

# Immersion Phase

## MSTP Introduction

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# Outline

- Phase Goals and Requirements
- Step 2 Considerations
- ACE Overview
- Entrustable Professional Activities (EPAs)
- Assessment & Grading
- Professionalism
- Logistics



# MSTP Registration Timeline

You are here



Feb                      March                      April                      May                      June                      July                      Aug                      Sept

2/19

3/27

4/5

4/8

4/15

4/22

5/2

8/26

Rising VMS3  
IP Requirements  
Meeting

Careers in Medicine  
ISC Fair  
March 27 at 5 pm  
EBL 238

How-to Register  
Meeting  
April 4 at 5 pm  
EBL 238

Registration opens for  
rising VMS4 MSTPs  
April 8 at 6 pm

Registration opens  
for rising VMS4  
April 15 at 6 pm

Registration opens  
for rising VMS3  
April 22 at 6 pm

Registration  
reopens for ALL  
May 2 at midnight

Immersion  
Phase 2019-20  
begins

Immersion Phase  
Orientation for  
VMS3

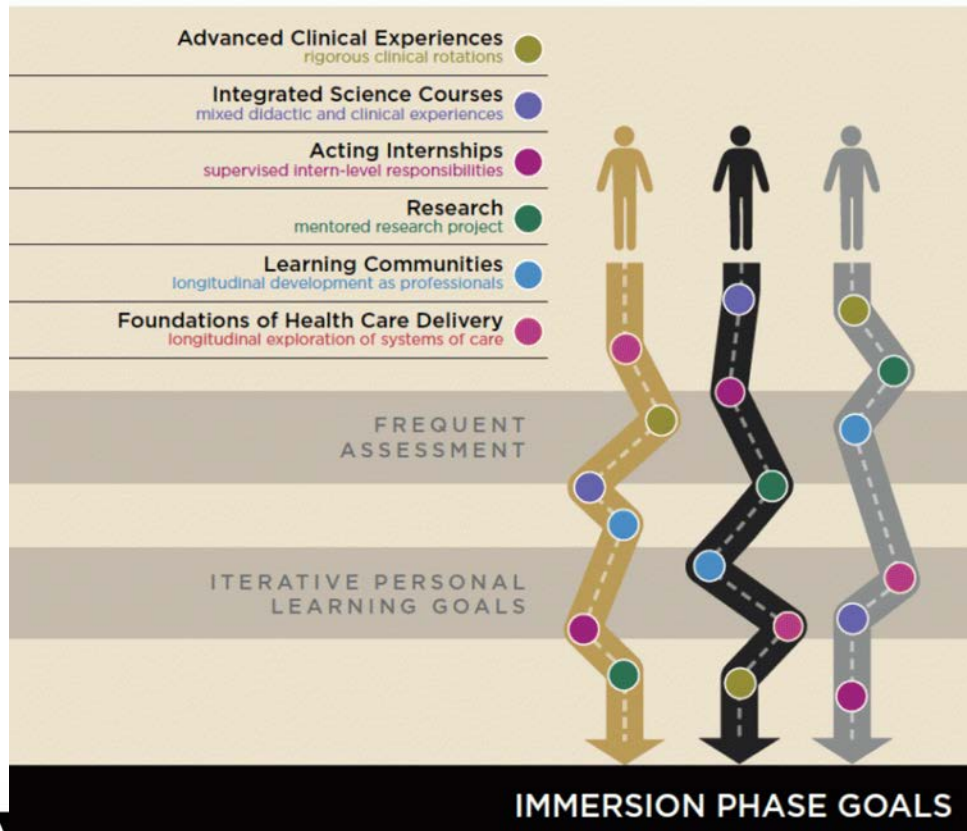


# Immersion Phase Goals & Graduation Requirements



## 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**

# C 2.0 Immersion Phase: Course Types

## ACE: Advanced Clinical Experience

- Rigorous clinical experience

## ISC: Integrated Science Course

- Didactic and clinical experiences

## AI: Acting Internship

- Supervised intern-level responsibilities

## AE: Advanced Elective

- Competency- or interest-driven
- Usually non-clinical setting

## Special Studies

- Competency- or interest-driven rotation
- Tailored course
- NOT in the catalog



# What to expect?



# Pre-C2.0 Class

*Requirements*





# Pre-C2.0 MD-PhD Immersion Phase Requirements

<https://medschool.vanderbilt.edu/ume/md-phd-prec2o>

Minimum Immersion Phase Requirements (in Months)		
On-Campus	1	Integrated Science Courses (ISCs)
	1	1 Acting Internship/certain ACEs*
	2	Advanced Clinical Experience (ACEs)
On-Campus or Away (away with approval)	4	Competency and Interest-Driven Rotations** (can be ISCs, ACEs, AIs or Electives#)
8 required months	Must include: 1 Primary Care course (either ACE or ISC) 1 Acute Care course (EM or ICU-based course)	
2	<i>Flex months</i>	
*ACEs that were previously Sub-Internships will count for this credit		
**two must be clinical rotations		
#Any requests for research months (elective) must be approved by Dr. Estrada.		



# ACEs that will meet the Immersion Phase Sub-I Requirement

Course #	Course Name
MED 5613	ACE: Critical Care, VU
MED 5610	ACE: CInI Nephrology
MED 5780	ACE: Medical Oncology
MED 5785	ACE: Hematology-Oncology
NEUR 5620	ACE: Stroke
OBN 5635	ACE: Clinical Obstetrics
OBN 5655	ACE: Gynecologic Oncology
OBN 5660	ACE: Fem Pelv Med and Recon Surg
PED 5635	ACE: Pediatric Hematology/Oncology
PED 5830	ACE: Pediatric Emergency Med
PED 5990	ACE: Pediatric Critical Care
PSYCH 5620	ACE: Neuropsychiatry
PSYCH 5625	ACE: Child & Adol. Psy Consult
PSYCH 5641	ACE: Inpatient Treatment of Psychosis
PSYCH 5645	ACE: Adlt Psych Consult-Liason
SURG 5613	ACE: Surgery, VAH
SURG 5614	ACE: Surg Critical Care
SURG 5615	ACE: Vascular Surgery
SURG 5617	ACE: Colon and Rectal Surgery
SURG 5618	ACE: Hepatobiliary
SURG 5620	ACE: Neurological Surgery
SURG 5621	ACE: Post-Surgical Critical Care, VAH
SURG 5630	ACE: Cardiac Surgery
SURG 5632	ACE: Thoracic Surgery
SURG 5660	ACE: Pediatric Surgery
SURG 5670	ACE: Surgical Oncology and Endocrinology
SURG 5680	ACE: Plastic Surgery
UROL 5640	ACE: Urology

# Pre-C2.0 MD-PhD Longitudinal Immersion Phase Requirements

On Campus	Unit	Mode of Delivery	Mode of Registration	Required Meeting
Yes	Learning Communities Unit 1 (LC1)	Sept or Jan of Immersion Phase	Self-Enroll (yes.vanderbilt.edu)	Monday 3 <sup>rd</sup> week (1-3p)
No	FHD-Advanced Communications 1 (AC1)	VSTAR Learn Course + CELA* (Self-paced)	Coordinated through Dr. Estrada	
No	FHD-Advanced Communications 2 (AC2)	VSTAR Learn Course + CELA* (Self-paced)	Coordinated through Dr. Estrada	
No	FHD-Interprofessional Education 1 (IPE1)	VSTAR Learn Course (Self-paced)	Coordinated through Dr. Estrada	
Yes	FHD-Interprofessional Education 2 (IPE2)	Pair with ACE in Immersion Phase	Self-Enroll (yes.vanderbilt.edu)	Tuesday 4 <sup>th</sup> Week (1-5p)
No	FHD-Institute for Healthcare Improvement (IHI) Modules	VSTAR Learn Course (Self-paced)	Coordinated through Dr. Estrada	

*\*CELA events for AC1 & AC2 will be schedule in March for MSTP students.*



# Institute of Healthcare Improvement (IHI): Required for GME

- Required IHI courses are
  - QI 101 – 105
  - PS 102, PS 104
    - 7 total courses
- Total time estimated to complete = 9.25 hours
- V\*LEARN Course
  - Upload completion certificates
  - Due before graduation (Encouraged to complete as early as possible)



# C2.0 Class

*Requirements*



# C2.0 MD-PhD Immersion Phase Requirements

Minimum Immersion Phase Requirements (in Months)		
On-Campus	1	Integrated Science Courses (ISCs)
	1	1 Acting Internship
	2	Advanced Clinical Experience (ACEs)
On-Campus or Away (away with approval)	4	Competency and Interest-Driven Rotations* (can be ISCs, ACEs, AIs or Electives <sup>#</sup> )
8 required months		Must include: 1 Primary Care course (either ACE or ISC) 1 Acute Care course (EM or ICU-based course)
2		<i>Flex months</i>
*two must be clinical rotations		
<sup>#</sup> Any requests for research months (elective) must be approved by Dr. Estrada.		



# C2.0 MD-PhD Longitudinal Immersion Phase Requirements

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Yes	Learning Communities Unit 1 (LC1)	Sept or Jan of Immersion Phase <sup>#</sup>	Self-Enroll (yes.vanderbilt.edu)	Monday 3 <sup>rd</sup> week (1-3p)
Yes	Learning Communities Unit 2 (LC2)	Sept or Jan of Immersion Phase <sup>#</sup>	Self-Enroll (yes.vanderbilt.edu)	Monday 3 <sup>rd</sup> week (3-5p)
Yes	Learning Communities Unit 5 (LC5)	Nov or March of Immersion Phase	Self-Enroll (yes.vanderbilt.edu)	Monday 3 <sup>rd</sup> week (1-3p)
Yes	Learning Communities Unit 7 (LC7)	April of Immersion Phase	Self-Enroll (yes.vanderbilt.edu)	Monday 3 <sup>rd</sup> week (1-3p)
No	FHD-RR-Quality Improvement (QI)	VSTAR Learn Course (Self-paced) - Gphase	Coordinated through Dr. Estrada	
Yes	FHD-Interprofessional Education 2 (IPE2)	Pair with ACE in Immersion Phase	Self-Enroll (yes.vanderbilt.edu)	Tuesday 4 <sup>th</sup> Week (1-5p)
Yes	FHD-Patient Safety (PS)	Pair with Immersion Phase Course	Self-Enroll (yes.vanderbilt.edu)	Tuesday 1st and 4 <sup>th</sup> Week (1-5p)
Yes	FHD-Health Care Economics (HCE)	VSTAR Learn/In person	Auto-enrolled in YES	February FHD Immersion Week
Yes	FHD-Health Care Policy (HCP)	VSTAR Learn/In person	Auto-enrolled in YES	February FHD Immersion Week
No	FHD-Institute for Healthcare Improvement (IHI) Modules	VSTAR Learn Course (Self-paced)- Gphase	Coordinated through Dr. Estrada	



# Institute of Healthcare Improvement (IHI): Required for GME

- Required IHI courses are
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# Step 2 Considerations: For All

*Recommendations From Dean of Student Affairs specific to MSTP students returning from G-phase to FCC/Immersion 4th year.*

- Sooner is better: after FCC phase recommend taking Step 2 CK (July-Sept/Oct).
  - About 1/3 of programs are asking for Step II CK in order to give out interviews.
  - We haven't seen lack of Step II CK hold back MSTP students from getting their interviews.
  - But, will need it well before rank lists in February. Don't postpone.
- There are many programs that want Step II CS before they will rank (after interviews)
  - Consider taking it before Nov of Immersion Phase year.
  - Check the USMLE website for guidance on reporting times.
  - Some programs will absolutely not rank students who haven't passed Step II CS.
  - CS also is harder to schedule and you have to travel to one of five cities, so plan in advance.
  - Information about CS exam is on Vandy CiM workshop site. Dr. Yakes talk is on mediasite and a must see, practice CELA sessions available for CS.
- For more one-on-one advice: contact Dean Fleming and attend the CiM Fair (March 27)

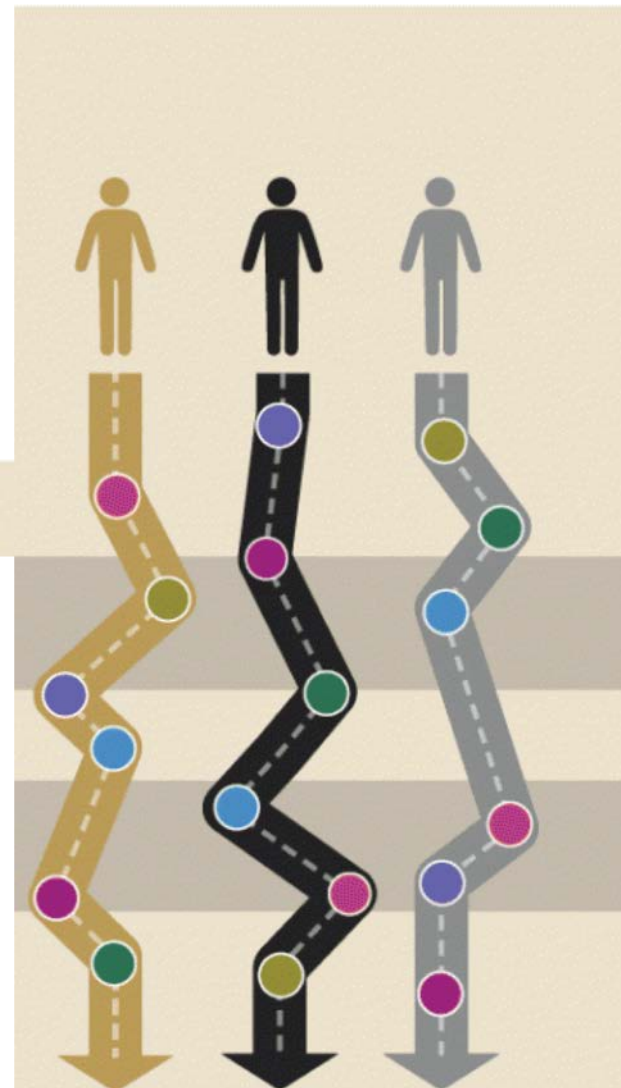
View: [Mediasite Link](#)

Download: [Dr. Beth Ann Yakes' Step 2 CS PowerPoint Presentation](#)



Advanced Clinical Experiences  
rigorous clinical rotations

# ACE Overview



# ACE Overview

## Overarching Goals for ACEs

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

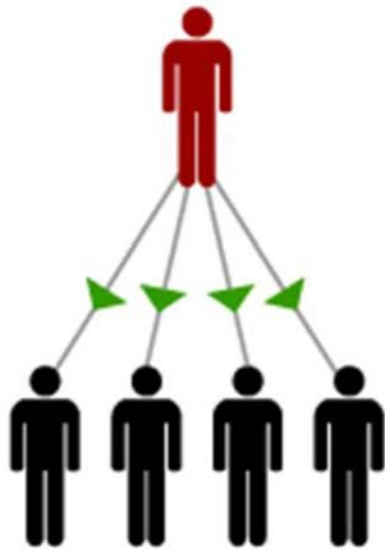
## Opportunities to enhance practice-based learning skills:

- 1) Student learning plan
- 2) Practice-based learning exercise

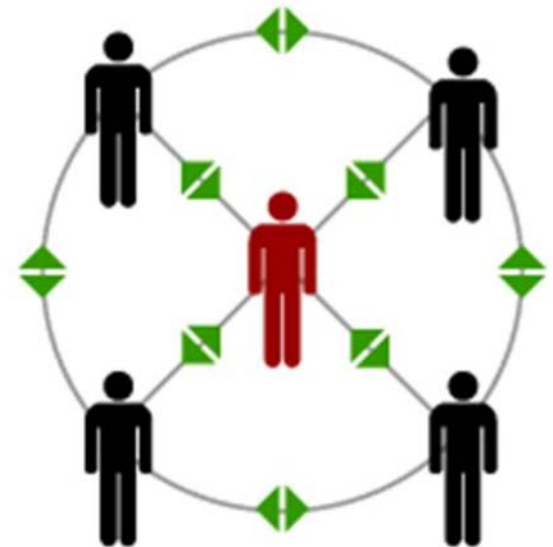


# Student Learning Plan: Why?

Teacher Directed



Learner Directed



# Student Learning Plan: How To

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
4. Print the form and take to your ACE on Day 1
5. Have a discussion with clinical preceptor(s) (attending, resident)



# Student Learning Plan: Form

## 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

2

3

4

5

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?

# Tips for Communicating Your Learning Plan

- Have the conversation with whoever will be your primary clinical preceptor (faculty, fellows, residents)
- Have the conversation early (week 1, day 1) and often
- 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”
  - “Can I touch base with you quickly about the plan for this clinical session?”
- Be confident but not brash. Be open to feedback and redirection if your preceptor suggests different goals



# Advantages of a Student Learning Plan

- Take ownership: 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 clinical environment
- Develop the habit (VERY LITTLE DIRECTION IN GME)





# Practice-Based Learning Exercise: Why?

- Medicine is dynamic
- Providers have knowledge gaps
  - Average time lag of 17 years to translate discovery into clinical practice
- Learning to learn in the workplace



# Practice-Based Learning Exercise: How To

- Goal: Form a clinical question and retrieve evidence to advance patient care
- Do as often as you can



## STEP 1: ASK 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 answer the question
- Select an appropriate resource(s) to answer the question
  - Guidelines vs. textbooks vs. systematic reviews vs. primary literature



STEP 3:

APPRAISE

Evidence

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



## STEP 4: ADVISE

- Verbalize clear practice recommendations to your team
  - During rounds or one-on-one discussions



# Practice-Based Learning Exercise: Assessment

- Embedded in the standard VSTAR Portfolio activity for each ACE
- Request assessment via Compass



# Practice-Based Learning Exercise: Assessment

## 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?



# What is an EPA?

- Unit of professional practice
  - Tasks or responsibilities that trainees (i.e. YOU) are entrusted to perform unsupervised once they have attained sufficient competence
- EPAs 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 with **indirect supervision 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



Collaborate as a member of an interprofessional team

### EPA 10



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

### EPA 11



Obtain informed consent for tests and/or procedures

### EPA 12



Perform general procedures of a physician

### EPA 13



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

# Practice-Based Learning Exercise: Assessment

## 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?

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  - I'll double check all of your findings
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3. What does this student need to work on to become more independent or to allow you to act upon their findings?





Dermatology Syllabus 59.2KB Word 2007 document



Announcements



ACE Student Handbook

Absence Request Form

Required Student Learning Plan

Assessment Overview

How to use Compass

# VSTAR Learn

## First Day of Course

Dr. Zic will send students an email the weekend before they start with information on where to report. If students have not heard from the course director before the course starts, they may contact him using the following phone number. Students may only contact faculty during the hours of 8 am and 8 pm, and preferably not on weekends.

Dr. Zic: 615-423-5299

*Additional information can be found in the IP Catalog (Google Version).*

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

Students will be expected to form clinical questions and retrieve evidence to advance patient care (EPA 7). Assessment of this skill is embedded in the standard course Compass form. 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 (Patient-Intervention-Comparison-Outcome) 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

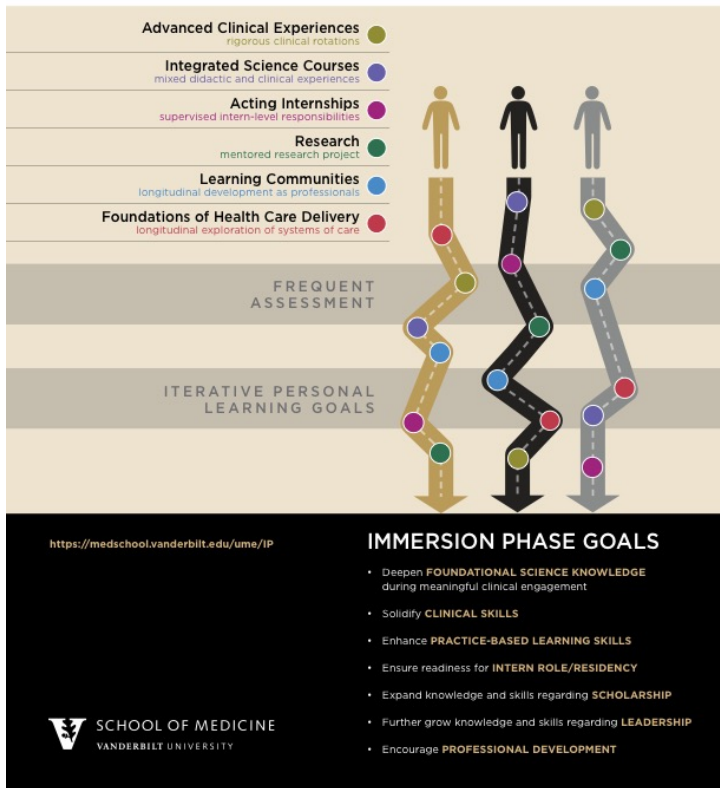
<https://medschool.vanderbilt.edu/ume/IP>



# 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

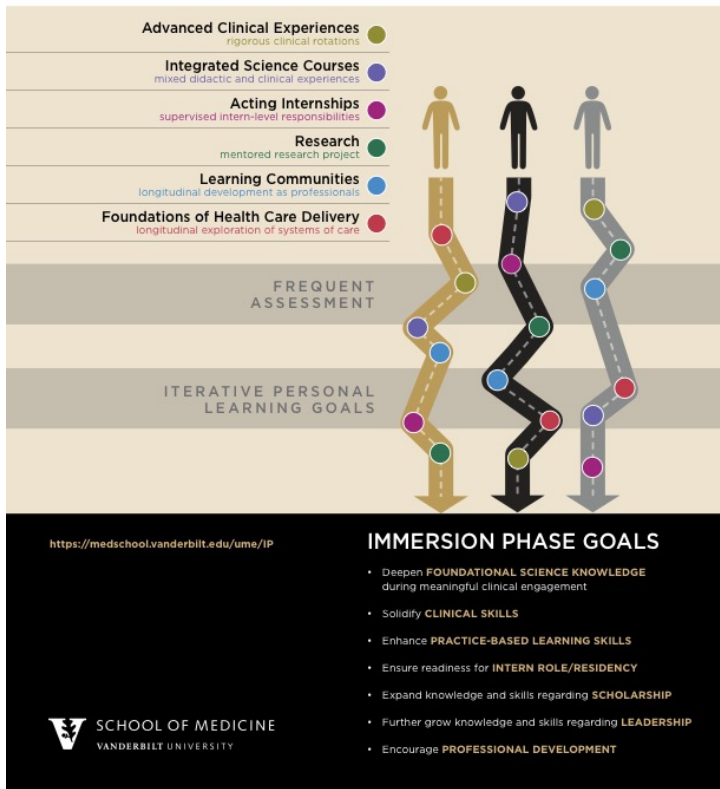




# Grading in the Immersion Phase

## Curriculum 2.0: Immersion Phase

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## 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)



**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)

# 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 demeanor	PR1a

# ACEs

PATIENT CARE	
Differential dx	PC2b
Diagnostic workup	PC2c
Self-knowledge of limits	PC7a
Assessment and Plan	PC7b
MEDICAL KNOWLEDGE	
Depth	MK2b
INTERPERSONAL COMMUNICATION	
Rapport with patients and families	IPCS7a.1
Content of presentations to colleagues	IPCS7b.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 7:** Form a clinical question and retrieve evidence to advance patient care

# Als

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



# Frontline Clinical Faculty/Residents

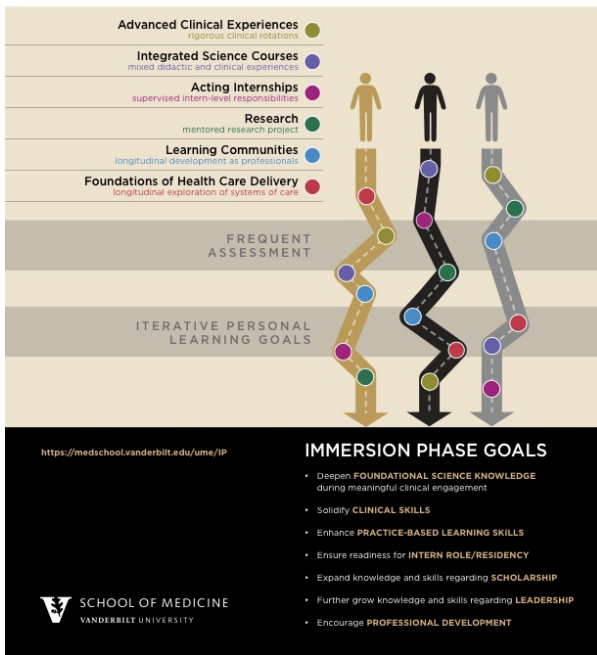


Student



## 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 – VSTAR Portfolio
- Immersion Phase Coordinator – VSTAR Portfolio
- **Learner (You!) – Compass**

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



# Compass: Best Practice

- You will use Compass to request data in all ACEs, AIs and ISCs ([www.vstarcompass.com](http://www.vstarcompass.com))
- Request feedback from clinicians (residents or attendings) with whom you have worked.
- Send requests at least 2x per week.
- Helpful to inform assessor before you send.
- N/A option for assessors



# Compass: AI Example



☰

Compass★

🔍 Filter items...

**Feedback**

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

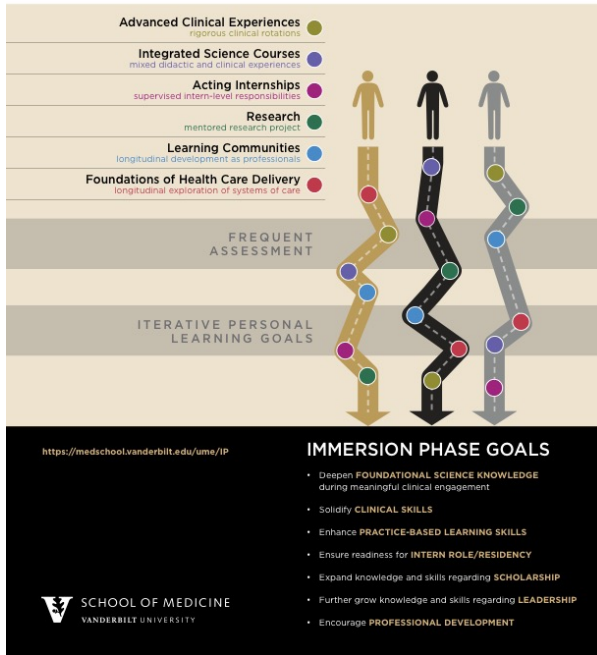
Students in their AI will have additional EPA activities



# 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

Current milestones with Target Levels

Activity Title	Assessor	Completed	pc2b	pc2c	pc7a	pc7b	mk2b	mk7b	mk7c	ipcs7a.1	ipcs7b.1	pbl3d	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	
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



**Medical Knowledge**

Understands established and evolving biological, clinical, epidemiological and social-behavioral sciences and must be able to apply this knowledge to patient care.

REACH

**Patient Care**

Provides care that is compassionate, culturally sensitive, safe, efficient, cost sensitive, appropriate, and effective for the treatment of illness and the promotion of health.

REACH

**Interpersonal and Communication Skills**

Able to communicate in ways that result in safe, culturally sensitive, effective and respectful information exchange and create beneficial partnerships with patients, their families, and other health professionals.

REACH

**Systems-based Practice**

Understands and responds to the larger context and system of healthcare and effectively call on system resources to provide care that is of optimal value.

TARGET

**Practice-based Improvement and Learning**

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 knowledge to individual patients and populations.

REACH

**Professionalism**

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. Professionalism applies to formal and informal interactions in education systems, in health care practice settings, and in the wider community.

REACH



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



**For clinical courses:** [optional]

Rate suitability for appointment as a resident on your service:

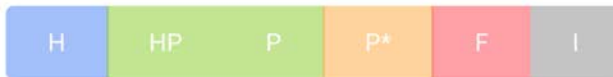
**Formative Comments**

Not to be quoted in Dean's Letter; please provide specific recommendations for improvement.

**Summative Comments**

Summative comments of student's performance may be used in Dean's Letter.

**FINAL GRADE**



**LEGEND:**

H: Excellent performance in all competency domains

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 coursework 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.



**Course Director determines level of performance for each Competency Domain and the Final Grade**



	<i>Summative Competency Ratings (6 domains assessed)</i>
<i>Risk of Fail (course director discretion)</i>	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

# Professionalism



**CAUTION**

**MOVING  
PARTS**

AUSTRALIAN SAFETY SIGNS by SafetySign 1800 22 80 82  
[www.safety-signs.com.au](http://www.safety-signs.com.au)



# Email Etiquette



## Step 2 CK and CS





# Making Choices



# Portfolio Cycles

- Fall 2019 (qualitative review)
- Spring 2020 (full cycle)



# Logistics



# 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
- Details regarding what you need to do:  
<https://medschool.vanderbilt.edu/ume/va-rotations>



# Academic Calendar 19-20

<https://medschool.vanderbilt.edu/enrollment/academic-calendars/>

Section	Dates
Section 7 (AY 19-20)	July 8– Aug 2
Section 8	Aug 5 - 30
<i>Immersion Orientation and Intersession 3rd yrs only</i>	<i>Aug 26 - 30</i>
Section 9 <i>NO CLASS: Labor Day, Sept 2</i>	Sept 3 - 27
Section 10	Sept 30 – Oct 25
Section 11	Oct 28 – Nov 22
Section 12 <i>NO CLASS: Thanksgiving break, Nov 28-29</i>	Nov 25 – Dec 20
<i>Winter Break</i>	<i>Dec 23 – Jan 3</i>
Section 1 <i>NO CLASS: MLK, Jr. holiday, Jan 20</i>	Jan 6 – 31
<i>Intersession 3rd and 4th yrs</i>	<i>Feb 3 – 7</i>
Section 2	Feb 10 – Mar 6
Section 3 <i>NO CLASS for VMS4: Match Day, March 20</i>	Mar 9 – Apr 3
Section 4	Apr 6 – May 1
<i>Intersession 3rd yrs only</i>	<i>May 4 – 8</i>
Graduation Day for EC 2016	May 8
Section 5 <i>NO CLASS: Memorial Day, May 25</i>	May 11 – June 5
Section 6 (END AY 19-20) <i>NO CLASS: Independence Day, July 3</i>	Jun 8 – Jul 2

# 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>

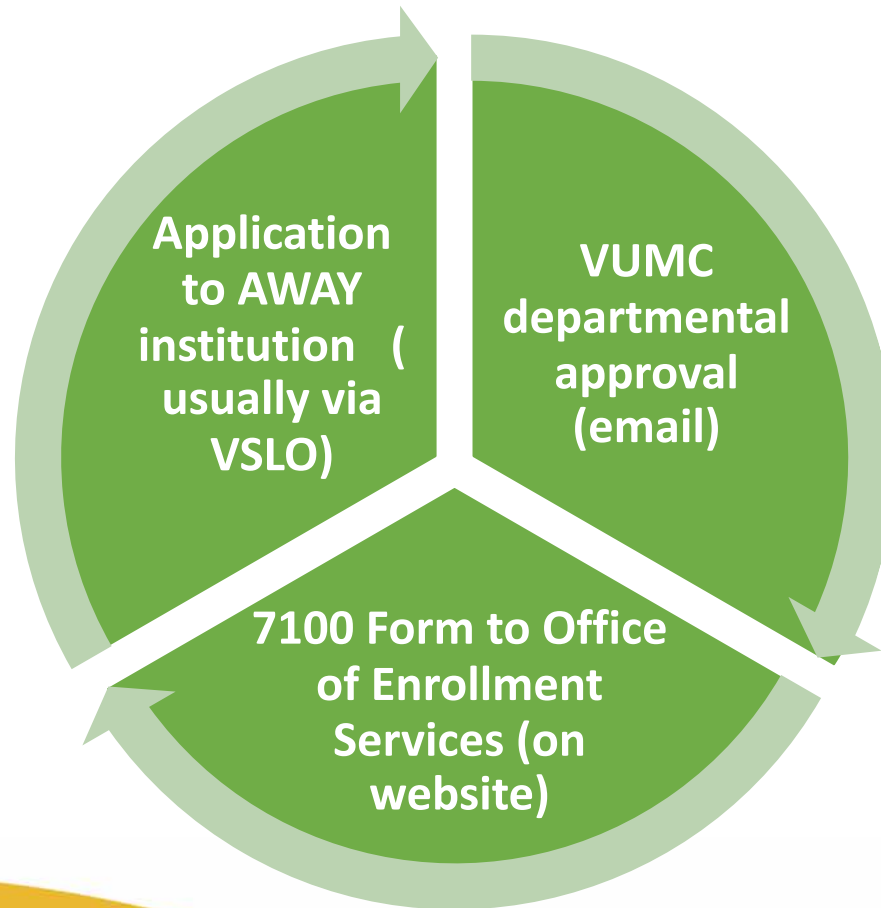


# Pursuing AWAY Rotation

- 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 Learning Opportunities (VSLO) 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



# 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.

Contact: Melissa N Carro  
[melissa.carro@vanderbilt.edu](mailto:melissa.carro@vanderbilt.edu)



# Immersion Phase 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



# 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



# Audit Tool

Immersion Phase

✓ Satisfied

Immersion Core

✓ Satisfied

On-Campus ACEs

✓ Satisfied

**Description:** Select **three** ACE rotations which must be taken at Vanderbilt. (See <https://medschool.vanderbilt.edu/ume/class2016>)

Satisfying Courses

Courses used to satisfy this requirement:

Course	Title	Units Earned	Term	Grade	Notes
EM 5950	ACE: Emergency Medicine	0	2015 Year		
PED 5612	ACE: Adolescent Medicine	0	2015 Year		
PED 5730	ACE: Child Abuse Pediatric Med	0	2015 Year		

Immersion Longitudinal

✓ Satisfied

Step Score Evaluation

✗ Not Satisfied

# Useful Links/Contacts

- Immersion Phase Requirements

- <https://medschool.vanderbilt.edu/ume/md-phd-requirements-pre-c-2-0/>
- <https://medschool.vanderbilt.edu/ume/md-phd-requirements-c2-0/>
- [Immersion.phase@vanderbilt.edu](mailto:Immersion.phase@vanderbilt.edu)

- Careers in Medicine

- <https://medschool.vanderbilt.edu/cim/>

- Enrollment

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

- FHD

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

- Learning Communities

- [pam.lynn@Vanderbilt.Edu](mailto:pam.lynn@Vanderbilt.Edu)

