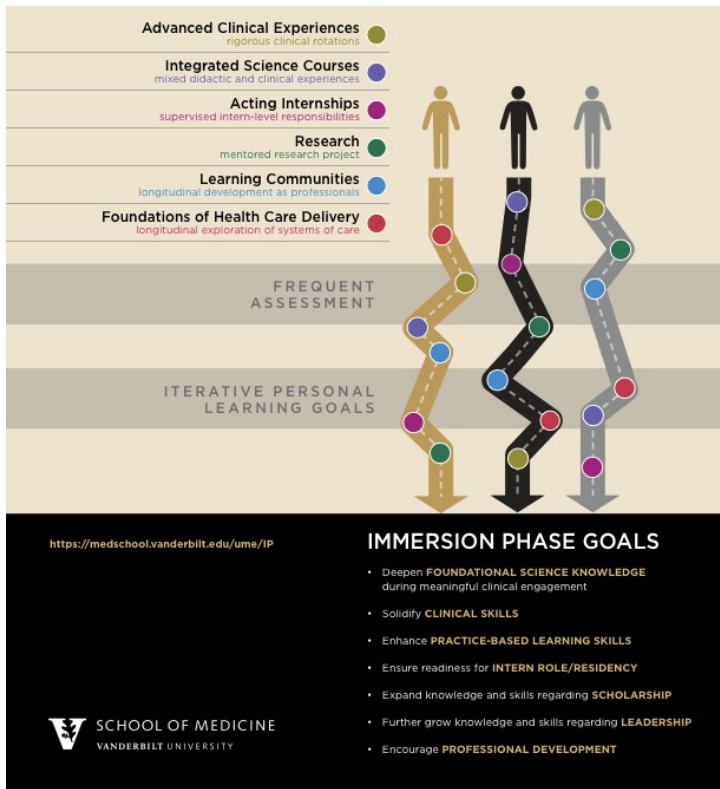
- Assess desired outcomes of VUSM curriculum required for graduation
- Appraise readiness for residency
- Provide feedback to direct future learning
- Provide distinction among students
- Generate data to inform curricular improvement



# Grading in the Immersion Phase

## Curriculum 2.0: Immersion Phase

A highly individualized post-clerkship phase that uses clinical context to build upon prior learning



## Graded as H/HP/P/F

- Integrated Science Courses (ISC)
- Advanced Clinical Experiences (ACE)
- Acting Internships (AI)
- Special Study–Away
- Research Immersion
- Foundations of Healthcare Delivery Quality Improvement (FHD QI) – 1-3 and Advanced Track

## Graded as P/F

- Advanced Electives (AE)
- Special Studies (Clinical here, Research - here or away)
- Learning Communities (LC)
- Foundations of Healthcare Delivery (FHD) – all except QI above



**ASSESSMENT in the  
IMMERISON PHASE**

**ACEs**

**ISCs**

**AIs**

**FOCUS of  
Assessment**

Clinical Skills  
Practice-Based  
Learning

Medical  
Knowledge  
Integration

Ensure  
Readiness for  
Internship

**Predominant  
Method of  
Assessment**

- Milestones
- EPA 7

- Knowledge Assessments
  - Multiple Choice Exams
  - Essay exams
  - Quizzes
- Milestones

- Milestones
- Entrustable Professional Activities (EPA)

# ACEs

MEDICAL KNOWLEDGE	
Integration	MK2a
Depth	MK2b
Analysis	MK7a
Inquiry	MK7b
Use of info resources	MK7c
PATIENT CARE	
Thought process	PC2a
Self-knowledge	PC7a
INTERPERSONAL COMMUNICATION	
Content of presentations to colleagues	IPCS7b.1
PRACTICE-BASED LEARNING & IMPROVEMENT	
Receptivity to feedback	PBLI3a
SYSTEMS BASED PRACTICE	
Initiative and contribution to group efforts	SBP2a
PROFESSIONALISM	
Professional duty	PR1b

**EPA 7:** Form a clinical question and retrieve evidence to advance patient care

# ISCs

MEDICAL KNOWLEDGE	
Integration	MK2a
Depth	MK2b
Analysis	MK7a
Inquiry	MK7b
Use of info resources	MK7c
PATIENT CARE	
Thought process	PC2a
Self-knowledge	PC7a
INTERPERSONAL COMMUNICATION	
Content of presentations to colleagues	IPCS7b.1
PRACTICE-BASED LEARNING & IMPROVEMENT	
Receptivity to feedback	PBLI3a
SYSTEMS BASED PRACTICE	
Initiative and contribution to group efforts	SBP2a
PROFESSIONALISM	
Professional duty	PR1b

# AIs

PATIENT CARE	
Self-knowledge of limits	PC7a
MEDICAL KNOWLEDGE	
Depth	MK2b
INTERPERSONAL COMMUNICATION	
Rapport with patients and families	IPCS7a.1
PRACTICE-BASED LEARNING & IMPROVEMENT	
Receptivity to feedback	PBLI3a
PROFESSIONALISM	
Professional demeanor	PR1a
Honesty/trustworthiness	PR5a
SYSTEMS-BASED PRACTICE	
Initiative and contribution (Conscientiousness)	SBP2a
Prioritization	SBP2b

**EPA 4:** Enter and discuss orders and prescriptions

**EPA 5:** Document a clinical encounter in the patient record

**EPA 8:** Give or receive a patient handover to transition care responsibility

**EPA 10:** Recognize a patient requiring urgent or emergent care and initiate evaluation and management

# Medical Knowledge

## Medical Knowledge 2: Deep Knowledge

Demonstrate deep knowledge of the sciences essential for one's chosen field of practice.

### MK2b: Depth

- Undesirable**  
Mastery of prior learning is insufficient to support currently expected activities.  
*Consistently displaying lower level, sometimes attaining higher level.*
- Entry**  
Limited knowledge base. Understanding is descriptive, i.e. focuses on how things appear, without questioning.  
*Consistently displaying lower level, sometimes attaining higher level.*
- Understanding hinges upon protocols or patterns rather than founded in an understanding of underlying physiologic mechanisms or foundational principles.  
*Consistently displaying lower level, sometimes attaining higher level.*
- Understands appropriate underlying mechanisms/principles, but may struggle to apply to a given case.  
*Consistently displaying lower level, sometimes attaining higher level.*
- Immediately and insightfully places new information in proper context.  
*Consistently displaying lower level, sometimes attaining higher level.*
- Aspirational**  
Creates unique insights and solutions to existing problems.
- Not applicable

# Core EPAs during Immersion Phase

Faculty will be asked to assess you using the following scales

**In supervising this student, how much did you participate in the task?**

- I did it** - Required complete guidance, student was unprepared, I had to do the work for them.
- I talked them through it** - Allowed to practice co-actively, with supervisor engaged in task.
- I directed them from time to time** - Student demonstrated some independence; only required intermittent prompting.
- I was available just in case** - Student functioned fairly independently, only needed assistance with nuances or complex situations.

**If you were in a similar situation again with this student, which are you most likely to tell them...**

- Watch me do this.
- Let's do this together.
- I'll watch you.
- You go ahead, and I'll double check all of your findings.
- You go ahead, and I'll double check key findings.

**What does this student need to work on to become more independent?**



# Frontline Clinical Faculty/Residents

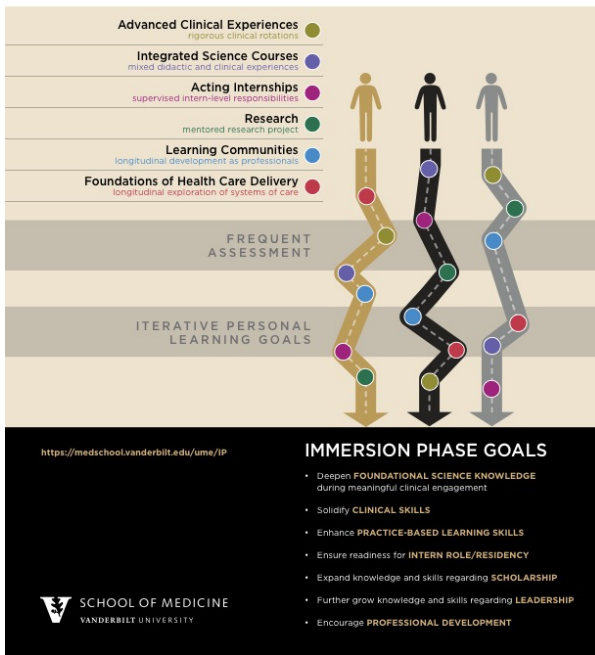


Student



## Curriculum 2.0: Immersion Phase

A highly individualized post-clerkship phase  
that uses clinical context to build upon prior learning



- **Who reports?** *Anyone that directly observes you!*

- Faculty
- Residents
- Interns
- Staff

- **Who solicits? How?**

- Course Directors - VStarPortfolio
- Immersion Phase Coordinator - VStarPortfolio
- **Learner (You!) - Compass**

*More data helps Course Directors understand assessor variability, learner's performance over time and provide more accurate summative assessment.*



# How to Compass

- Please visit [www.vstarcompass.com](http://www.vstarcompass.com) using a browser on your phone, laptop, or tablet. Bookmark this site for future use.
- Any activities to which you have been assigned *and* can send out will be listed here. You may see activities like:



# How to Compass: AI Example



The screenshot shows the Compass application interface. At the top left is a hamburger menu icon. The word "Compass" is written in a blue, cursive font at the top center. Below the header is a search bar with the placeholder text "Filter items...". The main content area is titled "Feedback" and contains a list of five items, each with a count of 0 and a right-pointing chevron icon.

Feedback Item	Count	Action
1. AI: Medicine, VU: Imm 2017-18 Sec 09	0	>
2. EPA 4- Orders / Prescriptions (Sect 09, 2017-18) AI: Medicine, ...	0	>
3. EPA 5 - Clinical Encounter (Sect 09, 2017-18) AI: Medicine, VU	0	>
4. EPA 8 - Handover (Sect 09, 2017-18) AI: Medicine, VU	0	>
5. EPA 10 - Urgent Care (Sect 09, 2017-18) AI: Medicine, VU	0	>



# How to Compass (continued)

- Click the activity that you wish to use. To request **milestone** feedback from clinicians that you have worked, use the activity with your course name.



# How to Compass: AI Example



The screenshot shows the Compass interface with a search bar at the top. Below the search bar, there is a section titled "Feedback" containing a list of five milestones. Each milestone has a progress indicator (a box with the number 0) and a right-pointing arrow. A red arrow points to the first milestone's progress indicator.

Milestone	Progress
1. AI: Medicine, VU: Imm 2017-18 Sec 09	0
2. EPA 4- Orders / Prescriptions (Sect 09, 2017-18) AI: Medicine, ...	0
3. EPA 5 - Clinical Encounter (Sect 09, 2017-18) AI: Medicine, VU	0
4. EPA 8 - Handover (Sect 09, 2017-18) AI: Medicine, VU	0
5. EPA 10 - Urgent Care (Sect 09, 2017-18) AI: Medicine, VU	0

Milestones for the AI or ACE are named simply by the course name

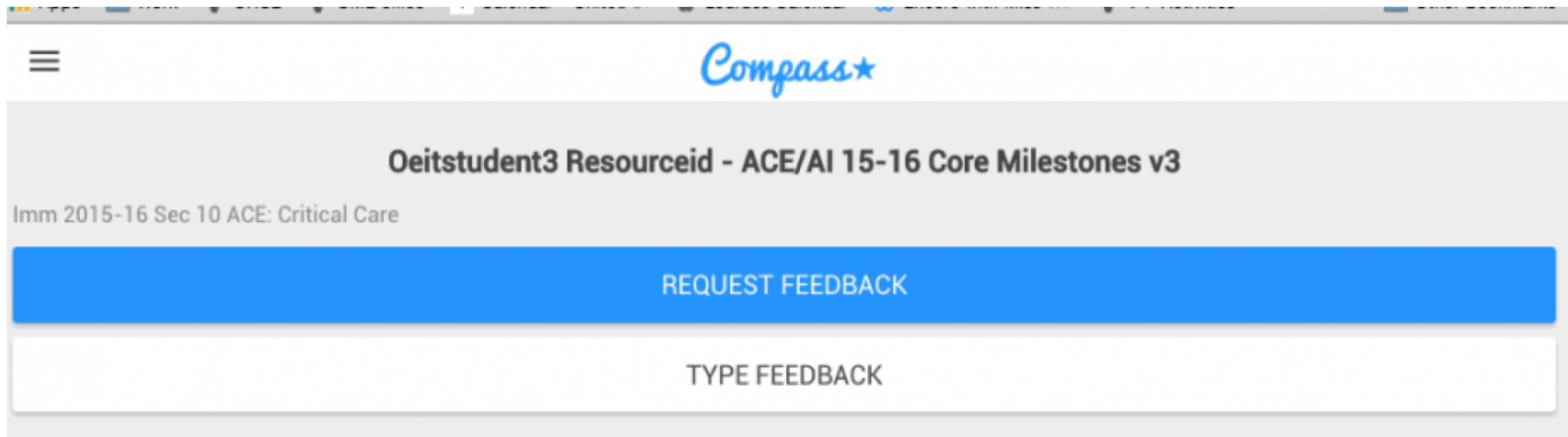
Students in their AI will have additional EPA activities



# How to Compass (continued)

Once you choose your activity, you are taken to a new screen with "request feedback" or "type feedback."

Use "request feedback."



A detailed guide on request feedback is here: <https://vstar.mc.vanderbilt.edu/help/?p=575>



# How to Compass (continued)

When you click “request feedback” you have three options for choosing the clinician.

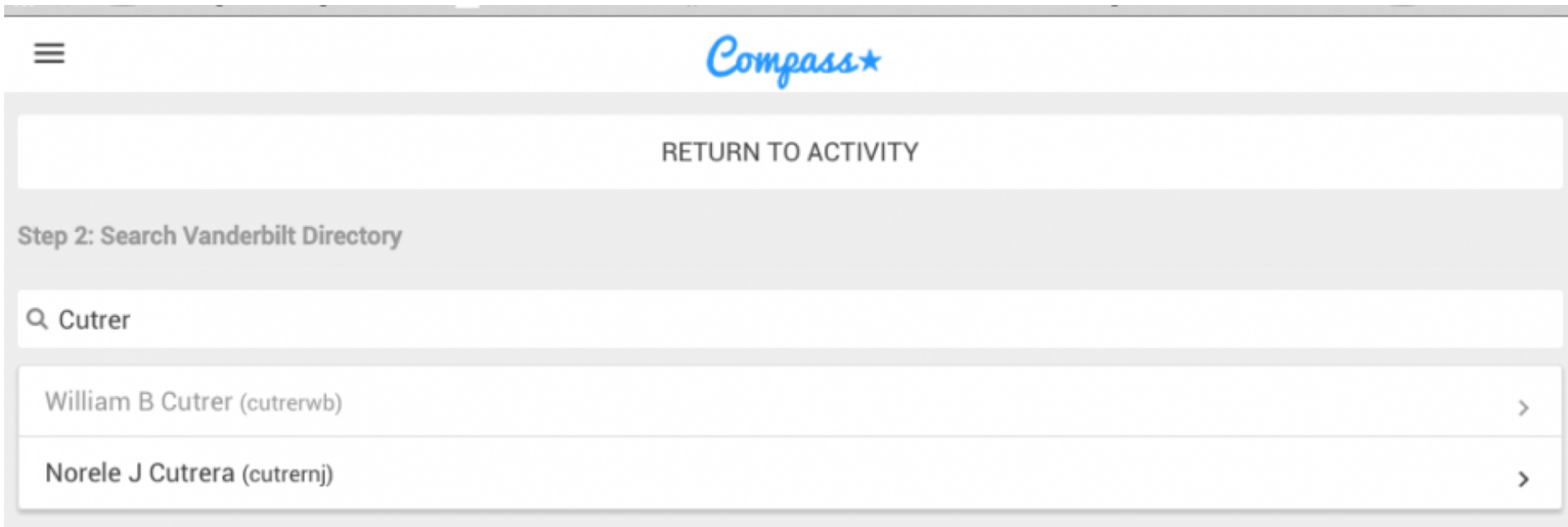
- If you “select from advisor list” you get the names of the Course Directors.
- If you want to use someone else, you can search the Vanderbilt Directory.
- If you are working at the VA or with a preceptor who would not have a VUNetID and Vanderbilt email address, choose “Add Email IDs”





# How to Compass (continued)

Find or input the individual you want to provide an assessment on your performance



The screenshot shows the Compass application interface. At the top left is a hamburger menu icon. The logo "Compass★" is centered at the top. Below the logo is a white button labeled "RETURN TO ACTIVITY". A grey bar below the button contains the text "Step 2: Search Vanderbilt Directory". Underneath is a search input field with a magnifying glass icon and the text "Cutrer". Below the search field is a list of search results:

- William B Cutrer (cutrerwb) >
- Norele J Cutrera (cutrenj) >



# How to Compass (continued)

- When you select the individual, you are taken to a new page that requests the date on which you worked with him/her.
  - You can input a single day, a week or longer. To input a range, use the Encounter Date and the End Date.
  - If you are requesting feedback on the day you worked with the individual or your last day to work with the individual (ideal), [you can verbally ask the clinician to be sure to complete the assessment.](#)
  - The request will auto expire in 7 days.
  - Once this info is input, select the blue bar “Request Feedback” at the bottom of the screen.





RETURN TO ACTIVITY

Step 3: Send Request

WILLIAM B CUTRER

Options

Encounter Date

10/15/2015

(Optional) End Date

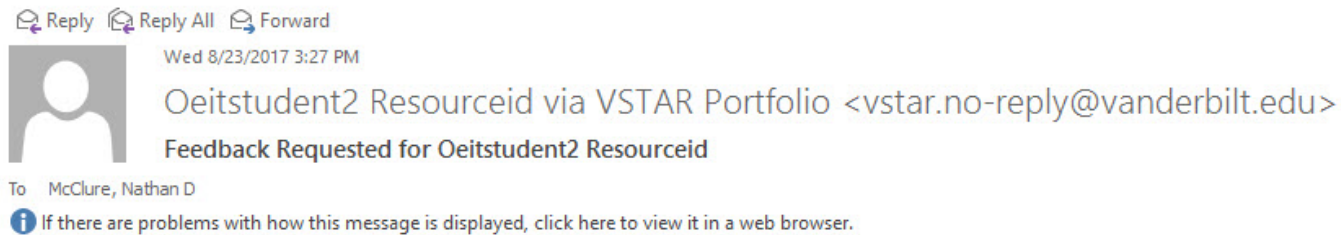
mm/dd/yyyy

REQUEST FEEDBACK



# How to Compass (continued)

An auto message will pop up stating “Your request has been sent successfully.” If you do not see this message, begin the process again. Your browser may have timed out. The assessor will receive a message that looks like this:



## VSTAR Portfolio

Dear [nathan.mcclure@vanderbilt.edu](mailto:nathan.mcclure@vanderbilt.edu),



John Doe has requested that you submit a brief evaluation of his/her performance during a clinical encounter or presentation on **Aug 23**. Please click the following link to complete this evaluation. [John Doe Assessment](#).

Thank you for taking the time to both observe this student and fill out this evaluation.

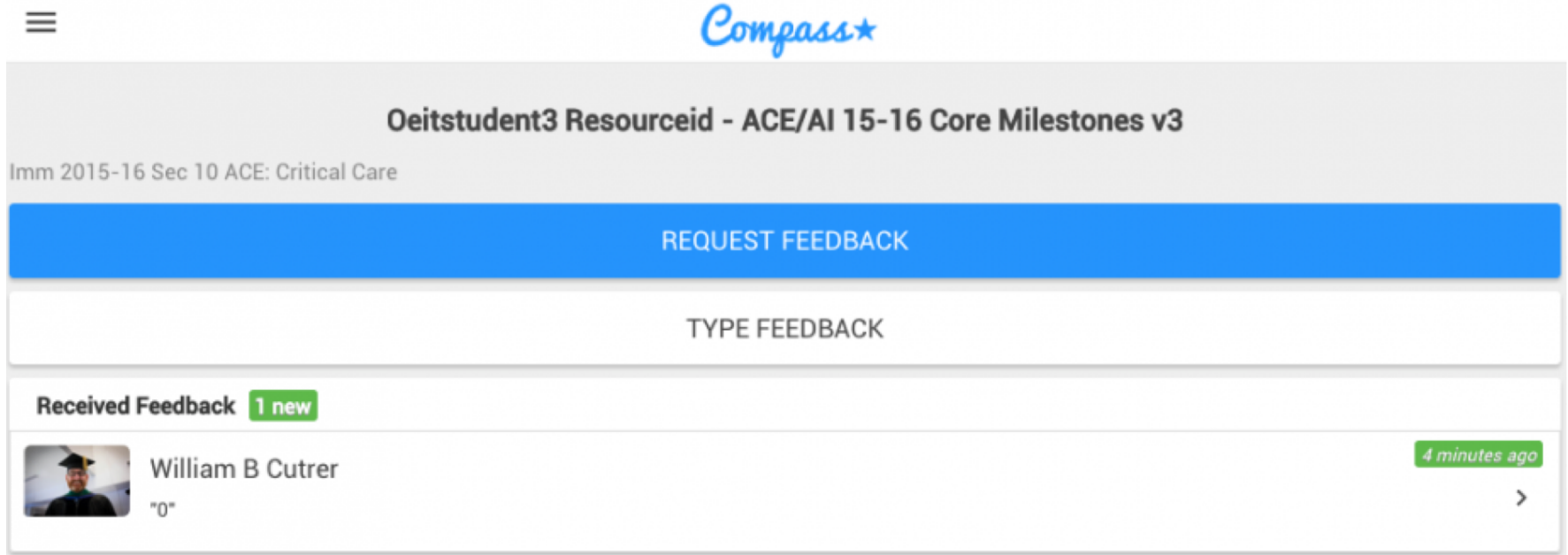
**Vanderbilt University School of Medicine**

[Contact Support](#) if you encounter any technical difficulties.

Please do not reply to this email. This mailbox is not monitored and you will not receive a response.

# How to Compass (continued)

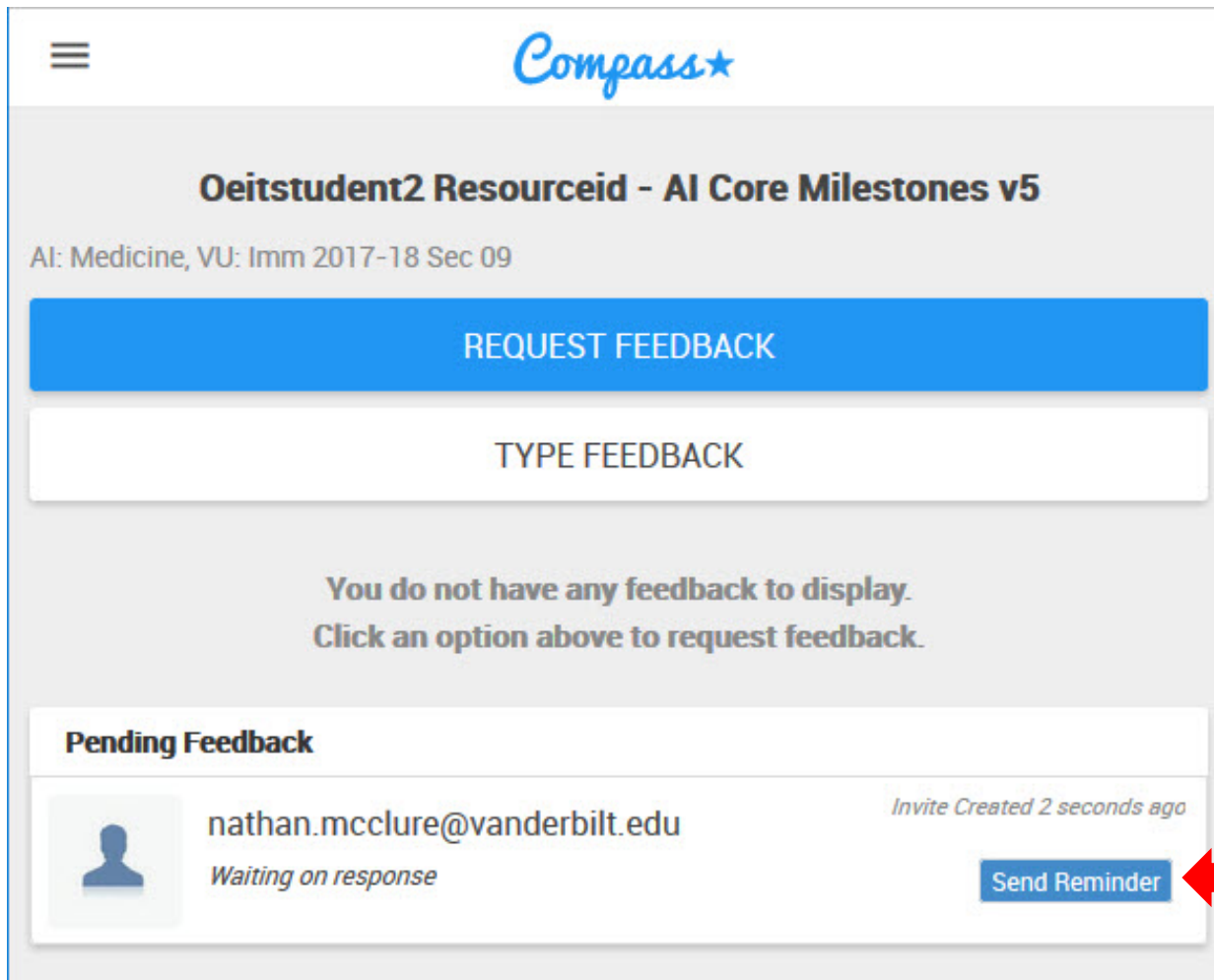
If/when you receive data, you can see it here in Compass (as well as in V\*Portfolio)



The screenshot displays the Compass interface. At the top left is a hamburger menu icon. The logo "Compass★" is centered at the top. Below the logo, the text "Oeitstudent3 Resourceid - ACE/AI 15-16 Core Milestones v3" is shown, followed by "Imm 2015-16 Sec 10 ACE: Critical Care". A prominent blue button labeled "REQUEST FEEDBACK" is centered. Below it is a white button labeled "TYPE FEEDBACK". A section titled "Received Feedback" with a green badge indicating "1 new" item is shown. The first feedback item is from "William B Cutrer" with a profile picture and a rating of "0". A green badge indicates the feedback was received "4 minutes ago", and a right-pointing arrow is visible.

# How to Compass (continued)

You can send a reminder after a few days, if the individual has not responded.



The screenshot shows the Compass interface. At the top, there is a menu icon and the Compass logo. Below that, the title 'Oeitstudent2 Resourceid - AI Core Milestones v5' is displayed, followed by the text 'AI: Medicine, VU: Imm 2017-18 Sec 09'. There are two main buttons: a blue 'REQUEST FEEDBACK' button and a white 'TYPE FEEDBACK' button. Below these buttons, a message states: 'You do not have any feedback to display. Click an option above to request feedback.' At the bottom, there is a 'Pending Feedback' section. It contains a card for a user named 'nathan.mcclure@vanderbilt.edu' with a status of 'Waiting on response'. The card also shows 'Invite Created 2 seconds ago' and a blue 'Send Reminder' button. A red arrow points to this button from the right side of the image.

Reminder  
button

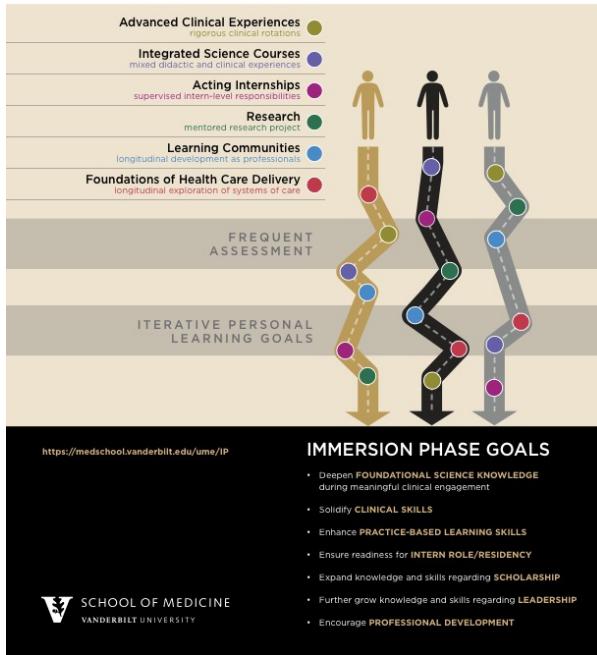
# Questions about COMPASS



# Assessment in the Immersion Phase

## Curriculum 2.0: Immersion Phase

A highly individualized post-clerkship phase that uses clinical context to build upon prior learning



## Data Collected to Inform Grades

- Milestones on all 6 Domains
- PBL Exercise (EPA7)
- Clinical observations (milestone-based + comments)
- Other course specific assessment modalities (e.g., quizzes, exams, CBL, TBL)
- EPAs

How does the performance data lead to a final grade?



Frontline Clinical Faculty/Residents

Course Director



Student

- Milestone (14) Assessments**
- MK2b-Depth
  - PC2b-Diff Dx
  - PC2c-Dx Workup
  - PC7a-Self-Knowledge
  - PC7b-Assessment/Plan
  - IPCS7a.1-Patient Rapport
  - IPCS7b.1-Presentation Content
  - SBP2a-Initiative
  - SBP2b-Prioritization
  - PBLI3a-Receptivity
  - MK7b-Inquiry
  - MK7c-Use of info resources
  - \*\*EPA7\*\*
  - PR1a-Prof Demeanor
  - PR5a-Honesty

Domain Scores



Final Grade

- MK
- PC
- IPCS
- SBP
- PBLI
- Prof

- Honors
- High Pass
- Pass
- Fail



Reach Target Threshold  
Sub-Threshold

Activity Title	Assessor	Completed	pc2b	pc2c	pc7a	pc7b	mk2b	mk7b	mk7c	ipcs7a.1	ipcs7b.1	pbli3d	pr1b	sbp2b	Comments
Imm 2016-17 Sec 2 ACE: Course	Assessor 1	10/2/16	4	4	4	4	4	4	4	5	4	4	5	4	n/a
Imm 2016-17 Sec 2 ACE: Course	Assessor 2	10/1/16	4	4	5	3.5	3	4	4	4	4	4	4.5	4	Strengths include ability to work in tea
Imm 2016-17 Sec 2 ACE: Course	Assessor 3	9/29/16	3	3.5	4	3.5	4.5	3.5	4		3	3.5	4		X is a very strong student. Presentati
Imm 2016-17 Sec 2 ACE: Course	Assessor 4	9/27/16	4	4	5	5	5	5	5	5	5	5	5	4	X was an asset to my clinic. X often p
Imm 2016-17 Sec 2 ACE: Course	Assessor 5	9/26/16	4	4	4	3	4	3.5	3	4		3	4	4	X was a wonderful med student to ha
Imm 2016-17 Sec 2 ACE: Course	Assessor 6	9/23/16	5	5	5	5	5	5	5	5	5	5	5	5	Wonderful medical student! Did great
Imm 2016-17 Sec 2 ACE: Course	Assessor 7	9/23/16	3.5	4	4	4	4	4	4		5	3	5	3	n/a
Imm 2016-17 Sec 2 ACE: Course	Assessor 8	9/22/16	5	4	5	4	4	4	4	5	5	4		4	X is well organized, mature medical s

Average Value for milestone			4.06	4.06	4.50	4.00	4.19	4.13	4.13	4.67	4.43	3.94	4.64	4.00
-----------------------------	--	--	------	------	------	------	------	------	------	------	------	------	------	------

Average Value for domain			4.16				4.15		4.55			3.94	4.64	4.00
--------------------------	--	--	------	--	--	--	------	--	------	--	--	------	------	------

Final assessment per domain														
-----------------------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--

PC MK IPCS PBLI PR SBP

Reach Reach Reach Target Reach Reach

Reach  
Target  
Threshold  
Sub-threshold

**Course Director  
determines level of  
performance for each  
Competency Domain**



<b>Competency</b> (Reach [R], Target [T], Threshold [TH], Sub-threshold [Sub])	<b>Performance</b>
<b>Medical Knowledge</b> Understands established and evolving biological, clinical, epidemiological and social-behavioral sciences and must be able to apply this knowledge to patient care.	<b>REACH</b>
<b>Patient Care</b> Provides care that is compassionate, safe, efficient, cost sensitive, appropriate, and effective for the treatment of illness and the promotion of health.	<b>REACH</b>
<b>Interpersonal &amp; Communication Skills</b> Able to communicates in ways that result in safe, effective and respectful information exchange and create beneficial partnerships with patients, their families, and other health professionals.	<b>REACH</b>
<b>Systems-Based Practice</b> Understand and respond to the larger context and system of healthcare and effectively call on system resources to provide care that is of optimal value.	<b>REACH</b>
<b>Practice-Based Learning &amp; Improvement</b> Able to continuously improve patient care by investigating and evaluating outcomes of care and by engaging in learning activities which involve critical appraisal and assimilation of scientific evidence and application of relevant	<b>TARGET</b>
<b>Professionalism</b> Possesses the knowledge, skills and attitudes necessary to carry out professional responsibilities, adhere to ethical standards and establish and maintain productive, respectful relationships with patients and colleagues.	<b>REACH</b>

**Course Director  
determines level of  
performance for each  
Competency Domain**

<b>Formative Comments:</b> (Not to be quoted in Dean's Letter; please provide specific recommendations for improvement)

<b>Summative Comments:</b> (Summative comments of student's performance may be used in Dean's Letter)



<b>Competency</b> (Reach [R], Target [T], Threshold [TH], Sub-threshold [Sub])	<b>Performance</b>
<b>Medical Knowledge</b> Understands established and evolving biological, clinical, epidemiological and social-behavioral sciences and must be able to apply this knowledge to patient care.	<b>REACH</b>
<b>Patient Care</b> Provides care that is compassionate, safe, efficient, cost sensitive, appropriate, and effective for the treatment of illness and the promotion of health.	<b>REACH</b>
<b>Interpersonal &amp; Communication Skills</b> Able to communicate in ways that result in safe, effective and respectful information exchange and create beneficial partnerships with patients, their families, and other health professionals.	<b>REACH</b>
<b>Systems-Based Practice</b> Understand and respond to the larger context and system of healthcare and effectively call on system resources to provide care that is of optimal value.	<b>REACH</b>
<b>Practice-Based Learning &amp; Improvement</b> Able to continuously improve patient care by investigating and evaluating outcomes of care and by engaging in learning activities which involve critical appraisal and assimilation of scientific evidence and application of relevant	<b>TARGET</b>
<b>Professionalism</b> Possesses the knowledge, skills and attitudes necessary to carry out professional responsibilities, adhere to ethical standards and establish and maintain productive, respectful relationships with patients and colleagues.	<b>REACH</b>

**Course Director determines level of performance for each Competency Domain**



	<b>Summative Competency Ratings</b> (6 domains assessed)
<i>Risk of Fail</i> (course director discretion)	Any Sub-Threshold OR >2 Thresholds
<i>Pass</i>	No more than 2 Thresholds All others at Target or above
<i>High Pass</i>	At least 3 Reaches All others at Target
<i>Honors</i>	Nothing below Target 5 Reaches

**H:** Excellent performance in all competency domains

**Final Grade: H**

**HP:** Excellent performance in several, but not all, competency domains

**P:** Satisfactory performance in all competency domains

**P\*:** Temporary grade given to students whose performance is marginal because of important deficiencies in some aspects of course-work or competency domains; must ultimately be resolved to Pass or Fail

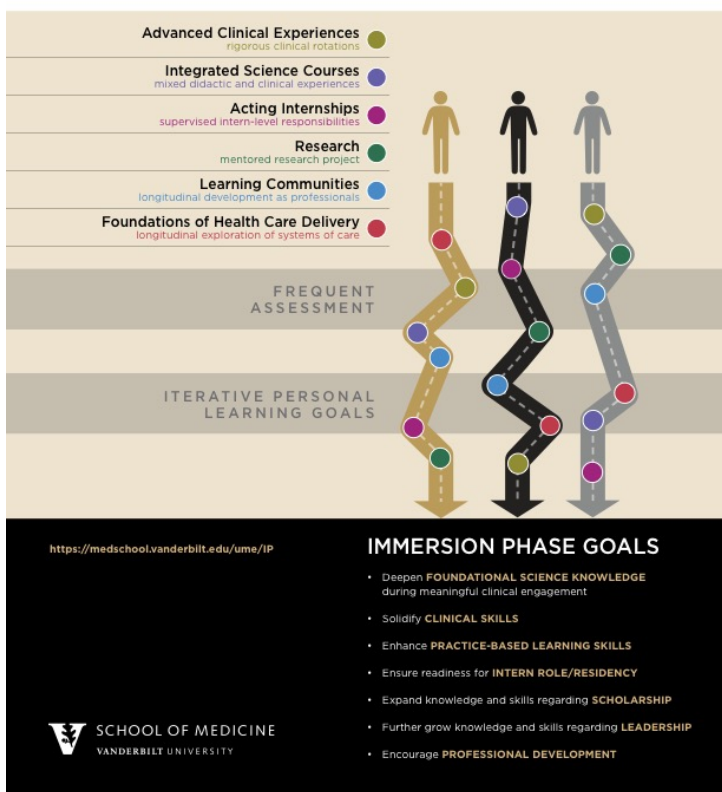
**F:** Unsatisfactory performance

**Note:** "I" Incomplete is not a grade and is not an alternative for failure, but indicates that some work must be completed before a grade is issued.

**For clinical courses:** Rate suitability for appointment as a resident on your service: **Superior**

## Curriculum 2.0: Immersion Phase

A highly individualized post-clerkship phase that uses clinical context to build upon prior learning

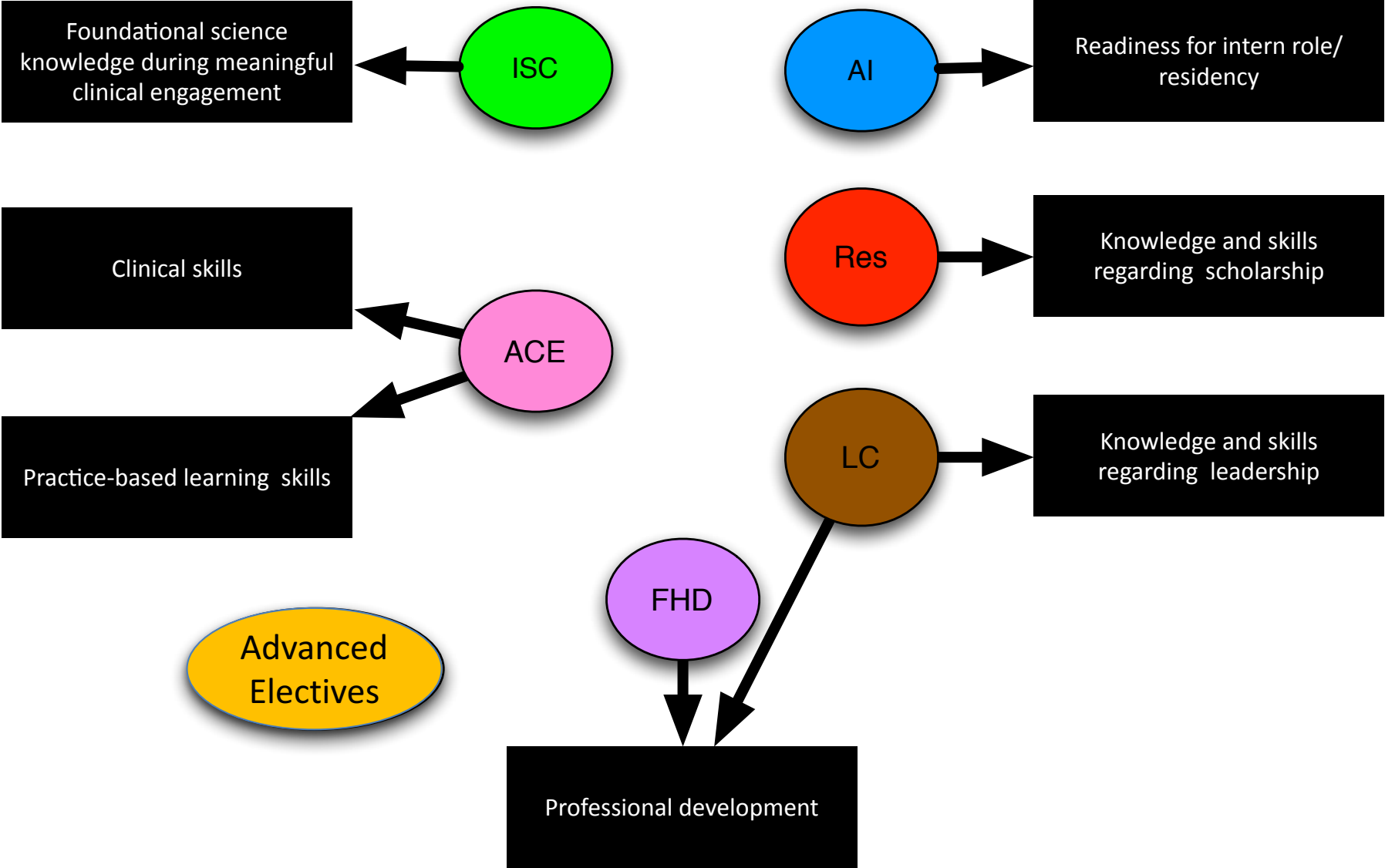


# Quality Control

Supporting standardization of outcomes in the context of individualization of learning experiences



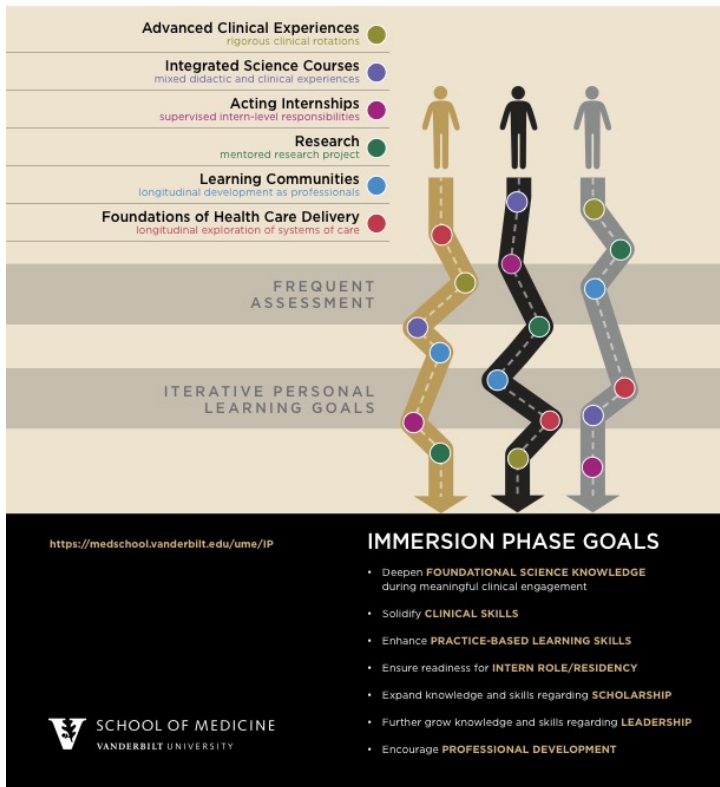
# Courses Designed to Meet Phase Goals



# Consistency within course categories

## Curriculum 2.0: Immersion Phase

A highly individualized post-clerkship phase that uses clinical context to build upon prior learning



- Each category has a set of milestones being assessed during the rotation that all use (at a minimum):
  - AI milestone  
set: <https://medschool.vanderbilt.edu/ume/ai-milestones-students>
  - ACE milestone  
set: <https://medschool.vanderbilt.edu/ume/ace-milestones-students>
  - ISC milestone  
set: <https://medschool.vanderbilt.edu/ume/isc-milestones-students>

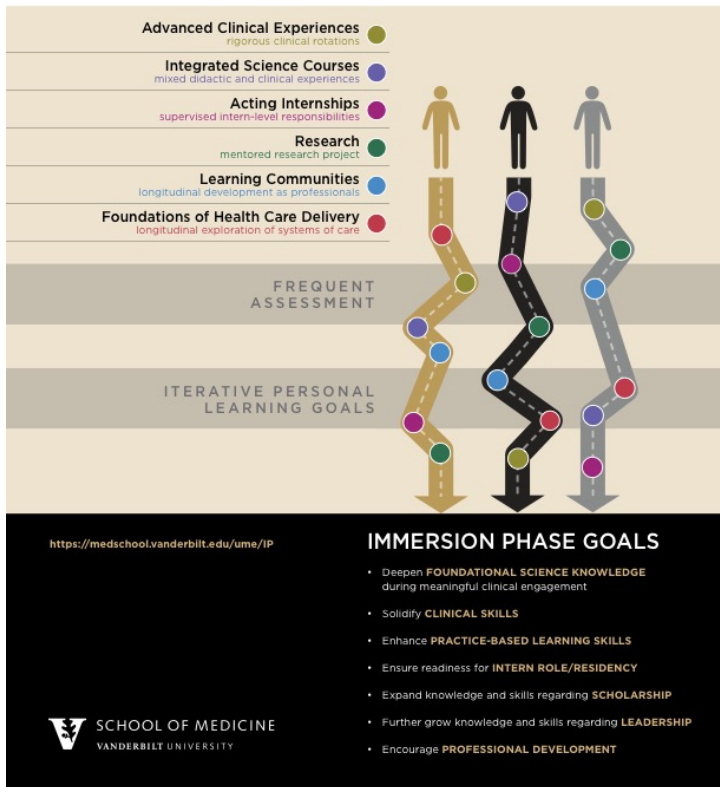




# Consistency within course categories

## Curriculum 2.0: Immersion Phase

A highly individualized post-clerkship phase that uses clinical context to build upon prior learning



- The set of milestones (and EPAs) is aligned to ensure the main goal of each course is weighted appropriately
  - ISC–Medical Knowledge
  - ACE–Patient Care + Practice-Based Learning
  - AI–Patient Care (+ EPA assessments)

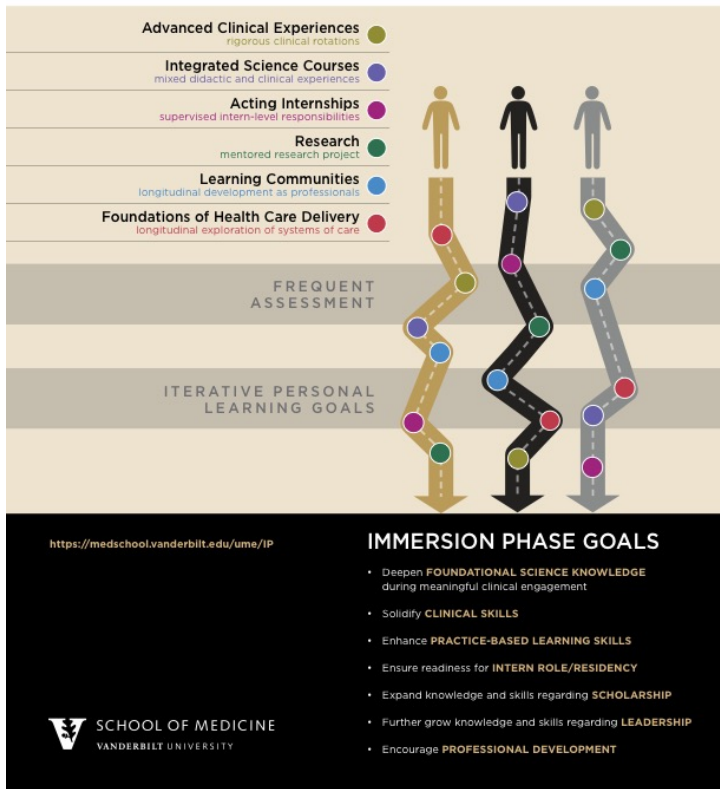




# QI efforts

## Curriculum 2.0: Immersion Phase

A highly individualized post-clerkship phase that uses clinical context to build upon prior learning



- Meetings of course directors within each category, to discuss data, review case examples and address process issues
- Faculty Development efforts to train workplace assessors
- Data analysis by Standing Assessment Committee:
  - Overall grade distribution
  - Distribution within categories
  - Milestone rating distributions by student and by faculty
  - Comparison with performance outcomes from prior phases



## Curriculum 2.0: Immersion Phase

A highly individualized post-clerkship phase that uses clinical context to build upon prior learning

**Advanced Clinical Experiences**  
rigorous clinical rotations

**Integrated Science Courses**  
mixed didactic and clinical experiences

**Acting Internships**  
supervised intern-level responsibilities

**Research**  
mentored research project

**Learning Communities**  
longitudinal development as professionals

**Foundations of Health Care Delivery**  
longitudinal exploration of systems of care

FREQUENT ASSESSMENT

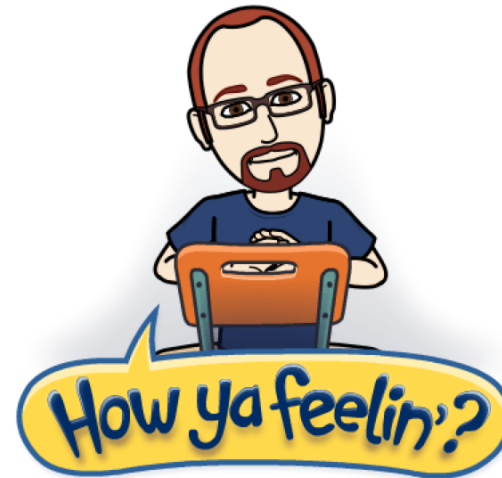
ITERATIVE PERSONAL LEARNING GOALS

<https://medschool.vanderbilt.edu/ume/IP>

### IMMERSION PHASE GOALS

- Deepen **FOUNDATIONAL SCIENCE KNOWLEDGE** during meaningful clinical engagement
- Solidify **CLINICAL SKILLS**
- Enhance **PRACTICE-BASED LEARNING SKILLS**
- Ensure readiness for **INTERN ROLE/RESIDENCY**
- Expand knowledge and skills regarding **SCHOLARSHIP**
- Further grow knowledge and skills regarding **LEADERSHIP**
- Encourage **PROFESSIONAL DEVELOPMENT**

**SCHOOL OF MEDICINE**  
VANDERBILT UNIVERSITY



# Attendance Policy

- Students are expected to attend all required sessions as described in the course syllabus
- Pre-approval required for
  - Interviews
  - Religious holy dates
  - Presentations of work at an advertised scholarly meeting
- Emergency absences can be approved for serious medical issues and family emergencies
- The full policy and form is available in every V\*Learn Immersion Phase course



## IMMERSION PHASE ABSENCE REQUEST FORM

Refer to the *VUSM Catalog* for the full absence policy and procedures related to this form

<http://vanderbilt.edu/catalogs/documents/medical.pdf#iphase>

*Request permission at least 4 weeks in advance of the start of the course.*

Name: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Date(s) of absence: \_\_\_\_\_ Type of absence:  Planned Absence  
 Emergency Absence  
 Interview

Reason(s) for absence: \_\_\_\_\_

Step 1: Obtain signature/email approval from the appropriate course director of the section that will be missed:

\_\_\_\_\_  
*Course director*

*Signature acknowledges that a make-up plan has been mutually agreed upon with the student.*



Step 2: Obtain signature/email approval from the appropriate faculty director of the longitudinal(s) that will be missed. *NOTE: Learning Communities requires face-to-face sessions. If you are going to miss an LC session, reach out to [bill.cutrer@vanderbilt.edu](mailto:bill.cutrer@vanderbilt.edu) to gain approval to drop the course.*

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*Foundations of Healthcare Delivery (FHD) – [fhd@vanderbilt.edu](mailto:fhd@vanderbilt.edu)*

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*Research (PLAN) – [vms.research@vanderbilt.edu](mailto:vms.research@vanderbilt.edu)*

Step 3: It is your responsibility to discuss your absence with your clinical team.

Step 4: Drop-off completed form to 201 Light Hall **or** email completed form to [VUSMabsence@vanderbilt.edu](mailto:VUSMabsence@vanderbilt.edu) (*Attached any email approvals you have if you did not get signatures*)

Final Approval: \_\_\_\_\_  
Associate Dean Amy Fleming or Assistant Dean Cathy Pettepher



# Dual Degrees

[https://medschool.vanderbilt.edu/ume/Imm\\_dual\\_degrees](https://medschool.vanderbilt.edu/ume/Imm_dual_degrees)



# Dual Degrees

- Students wishing to receive a waiver from any required curriculum requirements must complete and submit the [Alternative Pathway Request](#) with the Registrar.
- The Registrar will process the request and obtain approvals from the appropriate course director(s).

# C2.0 Dual Degree Requirements

[https://medschool.vanderbilt.edu/ume/Imm\\_dual\\_degrees](https://medschool.vanderbilt.edu/ume/Imm_dual_degrees)



C2.0 Requirements (in Months)	Ongoing Longitudinal Courses
4 Integrated Science Courses (ISCs) — on campus	Foundations of Health Care Delivery (11 units) <ul style="list-style-type: none"> <li>• 6 units taken during Intersessions</li> <li>• 5 units taken longitudinally, paired with other courses during the Immersion Phase</li> </ul>
1 Acting Internship — on campus	
4 Advanced Clinical Experiences (ACEs) — on campus	Learning Communities (8 units)
3 Research Immersion*	
2 Competency and Interest-driven Rotations <ul style="list-style-type: none"> <li>• can be ISCs, ACEs, Away ACEs, AIs or Advanced Electives</li> <li>• away with approval</li> <li>• one must be clinical</li> </ul>	
Overall Requirements	
14 months required	
6 flex months (4 flex + 2 months for Step 1 in July/August of year 3 + 1 month for interviews in December of year 4)	
May register for up to 18 rotations	
Must include: <ul style="list-style-type: none"> <li>• 1 Primary Care course (ACE: PC (VU or away), ACE: Adolescent Medicine or ISC: Community Healthcare)</li> <li>• 1 Acute Care course (ACE: Emergency Medicine or any ICU-based course, including ISC: Critical Care or critical care ACEs)</li> </ul>	



# C2.0 Dual Degree - Research

- Review dual degree with Research faculty, since some dual degrees can meet the Research Immersion credit requirement.
- If Research Immersion is needed, student must register for PLAN as well (only offered in March and September)

## Research Immersion

*\*It is strongly recommended that students contact the Office of Medical Student Research to discuss dual degree plans before enrollment in the degree program. Waiver request required for all dual degree students. Any request for research extensions require review of entire schedule.*

**MPH:** PLAN and Research Immersion requirements fulfilled by degree coursework.

**MDiv:** PLAN and Research Immersion required.

**MBA:** PLAN and Research Immersion requirements may be fulfilled by degree coursework. Evidence required for waivers.

**MEd:** PLAN and Research Immersion requirements fulfilled by degree coursework.

**MSCI:** PLAN and Research Immersion requirements fulfilled by degree coursework.

**MTS:** If taking the thesis track, PLAN and Research Immersion requirements may be fulfilled by degree coursework. Evidence required for waivers.

**LLM:** PLAN and Research Immersion requirements may be fulfilled by degree coursework. Evidence required for waivers.

# C2.0 Dual Degrees - Learning Communities

- 8 units required in most cases
- Strongly recommend to complete the required LC units before taking the year off

## Learning Communities

*Some Learning Communities requirements are fulfilled by graduate degree coursework.*

**MPH:** all 8 units required; recommended to complete in Y3

**MDiv:** all 8 units required; recommended to complete in Y3

**MBA:** 4 units required (LC1, LC2, LC4 and LC7); recommended to complete in Y3

**MEd:** 7 units required (LC1, LC3, LC4, LC5, LC6, LC7 and LC8); recommended to complete in Y3

**MSCI:** Will be reviewed on a case-by-case basis

**MTS:** Will be reviewed on a case-by-case basis

**LLM:** Will be reviewed on a case-by-case basis

# C2.0 Dual Degrees - FHD

- Requirements vary by degree; review webpage for information.
- Strongly recommend to complete the FHD requirements before taking the year off

Foundations of Health Care Delivery
<i>Please visit <a href="http://bit.ly/FHD_Dual_Degree_2">http://bit.ly/FHD_Dual_Degree_2</a> for details on Dual Degree equivalencies for MBA and MPH students.</i>
<b>MPH:</b> 5 longitudinal units required (QI 1-3, IPE2, and PS recommended to complete in Y3) plus both year 3 intersessions (AC1/PHP and AC2/IPE1)
<b>MDiv:</b> all 11 units required, including content of 4th year intersession (via attendance or alternative pathway depending on individual student's schedule).
<b>MBA:</b> 5 longitudinal units required (QI 1-3, IPE2, and PS recommended to complete in Y3) plus both year 3 intersessions (AC1/PHP and AC2/IPE1)
<b>MEd:</b> all 11 units required, including content of 4th year intersession (via attendance or alternative pathway depending on individual student's schedule).
<b>MSCI:</b> Will be reviewed on a case-by-case basis
<b>MTS:</b> Will be reviewed on a case-by-case basis
<b>LLM:</b> Will be reviewed on a case-by-case basis

# Inquiry Program

Office of Medical Student Research

<https://medschool.vanderbilt.edu/student-research/>

Joey V. Barnett, PhD

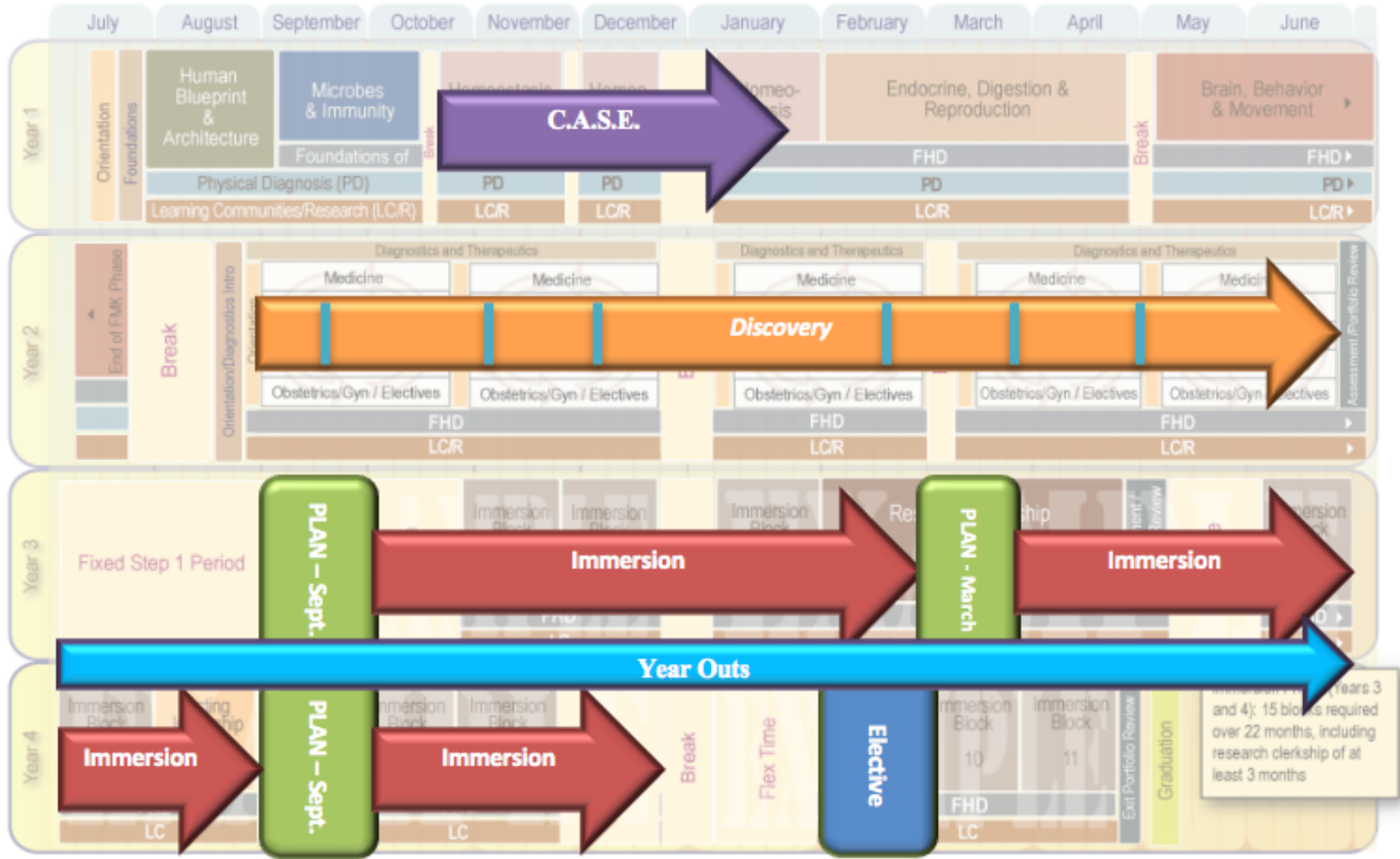
Director, Office of Medical Student Research

Assistant Dean of Physician-Researcher Training



# Inquiry Program

Vanderbilt University School of Medicine Curriculum 2.0 Schematic



# PLAN

Office of Medical Student Research

<https://medschool.vanderbilt.edu/student-research/>



# PLAN Team



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Assistant Professor of Urologic Surgery  
Email: [pat.keegan@vanderbilt.edu](mailto:pat.keegan@vanderbilt.edu)



**Candace McNaughton, MD, MPH**  
Assistant Professor of Emergency Medicine  
Email: [candace.mcnaughton@vanderbilt.edu](mailto:candace.mcnaughton@vanderbilt.edu)



**April Pettit, MD, MPH**  
Assistant Professor of Medicine  
(Infectious Diseases)  
Email: [april.pettit@vanderbilt.edu](mailto:april.pettit@vanderbilt.edu)



**Michael Ward, MD, MBA**  
Assistant Professor of Emergency Medicine  
Email: [Michael.j.ward@vanderbilt.edu](mailto:Michael.j.ward@vanderbilt.edu)



**Derek Williams, MD, MPH**  
Assistant Professor of Pediatrics  
Email: [derek.williams@vanderbilt.edu](mailto:derek.williams@vanderbilt.edu)



# Course Competencies

By the end of the course, students will be able to demonstrate the following specific competencies:

- Understand the research process and appreciate the close connection between research, clinical practice, and population health
- Identify and formulate a structured research question
- Identify major research study designs
- Understand basic principles of measurement and data analyses
- Understand basic principles for the interpretation of research findings within the context of the study design
- Understand basic principles of effective scientific communication





# Assessment

P/F

Average of Quizzes	15%
Oral Presentation	25%
Average of Assignments	30%
Final Project Plan	30%

Milestone assessments will be completed by your SGFs.



# PLAN Preparation

- [VSTAR Learn](#) Forum Blast last week - notifications
- SESSION 1: September 5<sup>th</sup> @ 1:00 PM
  - Pre-reading and Pre-Session Assessment due by 11:59 pm, Sunday September 3<sup>rd</sup> . Be prepared to present your project to your small group – whiteboards, 5 min each.
- Small Groups & Locations; Mentor feedback
- Mentor Email – support funds
- Invite your mentor to presentations (last session)



# Research Immersion

Office of Medical Student Research

<https://medschool.vanderbilt.edu/student-research/>



# RESEARCH IMMERSION TEAM

## Office of Medical Student Research

312 Light Hall

[vms.research@vanderbilt.edu](mailto:vms.research@vanderbilt.edu)

### **Joey Barnett, PhD**

Director, Office of Medical Student Research  
Assistant Dean, Physician-Researcher Training

### **Luke Finck, EdD, MA**

Assistant Director, Office of Medical Student Research  
Instructor, Medical Education and Administration

### **Stacey Satchell, MS, MA**

Program Manager, Office of Medical Student Research

### **Marlene Johnson**

Program Coordinator, Office of Medical Student Research



## Bedside



Pratik Pandharipande,  
MD, MSCI



Adriana Hung,  
MD, MPH

## Community & Global Health



Douglas Heimburger,  
MD, MS

## Bench



Mark deCaestecker,  
MB, BS, PhD

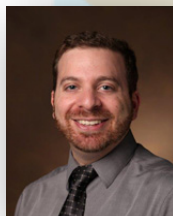


Julie Bastarache,  
MD

## Epidemiology & Informatics



Derek Williams  
MD, MPH



Jeremy Warner,  
MD, MS



Chevis Shannon, MBA,  
MPH, DrPh

## Ethics, Education, Policy & Society



Keith Meador,  
MD, ThM, MPH



David Stevenson,  
PhD

# Research Areas



# Objectives

## **CORE LEARNING OBJECTIVES AND COMPETENCIES**

The course Learning Objectives for the Research Immersion are closely aligned with selected School of Medicine milestones:

- Independently interpret information to formulate a research plan (MK7a, MK7b)
- Model a commitment to continuous self-regulated learning as evidenced by the collection, analysis, interpretation, and implementation of newly acquired information (MK7a, MK7b)
- Demonstrate knowledge and understanding of the science for selected course project (MK2a, MK2b, MK7a, MK7b)



# Objectives Continued

## **CORE LEARNING OBJECTIVES AND COMPETENCIES (Cont.)**

- Receptive to, and able to apply, constructive feedback (PBLI3a, PBLI3b)
- Apply knowledge of the scientific method, reproducible research, and experimental design in evaluating questions of interest (MK2a, MK7a, MK7b)
- Demonstrate knowledge and understanding of science effectively through various communication channels (IPCS7b.1, IPCS7b.2)
- Effectively engage in team-based activities, utilizing resources to support and lead team efforts (SBP2c).



# Assessment

H/HP/P/F

Graded course Assignments/Activities:

- Abstract
- Poster
- Presentation





# Assessment Continued

Milestones Completed by:

Research Director(s)

Mentor

Co-collaborator



# Assessment Continued

## Other Activities:

Area Meetings & Activities

Journals

Co-Curricular Activities

OMSR Journal Clubs

Updated Project Plan

Peer, Mentor, RD Evaluations



# Administration

- Marlene Johnson, Program Coordinator
- Block Calendar & assignments will be posted in VSTAR Learn 1 week before start of block
- 2 Course sessions per block (2<sup>nd</sup> and 4<sup>th</sup> Wed)
- Research Area meetings
- Support funds and Travel



# Questions?

Contact Us: [vms.research@vanderbilt.edu](mailto:vms.research@vanderbilt.edu)

Course Director: Luke Finck, EdD, MA

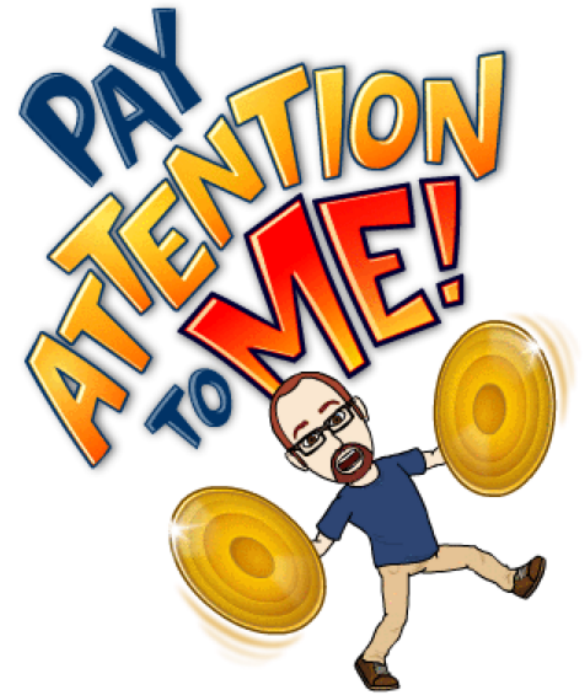
[luke.finck@vanderbilt.edu](mailto:luke.finck@vanderbilt.edu)

Course Support: Marlene Johnson

[marlene.j.johnson@vanderbilt.edu](mailto:marlene.j.johnson@vanderbilt.edu)



# Learning Communities





# Learning Communities–IMMERSION Refresher

Beth Ann Yakes, MD  
College Mentor

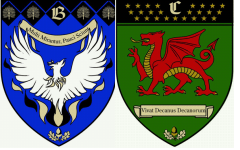




# REFRESHER...

- You have seen most of these slides before
- They are meant to serve as a refresher as to the WHAT and the WHY behind the LC-IMM units
- As usual, please email [Bill.Cutrer@Vanderbilt.Edu](mailto:Bill.Cutrer@Vanderbilt.Edu) and [Pam.Lynn@Vanderbilt.Edu](mailto:Pam.Lynn@Vanderbilt.Edu) with ANY and ALL questions





# Learning Communities

- Definition:
  - “intentionally developed longitudinal groups that aim to enhance students’ medical school experience and to maximize learning”
- Seek to maximize learning, specifically related to student development as professionals
- Function by:
  - fostering communication among students and faculty
  - promoting caring, trust, and teamwork
  - assisting students establish academic/support networks
  - encouraging student participation in learning activities







# Learning Communities-IMMERSION

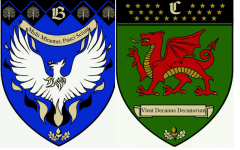
The Learning Communities-Immersion course seeks to **maximize medical student learning related to student development as professionals**. Helping students solidify an appropriate image of the medical profession and skill set related to functioning within the healthcare environment are the essential foundation for future success. Development as professionals involves knowledge, skills and attitudes related to students' practice as well as the environment within which the practice will occur. The **longitudinal nature and trusting environment** created within the Learning Communities fosters student professional development, specifically addressing personal areas of metacognition and reasoning, ethics, and leadership, as well as the knowledge and understanding of the broader healthcare environment. **The preparatory work and the academic sessions will build on prior experiences in LC-FMK and LC-FCC**. The LC-Immersion course will focus on solidifying student understanding of previously covered topics such as cognition, critical thinking, metacognition, and ethics, while exposing students to new topics within the learning and leadership development arenas. In sum, the Learning Communities will provide the nurturing environs to maximize student development as professionals.



## OVERARCHING COURSE GOALS:

1. To solidify student understanding regarding the **professional role of a physician**, and to develop the skills necessary for successful functioning as a medical professional
2. To re-explore major moral philosophies and tenets of biomedical **ethics** within the context of clinical medicine
3. To foster the ongoing development of a deeper understanding **of cognition, including critical thinking, clinical reasoning, and metacognition**, to allow students to function within the complex adaptive systems found within the healthcare environment
4. To develop the skills and processes of a **expert learner** who seeks to address gaps in knowledge as they arise in the clinical and research contexts
5. To build on foundational leadership abilities to enhance student knowledge, skills and attitudes surrounding **effective physician leadership**
6. To foster an ongoing sense of **collegial identity** within each of the four colleges, manifested as a respectful tolerance towards perspectives and beliefs discordant with their own, which will serve as a foundation for professionalism and professional discourse with colleagues and patients





# Session Format:

## Individual Preparatory Work

- Complete assigned readings
- Complete assigned exercises
- Posting in Vstar Forums
- Gather in College groups for discussion on one Monday during the 4-week block





# LC Units during Immersion Phase

Work Individually Prior to Face to Face Session

- 1) Applied Ethics
- 3) Situational Leadership
- 5) Priority Setting
- 7) Dealing With Uncertainty

Face to face session 1-3pm

- 2) Lifelong Learning
- 4) Problem Solving
- 6) Change Management
- 8) Leading and Managing Up

Face to face session 3-5 pm





# Grading

- Students will receive one grade for the entire course (which will include completion of all 8 units—each unit block is weighted equally)
- LC-Immersion will be graded P/F
- Grades based on
  - Preparation
  - Participation—including both:
    - Unit specific work product (forum questions/ reflections/essays/assignments)
    - Verbal participation in group discussions





# Logistics of LC sessions

- Offered on a rolling schedule
- Offered 4x during your Immersion Phase

	July	August	September	October	November	December	January	February	March	April	May	June
Year 3	STEP 1										No LC Offered	No LC Offered
LC			LC1/LC2	LC3/LC4	LC5/LC6	LC7/LC8	LC1/LC2	LC3/LC4	LC5/LC6	LC7/LC8		
Year 4	No LC Offered	No LC Offered									Graduation	
LC			LC1/LC2	LC3/LC4	LC5/LC6	LC7/LC8	LC1/LC2	LC3/LC4	LC5/LC6	LC7/LC8		



# Logistics of Registering

- Registration via of YES! for each individual unit
- May not enroll in an LC unit during an acting internship (or away rotations)
  - May be taken during Research/ACEs/ISCs

**Must be physically present for LC**  
**In-College discussions**



# Typical Immersion Phase Block Rotation: Longitudinal Elements







	Sun	Mon	Tues	Wed	Thurs	Fri	Sat
Week 1			FHD				
Week 2			FHD				
Week 3		LC Group Meeting	FHD				
Week 4			FHD meeting				

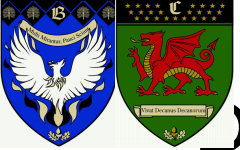


# Typical Immersion Phase Block Rotation: IF you are taking **PLAN**

	Sun	Mon	Tues	Wed	Thurs	Fri	Sat
Week 1			PLAN				
Week 2			PLAN				
Week 3		LC Group Meeting	PLAN				
Week 4			PLAN				

# Immersion Phase

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
8:00 AM- Noon	Immersion	Immersion	Immersion	Immersion	Immersion	Immersion	Immersion
1:00 PM- 5:00 PM	 <b>Learning Communities (Odd # units)</b>   <b>Learning Communities (Even # units)</b>   	<b>FHD or PLAN</b>	Immersion	Immersion	Immersion	Immersion	Immersion



# Dates for FACE TO FACE In-College Session

(ie must be physically present on campus to participate)

## **LC1/3/5/7/9 from 1-3pm and LC2/4/6/8/10 from 3-5pm**

- September block 2017 → Monday 9/18/17
- October block 2017 → Monday 10/16/17
- November block 2017 → Monday 11/13/17
- December block 2017 → Monday 12/11/17
- January block 2018 → Monday 1/22/18
- February block 2018 → Monday 2/26/17
- March block 2018 → Monday 3/26/17
- April block 2018 → Monday 4/23/17



# Questions?

Please direct questions to:

[Bill.Cutrer@Vanderbilt.edu](mailto:Bill.Cutrer@Vanderbilt.edu)

and

[Pam.Lynn@Vanderbilt.edu](mailto:Pam.Lynn@Vanderbilt.edu)



# **Foundations of Health Care Delivery**



# Foundations of Health Care Delivery: Course Goals

FHD will integrate students into clinical teams to care for individual patients while learning about the larger care delivery system. By immersing students in a longitudinal experience, the course will:

- Prepare professionals with systems level skills necessary to provide care that is safe, effective, patient-centered, timely, efficient, and equitable
- Integrate health systems science with clinical care
- Cultivate respectful professionals



# Foundations of Health Care Delivery

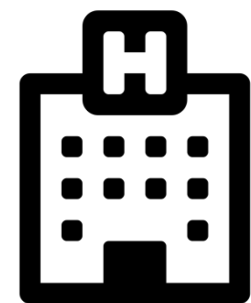
Year 1:  
Foundations of  
Medical Knowledge

The Health Care Team  
The Patient Within Care  
Medication Reconciliation  
Patient Education & Health Coaching  
Introduction to Patient Safety



Year 2:  
Foundations of  
Clinical Care

Social Determinants of Health  
Advocacy  
Transitions of Care  
High Value Care  
Settings of Care



Years 3 & 4:  
Immersion

Quality Improvement  
Patient Safety  
Advanced Communication  
Interprofessional Education\*  
Public Health and Prevention  
Health Care Economics and Policy



\*VPIL students fulfilled requirement during years 1 & 2

# Immersion Course Topics

1. Advanced Communication:
  - Overcoming barriers & personalizing communication (AC1) and skills for disclosure & professionalism (AC2)
2. Interprofessional Education:
  - The professions (IPE1) and team-based care (IPE2)
3. Quality Improvement (QI1-3)
4. Patient Safety (PS)
5. Advanced Population Health
  - Economics, Policy, and Public Health & Prevention





# FHD Immersion Course Information

- 6 units as a class during three one-week intersessions

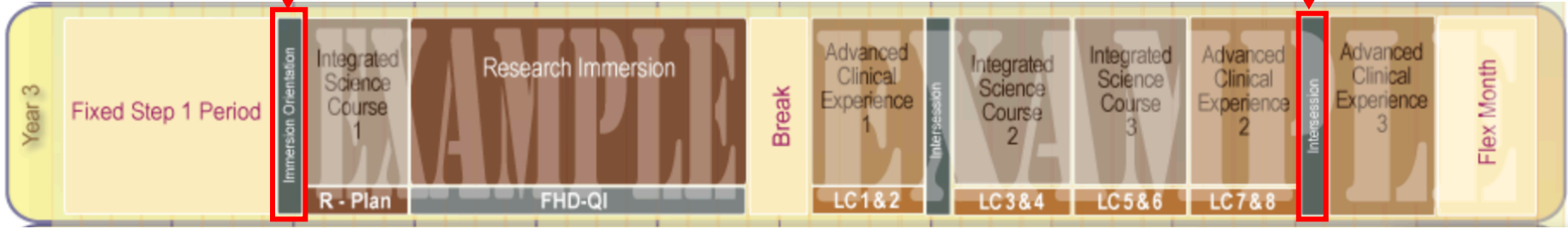


1

**AC1 and PHP**  
(Intro to Immersion Phase week)

2

**AC2 and IPE1**  
(3<sup>rd</sup> year spring intersession)



3

**HCE & HCP**  
(4<sup>th</sup> year winter intersession)

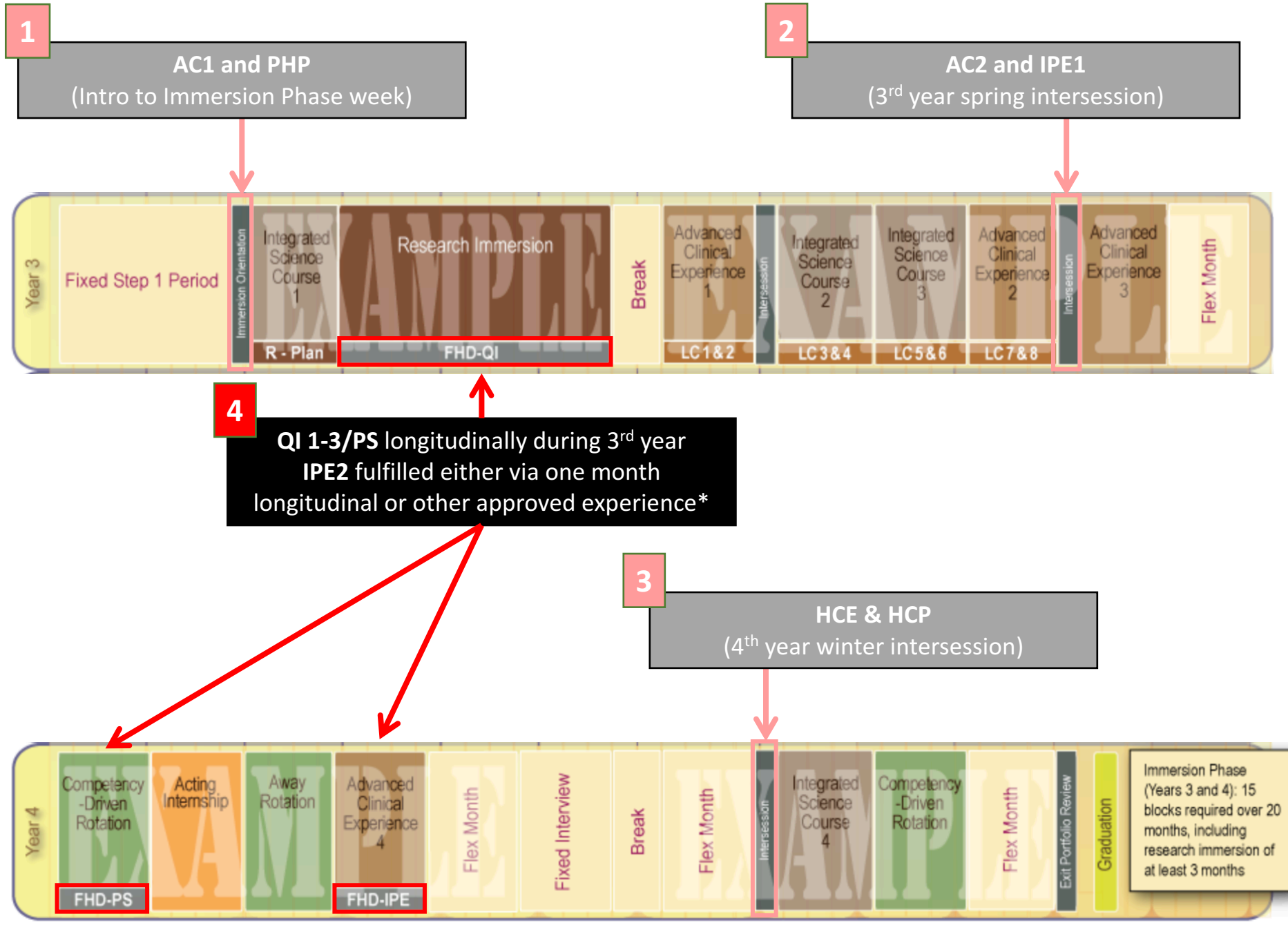


Immersion Phase  
(Years 3 and 4): 15  
blocks required over 20  
months, including  
research immersion of  
at least 3 months

# FHD Immersion Course Information

- 6 units as a class during three one-week intersessions
- 5 units longitudinally, mostly during 3<sup>rd</sup> year
  - Paired with a primary rotation
  - Tuesdays from 1-5 pm
  - 20 hours effort per unit
  - Primarily self-directed, asynchronous learning
  - **One or two face-to-face meetings (varies by course)**





\*Such as Nicaragua, Shade Tree, VPIL, or other approved interprofessional experience

# FHD Immersion Course Information

- 6 units as a class during 3 one-week intersessions
- 5 units longitudinally, mostly during 3<sup>rd</sup> year
  - Paired with a primary rotation
  - Tuesdays from 1-5 pm
  - 20 hours effort per unit
  - Primarily self-directed, asynchronous learning
  - One or two face-to-face meetings (varies by course)
- Pass/Fail except QI
- Can fulfill IPE2 via one month longitudinal OR other approved experience
  - Nicaragua, Shade Tree, VPIL, etc
- Multiple pathways to fulfill QI requirements
  - QI 1-3 via three 1 month longitudinals
  - QI Advanced Track (self-paced project)



# QI Grading

- 1 grade for QI 1-3 or Advanced Track
- Honors/High Pass/Pass/Fail, starting 9/1/17
- Grading done based on established rubrics
- New grading schema NOT retroactive



# FHD Immersion Course Information

<https://medschool.vanderbilt.edu/fhd/fhd-immersion-phase-courses>

- Lots of additional information:
  - Criteria for QI-Advanced Track projects
  - Immersion course prerequisites and pairing suggestions
  - Dual degree equivalencies for MBA/MPH students
  - Links to all syllabi
  - Wiki of QI projects
  - Course policy details (add/drop, group work, etc.)



# FHD Questions?

[fhd@vanderbilt.edu](mailto:fhd@vanderbilt.edu) or [jennifer.green@vanderbilt.edu](mailto:jennifer.green@vanderbilt.edu)

Course Directors:



**Jesse M. Ehrenfeld, M.D., M.P.H.**  
Departments of Anesthesiology,  
Surgery, Biomedical Informatics, &  
Health Policy



**Jennifer K. Green, M.D., M.P.H.**  
Departments of Internal Medicine &  
Pediatrics



**Heather A. Ridinger, M.D.**  
Department of Internal  
Medicine

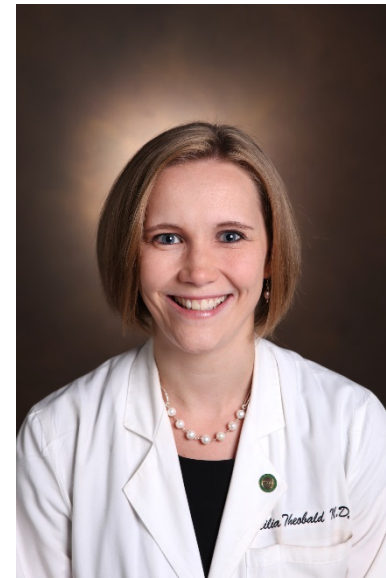




# Quality & Safety Coordinator

Questions regarding:

- QI completion
- QI advanced track
- Patient safety



**Cecelia Theobald, M.D., M.P.H.**  
Department of Internal Medicine



# Administrative Staff



**Program Manager**  
Heather Laney



**Program Coordinator**  
Ernest Guerra



**Program Coordinator**  
Eric Huffman

Light Hall 333

<https://medschool.vanderbilt.edu/fhd/>  
[fhd@vanderbilt.edu](mailto:fhd@vanderbilt.edu)





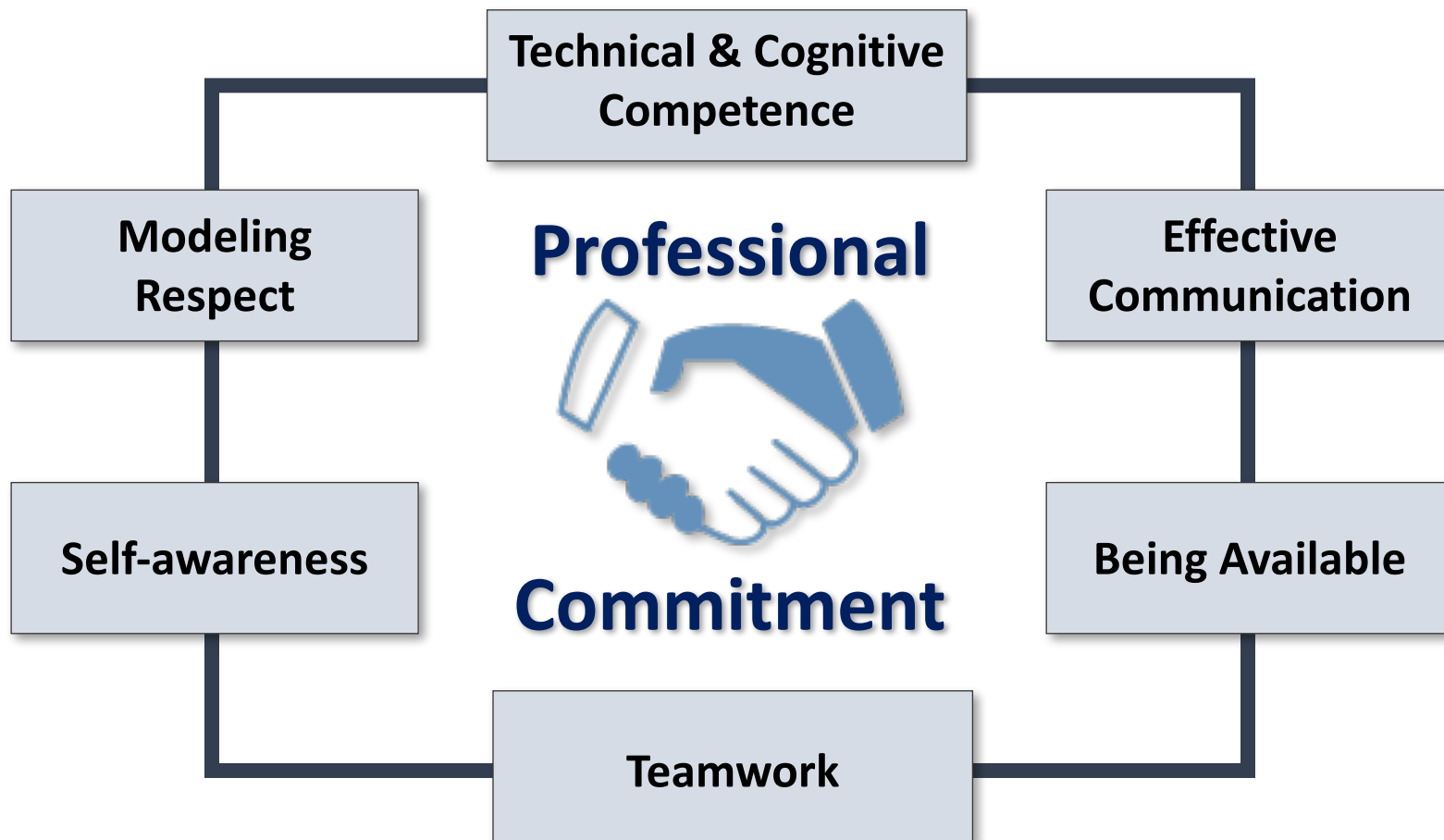
# Promoting Professionalism at VUMC: You Have an Important Role!

**Lynn E. Webb, PhD**

*Assistant Dean, School of Medicine  
Center for Patient and Professional Advocacy*



# Professionalism and Self-Regulation





# VUMC Credo

We provide excellence in health care, research and education.

We treat others as we wish to be treated.

We continuously evaluate and improve our performance.

- I make those I serve my highest priority
- I respect privacy and confidentiality
- I have a sense of ownership
- I conduct myself professionally
- I communicate effectively
- I am committed to my colleagues



# Sample Reported Learner Concerns

“During a feedback session, the attending told me ‘when you are presenting, in my head I am thinking, shut up, just shut up, I wish you would shut up, please shut up.’”

“I thought [the lecturer] was being disrespectful to anyone suffering from mental illness, even students with anxiety.”

“Dr. X said that we were all retarded.”

“We were on rounds and the resident said to me, ‘bend over, I need something to write on...it was very humiliating.’”

“I was placing the retractor; the attending slapped my hand. It hurt.”



# Definition of *Behaviors That Undermine the Learning Environment*

**Interfere with ability to achieve intended outcomes**

---

Threaten safety  
*(aggressive or violent physical actions)*

---

Create intimidating, hostile, offensive (unsafe), biased environment

---

Violate policies  
*(including conflicts of interest and compliance)*

---

*It's About Safety*



# What behaviors are “worth” reporting?

Feedback

Humiliation

Disrespect

Abuse

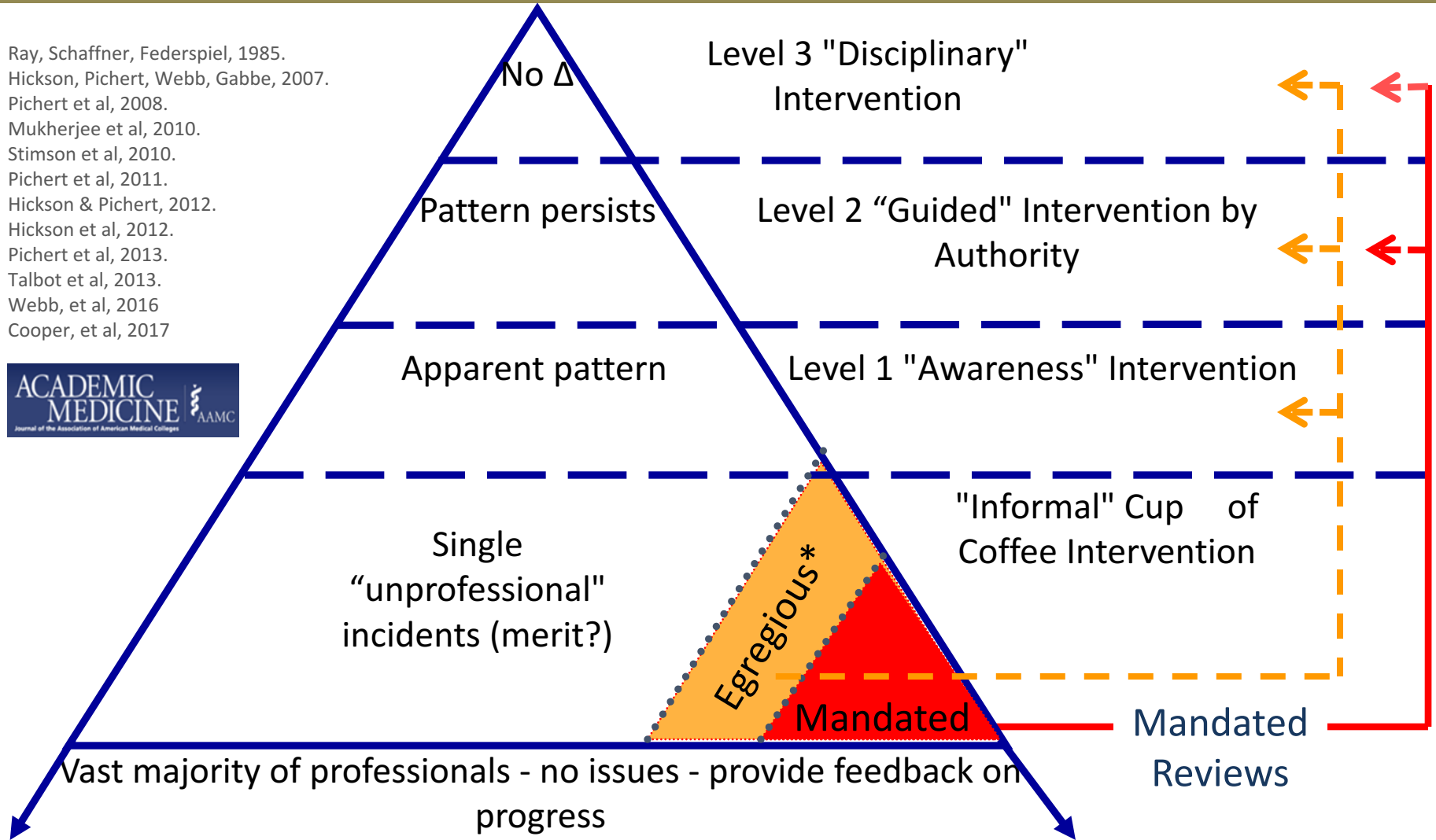
All reported events represent an opportunity to reflect





# How are data shared in a thoughtful way?

Ray, Schaffner, Federspiel, 1985.  
 Hickson, Pichert, Webb, Gabbe, 2007.  
 Pichert et al, 2008.  
 Mukherjee et al, 2010.  
 Stimson et al, 2010.  
 Pichert et al, 2011.  
 Hickson & Pichert, 2012.  
 Hickson et al, 2012.  
 Pichert et al, 2013.  
 Talbot et al, 2013.  
 Webb, et al, 2016  
 Cooper, et al, 2017



\*includes CMS-defined "condition level" and "immediate jeopardy" safety-related complaints

# Total credentialed clinicians (MD + APRN) at VUMC



2,634

# How many clinicians received a CORS report in FY 2017?

195

7.4%



# How many clinicians received an awareness intervention in FY 2017?

22

0.8%



# How many clinicians did not respond to a CORS awareness intervention?





# Our Approach:



Help learners feel safe to report



Equip “trusted” faculty to help learners reflect on event and encourage reporting



Use standard VUMC processes to address behavior



Consider timing of feedback to minimize potential impact on the learner



Options for those who experience or witness conduct inconsistent with Credo:



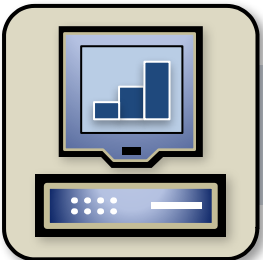
Informal/Collegial feedback with the Professional (Cup Of Coffee)

AND/OR



Search out a trusted faculty member to share the concern

AND/OR



Report occurrence in Veritas



# Trained Faculty Resources:

- College Advisors/Portfolio coaches
- Clerkship and Course Directors
- Associate/Assistant Deans
- Faculty Coordinator:
  - Lynn Webb, PhD
  - [Lynn.Webb@Vanderbilt.edu](mailto:Lynn.Webb@Vanderbilt.edu)
  - Cell: (615) 429-2827





# What questions do you have for me?

[www.mc.vanderbilt.edu/cppa](http://www.mc.vanderbilt.edu/cppa)

# **Aways, Add/Drops, Degree Audit and more**

Office of Enrollment Services

<https://medschool.vanderbilt.edu/enrollment/>



# Office of Enrollment Services (OES)

- Admissions, **Student Records**, Financial Aid
- 303 Light Hall
- Student Records related services:
  - Course Registration
  - Maintenance of academic records
  - Credentialing
  - Verifications
  - Academic credentialing
  - Away rotation support
  - Degree audit services
  - Grade recording



# Know Your Rotation Schedule

- You are currently registered through June 2018
- Log into YES (<http://yes.vanderbilt.edu>)
- Click on Student Registration
- For ACEs and ISCs, section number corresponds to rotation month. e.g. 09 for September, 10 for October, etc.

















# What is my schedule?

Email: [REDACTED]  
Commodore ID: [REDACTED]

**Medical Doctor Career**

Adviser(s): Joseph Gigante  
**Doctor of Medicine Degree**  
School: *School of Medicine*  
Classification: *Professional Doctoral Year 4*  
Degree Expect Term: *2016 Year*

Click here  
to view  
schedule

 <a href="#">Academic Record</a>	 <a href="#">Address Change</a>	 <a href="#">Anchor Link</a>
 <a href="#">Billing Portal</a>	 <a href="#">Blackboard</a>	 <a href="#">Degree Audit</a>
 <a href="#">Direct Deposit</a>	 <a href="#">DoreWays</a>	 <a href="#">Graduation</a>
 <a href="#">Message Center</a>	 <a href="#">Mobile YES</a>	 <a href="#">Student Registration</a>
 <a href="#">Transcript Request</a>	 <a href="#">Writing Studio Appt.</a>	



# What is my schedule?

The screenshot shows a web interface for a university course catalog. At the top left, there are two dropdown menus: "2016 Year" and "All Sessions". To the right, there is a summary bar with four columns: "SEARCH" (with a magnifying glass icon), "IN CART" (0.0 HRS), "ENROLLED" (0.0 HRS), and "ENROLLMENT DATES" (APR 28 2016). Below this, there is a paragraph of text about a course numbering scheme change, followed by a "Search Classes" section with a search input field and a "Search" button. Two red arrows point from the text below to the "2016 Year" dropdown and the "0.0 HRS" in the "ENROLLED" column.

Effective Fall 2015, Vanderbilt University has introduced a new course catalog numbering scheme. For assistance with the translation between old and new numbers, please consult the [Course Renumbering Lookup Tool](#).

**Search Classes** »

Enter subject area, course number, or title   Advanced

**2017 Year = 2017-18 =  
July 1, 2017 through  
June 30, 2018**

**Click here to  
see all  
enrolled  
courses**



# Timelines for Adding and Dropping

Self-service (via YES) adding and dropping is available throughout the academic year subject to the following deadlines:

- No less than 6 weeks in advance for
  - ACE Emergency Medicine
  - ACE Primary Care
  - All ISCs
- No less than 4 weeks in advance for all other ACEs
- No less than 1 week in advance for all individual (non-intersession) FHD units
- For details, see <https://medschool.vanderbilt.edu/enrollment/2016-2017-academic-calendars>



# Late Requests to Add or Drop

- Late requests to add or drop are evaluated case-by-case.
  - **Immersion rotations** - Immersion Phase Team ([immersion.phase@Vanderbilt.edu](mailto:immersion.phase@Vanderbilt.edu))
  - **FHD Immersion** - FHD Team ([fhd@Vanderbilt.edu](mailto:fhd@Vanderbilt.edu))
- Send email request explaining why deadline was not met.
- If drop or add is approved, complete the form at <https://medschool.vanderbilt.edu/enrollment/forms>





# Special Studies

- Can be clinical or research
- In select cases, can be non-clinical and non-research
- Requires a faculty mentor with a full faculty appointment
- Does **not** count toward ACE, ISC or AI
- Not designed as an alternative to ACE, ISC or AI
- Must be approved by the Immersion Phase Team
- Approval form is available on OES website



# Special Studies Approval Forms

- Designed to be collaboratively completed by student and faculty mentor.
- Final submission is made to OES by **faculty mentor**.
- Form is at <https://medschool.vanderbilt.edu/enrollment/forms>

















# Degree Audit

Email: [REDACTED]  
Commodore ID: [REDACTED]

**Medical Doctor Career**

Adviser(s): Joseph Gigante  
Doctor of Medicine Degree  
School: *School of Medicine*  
Classification: *Professional Doctoral Year 4*  
Degree Expect Term: *2016 Year*

**Click here to  
view degree  
audit**

 <a href="#">Academic Record</a>	 <a href="#">Address Change</a>	 <a href="#">Anchor Link</a>
 <a href="#">Billing Portal</a>	 <a href="#">Blackboard</a>	 <a href="#">Degree Audit</a>
 <a href="#">Direct Deposit</a>	 <a href="#">DoreWays</a>	 <a href="#">Graduation</a>
 <a href="#">Message Center</a>	 <a href="#">Mobile YES</a>	 <a href="#">Student Registration</a>
 <a href="#">Transcript Request</a>	 <a href="#">Writing Studio Appt.</a>	



# Degree Audit

- Designed to track progress toward degree completion
- Helps you know which “bucket” a course or rotation falls into
- Available to you and your portfolio coach in YES



## Immersion Phase

✘ Not Satisfied

**Description:** The Immersion Phase is a highly individualized period that builds upon the foundational knowledge acquired earlier, in a context that is most relevant to each student's individual interests. Immersion courses will solidify clinical skills; deepen foundational science knowledge through meaningful clinical engagement; allow students to dive into areas of personal learning needs and/or interest; expand knowledge and skills in leadership and scholarship; ensure readiness for residency; and enhance workplace learning skills. Students will select from a broad menu of courses including Integrated Science Courses, Advanced Clinical Electives, Acting Internships and Concentrations. During a portion of the immersion phase, students will participate in a three- to six-month mentored research experience, tailored around each student's particular research and clinical interests. The longitudinal curricular elements of Foundations of Healthcare Delivery and Learning Communities will remain integral to student development during the Immersion Phase.

Requirement(s):

Primary Care Check

✘ Not Satisfied

Acute Care Check

✔ Satisfied

Immersion Core

✘ Not Satisfied

**Description:** Minimum of 15 courses required over 22 months

**Courses:** 15 required, 7 taken, 8 needed

Integrated Science

✘ Not Satisfied

Acting Internship

✘ Not Satisfied

Advanced Clinical Experiences

✘ Not Satisfied

Research Immersion

✔ Satisfied

Competency and Interest-Driven Rotations - (Clinical)

✘ Not Satisfied

Competency and Interest-Driven Rotations

✘ Not Satisfied

Immersion Longitudinal

✘ Not Satisfied

Description: Immersion Longitudinal

Foundations of Health Care Delivery Intersessions

✘ Not Satisfied

Quality Improvement and Patient Safety

✘ Not Satisfied

Interprofessional Education

✘ Not Satisfied

EPA Week

✔ Satisfied

Learning Communities

✘ Not Satisfied

PLAN

✔ Satisfied

# Degree Audit

- Remember: Current enrollments only go through June 2018
- You will register for 2018-19 in April 2018
- Audit assumes successful completion of in-progress coursework
- Audits are automatically “refreshed” weekly
- Self-service “refresh” button is available



# Degree Audit Refresh

Medical Doctor

Refresh My Audits

Print

*Degree audits are for advisory purposes only and do not certify progress in the degree. Please refer to the appropriate school catalog as the authoritative document governing degree requirements. The student, in consultation with the adviser, should carefully review both sources.*

*NOTE: The audit assumes the successful completion of enrolled classes; classes in progress display as "satisfied" in the audit. Students and their advisers should check the audit carefully before concluding that a distributional or major requirement has been completed.*

Hide Disclaimer

*Effective Fall 2015, Vanderbilt University has introduced a new course catalog numbering scheme. For assistance with the translation between old and new numbers, please consult the [Course Renumbering Lookup Tool](#).*

**Self-service refresh**





# Alternative Pathways

- Dual degree
- Research year
- Form available at <https://medschool.vanderbilt.edu/enrollment/student-alternative-path-request>
- Must declare pathway to completing Immersion requirements
- Must be approved by Dean Fleming
- Not approved until you've received written approval from Dean Fleming



# Most Common Specialties for Away Rotations

Dermatology

Emergency Medicine

Ophthalmology

Orthopaedics

Otolaryngology

Neurosurgery

Plastic Surgery



# Pursuing AWAY Rotation

- You are eligible once FCC phase is complete and you have taken and passed Step 1.
- Form and instructions are at <https://medschool.vanderbilt.edu/enrollment/forms>
- You will **not** self-service register. You will work closely with Office of Enrollment Services to:
  - Apply for away rotations
  - Register for away rotations
- You can apply for **most** away rotations through the Visiting Student Application Service (VSAS) which is sponsored by the Association of American Medical Colleges (AAMC).
- FOLLOW THE VUSM APPROVAL PROCESS!
- Not covered for liability if not enrolled in the experience at VUSM



## Visiting Student Application Service

### Logging in for the First Time?

Before you can log into VSAS, your home school or medical institution must grant you access. You will receive a "VSAS: New User Instructions" email containing login instructions once you have been granted access.

Students who have not yet been granted access should contact the office or person who assists with 4th year scheduling regarding VSAS access.

### About VSAS

The Visiting Student Application Service (VSAS) is an AAMC application designed to make it easier for medical students to apply for senior electives at U.S. medical schools and teaching hospitals. Please visit our [VSAS website](#) for detailed information and resources.

### Do I need to use VSAS?

Students will use VSAS only if enrolled at a U.S. LCME-accredited medical school or participating COCA-accredited AACOM member school and applying for senior away electives at any [VSAS host institutions](#).

If not applying to one of these institutions, please review the [Extramural Electives Compendium \(EEC\)](#) for visiting student application information.

International students may also review information about the [Global Health Learning Opportunities \(GHLO\)](#) service.

### VSAS Help

**Contact VSAS Help Desk:** Contact us by e-mail ([vsas@aamc.org](mailto:vsas@aamc.org)) or phone (202-478-9878) Monday - Friday, 9 a.m. - 5 p.m. ET

**FAQs:** Review our [frequently asked questions](#) !

**Connect with VSAS on Facebook:** <http://www.facebook.com/AAMCMedStudent>

### Login

[Click Here to Login](#)

### Quick Elective Search

Search VSAS host institution electives:

Keywords

Specialty

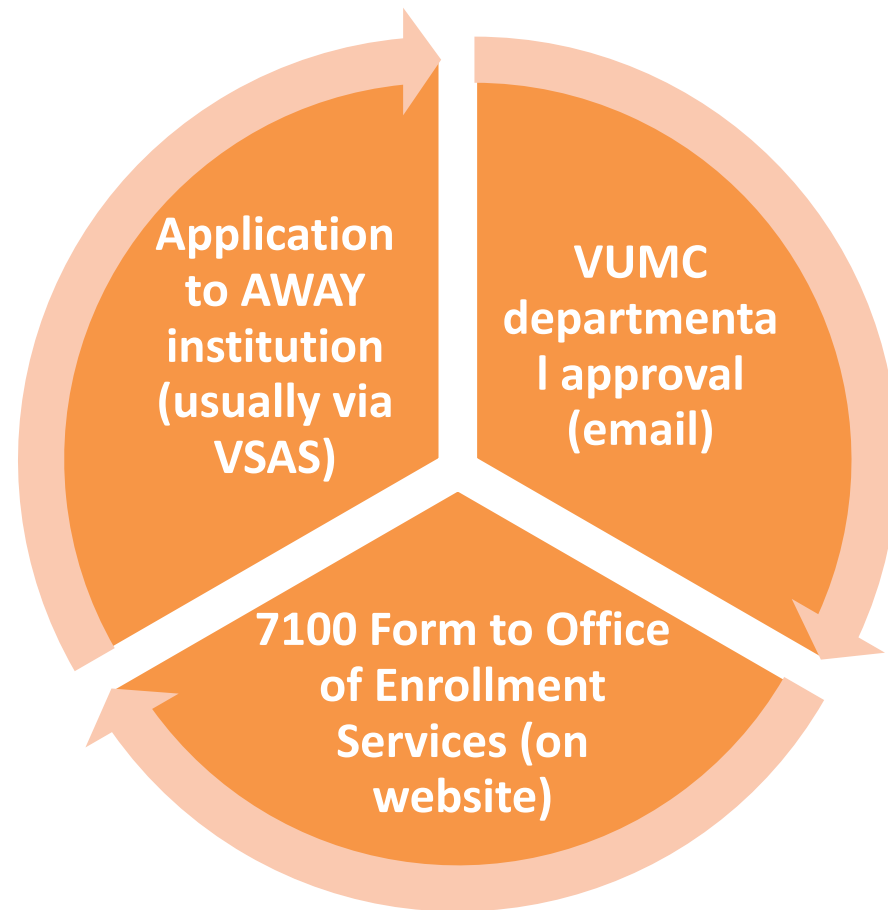
State

[Advanced Search](#)

Looking for institution information? Try the [list of host institutions](#).



# Process for Pursuing AWAY Rotation



# *Process for Pursuing AWAY Rotation*

- Office of Enrollment Services **MUST** receive notification from VU departmental approver. [see website for list]
- You are not registered until your form is submitted, departmental approval is received, and you see the rotation listed in YES.
- **ALWAYS** check for schedule conflicts and remember the immersion rotation drop deadlines.
- In early 2018 we will conduct extensive in-person overview of the process.



# Questions?

Office of Enrollment Services  
303 Light Hall  
Ph. 615-322-2145  
medregistrar@vanderbilt.edu  
Monday-Friday 8am-4:30pm

## **Student Records Staff**

**Logan Key**

**Melissa Carro** (away rotations;  
credentialing)

**David Swayze** (enrollment; registration)

**Meredith Wood** (general assistance with  
enrollment or financial aid)

