TEXAS COLLEGE OF OSTEOPATHIC MEDICINE

Our Mission
Create solutions for a healthier community by preparing tomorrow’s patient-centered physicians and scientists and advancing the continuum of medical knowledge, discovery, and osteopathic medicine to provide comprehensive health care.

CORE FAMILY MEDICINE
CLERKSHIP SYLLABUS
MEDE 8809
2014-2015

CLERKSHIP DIRECTOR
DAMON SCHRANZ, DO, FACOFP

CLERKSHIP COORDINATOR
SHIRLEY KING
Table of Contents

- Page 3. Clerkship Purpose
- Page 5. Core Competencies
- Page 7. Clerkship Learning Objectives
- Page 9. Clerkship Required Didactics and study assignments
- Page 10. Evaluation and Grading
- Page 12. Rotation Sites
  - Faculty and Staff
  - Contact Information
  - Other site-specific information
    - Site specific assigned study
    - Hospital requirements
    - On Call
    - Office hours
    - Parking
    - Dress code, attendance, student responsibilities, professionalism, etc.
- Page 20. Disclaimer
- Page 22. Appendix
Purpose of the Clinical Clerkship

The clinical clerkships affiliated with the Texas College of Osteopathic Medicine serve to provide supervised, high quality opportunities for third and fourth year medical students to apply and transform the declarative medical knowledge and basic clinical skills that they have acquired into procedural clinical competence, while also functioning as learning members of health care teams. The clinical clerkships promote and support TCOM students in developing clinical competence with emphasis on the core competencies beyond medical knowledge alone. Clerkships are encouraged to seek opportunities for students to provide Health and Wellness Counseling, develop improved interpersonal and communication skills, professionalism, as well as practice-based learning and improvement.

You are about to begin an eight-week experience with the department of family medicine during which time you will come to appreciate concepts of prevention and health maintenance within a context of continuity. Your learning experiences will take place primarily in an ambulatory setting, but will also include experiences within an inpatient setting. Health promotion-disease prevention has long been a part of the osteopathic philosophy and our educational emphasis on prevention is well established. In recent years this has been a rallying point for managed care groups across the country. A major part of prevention lies in the area of cancer prevention and detection. Cancer is most effectively controlled through long-term patient physician partnerships in prevention, early detection, and screening. Through your eight-week experience of this clerkship, it is anticipated you will gain full appreciation of these concepts. To facilitate the learning of this long-term partnership you have been assigned to an ambulatory family practice clinic for the entire eight weeks of the clerkship. During this time, you will be expected to coordinate all care necessary for those patients assigned to you. We do not expect all of you to choose family practice as a specialty, however we do feel the experience of this eight-week continuity is invaluable in shaping a lifelong attitude of patient care.

For physicians of the 21st century, managed care concepts are an important part of any medical practice. The student will be introduced to the practical implementation of these concepts at the clinic as well as discussions through small group seminar activities.

The family physician can provide health care for between 80 and 90 percent of the problems encountered. You will participate in this comprehensive health care in the areas of prevention, diagnosis, therapeutics, and rehabilitation. Also, you will experience continuity of care from the small infant to the senior citizen as the scope of the family practitioner.

This rotation offers an opportunity to perfect your clinical skills, judgment and knowledge. It gives you a chance to see patients and to follow them and test your clinical judgment and treatment. You will get feedback from the supervising physicians and from your patients. Some of this may be positive and some may be negative, but all of it will benefit you in your development as a physician. It is important to follow-up on “interesting patients” through daily individual reading. If you spend as little as one hour per day reading at home about topics discussed in the clinic or a patient you attended, you will visualize that topic better and enrich your clinical
database for the remainder of your professional career. Medicine is a “lifelong learning opportunity”.

We hope you will find this clerkship a rewarding experience, and that you leave with an appreciation of how rewarding family practice can be.
**Clerkship Competencies**

The objectives of the Clinical Clerkships are to enable TCOM students to achieve competence as graduate osteopathic medical students. As such, the objectives of the clerkship curriculum are represented by the AACOM Osteopathic Core Competencies for Medical Students. For the purposes of the TCOM Clinical Clerkship Competencies, the AACOM 14 Competencies have been condensed into the following 8:

1. Osteopathic Principles and Practices
2. Medical Knowledge
3. Patient Care
4. Interpersonal and Communication Skills
5. Professionalism
6. Practice-Based Learning and Improvement
7. Systems-Based Practice
8. Health Promotion/Disease Prevention

**General Competencies**

The core clinical clerkship in family medicine provides students with the opportunity for advancement of the following competencies:

- Communicate effectively and demonstrate caring and respectful behaviors when interacting with patients and their families.
- Gather essential and accurate patient information.
- Make informed decisions about diagnostic and therapeutic interventions based on patient information and preferences, up-to-date scientific evidence, and clinical judgment.
- Develop and carry out patient management plans.
- Counsel and educate patients and their families.
- Use information technology to support patient care decisions and patient education.
- Perform competently all medical and invasive procedures considered essential for practice.
- Provide health care services aimed at preventing health problems or maintaining health.
- Work with health care professionals from all disciplines to provide patient-focused care.
- Know and apply the appropriate basic and clinically supportive sciences.
- Use information technology to manage information, access on-line medical information, and support their own education.
• Create and sustain a therapeutic and ethically sound relationship with patients.
• Use effective listening skills and elicit and provide information using effective nonverbal, explanatory, questioning, and writing skills.
• Demonstrate respect, compassion, and integrity; a responsiveness to the needs of patients and society that supersedes self-interest; accountability to patients, society, and the profession; and a commitment to excellence and on-going professional development.
• Demonstrate a commitment to ethical principles pertaining to provision or withholding of clinical care, confidentiality of patient information, informed consent, and business practices.
• Demonstrate sensitivity and responsiveness to patients’ culture, age, gender, and disabilities.
• Know how types of medical practice and delivery systems differ from one another, including methods of controlling health care costs and allocating resources.
• Practice cost-effective health care and resource allocation that does not compromise quality of care.
• Advocate for quality patient care and assist patients in dealing with system complexities.
• The body is a unit: the person is a unit of body, mind and spirit.
• The body is capable of self-regulation, self-healing and health maintenance.
• Structure and function are reciprocally related.
• Rational treatment is based upon an understanding of the basic principles of body unity, self-regulation and the interrelationship of structure and function
Clerksip Goals and Learning Objectives

Goal 1

To help the student obtain a level of competence in osteopathic family medicine to qualify him/her for acceptance into a post-graduate GME program.

Upon completion of this clinical experience the student will be able to:

1. Record patient histories with emphasis on the patient’s total background, including medical, social, cultural, family, nutritional, environmental, and psychological considerations.
2. Complete a thorough, accurate, and efficient physical and structural examination.
3. Record an accurate database, make assessments and appropriate plans, including the tentative or working diagnosis, as well as identifying differential diagnostic considerations.
4. Select and utilize appropriate laboratory tests, radiological procedures, and consulting services to aid in reaching diagnostic conclusions.
5. Perform diagnostic and therapeutic clinic procedures commensurate with level of training.
6. Assume responsibility, under appropriate supervision, for patient evaluation and follow-up of cases to assess diagnosis and therapy.
7. Demonstrate knowledge of drug names, indications, side effects, dosage and drug interaction.
8. Demonstrate knowledge of structural findings, manipulative treatment for correction of abnormal findings, and contraindications for the application of manipulative therapy.
9. Properly utilize Problem-Oriented Medical Records.
10. Keep records in such a manner that they can be audited.
11. Assure quality care and cost effectiveness via the audit procedure.
12. Provide patient education to facilitate patients’ active participation in their own health care.
13. Provide medical care consistent with osteopathic philosophy and practice.
14. Develop a working relationship with other members of the health care delivery team: other physicians, nursing personnel, social services, office personnel, and community resources.
15. Identify the extent to which social, cultural, economic, psychological and environmental factors affect the health of patients and the delivery of health care.
16. Demonstrate a basic understanding of the techniques, skills, problems, and competencies required in the administration of health care delivery services and office management.
17. Refer a patient for specialty care. (This would include a completed history and physical and a copy of pertinent information for the specialist’s review. Communication regarding the referral should be relayed by phone, or preferably in writing. The Ambulatory Care Clinics would also expect a written or verbal reply from the specialist consulted following the patient visit.
18. Understand the basic concepts of managed care.
Goal 2

**To help the student correlate osteopathic principles with patient care.**

Upon completion of this clinical experience, the student will be able to:

1. Diagnose and treat disorders of the musculoskeletal system in-patients of all ages.
2. Diagnose and treat acute and chronic disorders, both somatic and visceral.
3. Give appropriate manipulative treatment to patients being treated for systemic diseases. The student is expected to design and implement a treatment program that is appropriate and rational for the pathophysiology involved.
4. Use radiology in the diagnosis of postural imbalance and other disease processes.
5. Identify trigger areas and reflex arcs of sensory or visceral origin.
6. Know the indications and contraindications for each type of manipulative treatment. Be able to select a type of treatment appropriate to the patient’s age, sex, and medical condition.

Goal 3

**To help the student develop communicative and professional skills.**

Upon completion of this clinical experience, the student will be able to:

1. Establish rapport and communicate with patients.
2. Promote patient compliance with indicated medication and other therapeutic measures.
3. Show an interest in the community being served.
4. Have better self-confidence and self-awareness.
5. Demonstrate a sense of professionalism as reflected in such diverse characteristics as case follow-up, continuing medical education efforts, punctuality and personal appearance.

Goal 4

**To help the student understand the importance of ethics in patient care, and professional interactions.**

Upon the completion of this clinical experience, the student will:

1. Understand the importance of respecting the confidentiality of patient and family concerns.
2. Recognize the rights of the patient.
3. Be attentive to common courtesies with fellow professionals, especially in handling referrals.
4. Be able to recognize their feelings and seek functional ways of improving their comfort and skills in dealing with “problem patients,” such as those who may be considered socially unacceptable, difficult to deal with, having AIDS, or are dying.
Clerkship Required Didactics and Study Assignment

A handout of the required didactics schedule, required meetings, and study assignments will be provided to you at orientation.
EVALUATION AND GRADING

Evaluation is an important part of any educational experience. The most important part of the evaluation process is the feedback the student receives during the learning process. The final grade you will receive will be based on your performance in three basic areas:

- Clinical performance.
- Family Medicine shelf exam
- Family Medicine Internal Exam

A mid-rotation feedback interview will be conducted by your clinic director. This is a formative evaluation and is for the purpose of giving you a "progress report" or clinical preceptor feedback of your clinical performance up to that time. Any deficiencies will be pointed out to you at that time. Any number grade given at this time will not be averaged with your final evaluation. A copy of the evaluation form can be found in the Uniform Policies and Procedures. Please review it. Your active participation in your assigned seminar group and other didactic sessions is required. This will be considered in determining your final grade.

The final grade for the clerkship will be computed as follows:

- Clinical Performance 50%
- Shelf Exam 25%
- Family Medicine Internal Quizzes 25%

The department will counsel with students who are borderline or not passing at the four-week' evaluation. We would hope this would allow the student ample time to improve his/her performance in the ensuing four weeks. Any student receiving a "failing" grade will be required to remediate the clerkship as directed by the Vice President of Student Affairs and described in the "Uniform Policies and Procedures for Clinical Clerkships".

Written comments are considered vital to the final evaluation and should be included as part of the clinical evaluation given by the clinic director. The course director, in consultation with the clinic director and seminar facilitator will determine the final course grade.

At the end of the rotation, your clinical preceptor will give you your clinical grade during a personal interview. Your grade will be forwarded from the director of the clinic to the course director. After being reviewed and signed by the course director, the complete rotation evaluation will be forwarded to the department chairperson for signature. From the chairperson's office, your grade is forwarded to the Office of Clinical Education, and then to the Registrar. If you do not agree with the evaluation, your first appeal is to the director of the clinic. The next step in the appeal process is to the course director with a request for departmental review. Final appeal would be through the procedure as outlined in the College catalog.

At the end of the rotation, your preceptor should go over your clinical performance. A standardized form developed by Clinical Education will be utilized to grade your clinical performance. The form covers areas including problem recognition, problem oriented diagnosis, therapeutics, communication skills, and professionalism and work habits. A perfect score on each section will reveal a composite score of 135. The students actual score (derived from the standardized form) will be divided by the total possible score of 135 to obtain a numerical grade between 27 and 100. This numerical grade will count for 50% of your final clerkship grade.
A comprehensive subject (shelf) exam will be given on the final day of the rotation. This will be administered by the Department of Evaluation Services. Per Health Science Center Policy, this will count 25% of the final grade and a scaled score of 70 or greater will be required to pass the clerkship course.

In addition to the subject exam, seven - 25 question weekly quizzes covering selected required reading assignments will be given. A cumulative grade of 70 or above is required on these quizzes to pass the course.

Any student failing to achieve a cumulative 70 on the quizzes must remediate all or a portion of the quizzes at the discretion of the course director. The maximum grade that can be received via remediation is 70. Any student who fails remediation of the quizzes will be required to repeat the Family Medicine rotation.

Failure to complete paperwork and/or online evaluations in a timely manner will result in the loss of points from your final grade and withholding of grades sent to the Registrar.
Rotation Sites

Acton Clinic
2006 Fall Creek Highway
Acton, Texas

APC Clinic
Sandy Booker, Supervisor
855 Montgomery
Fort Worth, Texas

Arlington Sanford Clinic
601 West Sanford
Arlington, Texas

Burleson Family Medicine Center
Craig Nelon, DO – William Thomas, DO
434 S. W. Wilshire
Burleson, Texas

Conroe Regional Medical Center
Stephen McKernan, DO, Medical Director
504 Medical Center Blvd.
Conroe, Texas

Corpus Christi Bay Area
Steven Gates, DO, Director of Medical Education
7101 South Padre Island Drive
Corpus Christi, Texas

Diamond Hill Community Health Center
Maya Namboodiri, DO, Medical Director
3308 Dean Road
Fort Worth, Texas

Eagle Ranch
Linda Ball, DO, Medical Director
Mary Palacios, Supervisor
7325 Boat Club Road
Fort Worth, Texas

Methodist Charlton Medical Center
Tom Shima, DO, Director of Osteopathic Medical Education
3500 W. Wheatland Road
Dallas, Texas
Northeast Community Health Clinic
Linda Siy, MD., Medical Director
837 Brown Trail
Bedford, Texas

Polytechnic Clinic
Robert Richard, DO, Medical Director
1650 S. Beach
Fort Worth, Texas

San Jacinto Methodist Hospital
Diane Dougherty, Ph.D., Associate Residency Program Director
4301 Garth Road
Baytown, Texas

Seminary Clinic
Jon Sivoravong, DO, Medical Director
Christina Hay, Clinic Supervisor
1305 E. Seminary Drive
Fort Worth, Texas

South Campus
2500 Circle Drive
Fort Worth, Texas

Trinity Holistic Family Medicine
Karen Birdy, DO, Medical Director
9239 Vista Way
Fort Worth, Texas

Viola Pitts
4701 Bryant Irvin Road
Fort Worth, Texas

Watauga Clinic
6601 Watauga Road
Watauga, Texas
COURSE FACULTY

Linda Ball, DO - Assistant Professor – Eagle Ranch
Karen Birdy, DO - Trinity Holistic Family Medicine
Steve Bishop, DO - Acton
Didi Ebert-Blackburn, DO - Assistant Professor - APC
Alan Byrd, MD - Assistant Professor - Diamond Hill
Manjula Cherukuri, MD - Assistant Professor - South Campus
Saira Dar, MD - Assistant Professor - Polytechnic
Thomas Dayberry, DO, Ph.D. - Assistant Professor - Associate Dean - Seminary Clinic
Thomas Diver, MPAS, PA-C Instructor - APC
Nancy Edens, PA-C Instructor - Eagle Ranch Clinic
Kelly Felps, MD - Assistant Professor – Diamond Hill
Frank Filipetto, DO, FACOFP - Chairman & Associate Professor – Seminary Clinic
Susan Franks, PhD - Associate Professor
Kimberly Fulda, PhD – Associate Professor
Juliette Fumtim, MD – Viola Pitts
Daniela Gamboa, MD – Assistant Professor – Diamond Hill
Victor Holmes, MPAS, CPC, PA-C – Instructor - APC
Charles Phillip Hudson, MD, FAAFP - Associate Professor - Seminary Clinic
Mandy Kiger, NP - Instructor - Diamond Hill
Aleena Kurien, DO - Assistant Professor - Watauga
Paul Lee, DO - Assistant Professor - Arlington Sanford
Daniel Lum, MD - Assistant Professor - North East
Howard Lund, MD - Assistant Professor – APC
Francis Mascarenhas, MD - Assistant Professor - South Campus

Maya Namboodiri, DO - Assistant Professor - Diamond Hill

Lisa Nash, DO, FAAFP - Associate Professor - Associate Dean Educational Programs

Vicki Nejtek, PhD - Associate Professor

Craig Nelon, DO – Burleson Family Medicine Center

Sue Nguyen, PA - Instructor - Polytechnic

Robert Richard, DO - Chairman & Assistant Professor – Polytechnic

Damon Schranz, DO, FACOFP - Associate Professor - Seminary Clinic

Jon Sivoravong, DO - Associate Professor - Seminary Clinic

Linda Siy, MD - Assistant Professor - North East

Yue-Qing Tan, MD - Assistant Professor – Watauga

William Thomas, DO – Burleson Family Medicine Center

Long Wong, MD - Assistant Professor - APC
General Responsibilities

Specific orientation for clinic procedures will be given at your individual clinics. Please refer to your schedules for specific details.

General Responsibilities

1. Clinic Hours
   Patient care hours and schedules vary from clinic to clinic. You are expected to arrive at your assigned clinic no later than one-half hour before the first scheduled patient. This will allow you to tend to any charting, messages, lab results, or other duties and be ready to see your first patient on time.

2. Patient Visits
   During the patient visit, the student is responsible for:
   - Obtaining an appropriate history and physical. This may be very comprehensive or problem focused, depending on the situation.
   - Evaluation of pertinent diagnostic tests.
   - Presenting every patient to the faculty supervisor prior to finalizing management plans.
   - After appropriate consultation with the faculty supervisor, initiate all necessary treatment and management.

3. Medical Record
   The medical record is a vital part of maintaining a continuity relationship with the patient and being able to provide a preventative approach to the health care of your patients. Updating the medical record each visit is expected of all students. This will include:
   - Chronic and acute problem lists
   - Medication lists
   - Immunization status
   - Health maintenance charts
   All records should be completed the day of the visit and no medical record shall be removed from the clinic.

4. Diagnostic Tests
   Laboratory, x-ray, and other diagnostic tests should be viewed as a means to confirm or rule out pathological conditions suspected on the basis of your clinical evaluation. Learning cost-effective health care is an essential part of your medical education. You should be able to justify each test you order. If you cannot give sound reasoning as to why the test should be done, perhaps it is an unnecessary test. All tests should be approved by the faculty supervisor prior to ordering or doing them.
Specific orientation on how to order lab and x-rays will be given at the clinic site. You must be specific and follow protocol. There are several managed health care plans that have specific rules. These must be followed. Ask the nursing staff at your clinic if you are unsure of what to do.

5. Lab Procedures Available at the Clinic Site.
   What lab procedures are done at the clinic is dependent on whether or not CLIA approval has been obtained. All of the UNTHSC clinics are CLIA approved. At the end of the rotation the student should be proficient in performing the following tests:
   • Urinalysis.
   • Wet mount.
   • KOH prep.
   • Urine pregnancy test.
   • Finger stick glucose, PT/INR, HgbA1c.
   • Obtaining specimens for various cultures.

6. Writing Prescriptions
   **All prescriptions must be signed by a supervising licensed physician.** Keep them in your pocket. Students **may not** call in prescriptions to the pharmacy.

7. Referrals
   If you feel that your patient would benefit from a referral to another specialist, you must have pre-approval by the supervising physician. He/she will review with you whether there is sufficient data on the patient's problem, and see if you have done a sufficient work-up before sending the patient to a consultant. It is your responsibility to arrange the consultations on your patients. You will be given specific orientation at each clinic site. There are specific rules to follow and these will vary according to the type of insurance or managed care plan the patient has.

   After making the appropriate arrangements for a consultation, the student will be expected to complete a referral form, which shall include all appropriate clinical information necessary to assure continuity of care. This includes copies of all appropriate labs, x-ray and other reports. We encourage the student doctor, whenever possible, to accompany the patient to the consultant in order to determine first-hand what is offered the patient in the way of care. When making the arrangements, ask the consultant's staff if it would be permissible for you to accompany your patient. You are expected to do this as part of the educational experience of this clerkship. Your clinical staff will cooperate in giving appropriate time away from the clinic for this educational activity.
General Guidelines

Attendance Policy
The Department of Family Medicine expects 100% attendance at all required clinics, rounds, meetings and assigned functions. Students are required to strictly adhere to the attendance policies described in “Uniform Policies and Procedures for Clinical Clerkships”. Failure to do so may result in disciplinary action.

ATTENDANCE (per the “Uniform Policies and Procedures for Clinical Clerkships”)

The focus of the clinical experience in years 3 and 4 is patient care. 100% attendance is, therefore, required to be certain that continuity of care is maintained. It is understood; however, that certain situations may arise that will result in absence from required daily participation.

In such instances the following policies will be observed:
All absences are subject to approval by the clerkship director. Even if the absence is approved, the clerkship director or preceptor may require an additional assignment or for time to be made up from any student who misses time on their service. Make up days should be completed within the regularly scheduled rotation.

All absences shall require submission of a Request for Absence from Clerkship form. That form is available either on-line or in the Office of Clinical Education.

Unapproved absence or absence in excess of the above policy may require remediation or result in a lower grade at the discretion of the clerkship director.

Absence of 5 days or more during any 4 week rotation (or any 4 weeks of an 8 week rotation) or absence of 7 days for 6-week rotations will result in a grade of INCOMPLETE and repeat of the entire rotation will be required.

Failure to notify the clerkship director or rotation supervisor of any absence will be considered neglect of duty and may result in a failing grade for the clerkship.

Students may be granted approval for absence by the Associate Dean for Academic Affairs for participation in select Health Science Center activities. Such approval must be obtained in advance with written notification to the clerkship director. Please review the individual syllabi for additional attendance requirements.

If you are ill, or otherwise cannot be in the clinic, you must notify your clinic director at the earliest possible time. Do not call the department answering service and leave a message. Call the department of Family Medicine Academic office, 817-735-2440, and/or your clinic. The Academic office phones are usually answered by 7:30 am.
**Professionalism and Ethics**

We expect you to give the appearance and behavior of an advanced medical student about to become a physician. You should remember that medical ethics of confidentiality should be adhered to. Appropriate identification identifying you as student physicians should be worn at all times when seeing patients. The student physician should appear well groomed, neatly dressed, and give a good professional image. Dress requirements include a cleaned and pressed clinic jacket. We reserve the right to suggest that dress may not be suitable, or we may suggest appropriate attire. Your response will be judged as part of your self-management.

We expect you to maintain the highest standard of professionalism and ethical behavior at all times. This includes your relationship with the clinic staff, and your fellow students.

**Problem Patients**

If you are having trouble with a patient, please notify your supervising physician. He/she will advise you or get further consultation on how to handle the situation.

**Availability**

You must be readily available at all times during clinic hours. If for any reason you must leave the clinic, you must notify both the supervising faculty and the head nurse. Your home phone number must be listed with your assigned clinic office.

**Equipment**

Carry your stethoscope with you during clinic hours.

**Courtesy Visits**

Under no circumstances are you to see a patient unless they have signed in with the receptionist of your clinic. Do not see your classmates or fellow students informally. They must register with the front desk. Under no circumstances are you to discount any charges without the approval of the supervising faculty.
DISCLAIMER

The clinical clerkship is operated in accordance with the policies and procedures of the academic programs of the Texas College of Osteopathic Medicine as presented in your class’ Clerkship Manual, Student Handbook and College Catalog.

Academic Integrity/Honor Code
Enrollment is considered implicit acceptance of the rules, regulations, and guidelines governing student behavior at UNT Health Science Center. It is the responsibility of the student to be familiar with all policies governing academic conduct which can be found in the UNTHSC Student Catalog, Student Policy Handbook and the Student Code of Conduct and Discipline which are located on the UNTHSC Internet at http://www.hsc.unt.edu/Sites/DivisionofStudentAffairs/

Academic Assistance
Students may schedule one-on-one academic assistance with faculty through in-person appointments, telephone calls or e-mail communication. Academic assistance is also available through the UNTHSC Center for Academic Performance (CAP) http://www.hsc.unt.edu/CAP

Attendance and Drop Procedure
Course instructors and the School’s administration expect students to attend class. It is the responsibility of the student to consult with the instructor prior to an absence, if possible. Withdrawal from a course is a formal procedure that must be initiated by the student. Students who stop attending class and do not withdraw will receive a failing grade. Students should consult with the instructors prior to withdrawing. In some cases a perceived problem may be resolved, allowing the student to continue in the course. It is the student’s responsibility to be familiar with the policies and procedures as stated in the Student Handbook and the UNTHSC Catalog located on the UNTHSC Internet at http://www.hsc.unt.edu/departments/studentaffairs/.

Americans with Disabilities Act
The University of North Texas Health Science Center does not discriminate on the basis of an individual’s disability and complies with Section 504 and Public Law 101-336 (American with Disabilities Act) in its admissions, accessibility, treatment and employment of individuals in its programs and activities. UNTHSC provides academic adjustments and auxiliary aids to individuals with disabilities, as defined under the law, who are otherwise qualified to meet the institution's academic and employment requirements. For assistance contact the Assistant Director, Disability Accommodations within the Center for Academic Performance at the Health Science Center. Reference Policy 7.105 Americans with Disabilities Act Protocol in the Student Policies.
Course and Instructor Evaluation
It is a requirement of all students that they are responsible for evaluating each of their courses and instructors as defined in UNTHSC Policy 7.120 Student Evaluation of Courses and Instruction. Please adhere to all guidelines established in the policy.

Course Assessment In some instances, courses will have a course assessment that will provide immediate feedback to the course director regarding progress of the course identifying potential problems and determining if student learning objectives are being achieved. (Provide all pertinent information regarding the specifics of the groups in the syllabus as defined in UNTHSC Policy 7.120 Student Evaluation of Courses and Instruction.)

Syllabus Revision
The syllabus is a guide for this class but is subject to change. Students will be informed of any change content or exam/assignment dates.

Turnitin and the Family Education Rights and Privacy Act (FERPA) – If applicable
NOTE: UNTHSC has contracted with Turnitin.com for plagiarism detection services. Use of Turnitin.com is entirely in the discretion of the instructor, but use of such a service requires that you provide notice (via syllabus) to your students that you are using such services. In addition, instructors who use Turnitin should be sure to remove student identifiable information from the work before sending to Turnitin or receive written permission from the student. There are two methods for using Turnitin for written assignments. Please refer to the wording guidelines and consent form located on the Faculty Affairs website at http://www.hsc.unt.edu/Sites/OfficeofFacultyAffairs/index.cfm?pageName=Turnitin.

Zero Tolerance for Sexual Violence and Harassment
All students should be able to study in an atmosphere free of harassment, sexual violence and gender discrimination. Title IX makes it clear that violence and harassment based on sex and gender is a Civil Rights offense subject to the same kinds of accountability and the same kinds of support applied to offenses against other protected categories such as race, national origin, etc. If you or someone you know has been harassed or assaulted, you can find the appropriate resources on the UNT Health Science Center’s website: http://web.unthsc.edu/info/200304/student_affairs/355/title_ix_reporting

We reserve the right to make clinical assignments based on needs and availability.
APPENDICES CAN BE ACCESSED ON CANVAS

1. Weekly Assignments
2. Focused Experiences
3. Learning Resources
4. Cognitive Objectives
5. Common Clinical Entities
6. ACOFP Code of Ethics