2026 – 2027 EMERGENCY MEDICINE CLERKSHIP SYLLABUS

Clerkship Contacts

Clerkship Director – Michael Parsa, M.D.
Email: Michael.D.Parsa@ttuhsc.edu

Assistant Clerkship Director – Patrick Popieluszko, M.D.
Email: papopiel@ttuhsc.edu

Clerkship Coordinator: Rebecca Aranda
Email: Rebecca.aranda@ttuhsc.edu

Clerkship Description

The Emergency Medicine rotation during the Medicine and the Mind Block is a unique learning opportunity designed to provide early exposure to the specialty and to the urgent and emergent care of adults. Students will assess undifferentiated patients and develop their own diagnostic and therapeutic management plans, integrating and applying knowledge from the other disciplines in the block. Clinical experiences will be augmented by didactics and written assignments.

Clerkship Objectives

Patient Care

Goal: Students who are able to provide patient-centered care that is appropriate and compassionate.

Objectives: By the end of the clerkship, students should be able to:

- Demonstrate proper interviewing techniques *(PC-1.1)*
- Obtain an accurate problem-focused history and physical exam (PC-1.1, PC-1.2, PC-1.3)
- Develop a diagnostic and therapeutic patient management plan for the patient with both an undifferentiated complaint and a known disease process *(PC-1.3, PC-1.2)*
- Formulate a differential dx when evaluating an undifferentiated patient: *(PC-1.3)*
  - List worst case scenarios
  - Prioritize likelihood of diagnoses based on clinical findings
- Patient management skills *(PC-1.2, PC-1.7)*
  - Monitor the response to therapeutic intervention
  - Develop appropriate disposition and follow up plans
- Patient communication *(PC-1.6, PC-1.7)*
  - Educate patients on safety and provide anticipatory guidance as necessary
  - Educate patients to ensure comprehension of discharge plan
- Recognize immediate life-threatening conditions such as, but not limited to, STEMI, Stroke, high-acuity Trauma, etc. *(PC-1.4, PC-1.5)*
- Interpret basic diagnostic tests such as, but not limited to labs and imaging *(PC-1.3)*
- Initiate basic resuscitation and stabilization *(PC-1.5)*

Knowledge for Practice

Goal: Students who are able to apply their broad knowledge base to patient care in the ED clinical

setting.

Objectives: During the clerkship, the student will have opportunity to:

- Apply diagnostic principles from years 1-3 to the ED clinical setting *(KP-2.2)*
- Apply evidence-based principles to patient care in the ED clinical setting *(KP-2.3)*

Practice Based Learning and Improvements

Goal: Students who are able to apply scientific evidence to patient care, accept, and apply feedback for improvement of patient care practices.

Objectives: Students will demonstrate the ability to:

- Act on corrective feedback *(PBL-3.3)*
- Use information technology to improve patient care *(PBL-3.4)*

Interpersonal and Communication Skills

Goal: Students who are able to effectively communicate with patients, families, faculty, staff, residents and other students.

Objectives: Students will have opportunity to:

- Develop and demonstrate professional interactions and effective communication with ED faculty, staff and consultants *(ICS-4.2)*
- Demonstrate active listening skills *(ICS-4.3)*
- Establish a therapeutic relationship with patients and families *(ICS-4.1, ICS-4.3)*

Professionalism

Goal: Students who demonstrate a commitment to carrying out professional responsibilities, adhering to ethical principles, displaying sensitivity to a diverse patient population.

Objectives: Throughout the clerkship, students will demonstrate:

- Respect towards patients and families whose lifestyles, culture and values may be different from their own *(PRO-5.1)*
- Ethical behavior, including patient confidentiality, privacy and consent *(PRO-5.2)*
- Reliability, by arriving on time and prepared for all required activities (PRO-5.3, PRO-5.7)
- Honesty and integrity in patient care *(PRO-5.6)*
- Professional appearance *(PRO-5.7)*

Systems-Based Practice

Goal: Students who demonstrate an awareness of the larger context of health care and understand how to effectively utilize system resources to provide optimal care.

Objectives: By the end of the clerkship, students should be able to:

- Demonstrate understanding of limitations patients' face due to lack of resources *(SBP-6.2, SBP-6.3)*
- Know when accessing social services is indicated *(SBP-6.2, SBP-6.4)*

Inter-Professional Collaboration

Goal: Students who demonstrate the ability to effectively engage as part of an inter-professional

team.

Objectives: Throughout the clerkship, student should have the opportunity to:

- Develop teamwork and inter-professional communication skills during simulation activities and in the ED *(IPC-7.3)*

Personal and Professional Development

Goal: Students who demonstrate the principles required for lifelong professional growth.

Objectives: During the clerkship, students will have opportunity to:

- Develop proper judgment regarding when to take responsibility and when to seek assistance with patient care, based on their current level of training *(PPD-8.1)*

Integration Threads

X Geriatrics	X Patient Safety	X Communication Skills	X Professionalism	X Palliative Care
_ Basic Science	X Pain Management	X Diagnostic Imaging	X EBM	_Clinical & Translation Research
X Ethics	X Chronic Illness Care	X Clinical Pathology	X Quality Improvement	

General Requirements

Course expectations include showing up for all shifts, on time, appropriately attired (scrubs or business attire, no dangling hair, no open toe shoes), ready to work, with a stethoscope and your ID badge. When evaluating real or simulated patients, always use appropriate Personal Protective Equipment (PPE) and be respectful.

ED Shifts will be distributed between the following facilities:

- UMC of El Paso, 4815 Alameda, 915-521-7700
- THOP-Transmountain Campus, 2000 Transmountain Road, 915-877-8136 (with completed credentialing on file)
- Additional sites are being pursued.

If an emergency arises preventing you from working your shift or you are ill, you must e-mail the EM Clerkship Coordinator and submit the absence through the PLFELPClerkshipAbsence@ttuhsc.edu.

You are expected to act as the primary provider for the patients you see on these shifts. You will do a focused H&P, and then present the patient to the faculty with a differential diagnosis along with a diagnostic and therapeutic management plan. Each student will be assigned approximately 40 clinical hours in the emergency department in shifts varying in length, but not more than 12 hours. Additional shifts beyond hours may be available upon request, but cannot replace other required activities. You are required to work all hours assigned to you and you will be required to work nights and weekends during your Ambulatory weeks.

All patients are to be presented to faculty before pelvic and rectal exams, and before any procedures are done. You are not to do any of these things without direct physician

observation. You must notify and obtain approval from the senior resident or faculty member for each patient you plan to pick up. If a patient appears unstable (i.e., looks really sick, has respiratory distress, or has abnormal vital signs) notify your attending or resident immediately.

Do not leave the department without advising your faculty. Expect to eat your meals in the ED, although you will be allowed to leave the department to get food from the cafeteria. There is a refrigerator and microwave oven in the UMC ED for physician/student use.

Grading Policy

Grading will be based on attendance, participation, written assignments and your clinical shift assessment forms. Due to the brief duration of the course, grades will be pass/fail only.

PASS:

- Complete all assigned shifts in the ED
- Complete all assignments to the satisfaction of the course director.
- Observed H and P Pink Card submitted x 2 in Elentra
- Complete a minimum of 13 patient entries and document an observed h and p in the Op-Log system
- Any assignments that are not completed or are completed poorly must be completed to the satisfaction of the course director before a PASS can be issued.
- Clinical evaluations must meet a minimum standard of the following:
  - Professional behavior
  - Patient evaluation skills
  - Patient management skills

IN PROGRESS:

This grade will be issued at the end of the clerkship if the course requirements have not been met due to mitigating circumstances. Once the requirements have been met, the grade will be changed to PASS.

FAIL:

- Unprofessional behavior
- Failure to complete required remedial work in the allotted time.
- Failure to complete course requirements to a satisfactory level.

Documentation

Documentation is an important part of clinical practice. We require you to turn in one completed chart for Dr. Parsa to review, due 7 days after your final ED shift of the block or by the last day of clinical duties. This should be your own documentation (not part of the permanent medical record). It should be submitted in a standard typewritten format (word or apple pages document) and uploaded into PLF approved on-line system. It must include the following mandatory items:

- History and physical (not exhaustive, but focused; appropriate for ED)
- ED course-Testing results with interpretation (i.e. K- 2.9-low). Differential

diagnosis. Therapeutic interventions with indications and reassessment, i.e.
  - 17:30- Ondansetron given for nausea. 18:00- no nausea, abdomen non-tender, P90 BP 120/80
- Final Diagnosis
- Disposition (with treatment and follow up plan if discharged)

Your note should include what a proper ED physician's note would include, such as one that would be dictated into a real medical record. Feedback will be provided noting your documentation strengths and weaknesses. If your documentation has significant weaknesses, you will be required to repeat the assignment until adequate documentation is demonstrated. Examples are available in Elentra EM Clerkship course page.

Detailed Social History Assignment

A typical ED patient may face many life challenges; these may be related to poor decisions they have made or may be related to circumstances beyond their control. These challenges may include such difficulties as substance abuse, prior criminal activity and arrests, being a victim of crime, poverty, unemployment, gender identity, lack of healthcare coverage, disability, legal problems, immigration status issues, transportation difficulties, complex close relationship issues (abuse, estrangement, etc.), or family of origin/upbringing issues (i.e. parent was an addict).

Assignment Objectives:

- Identify the key barriers to health for a patient presenting to the ED
- Reflect on these barriers and how they are affecting this patient's health
  - Consider whether the patient is facing more than one barrier/challenge and, if so, how the issues are interrelated
  - Consider the impact of potential healthcare access issues, such as financial, housing, and/or food insecurity
  - Identify prior attempts at treatment and why interventions were successful/unsuccessful
- Understand the patient's perspective on their struggles
- Reflect on what you have learned to improve the treatment you provide to future patients

Your assignment is to identify an ED patient with a chief complaint or medical condition that suggests challenges in accessing healthcare or maintaining a healthy lifestyle and to complete a detailed social history on that patient, recounting the specific challenges they face in regard to any of the above issues. Discuss the issues relevant to them and their situation. Please attempt to find out details and specific examples of how these challenges may have affected their health and how many of these challenges are linked together. As you interview your patient, ask yourself:

1. What are the key barriers to health for this patient?
2. How are these barriers affecting this patient's health?

For example, a gentleman with EtOH dependence may have most of the above problems, all stemming from his EtOH use. He may have tried to quit many times (ask about what he has tried, how effective it was, why it did or didn't work). Ask about some of the other issues above, and how EtOH has affected those issues. Ask where he gets money and how he spends it, ask how he accesses healthcare (when was his last clinic visit, how beneficial was it,

how did he get there, could he afford the prescriptions and ancillary testing); ask about living arrangements and family support.

Don't ask questions as if going through a checklist, but try to do your best to put yourself in their shoes and truly understand the patient's perspective on their struggles. Take what you have learned and write a one-page narrative including any personal reflections related to the encounter. Sample write-ups can be accessed in Elentra. Dr. Parsa will review your write-up and provide written feedback. The assignment will need to be repeated if it is not comprehensive and completed with proper effort.

Patient care follow-up assignment

Please select one ED patient of yours that was admitted and follow them through their hospitalization. Please visit them at least once in the hospital to see how they are doing and complete the form in Appendix B. Please identify one primary research article that is relevant to the care of your patient and discuss the article and how it applies in the last section. This assignment is best initiated during your first or second ED shift, so you will have time to follow-up with your patient. An assignment example is available in Elentra.

Clinical Observed H&P Encounter Pink Cards

These cards will be used during your EM shifts to facilitate real time feedback for your own professional development as well as to be incorporated into your mid-clerkship feedback. The Program Coordinator will provide these cards to you throughout the rotation. You are required to turn in 2 cards. Students can either upload them or email them to the Program Coordinator.

Mid-Rotation Assessment

Progress will be assessed for each student at the midpoint of the rotation. Clerkship faculty will review your clinical evaluations, completed assignments and Op-Log entries.

Any student who is not making satisfactory progress will meet with clerkship faculty to discuss their perception of any problem, the student's strengths and weaknesses and current circumstances. Steps will be taken to determine the precise problem and to work out an appropriate course of action. If you are progressing well, you will receive a personalized online TTAS mid-clerkship evaluation from clerkship faculty and you will not be required to meet; but a meeting can be arranged if you request one.

Op-Log Entries

You will be required to complete Op-Log entries on all patients with whom you have direct, clinical contact; e.g., performing a patient's history and physical examination, or performing or assisting in a procedure. Each student is required to document in the Op-Log the following mandatory conditions: (1) Abdominal Pain, (2) Chest Pain. Involvement with a more advanced or critical patient in which significant faculty/resident teaching is involved should also be included. Please note that in addition to your required entries, you must document an observed h and p under the "Procedures" tab in the op-Log system. If you are not able to complete all required diagnoses, please notify the Clerkship Coordinator for instructions that will assist you in completing the requirements.

Clinical Evaluations

You are encouraged to seek out feedback from faculty and senior residents while on your assigned shifts. Senior residents should only be approached to complete an evaluation if the faculty defers to the resident. Clinical shift assessment forms can be completed in two ways: 1- Provide them with a blank shift assessment form to complete for the assigned shift. This should be reviewed with you and submitted into the locked student assessment box in the ED by the evaluator If done in this manner, the student is still required to trigger the assessment in Elentra within 48 hours. 2- Students may trigger a shift assessment through the Elentra system for completion by their faculty/resident evaluator. One completed shift assessment form is required for each assigned shift. All faculty members and senior residents have been asked to provide you with verbal feedback during and at the end of your shift.

Final Clerkship Assessments

Grades for the Emergency Medicine Clerkship should be available approximately three to four weeks after the conclusion of the rotation. This clerkship is a Pass/Fail rotation. Students should be proactive in seeing patients and improve their clinical skills by consistently applying their medical knowledge in the clinical setting. Below is a summary of how students are assessed. The assessments will be aggregated for your final grade. Comments will also be provided highlighting students strengths and areas for improvement.

Specifics that commonly lead to "Needs Improvement" in one or more competencies in the final grade

- Not submitting assignments by the due date
- Not completing all OpLog requirements by the due date
- Not triggering an ED clinical shift assessment within 48 hours of each shift

EMERGENCY MEDICINE FINAL CLERKSHIP ASSESSMENT (All competencies graded as: Needs improvement/Meets expectations/Exceeds expectations)		
Competency	**Components**	**Source**
Patient Care	○ Demonstrate proper interviewing techniques (PC-1.1) ○ Obtain an accurate problem-focused history and physical exam and submit the observed H&P by end of block. Non-compliance will negatively impact the students' final grade, resulting in a "needs improvement" until requirement is met. (PC-1.1, PC-1.2, PC-1.3) (PC-1.1) ○ Develop a diagnostic and therapeutic patient management plan for the patient with both an undifferentiated complaint and a known disease process (PC-1.3, PC-1.2) ○ Formulate a differential dx when evaluating an undifferentiated patient: (PC-1.3) ○ List worst case scenarios ○ Prioritize likelihood of diagnoses based on clinical findings ○ Patient management skills (PC-1.2, PC-1.7) ○ Monitor the response to therapeutic intervention ○ Develop appropriate disposition and follow up plans ○ Patient communication (PC-1.6, PC-1.7) ○ Educate patients on safety and provide anticipatory guidance as necessary	○ Emergency Medicine Clinical Assessments ○ Timely Op-Log Entries ○ Clinical Observed H&P encounter cards ○ ED Patient Note assignment ○ Social History assignment ○ Patient Care follow-up assignment ○ OSCE

	○ Educate patients to ensure comprehension of discharge plan ○ Recognize immediate life-threatening conditions such as, but not limited to, STEMI, Stroke, high- acuity Trauma, etc. (PC-1.4, PC-1.5) ○ Interpret basic diagnostic tests such as, but not limited to labs and imaging (PC-1.3) ○ ○ Initiate basic resuscitation and stabilization	
Knowledge for Practice	○ Apply diagnostic principles from years 1-3 to the ED clinical setting (KP-2.2) ○ Apply evidence-based principles to patient care in the ED clinical setting (KP-2.3)	○ Emergency Medicine Clinical Assessments ○ ILP ○ NBME ○ OSCE
Interpersonal & Communication Skills	○ Develop and demonstrate professional interactions and effective communication with ED faculty, staff and consultants *(ICS-4.2)* ○ Demonstrate active listening skills *(ICS-4.3)* ○ Establish a therapeutic relationship with patients and families *(ICS-4.1, ICS-4.3)*	○ Emergency Medicine Clinical Assessments ○ Clinical Observed H&P ○ OSCE
Practice-Based Learning & Improvement	○ Act on corrective feedback *(PBL-3.3)* ○ Use information technology to improve patient care *(PBL-3.4)*	○ Emergency Medicine Clinical Assessments ○ OSCE
System- Based Practice	○ Demonstrate understanding of limitations patients' face due to lack of resources (SBP-6.2, SBP-6.3) ○ Know when accessing social services is indicated (SBP-6.2, SBP-6.4)	○ Emergency Medicine Clinical Assessments ○ Social History assignment ○ Patient Care follow-up assignment
Professionalism	○ Respect towards patients and families whose lifestyles, culture and values may be different from their own *(PRO-5.1)* ○ Ethical behavior, including patient confidentiality, privacy and consent *(PRO-5.2)* ○ Reliability, by arriving on time and prepared for all required activities (PRO-5.3, PRO-5.7) ○ Honesty and integrity in patient care *(PRO-5.6)* ○ Professional appearance *(PRO-5.7)*	○ Emergency Medicine Clinical Assessments ○ Timely OP-Log Entries ○ Timely assignment submissions ○ OSCE
Inter-professional Collaboration	○ Develop teamwork and inter-professional communication skills during simulation activities and in the ED *(IPC-7.3)*	○ Emergency Medicine Clinical Assessments
Personal and Professional Development	○ Develop proper judgment regarding when to take responsibility and when to seek assistance with patient care, based on their current level of training *(PPD-8.1)*	○ Emergency Medicine Clinical Assessments

TTUHSC EP may utilize institution-approved artificial intelligence (AI)-assisted tools to support teaching, learning, and grading processes. AI tools are used to enhance efficiency and consistency; however, they do not replace faculty expertise, professional judgment, or final decision-making authority. Examples of permitted AI-supported functions may include, but are not limited to: assignment completion support where explicitly allowed, verification of submission completeness, preliminary rubric-aligned feedback, similarity checks, scoring assistance, and workflow efficiency improvements. Faculty are responsible for reviewing and verifying AI-generated outputs prior to assigning grades or providing final feedback.

Student use of AI tools (including generative AI platforms) is governed by course-specific guidelines. In some assignments, AI use may be permitted; in others, it may be limited or prohibited. Students are responsible for understanding and adhering to these expectations. Any AI-generated or AI-assisted content must be appropriately disclosed and cited in accordance with course instructions to maintain academic integrity. Failure to follow course AI guidelines may constitute academic misconduct.

Students should be aware that AI-generated content may contain inaccuracies, incomplete information, or embedded bias. Students remain responsible for the accuracy, originality, and integrity of all submitted work. Faculty retain full responsibility for final evaluation of student performance. Students may request clarification regarding grading processes or feedback and may appeal decisions through established institutional procedures.