

OSS 648
ADVANCED -
ANESTHESIOLOGY

CLERKSHIP ELECTIVE ROTATION SYLLABUS

OSTEOPATHIC SURGICAL SPECIALTIES

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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)
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.
Mid Rotation Form	Completed 100% and needing no revisions to the appropriate drop box in D2L
Student Activity Log	Completed 100% and needing no revisions to the appropriate drop box in D2L

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 in collaboration, as appropriate, with residents and/or fellows. The purpose of this Advanced Anesthesiology clerkship is to provide the student with an overview of the clinical specialty.

Rotations are typically two weeks, 3 credit hours or four weeks, 6 credit hours in duration. Timeframes for each rotation are decided at least 30-days prior to the beginning of the rotation.

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

Please note that we have included links to the reading materials. Should the links not work for you, please cut, and paste the link into a browser window and the material should load for you.

This syllabus provides an overview of rotation goals and objectives designed to help you gain an understanding of the breadth and scope of this subject. As you progress through the rotation, you

will perform certain activities intended to help you meet the identified goals and objectives. Please make sure to review this syllabus in its entirety to ensure understanding of the rotation format, syllabus content, and MSUCOM expectations.

ELECTIVE COURSE SCHEDULING

Preapproval

- 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

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 in collaboration, as appropriate, with residents and/or fellows. This Elective rotation is a two (2) or four (4) week experience. The purpose of this Advanced Anesthesiology clerkship is to provide the student with an overview of the clinical specialty. Anesthesiology should include exposure to a variety of surgical topics and experiences. Exposure to the topics will be through reading, lectures, seminars, and direct experiences.

The service should be organized to provide the maximum degree of practical clinical exposure and learning in the areas of diagnosis, management, and therapy in anesthesiology, which is consistent with a fourth-year osteopathic medical student's level of knowledge. Opportunities for learning such as lectures, reading, consults and history and physical examination (H&P) review will be available.

Please note that we have included links to the reading materials. Should the links not work for you, please cut, and paste the link into a browser window and the material should load for you.

GOALS AND OBJECTIVES

GOALS

1. Observe and participate in peri anesthesia care.
 - a. Preop evaluation including medical history/physical osteopathic exam/ history of surgeries and anesthesia.
 - b. Development of anesthesia plans/options.
 - c. Post Op Care: Chronic vs Acute Pain / Prevention vs Intervention for post op nausea vomiting.
2. Intraoperative Anesthesia Care.
 - a. Airway Management: You will be expected to perform or assist:
 - b. Oral endotracheal Intubation
 - c. MAC blade x2
 - d. Miller Blade x2
 - e. LMA intubation x 2
 - f. Glide scope or Video Assisted Intubation x1.

Specific Learning Objectives

Know the indications/contraindications as well as the mechanics needed relative to Central Line Monitoring. Know the differences and indications of central or invasive monitoring.

3. Interact with members of the team, patient care units and ambulatory clinic personnel in a respectful, responsible, and professional manner.
4. Interact with patients and their families in a respectful, sensitive, and ethical manner.

OBJECTIVES

Pre-Anesthesia History and Physical Examination.

Be able to perform a history and physical examination, including musculoskeletal status, on a scheduled preoperative patient. At a minimum, pertinent information will include preoperative data (laboratory, x-ray/ECG findings), informed consent, anesthetic plan, and determination of ASA status and appropriate pre-anesthetic medication.

SPECIFIC LEARNING OBJECTIVES

1. Perform a pre-anesthetic history and physical examination.
2. Interpret pre-operative data, including laboratory, ECG and X-ray findings.
3. Explain the need for and how to obtain an informed consent.
4. Patient health and co-morbidities for planned surgical procedure.
5. Determine ASA physical status and what it means.
6. Determine proper preanesthetic medication(s), including need and route.
7. Start an intravenous line utilizing proper technique.

Basics of Anesthesiology/Machine/Monitoring

Complete an anesthesia machine preoperative check. Critical elements of this check include knowledge of the proper utilization of nitrous oxide, oxygen, gas metering and flow, use of a semi-closed circle absorber system, vaporizer function, and the basics of intraoperative ventilator use. Discuss the safety features of the anesthesia machine and all applicable monitors.

SPECIFIC LEARNING OBJECTIVES

Observe an anesthetic machine preoperative safety check and have basic knowledge of:

1. Proper utilization of anesthetic gases/agents
2. Metering and flow
3. Vaporizer function
4. Absorber system
5. Intraoperative ventilator use
6. Discuss the basic uses of all applicable intraoperative monitoring devices.

Anesthetic Agents/Medications

Define and describe pharmacodynamics, pharmacokinetic, physiological, and postoperative effects of the commonly used anesthetic agents as well as appropriate drug interactions.

SPECIFIC LEARNING OBJECTIVES

Define/describe:

1. Pharmacodynamics / Pharmacokinetic / Physiological/ Post-operative effects
2. List of anesthetic drug classes: Familiarize Drug Classes:
 - a. IV/Gas Anesthesia (ex: Propofol vs Sevoflurane)
 - b. Opioids
 - c. Local Anesthetics
 - d. Neuromuscular Blocking Agents and Reversal Agents

Airway Management

Identify and/or describe anatomic considerations of the airway, conditions that may compromise that airway, and airway management under mask, oral pharyngeal, nasal pharyngeal, and endotracheal tube placement. Demonstrate familiarity with common complications and treatment of aspiration as well as indications for postoperative extubation.

SPECIFIC LEARNING OBJECTIVES

1. Identify/describe all anatomical and physiological considerations of the airway including classification i.e., Mallampati score.
2. Conditions that may compromise that airway.
3. Demonstrate appropriate airway management techniques utilizing:
 - a. Mask and bag
 - b. Oropharyngeal airway
 - c. Nasopharyngeal airway
 - d. Endotracheal tube
4. Demonstrate familiarity with common airway complications as well as treatment for pulmonary aspiration/pulmonary aspiration pneumonitis.
5. Know the indications for post-operative extubation.

Regional Anesthesia

1. Describe Spinal vs Epidural
 - a. Know anatomical differences.
 - b. Understand indications and contraindications.
2. Describe Peripheral Regional Anesthesia
 - a. Regional Anesthesia Techniques.
 - Anatomy, Surgical Indication, Benefits, Risks
 - b. Ultra Regional Anesthesia.

- c. Local Anesthetics
- d. Indications / Contradictions.
- 3. Chronic vs Acute Pain Management
 - a. Describe differences acute vs chronic pain.
 - b. Familiarize with acute pain techniques – such as ultrasound, regional anesthesia vs medical management.

SPECIFIC LEARNING OBJECTIVES

Describe the appropriate patterns of regional anesthesia usage, including:

1. Differences/ effects of peripheral regional anesthesia
2. Indications
3. Contraindications
4. Principles of use
5. Physiological effects
6. Local anesthetic
7. Basic techniques
8. Proper dosage
9. Recognition and treatment of the manifestations of local anesthetic toxicity

Post-Anesthesia Care Unit

List factors related to anesthetic emergence, recall its effect upon hemodynamics and physiological status, and explain the use of reversal agents and all monitoring modalities, and scoring techniques utilized in the post-anesthesia care unit.

SPECIFIC LEARNING OBJECTIVES

1. List factors related to anesthetic emergence, and,
2. Its effect upon the patient's hemodynamic and physiological status, and,
3. Explain the use of reversal agents and all monitoring modalities, and,
4. Know the scoring techniques utilized in the PACU.

Shock: Fluid and Electrolyte Management/Blood Therapy

Distinguish between appropriate uses of fluids intraoperatively, replacement of intravenous volume during the operative procedure, use of blood products, as well as identify complications and side effects associated with volume replacement. Explore blood products vs equivalents.

SPECIFIC LEARNING OBJECTIVES

1. Distinguish the appropriate use of fluids intraoperative. (ex: normal saline vs lactated ringer's vs colloid).
2. Calculate replacement lost body fluids, intraoperative blood loss, metabolic fluids during the operative procedure.
3. Identify the complications associated with fluid volume replacement, and,
4. Know the distinct types of shock and the treatment for each.

Invasive Monitoring

1. Arterial Line Placement: Be aware of the indications/contraindication relative to arterial line placement. Participation in the insertion of arterial lines will be at the discretion of the attending anesthesiologist and the Department of Anesthesiology.

SPECIFIC LEARNING OBJECTIVES

Be aware of the indications and contraindications relative to arterial line placement.

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1. Central Line Placement: Be aware of the indications/contraindications as well as the mechanic's relative to central line placement. Participation in the insertion of central lines will be at the discretion of the attending anesthesiologist and the Department of Anesthesiology.
2. Ultrasound: Be aware of the use(s) of ultrasound in the placement of arterial lines, nerve blocks and central line placement.

SPECIFIC LEARNING OBJECTIVES Be aware/knowledgeable relative to the placement of arterial lines, central venous lines, and the use of ultrasound in the placement/technique of various nerve blocks.

Specific Types of Anesthesia Care

Recognize different physiological and psychological parameters encountered in the administration of Pediatric, Cardiac, Neurosurgical, Obstetrical, Ophthalmic, Thoracic, Vascular and Trauma Anesthesia.

AREAS TO CONSIDER

Recognize the different physiological and psychological parameters encountered in the administration of:

1. Pediatric
2. Cardiac
3. Neurological
4. Obstetrical
5. Ophthalmic
6. Thoracic
7. Vascular
8. Trauma anesthesia

BASIC SCIENCE LINKS

1. As applicable to the various systems noted under Specific Learning Objectives

OPC SKILLS REVIEW

1. As applicable to the various systems noted under Specific Learning Objectives

EQUIPMENT NEEDED

As supplied by institution

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: **Advanced Anesthesia**

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

While there are many fine anesthesiology texts available, much of the information contained in this protocol and study guide may be found in *Millers Basics of Anesthesia, 8e. (2023) Manuel C. Pardo, Jr.*

<http://ezproxy.msu.edu/login?url=https://www.clinicalkey.com/dura/browse/bookChapter/3-s2.0-C20190013210>

Recommended Websites

A. Pre-Anesthesia History and Physical Examination.

1. VIDEO: Peripheral Venous Cannulation
(<https://www.youtube.com/watch?v=qRWb9CJU0Yk>)

OPC SKILLS REVIEW

1. Vital signs
2. Cardiac physical examination
3. Pulmonary physical examination
4. Examination of affective operative area/site (as applicable)
5. Proper interviewing technique
6. Proper use of empathy

B. Basics of Anesthesiology/Machine/Monitoring

1. VIDEO: Monitoring Ventilation with Capnography
(<https://www.youtube.com/watch?v=Mxz-drVdS58>)
2. VIDEO: Pulse Oximetry (<https://www.youtube.com/watch?v=2v3rae-73jc>)
3. VIDEO: Capnography (<https://www.youtube.com/watch?v=BbQllsit6eo>)

C. Anesthetic Agents/Medications

1. VIDEO: Conscious Sedation for Minor Procedures in Adults
(<https://www.youtube.com/watch?v=BSYYq01Y9xQ>)

D. Airway Management

1. VIDEO: Orotracheal Intubation
(<https://www.youtube.com/watch?v=c0v5hpLQXZU&list=PL5v3YzNPkiRNbTuPrIAPrA3cvWRgTMKzB>)

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2. VIDEO: Positive Pressure Ventilation with Face Mask and Bag Valve Device (<https://www.youtube.com/watch?v=GDVz-Wepllg>)
3. VIDEO: Fiber optic Intubation (<https://www.youtube.com/watch?v=UG4n7AwRRBU>)
4. VIDEO: Endotracheal Intubation iSIM2 (https://www.youtube.com/watch?v=LpPEDvd_RDg)
5. VIDEO: Fiber optic Endotracheal Intubation (<https://www.youtube.com/watch?v=s-dy6-DW0wM>)

OPC SKILLS REVIEW

1. Examination of the mouth and posterior pharynx
2. Examination of the respiratory tree

E. Spinal, Epidural, and Regional Anesthesia

1. VIDEO: Lumbar Puncture (https://www.youtube.com/watch?v=weoY_9tOcJQ)
2. VIDEO: Epidural Anesthesia (https://www.youtube.com/watch?v=ndYzw_ISfJA)
3. WEB: New York School of Regional Anesthesia (<https://www.nysora.com/>)

OPC SKILLS REVIEW

1. Neurological examination (central and peripheral)
2. Dermatome recognition and application

F. Post-Anesthesia Care Unit

1. VIDEO: Arterial Puncture for Blood Gas Analysis (<https://www.youtube.com/watch?v=YuFK22n-tvl>)
2. VIDEO: Monitoring Ventilation with Capnography (<https://www.youtube.com/watch?v=Mxz-drVdS58>)
3. VIDEO: Nasogastric Intubation (<https://www.youtube.com/watch?v=ARHfqRB3t4M>)
4. VIDEO: Pulse Oximetry (<https://www.youtube.com/watch?v=2v3rae-73jc>)
5. VIDEO: Post-Anesthesia Care Unit (https://www.youtube.com/watch?v=8PgCyzJDV_4)

OPC SKILLS REVIEW

1. Vital signs in the emergent patient (BP, P, R, Temperature)

G. Shock: Fluid and Electrolyte Management/Blood Therapy

1. VIDEO: Fluids and Electrolytes, Part I (<https://www.youtube.com/watch?v=K3VRehFOZUw>)
2. VIDEO: Fluid Overload (https://www.youtube.com/watch?v=uFggEgh_OS8)
3. VIDEO: What is Shock? (<https://www.youtube.com/watch?v=9a7N9AU1GiQ>)
4. VIDEO: Shock Explained Clearly (<https://www.youtube.com/watch?v=CbM4UihE1TQ>)

OPC SKILLS REVIEW

1. Know vital signs, both normal and pathological
2. Be able to perform a cardiac and pulmonary examination.

3. Be able to perform an abdominal examination including the examination for hepatomegaly.
4. Be able to perform a lower extremity examination for ankle and pretibial edema.
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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.

STUDENT ACTIVITY LOG

Students are required to submit via D2L Dropbox an Activity Log by 11:59 pm on the last day of the rotation.

In this log you will need to outline all the Procedures you either assisted or watched, the Primary Diagnosis of each patient seen, all meetings or lectures (including didactics) and all materials you read while on the rotation.

The complete Activity Log can be viewed on the last page of this syllabus or under the Activity Log Module on D2L for this course. The form is the last page of the syllabus.

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.

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).

Grades are held until all rotation requirements are received. Students are required to ensure their rotation requirements are completed correctly.

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

There is no corrective action available for this course.

As determined by the IOR, the student will receive an N grade for the course if all assignments 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

Each individual student is responsible for their behavior and is expected to maintain standards of academic honesty. Students share the responsibility with faculty for creating an environment that supports academic honesty and principles of professionalism. Proper relationships between faculty and students are fundamental to the college's function and this should be built on mutual respect and understanding together with shared dedication to the education process. It is a fundamental belief that each student is worthy of trust and that each student has the right to live in an academic environment that is free of injustice caused by dishonesty. While students have an obligation to assist their fellow students in meeting the common goals of their education, students have an equal obligation to maintain the highest standards of personal integrity.

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
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
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 end of the rotation
Mid Rotation Feedback Form	Submit in 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- 11:59pm on the 1st Friday 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
Student Activity Log	Submit in D2L	Last day 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.



College of Osteopathic Medicine
MICHIGAN STATE UNIVERSITY

MID-ROTATION FEEDBACK FORM

Rotation Name: OSS 648

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:

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3. Overall comments on student performance

Strengths:	Areas of Improvement:

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

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

STUDENT ACTIVITY LOG (ACT) OSS 648

Advanced Anesthesia Rotation

Student Name:

Base Hospital:

Rotation Dates:

Please note you will be **required to make an entry or more per day** you are on the rotation.

In addition,

- Give as many details as possible regarding the procedures you were involved with.
- Give as many details as possible regarding the primary diagnosis of the patients seen.
- Complete the Meetings/Lectures portion as applicable.
- Specify the readings you completed while you were on the service.

Please note that extra lines can be added to each log by tabbing after last column

Please list all procedures observed:

Procedure	Date	Surgeon

Please list Primary Diagnosis of Patients Seen:

Primary Diagnosis	Date	Clinic / Hospital

Please list all meetings and Lectures attended:

Meeting / Lecture	Date	Topic

Please list all reading materials read on the rotation:

Material	Topic

When completed, please upload to the Dropbox on D2L.