

IM 653
**ONCOLOGY and HEMATOLOGY
CLERKSHIP**

CLERKSHIP ELECTIVE ROTATION SYLLABUS

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At Michigan State University College of Osteopathic Medicine (MSUCOM), we are constantly working to improve our curriculum and to meet accreditation guidelines. We need to meet the challenges of modern medicine that force us to innovate. While changes will generally be instituted at the beginning of the school year, changes may also be implemented semester to semester.

Please be mindful of the need to read your syllabi before beginning your rotation.

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ROTATION REQUIREMENTS

REQUIREMENT	SUBMISSION METHOD (For submission due dates, refer to table at the end of the syllabus)
Mid Rotation Form	Completed 100% and needing no revisions to the appropriate drop box in D2L
Patient Types and Procedure Log	Online D2L Drop Box
Clinical Shift Schedule (must be the schedule you worked, not what you were scheduled to work)	Online D2L Drop Box
Attending Evaluation of Clerkship Student	Students must select their attending physician as directed within the rotation description in Medtrics. At the start of the last week of the rotation, students will need to request an evaluation in Medtrics. By requesting an attending evaluation from their assigned attending physician, the attending physician will receive an automated email link connecting them to their assigned Attending Evaluation within Medtrics. Attendings will be able to electronically access and submit the forms on behalf of their students.
Student Evaluation of Clerkship Rotation	Students will submit their rotation evaluations electronically at the conclusion of every rotation by accessing the Medtrics system: https://msucom.medtricslab.com/users/login/ . By the last week of each rotation, students will receive an automated email link connecting them to their assigned evaluation. Students can also access pending evaluations on the 'Home' or 'Evaluations' tabs within their Medtrics accounts.

INTRODUCTION AND OVERVIEW

This course is designed to provide the student with an opportunity to actively engage in patient-based learning experiences under the guidance of a faculty member (preceptor) in collaboration, as appropriate, with residents and/or fellows. This syllabus provides an overview of rotation goals and objectives designed to help you gain an understanding of the breadth and scope of Oncology and Hematology.

ELECTIVE COURSE SCHEDULINGPreapproval

- This course does not require preapproval from the IOR. The student should follow the below directions for elective course confirmation and enrollment.

Required Prerequisites

- This course does not require any prerequisite courses.

Course Confirmation and Enrollment

- The student must be an active student at MSUCOM.
- Student must complete five core rotations prior to any elective rotation.
- It is the student's responsibility to provide the elective site/rotation acceptance material to the COM.Clerkship@msu.edu for MSU confirmation and scheduling.
 - MSUCOM clerkship confirmation is complete when the rotation is visible on the students Medtrics schedule.
- It is the student's responsibility to ensure enrollment prior to beginning any course/rotation.
 - Enrollment will be processed by the MSUCOM Registrar's Office upon clerkship confirmation.
 - Enrollment can be verified by the student by reviewing the Student Information System
- MSUCOM confirmation must occur at least 30 days in advance of the rotation.
- Once confirmed, the rotation may only be cancelled 30 days or more in advance of the start date.

ROTATION FORMAT

Rotations are typically two weeks, three credit hour, or four weeks, six credit hours in duration. Timeframes for each rotation are decided at least 30 days prior to the beginning of the rotation.

Rotation schedules **are not** to be submitted until the last Friday-Sunday of the rotation. You must document your actual schedule worked. You are required to document any time off for illness, boards, etc. that caused a deviation from the schedule you were provided. **All rotation days must be accounted for.**

The overall performance of course participants will be evaluated through customary assessment instruments normally employed by the department for elective rotations, at the discretion of the instructor of record.

GOALS AND OBJECTIVES

GOALS

Course participants will:

1. Develop an appreciation of the practice of Hematology/Oncology as related to the specialty of the preceptor.
2. Assimilate what they learn and demonstrate their understanding of patient care through ongoing interaction and dialogue with, as well as formative feedback from, the preceptor.
3. Demonstrate an understanding of the (seven) osteopathic core competencies (as applicable).

Educational Goals

The hematology/oncology rotation is intended to provide the student with hands on experience in the evaluation and treatment of various hematological and oncological conditions.

The clinical experience will emphasize the diagnosis and management of acute and chronic hematology/oncology diseases, and the management of the risk factors associated with each disease.

Learning objectives highlight the complete and accurate patient history and physical exam, indications appropriate diagnostic studies and the understanding of first line therapy for common hematological/oncological conditions.

1. The clinical experience will emphasize the diagnosis and management of acute and chronic Hematology/Oncology diseases.
2. The clinical experience will emphasize evaluation of risk factors, and management of risk factors to prevent disease advancement if possible.
3. The clinical experience will include learning to perform a complete and accurate patient history and physical exam.
4. The clinical experience will include identification and indications for appropriate diagnostic studies.
5. The clinical experience will help the student identify the first line therapy for common Hematology/Oncology disorders.

OBJECTIVES

1. Medical Knowledge: The student is expected to be able to describe the clinical presentation, pathophysiology, and management of the following hematologic/oncologic issues:

Lab evaluation

1. Describe the role of the **peripheral smear** in the diagnosis of various diseases.
2. Identify and list the significance of the various red blood cell abnormalities including microcytosis, macrocytosis, schistocytes, target cells, Howell-Jolly bodies etc.
3. Identify and list the significance of the various white blood cell abnormalities including hyper segmented neutrophils, blast cells, Auer rods, hairy cells, etc.
4. Be familiar with the significance and indications of a bone marrow biopsy.

White blood cell disorders

1. Define and identify causes of the following white blood cell disorders:
 - Leukopenia
 - Neutropenia
 - Lymphopenia
 - Leukocytosis

1. Understand the definition of anemia for both men and women.
 - Be familiar with the clinical symptoms and signs of anemia.
 - Discuss the diagnostic approach to anemia regarding the complete blood count, MCV, RDW, reticulocyte count, and peripheral smear findings.
 - Understand the approach, pathophysiology, and diagnosis of anemias associated with decreased production.
 - **Microcytic anemia**
 - Iron deficiency anemia.
 - Sideroblastic anemia
 - Anemia of chronic disease
 - Thalassemias
 - Lead poisoning
 - **Normocytic anemias**
 - Anemia of chronic disease
 - Anemia of chronic renal failure
 - Endocrine disorders
 - **Macrocytic anemia**
 - Vitamin B12 deficiency
 - Folate deficiency
 - Drug induced disorders.
2. Understand the approach, pathophysiology and diagnosis of anemias associated with increased destruction.
 - **Hemolytic anemias**
 - Sickle Cell anemia
 - Glucose-6-Phosphate Dehydrogenase deficiency
 - Hereditary spherocytosis
 - Acquired immune hemolytic anemia.
 - Warm antibody
 - Cold antibody
 - Acquired nonimmune hemolytic anemia.
 - Microangiopathic hemolytic anemia
 - Thrombotic thrombocytopenic purpura (TTP)
 - Disseminated intravascular coagulation (DIC)
 - Hemolytic-uremic syndrome
 - Eclampsia
 - Malignant hypertension
 - Microangiopathic hemolytic anemia
 - Prosthetic valves
 - Severe aortic stenosis
 - Physical and chemical trauma
 - Infection
 - Hypersplenism
 - Paroxysmal nocturnal hemoglobinuria
3. Understand the approach, pathophysiology and diagnosis of **anemias associated with decreased production of red blood cells.**
 - Malignancies and other marrow infiltrative diseases
 - Leukemia and lymphoma

- Plasma cell disorders
- Stem cell disorders
 - Myelofibrosis
 - Aplastic anemia
 - Pure red cell aplasia
 - Myelodysplasia

Platelet disorders

1. **Thrombocytopenia**

- Understand the definition of thrombocytopenia.
- Discuss the differential diagnosis of thrombocytopenia regarding decreased production and increased destruction.
- Review **TTP** and **HUS**
- Review **DIC**
- Discuss the etiologies and pathophysiological mechanism of **Heparin induced thrombocytopenia (HIT)**
 - Distinguish between HIT I and HIT II
 - Discuss treatment goals of HIT.
- Discuss pathophysiology, presentation, and management of **idiopathic thrombocytopenic purpura**.

2. **Thrombocytosis**

- Understand the etiology, diagnostic criteria, and treatment of **Essential Thrombocytosis**
- Understand causes of reactive thrombocytosis

Deep vein thrombosis and pulmonary embolism

1. Be familiar with the risk factors associated with DVT and PE
2. Understand the etiology of DVT and PE
3. Review the clinical symptoms and signs of DVT/PE
4. Understand the diagnostic approach to DVT/PE
5. Be familiar with the management of DVT/PE
6. Review the importance of prevention of DVT/PE

Thrombophilia

1. Understand the clinical and laboratory manifestations of the various causes of thrombophilia.
 - **Activated Protein C Resistance /Factor V Leiden**
 - **Prothrombin G20210A**
 - **Antithrombin deficiency**
 - **Protein C and S deficiency**
2. Be familiar with the work up of the **hypercoagulable** state.
3. Discuss the clinical and laboratory features of **antiphospholipid syndrome**.

Coagulopathy

1. Discuss the presentation, diagnosis, and treatment of **Hemophilia A**
2. Discuss the presentation, diagnosis, and treatment of **Hemophilia B**

3. Discuss the presentation, diagnosis, and treatment of **Von Willebrand Disease**

Pancytopenia

1. Understand the etiology and classification of pancytopenia.
2. Review the various causes of pancytopenia.
3. Be familiar with the proper workup for pancytopenia.

Bone marrow failure

1. Define **Myelodysplasia**
2. Review the epidemiology and pathogenesis of myelodysplasia.
3. Briefly discuss the classifications of myelodysplasia

Aplastic anemia

1. Define **aplastic anemia**.
2. Review the causes of aplastic anemia.
3. Understand the pathogenesis of acquired aplastic anemia.
4. Discuss the diagnosis and treatment of aplastic anemia.

Paroxysmal nocturnal hemoglobinuria (PNH)

1. Explain the pathogenesis and presentation of PNH.
2. Discuss the diagnosis and treatment of PNH.

Myeloproliferative disorders

1. Be familiar with the background, epidemiology, and clinical presentation of **Polycythemia Vera (PV)**
2. Discuss the diagnostic criteria for PV.
3. Review the treatment options for PV.
4. Define and review the epidemiology of **Essential Thrombocytosis (ET)**
5. Discuss the diagnostic criteria of ET.
6. Discuss the treatment options of ET.

Transfusions

1. Discuss the indications, risks, and benefits of the following transfusions.
 - Red cell transfusions
 - Platelet transfusions
 - Plasma products

Sickle cell disease (SCD)

1. Review the pathophysiology of SCD.
2. Discuss the clinical symptoms and signs of SCD.
3. Discuss the treatment options of SCD.
4. Review the important acute complications of SCD.

Plasma cell disorders

1. Discuss the pathophysiology and clinical presentation of **Multiple Myeloma (MM)**
2. Review the diagnosis and proper work up of MM.
3. Briefly review the treatment options of MM
4. Define **Monoclonal Gammopathy of Undetermined Significance (MGUS)**
5. Discuss the natural history, clinical presentation, and management of MGUS.
6. Be familiar with the diagnosis, presentation, and treatment of **Waldenstrom Macroglobulinemia**
7. Discuss the causes, presentation, and treatment of **amyloidosis**.

Breast cancer

1. Review the risk factors associated with breast cancer.
2. Discuss the recommended screening modalities for the early detection of breast cancer.
3. Explain the various pathologic subtypes of breast cancer.
 - Types of Adenocarcinomas
 - Ductal carcinoma in situ (DCIS)
 - Lobular carcinoma in situ (LCIS)
 - Paget disease of the nipple
4. Review the diagnosis and work up of a breast mass.
5. Discuss the prognosis of breast cancer regarding estrogen, progesterone receptors and Her-2 overexpression.
6. Briefly review treatment options for the various forms of breast cancer

Lung cancer

1. Discuss the risk factors associated with lung cancer.
2. Review the epidemiology of lung cancer.
3. Discuss the various classifications, presentation, and management of **Non-Small-Cell Lung Cancer**
4. Review the presentation, associated syndromes, and management of **Small-Cell Lung Cancer**

Colorectal cancer

1. Discuss the epidemiology and pathophysiology of colorectal cancer.
2. List the risk factors associated with colorectal cancer.
3. Review the recommendations regarding screening for colorectal cancer.
4. Briefly discuss the work-up, diagnosis and treatment of colorectal cancer

Gastrointestinal cancers

1. Discuss the presentation, risk factors, diagnosis, and treatment of the following GI malignancies:
 - Esophageal cancer
 - Gastric cancer
 - Pancreatic cancer
 - Hepatocellular cancer
 - Gallbladder cancer

- Cholangiocarcinoma

Malignant melanoma

1. Review the incidence, epidemiology and risk factors associated with melanoma.
2. Discuss the clinical presentation, diagnosis, and treatment options for melanoma.

Prostate cancer

1. Review the epidemiology and risk factors associated with prostate cancer.
2. Discuss the current recommendations regarding screening for prostate cancer.
3. Explain the presentation, diagnosis, prognosis, and treatment options of prostate cancer.

Leukemia

1. Differentiate the various leukemias regarding presentation, cytogenetics, diagnostic workup, treatment options and prognosis.
 - Acute Myelogenous Leukemia
 - Chronic Myelogenous Leukemia
 - Chronic Lymphocytic Leukemia
 - Acute Lymphocytic Leukemia
 - Hairy Cell Leukemia

Lymphoma

1. Differentiate **Hodgkin lymphoma** and **non-Hodgkin lymphoma** regarding epidemiology, pathophysiology, presentation, diagnosis, staging, and treatment.

Additional malignancies

1. Discuss the epidemiology, pathophysiology, risk factors, screening, diagnosis, treatment, and prognosis for the following cancers.
 - Head and Neck Cancers
 - Sarcomas
 - Endocrine malignancies
 - Renal Cell Cancer
 - Bladder Cancer
 - Testicular Cancer
 - Gynecological Cancers
 - Intracranial Cancers

Oncological emergencies

1. Discuss the definition, pathophysiology, presentation, diagnosis, and treatment of the following emergencies.
 - Malignant pericardial effusion and tamponade
 - Superior Vena Cava Syndrome
 - Acute Tumor Lysis Syndrome
 - Hypercalcemia of Malignancy

- Syndrome of Inappropriate Antidiuretic Hormone and Hyponatremia
- Neutropenic Fever
- Epidural Spinal Cord Compression
- Pathologic Fractures

COMPETENCIES

1. The student should complete a thorough medical history including details of current symptoms, previous hematologic issues and management efforts, and risk factors that could impact on the diagnosis or management of their current problem.
2. Perform a complete physical exam with appropriate emphasis on the hematopoietic system exam.
3. Interpret common diagnostic tests utilized in the evaluation of the patient with a hematologic or oncologic disorder.
4. Interpret laboratory test with emphasis on the CBC, iron studies, Vitamin B12 and Folate disorders.
5. Socioeconomic: The student will:
 - Appreciate the psychosocial issues that potentially impact the patient's hematologic problems (professionalism and sensitivity to disability issues).
6. Assessment of Clinical Competencies:
 - Patient Care: The student will be able to complete an accurate history and physical exam and accurately document the findings, write daily notes to accurately and concisely project the status of the patient's condition, and recognize unstable patients in need of urgent evaluation and management.
 - Medical Knowledge: The student can demonstrate knowledge of the criteria for diagnosis of common clinical problems, know the first line therapies for common clinical problems, and demonstrate a knowledge of the interpretation of diagnostic tests.
 - Communication Skills: The student can effectively present the clinical evaluation of a new patient and /or the clinical progress of a continuing patient, and communicate effectively with patients, clinical support staff, and supervising residents and attending physicians.
 - Professionalism: The student will demonstrate respect for patients, families, co-workers, and work effectively with nurse coordinators, social services, and ancillary staff.
 - Practice Based Learning: The student will be able to identify and discuss appropriate, evidence-based approaches to assist in the diagnosis and management of clinical problems encountered in their patients.
 - Systems Based Practice: The student will be able to incorporate a team approach in the management of complicated patients.
 - Osteopathic Principles and Practices: The student should be able to integrate osteopathic principles and treatments in the management of the hematologic patient.

Teaching Methods: The student is expected to function as a viable member of the supervising physician health care team. Assigned student responsibilities can include supervised first patient contact in the office or clinic, the completion of admission history and physicals, the completion of pre-rounding progress notes on assigned patients, participation in conducting and the interpretation of diagnostic testing and clinical management.

Participation in Clinical Conferences and/or Structured Educational Programs: The student is expected to participate in clinical conferences and educational programs appropriate for the clerkship course including those associated with residency educational programs.

Evaluation: The student is encouraged to solicit feedback related to his/her clinical performance daily. The student should receive formative performance evaluations at the mid-point and end of the rotation that outlines faculty perceived strengths and weaknesses related to the student's performance that includes recommendations for strengthening his/her performance as warranted.

COLLEGE PROGRAM OBJECTIVES

In addition to the above course-specific goals and learning objectives, this clerkship rotation also facilitates student progress in attaining the College Program Objectives. Please refer to the complete list provided on the MSUCOM website (<https://com.msu.edu/>) and in the Student Handbook.

REFERENCES

REQUIRED STUDY RESOURCES

Desire 2 Learn (D2L): Please find online content for this course in D2L (<https://d2l.msu.edu/>). Once logged in with your MSU Net ID, your course will appear on the D2L landing page. If you do not see your course on the landing page, search for the course with the following criteria, and pin it to your homepage: **IM 653 Oncology and Hematology**

If you encounter any issues accessing this D2L course, please email the CA (on the title page of this syllabus). It is your responsibility to make sure you have access to the course D2L page on the first day of the course.

Student D2L email addresses must be forwarded to your MSU email account.

SUGGESTED STUDY RESOURCES

Recommended Texts

Review of the Hematology Modules from the Heme course OST 522 course pack will be of value to the student. There is no assigned textbook. Reading assignments are under the purview of the preceptor.

ONCOLOGY - HEMATOLOGY REFERENCE TEXTS

1. Hematology: Basic Principles and Practice, 8th Ed. Leslie Silbertein MD; John Anastasi MD, Ronald Hoffman MD. (Very good discussion of clinical and diagnostic methods.)
<http://ezproxy.msu.edu/login?url=http://www.clinicalkey.com/dura/browse/bookChapter/3-s2.0-C20190000052>

2. Williams Hematology, 10th Ed. Kenneth Kaughansky, Marshall Lichtman. (Landmark text with great explanations of the various hematologic disorders and clinical presentations with diagnostic work up.)

<http://ezproxy.msu.edu/login?url=http://accessmedicine.mhmedical.com/book.aspx?bookid=2962>

3. Harrison's Principles of Internal Medicine, 21st Ed. (Very good sections on hematology as well as oncology describing basic principles of the diseases as well as clinical presentation and diagnostic techniques. This text has particularly good discussions of the disease without getting into complicated details.)

<http://ezproxy.msu.edu/login?url=https://accessmedicine.mhmedical.com/book.aspx?bookid=3095>

WEEKLY READINGS/OBJECTIVES/ASSIGNMENTS

MID ROTATION FEEDBACK FORM

This form is required for this rotation, including both two- and four-week rotations.

Two-week Rotation: This will need to be completed by the Attending or Resident and dated by the 1st Friday of the rotation. Students must upload the form to a D2L drop box by 11:59 on the last day (Sunday) of the rotation.

Four-week Rotation: This will need to be completed by the Attending or Resident at the end of week two of the rotation. It should be dated no later than the 3rd Wednesday of the rotation. Students must upload the form to a D2L drop box by 11:59pm on third Sunday of the clerkship to be eligible to obtain a Pass in the rotation.

ROTATION EVALUATIONS

Attending Evaluation of Student

Attending Evaluation of the Student is completed electronically via Medtrics by the supervisor designated within the Medtrics rotation description. To initiate this evaluation, each student must select their attending physician as directed within the rotation description in Medtrics. Students will receive an email from Medtrics to select the attending 7 days prior to the end of the rotation. Should your rotation lack a rotation description or if you have any questions, please contact COM.Clerkship@msu.edu. Upon selecting the attending physician directed within the Medtrics rotation description, the attending physician will receive an automated email link connecting them to their assigned Attending Evaluation within Medtrics.

Attendings will be able to electronically access and submit the Attending Evaluation of the Student. Attendings will access the electronic form within Medtrics by selecting the email link on a smart device. No login (username/password) will be required for attendings to access their pending evaluation(s) assigned to them. After the electronic form has been submitted by their attending, students can review the Attending Evaluation of the Student that were completed by visiting the 'Evaluations' module (in the 'About Me' tab) of their Medtrics profiles.

IM 653 Oncology and Hematology

Students are encouraged to seek formative/verbal feedback on their performance at least weekly. Students are also encouraged to discuss the Attending Evaluation of the Student with the supervisor completing the evaluation.

Any evidence of tampering or modification while in the possession of the student will be considered “unprofessional behavior” and will be referred to the Committee on Student Evaluation (COSE).

Student Evaluation of Clerkship Rotation

Students will submit their rotation evaluations electronically at the conclusion of every rotation by accessing the Medtrics system:

<https://msucom.medtricslab.com/users/login/>. By the last week of each rotation, students will receive an automated email link connecting them to their assigned evaluation for the respective rotation. Students can also access their pending evaluations on the ‘Home’ or ‘Evaluations’ tabs within their Medtrics accounts.

Unsatisfactory Clinical Performance

The Instructor of Record will review/investigate a student’s performance on a rotation when a concern is raised by the supervisor(s), and/or when the Attending Evaluation of Clerkship Student contains any below expectation marks within the professionalism area, any unsatisfactory written comments, or a total of two or more below average marks on the evaluation. After investigations, the Instructor of Record will determine a final grade for the student.

Professionalism concerns, as well as accolades, will also be referred to the MSUCOM Spartan Committee Clearinghouse for resolution, per MSUCOM’s Common Ground Framework for Professional Conduct.

CORRECTIVE ACTION

The following assignments are eligible for corrective action. Students who were not successful on these assignments during the course will receive an NGR grade and be permitted to go through a ‘corrective action’ process. Corrective Action and will be due no later than 14 days after the last day of the rotation at 11:59pm:

- Mid Rotation Feedback Form
- Patient Types and Procedure Logs
- Clinical Shift Schedule

The student is responsible for contacting the Course Assistant (on the title page of this syllabus) if they believe missing assignments were reported in error, or if they are unclear about the corrective action process.

While it is the responsibility of the student to ensure that the Attending Evaluation of Clerkship Student is completed, this requirement may extend beyond the corrective action deadline.

If a student **successfully completes** the corrective action process, as determined by the IOR, the student will receive credit for the deficient academic grading requirement(s) and be eligible for a change in rotation grade (from NGR to Pass, pending the Attending Evaluation of Clerkship Student)

As determined by the IOR, the student will receive an N grade for the course if all assignments and the corrective action process are **not completed** successfully within 14 days after the last day of rotation at 11:59pm (except for the Attending Evaluation). Additionally, a letter of unprofessional behavior for late submission of assignments will be sent to the MSUCOM Spartan Community Clearinghouse.

BASE HOSPITAL REQUIREMENTS

Students are responsible for completing all additional requirements set by the hospital/clinical site at which they are completing a rotation. Students are not responsible for reporting to MSUCOM the results of any requirements that exist outside of those listed above.

COURSE GRADES

All rotation requirements must be completed to determine a grade for the course. Students are required to ensure their rotation requirements are completed and submitted correctly.

P/Pass – means that credit is granted, and that the student achieved a level of performance judged to be satisfactory by the department according to the student's didactic and clinical performance.

NGR/No Grade Reported – means that a final grade ('Pass' or 'No Grade') cannot be determined due to one or more missing course requirements. The NGR grade will be changed to a final grade once all the completed course requirements have been submitted to and processed by MSUCOM (either to the department or Clerkship Team). An 'NGR' grade will NOT remain on a student's transcript.

N/No Grade – means that no credit is granted, and that the student did not achieve a level of performance judged to be satisfactory by the department according to the student's didactic and clinical performance.

N Grade Policy

Students who fail this rotation will have to repeat the entire rotation and fulfill all (clinical and academic) requirements.

STUDENT RESPONSIBILITIES AND EXPECTATIONS

Course participants will meet the preceptor on the first day of the rotation at a predetermined location to be oriented to rotation hours, location(s), and expected duties and responsibilities while on-service.

- *The student **will** meet the following **clinical responsibilities** during this rotation:*

- Students are expected to function collaboratively on health care teams that include health professionals from other disciplines in the provision of quality, patient-centered care.
- *The student **will** meet the following **academic responsibilities** during this rotation:*
 - Students are expected to identify, access, interpret and apply medical evidence contained in the scientific literature related to patients' health problems.
 - Students are expected to: assess their personal learning needs specific to this clinical rotation, engage in deliberate, independent learning activities to address their gaps in knowledge, skills, or attitudes; and solicit feedback and use it daily to continuously improve their clinical practice.

It is the **student's** responsibility to notify the Clerkship Office (com.clerkship@msu.edu) immediately if they are placed on quarantine or contract COVID.

ATTIRE AND ETIQUETTE

During your clinical rotation, you will be a part of many different learning environments and will be given great deal of responsibility. Importantly, most of your patients will consider you a critical member of the medical team and see you as a physician. Given this, it is vital that a high level of professional behavior is maintained.

Outward appearance is particularly important in this regard and is critical for initial impressions and for gaining the respect of your patients. For this reason, please adhere to the following dress code during your clerkship:

- Men should routinely dress in slacks, as well as a shirt with tails tucked in.
- Women should wear skirt or slacks. Skirts should be of a length that reaches the knees or longer.
- No blue jeans are allowed during any rotation.
- Tennis shoes should not be worn, except with scrubs.
- No open toe shoes, flip-flops, or sandals are allowed at any time. Socks are always a public health code requirement.
- Scrubs are provided for situations where extended periods of patient care necessitate more comfortable clothing or a change in clothing.
- At ALL times when patient contact is expected or anticipated, your waist-length WHITE COAT will be worn, with your ID badge worn above the waist.
- As this policy simply represents general guidelines, we encourage anyone with uncertainties or questions regarding the dress code to reach out to the student director for confirmation.
- Wear a waterproof gown when blood or body fluid may soak a cloth gown.
- If you accidentally have blood or body fluids splattered on your clothing, at the next convenient time, you should excuse yourself, change into hospital scrubs, and put your contaminated clothing in a separate bag for later laundering.

MSU COLLEGE OF OSTEOPATHIC MEDICINE STANDARD POLICIES

The following are standard MSUCOM policies across all Clerkship rotations.

CLERKSHIP ATTENDANCE POLICY

MSUCOM requires student participation in clerkship rotations and clinical activities with consistent attendance to acquire the skills and knowledge necessary for successful program completion. This policy will define the policy and procedures regarding absences for clerkship activities. [Policy - Clerkship Absence 2025.pdf](#)

POLICY FOR MEDICAL STUDENT SUPERVISION

The MSUCOM curriculum includes required clinical experiences in a variety of clinical learning environments. The Medical Student Supervision Policy outlines all supervision agreements and expectations. [Clerkship Medical Student Supervision Policy.pdf](#)

MSUCOM STUDENT HANDBOOK

The Student Handbook is published electronically by MSUCOM for students in the Doctor of Osteopathic Medicine program. This handbook does not supersede other Michigan State University or College of Osteopathic Medicine policies, regulations, agreements, or guidelines. <https://osteopathicmedicine.msu.edu/current-students/student-handbook>.

COMMON GROUND FRAMEWORK FOR PROFESSIONAL CONDUCT

The Common Ground Framework provides the MSUCOM community with a reminder of the unity of mind, body, and spirit that underlines the field of osteopathic medicine. The framework is a set of guiding, foundational principles that underpin professional conduct and integrity and applies to all professionals at work within the shared college community, independent of their specific roles or responsibilities.

<https://osteopathicmedicine.msu.edu/about-us/common-ground-professionalism-initiative>

MEDICAL STUDENT RIGHTS AND RESPONSIBILITIES

The rights and responsibilities of students enrolled in MSUCOM are defined by the medical colleges of Michigan State University, including the College of Osteopathic Medicine, the College of Human Medicine, and the College of Veterinary Medicine. Students enrolled in the professional curricula of these colleges are identified as “medical students.” These colleges collectively define “Medical Student Rights and Responsibilities” (MSRR). This document addresses academic rights and responsibilities, governance, procedures for complaints, due process, and other topics. The current version is available on the MSU Spartan Life website at the address below: <http://splife.studentlife.msu.edu/medical-student-rights-and-responsibilities-mssr>

MSU EMAIL

MSU email is the official communication from faculty and staff to students and students are responsible for checking it daily and maintaining their MSU email accounts so that messages can be received. Students are responsible for responding to email in a timely manner or as otherwise outlined in course communication.

Forwarding MSU email to another email account or failure to check email are not valid excuses for missing a deadline or other requirements of the DO program.

Please Note: Student D2L email addresses must be forwarded to your MSU email account.

Further, students must use secure email when working in a hospital, clinic, or other health care setting if discussion of patient information is involved. MSUNet (msu.edu) email is secure; many web-based email systems including Hotmail, Gmail, and Yahoo are not.

<https://osteopathicmedicine.msu.edu/current-students/student-handbook>.

DUTY HOURS AND FATIGUE MITIGATION

The accreditation standards for graduate medical education programs include restrictions on the duty hours of residents. Additionally, institutions are expected to promote a clinical learning environment in which duty hours are monitored and strategies exist to mitigate the effects of fatigue. [Clerkship Duty Hours and Fatigue Mitigation Policy.pdf](#)

STUDENT EXPOSURE PROCEDURE

A protocol has been developed by the University Physician to report incidents of exposure, e.g., needle sticks, mucous membrane exposure, tuberculosis exposure, etc., and it may be found here:

<https://osteopathicmedicine.msu.edu/current-students/clerkship-medical-education/injury-and-property-damage-reports>

Contact Associate Dean for Clerkship Education, Dr. Susan Enright (enright4@msu.edu), if exposure incident occurs.

STUDENT ACCOMMODATION LETTERS

Michigan State University is committed to providing equal opportunity for participation in all programs, services, and activities. Requests for accommodations by persons with disabilities may be made by contacting the Resource Center for Persons with Disabilities (RCPD) at 517-884-RCPD, or on the web at www.rcpd.msu.edu. Once a student's eligibility for (clinical and/or testing) accommodation(s) are determined, the student may be issued an Accommodation Letter. Students must present their letter to the Clerkship Team (COM.Clerkship@msu.edu) at the start of the semester in which they intend to use their accommodations (for tests, projects, labs, etc.). Accommodation requests received after the semester onset will be honored whenever possible.

If modifications, updates, or extensions to an existing letter are made after the semester begins, it is the responsibility of the student to submit the newest version to the Clerkship Team if he/she intends to utilize the accommodation going forward.

SUMMARY OF GRADING REQUIREMENTS

*For any below information requiring an item be uploaded to D2L, students must ensure it is put into the correct folder within the correct section for their course.

Requirement	Submission Method	Pass	No Grade Reported	No Pass
Mid Rotation Feedback Form	Submit via D2L	<ul style="list-style-type: none"> Completed, scanned, and uploaded to D2L. Must be 100% complete and needing no revisions by: <ul style="list-style-type: none"> Four-week rotations- 11:59 pm on the 3rd Sunday of the rotation. Two-week rotations- Dated by 11:59pm on the 1st Friday of the rotation; uploaded by 11:59pm on the last day (Sunday) of the rotation. 	Will be the conditional grade until all requirements of this rotation are met.	Failure to complete 100% and upload by 14 days after the last day of the rotation at 11:59 pm
Patient Types and Procedure Log	Upload into D2L Drop Box for the course	Submitted by 11:59 pm on the last Sunday of Rotation	Will be the conditional grade until all requirements of this rotation are met	Failure to complete and submit within 14 days from the end of the rotation at 11:59 pm
Clinical Shift Schedule	Online D2L Drop Box	Submitted by 11:59 pm on the last Sunday of Rotation. NOT to be submitted before the last Friday of the rotation, and must be the schedule you worked, not what you were scheduled to work	Will be the conditional grade until all requirements of this rotation are met	Failure to complete and submit within 14 days from the end of the rotation at 11:59 pm
Attending Evaluation of Clerkship Student	Attendings receive an automated email link connecting them to their assigned evaluation(s) within Medtrics, where they may access and submit the electronic form(s) directly	<ul style="list-style-type: none"> Student may receive "Below Expectations" in up to one (1) subcategory. Overall categories must receive "Meets Expectations" or "Exceeds Expectations" 	Will be the conditional grade until all requirements of this rotation are met	<ul style="list-style-type: none"> Receives two (2) or more "Below Expectations" within the subcategory sections. Receives comments that indicate below expectations of performance. See Unsatisfactory Clinical Performance above

Requirement	Submission Method	Pass	No Grade Reported	No Pass
Student Evaluation of Clerkship Rotation	Can be accessed and submitted electronically by students within the dashboard of their Medtrics profiles	Completed 100% by 11:59 pm the last day of the rotation	Will be the conditional grade until all requirements of this rotation are met.	Failure to complete and submit within 14 days from the last day of the rotation



College of Osteopathic Medicine
MICHIGAN STATE UNIVERSITY

MID-ROTATION FEEDBACK FORM

Rotation Name: _____

Student Name: _____

Evaluator Name: _____

Evaluator Signature: _____

Date of review with Student: _____

1. This assessment is based on:

- ☐ My own observations and interactions with the student.
☐ Feedback received from other faculty and/or resident supervisors.

2. The student is progressing satisfactorily for their level of training:

☐ YES ☐ NO

If NO, please summarize areas needing improvement below:

3. Overall comments on student performance

Strengths:	Areas of Improvement:

4. Please check only areas of student **DIFFICULTY**:

<input type="checkbox"/>	On time for all activities of the rotation	<input type="checkbox"/>	Present/Prepared for all activities of rotation
<input type="checkbox"/>	Respectful/courteous to patients, staff, peers, attending's	<input type="checkbox"/>	Student is aware of limitations and appropriately seeks assistance when needed
<input type="checkbox"/>	A great team player (helpful, reliable, proactive)	<input type="checkbox"/>	Accepting of feedback and made necessary changes because of the feedback
<input type="checkbox"/>	Engaged in learning	<input type="checkbox"/>	Honest and trustworthy
<input type="checkbox"/>	A good patient advocate	<input type="checkbox"/>	Work ethic