

Paul L. Foster School of Medicine

# **Syllabus**

# Medical Skills Course (MSC)

PMSK 5301 (MSC I)

PMSK 5302 (MSC II)

Academic Year 2020-2021

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# **Course Description**

In the end we retain from our studies only that which we practically apply. –Johann Wolfgang von Goethe

#### Overview

The Medical Skills Courses I and II are the first two semesters of a two-year series of courses that are designed to teach each medical student the basic clinical skills needed for medical practice. These skills include effective communication, scheme-based history taking and physical examination, development of clinical reasoning, formation of an initial diagnostic plan, interpretation of basic diagnostic studies, performance of selected procedures, provision of counseling and feedback, and articulation of a clinical case presentation. During the COVID-19 pandemic, the medical skills course will follow the PLFSOM "Return to Campus Academic Operations Plan" in an effort to reduce risk to students, staff and faculty.

The Medical Skills Courses are closely coordinated with Scientific Principles of Medicine (SPM) so that each Medical Skills session applies content provided during the same week as SPM. Through this integration, the two courses reinforce each other and deepen student learning.

Learning is accomplished through pre-session review of preparatory material, readiness assurance quizzes, standardized patient interactions, group debriefing following standardized patient encounters, demonstration and guided practice with feedback on performance of simulated clinical procedures, team-based simulated problem solving scenarios, field trips to outlying facilities, and other modalities. Formative feedback on each student's performance is provided through faculty guided review of performance in the standardized patient encounters, peer assessment using predetermined criteria, and periodic review with a faculty member of videotaped SP encounters.

Students are assessed through their performance in simulated settings with standardized patients (OSCE examinations), through their answers on readiness assurance quizzes, and through demonstration of their proficiency with selected procedural tasks. Assessments are administered at the end of each academic unit. At the end of the second year of medical school, a comprehensive OSCE examination is performed testing students over the content covered during the first two years

# Integration with the Medical School Curriculum

The clinical presentation-based curriculum creates an unprecedented opportunity for integration and application of topics in Medical Skills with content covered in Scientific Principles of Medicine. Matching the standardized patient cases and skill building activities with the content of the basic sciences curriculum creates reinforcement between these two courses that deepens and strengthens the learning in both. In addition, the skills developed in the Medical Skills Course are also practiced during clinical experiences in the Society, Community and the Individual course.



# **Educational Methods and Learning Experiences**

Medical Skills Courses I and II will be presented as a series of weekly 1.5-hour sessions throughout the first year of medical school. Students will be divided into learning groups, and each group will rotate through the learning activities being presented that day.

**Preparatory reading assignments:** Prior to each session, students will study the Exam Room Guide that has been prepared for the clinical scheme, and will review the video recording that reviews the Guide. They may also have a reading assignment, for example, a section from a section from MacLeod's Clinical Examination 14<sup>th</sup> Edition. A curated collection of medical skills textbooks is available through the TTUHSC-EP electronic library at:

# https://elpaso-ttuhsc.libguides.com/PLFSOMtextbooks

Session instructions and preparatory materials are posted on CHAMP. Students are also responsible for reading announcements posted on Canvas in regards to the course. Announcements will include important information about testing, sessions, sign-ups for OSCE physical exam evaluations and History and Physical assignment, etc. Students should check their Canvas account settings to have Canvas announcements and notifications sent to their email.

**Objective Structured Clinical Encounter (OSCE)**: Both a learning and an assessment tool, the OSCE is a structured exercise in which the student interacts with a standardized patient who has memorized a clinical scenario. Students will be required to demonstrate specific skills in communication, history taking, physical examination, and recording of clinical information. Students receive specific feedback on their performance.

**Small-group activities:** Demonstrations, facilitated performance, and practice with interview skills, physical examination techniques, and clinical procedures will be principally carried out in small groups supervised by clinical faculty.

**Team Based Learning Sessions:** Some units may include Team Based Learning sessions. TBL sessions consist of individual readiness assurance test, a group readiness assurance test, and an application exercise.

**Clinical simulations:** The Training and Educational Center for Healthcare Simulation (TECHS) Center is capable of simulating numerous clinical procedures on mannequins or in computergenerated virtual reality. Students will use the Center to develop and refine their skills before performing procedures on actual patients.

**Patient encounter log:** During medical school, each medical student maintains a log of their patient encounters, including standardized patient encounters. The Online Patient Log (OP Log) can be found on the Canvas page for the Medical Skills Course.

**SP Encounter Review and Reflective Self-Assessment:** Once each semester, every student is required to meet with the Physician Assistant Educator and/or Nurse Educator for a small group review of one of their videotaped SP encounters and SOAP notes. Prior to the session, each student will view one of their videotaped SP encounters and SOAP notes, complete a reflective SP Video Questionnaire, and identify goals for professional development. During the session, students view a sample of each other's videotapes, SOAP note and identify opportunities for improvement in communication, documentation skills, interpersonal skills, and clinical reasoning.

**Field Trip:** Students will visit selected medical facilities where they will be oriented to the operations and healthcare procedures of the facility. Students may interview selected patients during a field trip and maybe assigned to prepare a structured write-up or report of their experience.

# Competencies, Program Goals and Objectives, and Outcome Measures

The Paul L. Foster School of Medicine education program goals and objectives are outcome-based statements that guide instruction and assessment as you develop the knowledge and abilities expected of a physician. All elements of the PLFSOM curriculum are derived from and contribute to the fulfillment of one or more of the medical education program's goals and objectives, which can be found at <u>PLFSOM PGOs</u>.

The overall goal of the Medical Skills Course is for each medical student to achieve proficiency and competence in the fundamental skills of doctoring. Specifically, the Medical Skills Course is designed to promote student achievement of the following learning objectives (associated PLFSOM Education and Program Objective (PGO) IDs are given in parenthesis and detailed in the subsequent table):

- Communicate effectively with patients, family members, faculty, staff, and peers in a respectful and diplomatic manner. (PGO 4.1, 4.2, 4.3)
- Communicate using language that is clear, understandable, and appropriate to each patient. (PGO 1.8, 2.5, 5.1)
- Maintain each patient's dignity and modesty during clinical encounters. (PGO5.2)
- Identify the chief reason for the clinical encounter and use questions effectively to find the most pertinent history needed for decision-making. (PGO 1.1, 1.5)
- Use effective approaches to help patients promote behavioral change for the purpose of avoiding preventable diseases. (PGO 1.8, 1.9)
- Select and perform the most pertinent physical examination maneuvers to search for findings that support or refute likely diagnoses under consideration. (PGO 1.1)
- Concisely, accurately, and legibly record the patient's history in the medical record. (PGO 1.7, 4.4)
- Use the patient's history, physical examination, and diagnostic studies to generate alist of active medical problems. (PGO 1.3, 2.3)
- Orally present a patient's history and physical examination in an organized and concise manner. (PGO 4.2)
- List the appropriate indications, potential risks and intended benefits of common procedures such as venipuncture, bladder catheterization. (PGO 1.2, 1.10)
- Proficiently perform several common clinical procedures. (PGO 1.6, 1.10)
- Participate effectively and collaboratively with a healthcare team in an urgentsituation. (PGO 7.1, 7.2, 7.3, 7.4)
- Maintain ongoing learning practices that promote the development of optimal medical skills including careful preparation, active engagement, and reflection on formative feedback. (PGO 3.3)

Patient Care		
Educa	ational Program Objectives	Outcome Measures
1.1	Gather essential information about patients and their conditions through history taking, physical examination, and the use of laboratory data, imaging studies, and other tests.	<ul> <li>Clinical Performance         Rating/Checklist (SP checklist         criteria – learning encounter)</li> <li>Multisource Assessment (Faculty         debriefing following each         encounter)</li> <li>Stimulated recall (SPERRSA video         SOAP note review and discussion)</li> <li>Self-assessment (SPERRSA video         SOAP note review and         discussion)</li> <li>Exam – Institutionally Developed,         Clinical Performance (End-of Unit         OSCE; Open Lab practice sessions)</li> </ul>
1.2	Make informed decisions about diagnostic and therapeutic interventions based on patient information and preferences, up-to-date scientific evidence, and clinical judgment.	Participation (Procedure skill building activities with feedback)
1.3	For a given clinical presentation, use data derived from the history, physical examination, imaging and/or laboratory investigation to categorize the disease process and generate and prioritize a focused list of diagnostic considerations.	<ul> <li>Multisource Assessment (Weekly learning encounter debrief)</li> <li>Exam – Institutionally Developed, Clinical Performance (End-of Unit OSCE)</li> </ul>
1.5	Recognize a patient requiring urgent or emergent care, and initiate evaluation and management.	<ul> <li>Clinical Performance         Rating/Checklist (SP checklist         criteria – learning encounter)</li> <li>Multisource Assessment (Faculty         debriefing following each         encounter)</li> <li>Stimulated recall (SPERRSA video         SOAP note review and discussion)</li> <li>Self-assessment (SPERRSA video         SOAP note review and discussion)</li> <li>Participation (manikin simulations         activities with feedback)</li> <li>Exam – Institutionally Developed,         Clinical Performance (End-of Unit         OSCE)</li> </ul>
1.6	Describe and propose treatments appropriate to the patient's condition and preferences.	Participation (Procedure skill building activities with feedback)
1.7	Accurately document history, physical examination, assessment, investigatory steps and treatment plans in the medical record.	<ul> <li>Clinical Documentation Review (Weekly learning encounter SOAP note; OSCE exam SOAP note; SPERRSA video SOAP note review</li> </ul>

1.8	Counsel and educate patients and their families to empower them to participate in their care and enable shared decision-making.	<ul> <li>and discussion)</li> <li>Exam – Institutionally Developed, Clinical Performance (End-of Unit OSCE)</li> <li>Clinical Performance Rating/Checklist (SP checklist criteria and verbal feedback – learning encounter)</li> </ul>
1.9	Provide preventative health care services and promote health in patients, families and communities.	<ul> <li>Clinical Performance         Rating/Checklist (SP checklist         criteria and verbal feedback –         learning encounter)</li> <li>Clinical Documentation Review         (Weekly learning encounter SOAP         note; OSCE exam SOAP note;         SPERRSA video SOAP note review         and discussion)</li> </ul>
1.10	Demonstrates and applies understanding of key issues in performing procedures and mitigating complications, and demonstrates reliable mechanical skills in performing the general procedures of a physician.	<ul> <li>Participation (Procedure skill building activities with feedback)</li> </ul>
	lge for Practice	Outcome Macauras
2.3	Apply evidenced-based principles of clinical sciences to diagnostic and therapeutic decision-making and clinical problem solving.	<ul> <li>Outcome Measures</li> <li>Multisource Assessment (Weekly learning encounter debrief)</li> <li>Exam – Institutionally Developed, Clinical Performance (End-of Unit OSCE)</li> </ul>
2.5	Apply principles of social-behavioral sciences to patient care including assessment of the impact of psychosocial, cultural, and societal influences on health, disease, care seeking, adherence and barriers to care.	<ul> <li>Clinical Performance         Rating/Checklist (SP checklist         criteria and verbal feedback –         learning encounter),</li> <li>Clinical Documentation Review         (Dialysis Center Visit note)</li> </ul>

Practic	Practice-Based Learning and Improvement		
Educati	onal Program Objectives	Outcome Measures	
3.3	Accept and incorporate feedback into practice.	<ul> <li>Participation (Mastery based assessment of physical examination skills; SP encounter debrief)</li> <li>Stimulated recall (SPERRSA video review and discussion)</li> </ul>	

Interp	ersonal and Communication Skills	
	ional Program Objectives	Outcome Measures
4.1	Communicate effectively with patients and families across a broad range of socioeconomic and cultural backgrounds.	<ul> <li>Clinical Performance         Rating/Checklist (SP checklist         criteria and verbal feedback –         learning encounter)</li> <li>Peer Assessment (Peer feedback         – learning encounter)</li> </ul>
4.2	Communicate effectively with colleagues and other health care professionals.	<ul> <li>Clinical Performance         Rating/Checklist (SP checklist         criteria and verbal feedback –         learning encounter)</li> <li>Peer Assessment (Peer feedback         – learning encounter)</li> <li>Multisource Assessment (Weekly learning encounter debrief)</li> </ul>
4.3	Communicate with sensitivity, honesty, compassion and empathy.	<ul> <li>Clinical Performance         Rating/Checklist (SP checklist         criteria and verbal feedback –         learning encounter)</li> <li>Peer Assessment (Peer feedback         – learning encounter)</li> </ul>
4.4	Maintain comprehensive and timely medical records.	<ul> <li>Clinical Documentation Review (Weekly learning encounter SOAP note; OSCE exam SOAP note; SPERRSA video SOAP note review and discussion)</li> <li>Exam – Institutionally Developed, Clinical Performance (End-of Unit OSCE)</li> </ul>
Profes	sionalism	
Educat	onal Program Objectives	Outcome Measures
5.1	Demonstrate sensitivity, compassion, integrity and respect for all people.	Clinical Performance     Rating/Checklist (SP checklist     criteria and verbal feedback –     learning encounter)
5.2	Demonstrate knowledge of and appropriately apply ethical principles pertaining to patient privacy, autonomy and informed consent.	Clinical Performance     Rating/Checklist (SP checklist     criteria – learning encounter;     Professionalism criteria – learning     encounter)

Interp	Interprofessional Collaboration		
Educati	onal Program Objectives	Outcome Measures	
7.1	Describe the roles of health care professionals.	<ul> <li>Participation (TeamSTEPPS IPE scenario sessions – debriefing and feedback)</li> <li>Participation (manikin simulation activities with feedback)</li> </ul>	
7.2	Use knowledge of one's own role and the roles of other health care professionals to work together in providing safe and effective care.	<ul> <li>Participation (TeamSTEPPS IPE scenario sessions – debriefing and feedback)</li> <li>Participation (manikin simulation activities with feedback)</li> </ul>	
7.3	Function effectively both as a team leader and team member.	<ul> <li>Participation (TeamSTEPPS IPE scenario sessions – debriefing and feedback)</li> <li>Participation (manikin simulation activities with feedback)</li> </ul>	
7.4	Recognize and respond appropriately to circumstances involving conflict with other health care professionals and team members.	<ul> <li>Participation (TeamSTEPPS IPE scenario sessions – debriefing and feedback)</li> <li>Participation (manikin simulation activities with feedback)</li> </ul>	

# **Grading System**

## Formative Assessment and Feedback

Formative feedback is provided to the students on a weekly basis through the following mechanisms: Standardized Patient checklist and feedback, peer observer feedback, group debriefing and note writing. One on one feedback to each student is also provided by faculty supervising the skill practice stations. In addition, SPERRSA and Open Lab are designed to provide formative feedback.

# **Summative Assessment and Grading**

Detailed information regarding institutional and school-level grading procedures and transcript notations can be found in the TTUHSC-EP 'Grading Procedures and Academic Regulations' (HSCEP OP 77.19) policy and PLFSOM 'Grading, Promotion, and Academic Standing' (GPAS) policy. On the basis of a composite assessment, each student in the Medical Skills Course will generally receive a grade of 'PA' (Pass) or 'FA' (Fail) for each semester of the course. The components of the composite assessment are:

- Attendance: Attendance is required and will be recorded weekly. 10% of each student's grade for each Unit can be earned based on performance on weekly quizzes and completion of the Online Patient Log (OP Log)
  - Performance on weekly quizzes: A readiness assurance quiz is regularly included in the morning of each Medical Skills session. Students achieving a cumulative performance of 80% or more on these quizzes will earn five points towards their unit grade. Students achieving a cumulative performance of 50% to 79% on these quizzes will earn two and half points towards their unit grade. Students earning below a 50% will receive no points.
  - Completion of the OP Log: Students are expected to record each standardized
    patient encounter in their Online Patient Log (OP Log). Students completing their OP
    Log with all of their standardized patient encounters by the end of the Unit will earn
    five points towards their unit grade.
- Performance on OSCE examinations: Each End-of-Unit OSCE will have between 2-4 stations.
  One or more of these stations will be a Standardized Patient encounter. Assessment at each station will be based on demonstration of proficiency as assessed using predetermined criteria that assess skills in history taking, physical examination, communication, clinical reasoning, documentation, and professional demeanor. Performance on the OSCE examinations will constitute 90% of the summative score for each Unit.
- Physical Exam Skill Evaluation: Each Unit may require that students demonstrate mastery
  of a physical examination set. Testing times will be arranged during each Unit.
   Performance criteria will be predetermined and these criteria will be available to the
  students. Students must correctly perform 90% of the predetermined criteria in order to
  receive a passing score. Students will have multiple opportunities to achieve a passing
  score on this activity.
- Team-based learning sessions: Several Units include one or more TBL sessions. TBL sessions consist of an individual readiness assurance test, a group readiness assurance test, and an application exercise. All of these activities are graded. It is noted that a small contribution of this grade comes from group activities. Therefore each student's individual Unit grade will, to a small extent, reflect the performance of their peers. Student scores on the TBL activity will be included in the final score for the Unit as part of the OSCE exam score.
- Medical Record Keeping: During the renal unit, students will visit one of the dialysis centers
  in the surrounding community. They will interview a dialysis patient to assess the
  psychological and social factors, in addition to the medical issues, affecting the patient's life.
  They will be required to submit a progress note on Canvas documenting this visit which will

be graded and included in the end of unit assessment.

- Passing score: Students must demonstrate a cumulative score of 75% or greater in order to receive a grade of Pass for an academic Unit. Students must receive a grade of Pass in all constituent Units in order to receive a grade of 'PA' (Pass) for a semester of the Medical Skills Course.
- Unprofessional behavior: Students demonstrating unprofessional behavior may receive a grade of Fail for the Unit and the corresponding course semester regardless of their cumulative score.
- Make up examinations: Students who have attended the majority of sessions during the academic Unit and who achieve a summative score of less than 75% will be offered an opportunity to take a makeup OSCE examination. Arrangements will be made to take the makeup OSCE examination within one month of the end of the academic Unit. Students will only be required to retake the portions of the examination on which they received a score of less than 75%. Those students who achieve a score of less than 75% on the makeup examination will receive a grade of Fail for the Unit and corresponding semester course, and referred to the Grading and Promotions Committee (GPC). Pending approval by the GPC, those students will be offered an opportunity to repeat the Unit examination at the end of the academic year. If they successfully remediate the failed Unit at the end of the academic year, the semester grade of 'FA' (Fail) will be changed to a grade of 'FA/PA' (Failed First Attempt/Passed Remediation).
- Posting of grades: Each student's Unit OSCE grade will be released within 30 days of the
  end of the Unit. If the student does not demonstrate mastery of a required physical
  examination skill or any incomplete portion of OSCE prior to the end of the semester, their
  grade will be listed as 'DE' (Deferred) until the physical examination skill or any
  incomplete portion of OSCE is mastered.

# Course Policies and Procedures

The Medical Skills Course follows all applicable policies and procedures of the Office of Student Affairs of the Texas Tech University Health Science Center El Paso Paul L. Foster School of Medicine. In addition, the Medical Skills Course has established additional course-specific policies that are created to maintain an optimal learning environment, promote professional conduct with standardized patients, faculty, staff and peers, and protect the resources of the Training and Educational Center for Healthcare Simulation (TECHS).

#### Schedule

- Medical Skills sessions for MS1 students are generally held once a week on Thursday.
   Students are assigned to attend for 1.5 hours with an asynchronous online readiness quiz available at 7am on the morning of the medical skills session. Each student will be assigned a time to attend their session. The time of the assigned session will rotate each semester.
- Timing may vary for special activities such as visits to the Dialysis Center and TBLs. The calendar will be posted well in advance of the session.
- Open labs are generally held on Wednesdays by the Physician Assistant and Nurse Educator. Times are posted on Canvas.
- SPERRSA sessions are held on Wednesday. Attendance at one session per semester is required.

# Attendance Policy

As outlined in the PLFSOM 'Pre-clerkship phase attendance policy', failure to meet the school's overall expectations for attendance and participation can lead to a number of consequences including failure of a course or referral to the GPC for professionalism concerns. Attendance at Medical Skills Course activities is required. Students are required to arrive on time and participate in course activities until excused by the supervising faculty member. Students arriving late may receive an unexcused absence for the session from the Course Director/Co-Director.

Absences: Students must notify the Course Coordinator in advance of an anticipated absence, preferentially at least two working days prior to the MSC session (so that adjustments can be made in the number of standardized patients). In the event of an emergency that results in a full or partial absence from an MSC session, the student must notify the course Co-Director or Coordinator within three working days or the session will be counted as an unexcused absence. These notifications are in addition to the notice provided to the Office of Student Affairs through the <a href="mailto:plfabsence@ttuhsc.edu">plfabsence@ttuhsc.edu</a> email address. The Office of Student Affairs makes the final determination regarding whether an absence is excused.

Make up sessions: On a case-by-case basis the MSC Course Co-Director in coordination with the TECHS Center staff may schedule make up sessions for students with excused absences from MSC sessions.

Prior commitments: For conflicts due to events that are anticipated well in advance (such as religious holidays or weddings), the student must contact the Course Coordinator or Course Co- Director and the Office of Student Affairs. The Office of Student Affairs will make the determination whether the absence is excused (refer to the PLFSOM 'Pre-clerkship phase attendance policy').

#### Conduct

Deportment: Students are expected to be attentive to the activities and instruction in each session, and conduct themselves in a courteous and professional manner with peers, staff, faculty, and standardized patients.

#### I. Purpose

All students have a legal and moral right to know the specific areas of prohibited conduct and to be judged as to charges of commission of such conduct by a fair and impartial hearing.

# II. Policy

Set forth below are school regulations prohibiting certain types of student conduct and constitute offenses against the school.

#### 1. Academic dishonesty

- a. Giving or receiving information about the content of quizzes, examinations, (including make-up exams), classroom, or lab work or other assignments without instructor permission.
- b. Copying or using unauthorized information or materials on quizzes, examinations, or other assignments.
- c. Selling, buying, or otherwise obtaining a copy of a test, quiz, or examination without instructor approval.
- d. Collaborating with another person or persons during quizzes, examinations or other assignments except as authorized by instructor.
- e. Working with another person or persons during or prior to a make-up examination unless authorized by instructor.
- f. Substituting for another person during a quiz or examination or allowing a person to substitute for you during a quiz or examination.

- g. Buying or selling a report, term paper, manuscript, project, etc. to meet the requirements of an assignment.
- h. Plagiarism: using partially or totally the ideas or words of another person or persons in written assignments without crediting the source(s).
- i. Failing to follow assignments without crediting the source(s).other
- 2. Stealing property, knowingly possessing, receiving, or selling stolen property of TECHS.
- 3. Behaving in an abusive, obscene, violent, excessively noisy, or drunken manner at TECHS.
- 4. Damaging or destroying TECHS property or property belonging to a member of the center.
- Intentionally causing or attempting to cause physical injury to an employee, a student, or guest, or behaving in such a manner that could reasonably be interpreted as possibly leading to the physical injury of an employee, student, or guest.
- 6. Unauthorized entry into any office, laboratory, or storage space at TECHS.
- 7. Bringing or using firearms, fireworks, explosives, incendiaries, and all other type of weapons to TECHS.
- 8. Hazing or harassing any student, staff member, or guest of TECHS.
- 9. Possessing, using, transmitting, or being under the influence of any narcotic drug, hallucinogenic drug, amphetamine, marijuana, alcoholic beverage, or intoxicant of any kind on TECHS at any time. Using legally prescribed medications is not a violation.

Personal belongings: Students should bring only required equipment to each MSC session. Do not bring backpacks, purses, or computers into the TECHS Center. The TECHS Center is not responsible for lost or stolen items. Items left behind will be sent to the TTUHSC El Paso Police Department.

Conversation: Do not carry on side conversations in class or during simulation activities.

Other Activities: Learners may not work on other activities while in class. This includes homework for other courses or other personal activities.

Attitude: Learners are expected to maintain a civil attitude in class. Inappropriate or offensive commentary or body language regarding the course, the instructor, assignments, or fellow students, will not be tolerated.

Profanity and Offensive Language: Learners may not use profanity or offensive language in class.

Internet: In sessions where computers are used, students may use the internet only for purposes related to the MSC session.

Electronic devices: Students are expected to follow the TECHS policy on electronic communication devices. Personal electronic devices are to be used only for the support of education and provision of medical care. Personal and communication devices may not be used during testing scenarios. No personal electronic devices (e.g. cell phone, iPad, iPod, tablets, smart watches, Bluetooth headsets, headphones, earbuds, etc.) are permitted during exam sessions. Use of these items during End-of-Unit OSCE examinations will be considered a breach of the student honor code and grounds for disciplinary action.

Guests and Children: Students may not bring friends or children to the TECHS Center during learning sessions. Individuals who violate this regulation are subject to disciplinary action.

Consumables: No food, chewing gum, drinks, seeds, or toothpicks are permitted in simulated patient care areas (Ex. Standardized patient examination rooms, immersive simulation rooms, near hospital style beds, or during any procedural activity). Water and coffee may be brought into classroom portions of TECH provided no real or simulated medical care activities are planned in that space.

Security: The TECHS Center is a secure area. Unauthorized entry is not permitted.

Property: Removing equipment from the TECHS Center is not permitted under any circumstance. Abuse and/or damage to the facilities or equipment may result in charges and/or loss of future privileges.

# **Professional Attire**

Policies regarding appropriate attire are covered in the policies and procedures of the Office of Student Affairs of the Texas Tech University Health Science Center El Paso Paul L. Foster School of Medicine. In addition, policies specific to the TECHS Center are outlined in the TECHS Policy for Students and Other Training Participants. Students can find a copy of the TECHS Policy posted on Canvas.

TECHS is considered to be a clinical area, and standardized patients are to be treated the same as actual patients. Because of the requirement that medical students examine standardized patients who are partially disrobed, it is required that students dress in a modest and understated manner, commensurate with proper decorum for clinical work.

All learners participating in sessions at the TECHS Center are required to wear their white coats over their professional business attire.

# 1. Clothing

Clothing will be worn appropriate to the TECHS Center's environment. All clothing should be neat, clean, pressed and fit properly. Fabrics should be traditionally acceptable for a standard clinical care setting. Articles of clothing that are considered inappropriate for the TECHS Center are those described below (this list is not all-inclusive):

- a. Tight-fitting, revealing, overly loose-fitting, wrinkled, soiled, and casual clothing such as shorts, skirts, denim jeans/skirts/shirts of any color and clothing that may expose the midriff and torso.
- b. Skirt lengths that are more than two (2) inches above the knee or with a dramatic/revealing slit.
- c. Tank tops or blouses with racer backs or spaghetti straps.
- d. Plunging neckline, V-neck, or blouse/shirts unbuttoned that reveal undergarments.
- e. Stirrup pants, low rise pants, baggy pants, sweat pants or outfits, warm-ups, wind suits and leggings.
- f. Fabrics such as denim (any color), sheer, clinging, open weave knit, dressy metallic, seguins, and sweatshirts.

#### 2. Shoes

Footwear should be worn at all times while at the TECHS Center. All footwear worn should fit comfortably.

a. For safety reasons shoes will be closed-toed, solid rubber sole, and low heeled to prevent slipping, falling or accidents.

#### 3. Scrubs

MSI or MSII students are not permitted to wear scrubs unless advance approval is granted by the TECHS Center Director(s) and Medical Skills Course Director. If advance approval is given scrubs should be neat, clean, fit properly and professional. V-neck scrubs should be worn with an under-shirt if chest hair is visible.

# 4. Jewelry

- a. Jewelry, if worn, must reflect a professional image. Jewelry that could become a hazard, interfere with the care of a standardized patient or cause an accident while in the TECHS Center may not be worn.
- b. Earrings will be limed to earlobes only. Ear gauges must be flesh color when attending sessions.
- c. Multiple necklaces or bracelets that are distracting or pose a safety hazard should not be worn.

d. Other visible body (nose, eyebrow, chin, etc.) or tongue piercings are prohibited unless approved by Student Affairs.

#### 5. Head Gear

Hats, caps, and other head gear are not permitted in the TECHS Center or during Medical Skills sessions. Only head gear worn for religious purposes and approved in advance by the Office of Student Affairs is permissible.

#### 6. Face Masks & PPE

Face coverings may be required for participation in some activities to minimize transmission risk to staff and other learners. If you bring your own face mask, it should be professional without profane or inappropriate images. When necessary, appropriate personal protective equipment (PPE) shall be worn (e.g., gloves, gown, and or mask) in accordance with standard clinical practice for the simulated case described.

# 7. Makeup

The wearing of makeup shall be complimentary to a learner's natural features and create a fresh, natural appearance. Makeup should be modest and minimal.

## 8. Tattoos

Learners with visible tattoos on the legs or arms should be covered.

#### 9. Identification badges

Identification badges will be visible and worn in the chest area on the outside of the white coat at all times while at the TECHS Center. The photo ID badge will be helpful in identifying learners during sessions and in the event of an emergency.

#### 10. Cell Phone Policy

- a. Any and all use of electronic communications devices must be limited to those appropriate to the simulated clinical environment in which a learner is participating. TECHS acknowledges that current health care practice relies on the use of peripheral cognitive aids, such as prescription reference programs, clinical care applications, calculators, and access to outside articles and references. In order to enhance the realism and learning of the participants in sessions at TECHS, the possession and professional use electronic communication devices is allowed, except when limited by the direction and objective of a specific Course Director. Example. Students are not allowed to bring cell phones into TECHS during OSCE exams. Learners are not allowed to take photos or videos using personal devices during simulation activities.
- b. Outside of simulation activities, photographs or images may be requested for use in an educational or departmental activities, but must be approved by any associated Course Director, and either the Director or an Associate Director of TECHS.

c. To enhance the learning and education about appropriate and professional use of communication device in the clinical setting, any learner observed using their device may be asked by the session facilitator to share their device use and resources as part of the simulation discussion and debriefing.

# Confidentiality and HIPAA

To preserve the realism of the clinical scenarios used at TECHS and to provide an equitable and excellent learning experience for each learner, all participants at TECHS are required to keep the simulation activities and case materials confidential. Learners must treat standardized patient (SP), role play partner(s), simulator manikin or partial task equipment like a real patient. All participants at TECHS are expected to uphold all requirements of the Health Insurance Portability and Accountability Act (HIPAA) and any other federal, state laws, and TTUHSC rules and regulations of confidentiality. Any violations must be reported to the center director, associate director, or course director. Many activities at TECHS are video-recorded and/or photographed for learning, training or debriefing purposes. The videos are stored on the TECHS server; and students can view or request a copy of his or her performance. Requests for review should be submitted to TECHS director and the applicable course director. TECHS protects the confidentiality of its employees, faculty, learners, and standardized patients. Any use of the video outside of the learning purpose is strictly prohibited (see <u>Video Recording</u> for more information about video record retention).

# Hygiene

- 1. Every participant in any training session at the TECHS Center shall follow infection control measures in regards to grooming and professional appearance.
- 2 Hair, including beards and mustaches, should be clean and groomed so that it presents an overall professional appearance. Hair longer than shoulder length must be confined so that it does not interfere with patient care or present a safety hazard.
- 3. Shaving of only a portion of hair and extreme hair color or hairstyles are prohibited.
- 4. Hand hygiene, including hand washing, is an essential part of infection control. Hand nails should be trimmed of an even length so standardized patients will not be scratched or hurt during a session. Same requirement applies to manikin simulators or simulations involving physical exam or skills procedures.
- 5. Nail polish is acceptable with moderation (Conservative nude or light colors).
- 6. Use of perfume and cologne should be in moderation.

At the discretion of the TECHS Center Director(s), Medical Skills Director, or Organizer of the session, learners and other training participants not complying with this policy may be

asked to leave or the issue will be reported to their designated supervisor(ex. College masters or dean).

# Immunization Policy

In accordance to TTUHSC El Paso Operating Policy, students must be current on all immunizations prior to entering a patient clinic or hospital unit. To review the TTUHSC El Paso Health Surveillance Program, go to <a href="http://elpaso.ttuhsc.edu/opp/">http://elpaso.ttuhsc.edu/opp/</a> documents/75/op7511a.pdf

# Occupational Exposure Management

All students are expected to follow the policy regarding exposures to blood-borne pathogens and body fluids established by the TTUHSC El Paso Occupational Exposure Management Program. Information regarding this policy can be found at:

http://elpaso.ttuhsc.edu/opp/ documents/75/op7511.pdf, http://elpaso.ttuhsc.edu/occupationalhealth/BloodBodyFluidExposures.aspx

#### Professionalism

Students are expected to adhere to the Standards of Professional Conduct that are delineated in the Medical Student Handbook of the Paul L. Foster School of Medicine. Unprofessional conduct may result in a Unit grade of Fail regardless of examination scores or attendance. Episodes of unprofessional behavior may be documented by a course faculty member or by a member of the staff on an incident card. These cards will be handled according to policies established by the Office of Student Affairs.

## **Textbooks**

A curated list of relevant electronic textbooks is also available through the TTUHSC-EP Library at: <a href="https://elpaso-ttuhsc.libguides.com/PLFSOMtextbooks">https://elpaso-ttuhsc.libguides.com/PLFSOMtextbooks</a>.

The required textbook for the course is:

 Alastair Innes J, Dover A, Fairhurst K, eds. MACLEOD'S CLINICAL EXAMINATION, 14th edition. ELSEVIER HEALTH SCIENCES, 2018. ISBN: 9780702069932 (This book is available through the TTUHSC El Paso electronic library)

Optional textbooks for the course include:

- Evidence-based Physical Diagnosis, 4th ed. (2018), by Steven McGee, Saunders Elsevier, St. Louis.
- Bickley, Lynn S, Bates' Guide to Physical Examination and History-Taking, 12th Edition. Lippincott Williams & Wilkins, 2016. ISBN- 9781469893419.
- Symptoms to Diagnosis, An Evidence-Based Guide, 3<sup>rd</sup> ed. (2014), by Scott D. Stern, Adam S. Cifu, Diane Altkorn

- The Patient History, Evidence-Based Approach, (2012), by Mark Henderson
- Dan Longo, et al., Harrison's Principles of Internal Medicine; 20thth edition (2018), which is available online through the TTUHSC El Paso Library web site. Click on TTUHSC > Library > eBooks > AccessMedicine > Harrison's Online.
- PhD Rn, P. K. D., & Facs, M. T. P. J. (2017). Mosby's Manual of Diagnostic and Laboratory Tests (6th ed.). Mosby, which is available online through the TTUHSC El Paso Library web site.

http://libraryaccess.elpaso.ttuhsc.edu/login?url=http://www.r2library.com/Resource/Title/0323446639

#### **Electronic Resource:**

 UpToDate which is available online through the TTUHSC El Paso Library web site. http://www.uptodate.com/

# Required Equipment

- 1. A stethoscope
- 2. A 256 Hz tuning fork
- 3. A Dejerine reflex hammer
- 4. A penlight
- 5. A tape ruler
- 6. A Snellen eye card (for vision testing)
- 7. A white coat
- 8. Analogue wristwatch with second hand
- 9. Writing utensil: pen/pencil
- 10. A paper to write note during SP encounter
- 11. sphygmomanometer

Note: Each exam room in the TECHS Center is equipped with an otoscope and an ophthalmoscope. Therefore, students do not need to purchase a diagnostic instrument set for the Medical Skills Course.

# **Disability Support Services**

TTUHSC EP is committed to providing equal access to learning opportunities to students with

documented disabilities. To ensure access to this course, and your program, please contact the <u>Office of Academic and Disability Support Services</u> to engage in a confidential conversation about the process for requesting accommodations in the classroom and clinical setting. Accommodations are not provided retroactively so students are encouraged to register with DSS as soon as possible.

# Staff and Faculty Roster and Scheduled Office Hours

During the pandemic, faculty will be available to meet with student by appointment only in virtual meeting room.

## **Course Director:**

Thwe Htay, MD, FACP

Dr. Htay has an open door policy. Students are welcome to visit any time if the office door is open.

MEB 4140

thwe.htay@ttuhsc.edu

915-215-4039

#### **Course Co-Director:**

Gordon Woods, MD, MHPE, FACP

Dr. Woods has an open door policy. Students are welcome to visit any time if the office door is open.

MEB 2240-C

Gordon.woods@ttuhsc.edu

915-215-4353

# **Course Faculty:**

Brad Fuhrman, MD
MEB 2220B
brad.fuhrman@ttuhsc.edu
915-215-5711

# **Physician Assistant Educator:**

Damaris Rosado, MS, MPAS, PA-C MEB 4147 <u>damaris.rosado@ttuhsc.edu</u> 915-215-4701

## **Nurse Educator:**

Laura Gorby, MSN, RN-BC MEB 3185A laura.gorby@ttuhsc.edu 915-215-4583

#### **Course Coordinator:**

Pamela Almodovar-Baker MEB 3185 pamela.almodovar@ttuhsc.edu 915-215-4581