Syllabus

Medical Skills Course (MSC)

PMSK 5301 (MSC I)
PMSK 5302 (MSC II)
Academic Year 2024-2025
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Contact Information

Course Director
Rebecca Lee Campos, MD, FAAFP, FAIHM
Office: MEB 4146
Tel: 915-215-4527
Rebecca.L.Campos@ttuhsc.edu

Course Co-Director
Mariela Lane, MD
Office: MEB 2200B
Tel: 915-215-4126
Marielan@ttuhsc.edu

Course Coordinators
Mayra Sandoval, MS
Office: MEB 3185
Tel.: 915-215-5951
Mayra.Sandoval@ttuhsc.edu

Sheila Torres
Office: MEB 3185
Tel: 915-215-5775
Sheila.Torres@ttuhsc.edu
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 and after 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 week’s SPM content. 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, and mid-unit feedback on readiness quiz performance.

Students are assessed through their performance in simulated settings with standardized patients (Objective Structured Clinical Encounter examinations), readiness assurance quizzes, and evaluation of encounter note content. Assessments are administered at the end of each academic unit.

Integration with the Medical School Curriculum

The Clinical Presentation-based Curriculum creates an invaluable 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. Eventually, the clinical schemes covered during the first two years of medical school will be carried on into the clinical clerkships in the third and fourth year of medical school.
Educational Methods and Learning Experiences

Medical Skills Courses I and II will be presented as a series of weekly 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 are required to 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 Bates’ Visual Guide to Physical Examination and History Taking 12th 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 Elentra. Students are also responsible for reading announcements posted on Elentra regarding the course. Announcements will include important information about testing, sessions, sign-ups for SPERRSA and Open Labs, etc. Students are required to check their Elentra account settings to have Elentra announcements and notifications sent to their email. Remember to check email and announcements daily.

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.

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 (iRAT), a group readiness assurance test (gRAT), and an application exercise.

Clinical simulations: The Training and Educational Center for Healthcare Simulation (TECHS) is capable of simulating numerous clinical procedures on mannequins or high quality task trainers and equipment. Students will use TECHS 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) instructions and access link can be found on the Elentra community page for the Medical Skills Course.

SP Encounter Review and Reflective Self-Assessment: Once each semester of the first year of
medical skills, every student is required to meet for a small group review of one of their videotaped SP encounters and SOAP notes. Prior to the video review 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 video, 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 will interview selected patients during a field trip and will be 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 PLFSOM PGOs.

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 while obtaining a pertinent medical history and providing information on findings and plan according to the course unit, such as Hematology, Cardiovascular and Pulmonary and/or Gastroenterology. (ICS-4.1, ICS-4.2, ICS-4.3)
- Communicate in clinical outpatient and inpatient settings using language that is clear, understandable, and appropriate to each patient. (PC-1.6, KP-2.5, PRO-5.1)
- Maintain each patient’s dignity and modesty during clinical encounters when learning proper focused physical exam according to the unit. (PRO-5.2)
- Identify the chief reason for the clinical encounter and use questions effectively to find the most pertinent history needed for decision-making. (PC-1.1, PC-1.5)
- Use effective approaches to help patients promote behavioral change for the purpose of avoiding preventable diseases. (PC-1.6, PC-1.7)
- Select and perform the most pertinent physical examination maneuvers to search for findings that support or refute likely diagnoses under consideration such as proper
abdominal or cardiopulmonary exam. (PC-1.1)

- Concisely, accurately, and legibly record the patient's history in the medical record from standardized patient encounters and patient visit from field trip. (PC-1.7, ICS-4.4)
- Use the patient’s history, physical examination, and diagnostic studies to generate a list of active medical problems such as reviewing imaging, pulmonary function testing, electrocardiogram and peripheral smear images. (PC-1.3, KP-2.3)
- Orally present a patient's history and physical examination in an organized and concise manner. (ICS-4.2)
- List the appropriate indications, potential risks and intended benefits of common procedures such as venipuncture and bladder catheterization. (PC-1.2, PC-1.8)
- Proficiently perform several common clinical procedures according to the unit such as wound debridement, splinting, suturing and phlebotomy on task trainers and other equipment. (PC-1.2, PC-1.8)
- Participate effectively and collaboratively with a healthcare team in an urgent situation such as various cases of shock. (IPC-7.1, IPC-7.2, IPC-7.3, IPC-7.4)
- Maintain ongoing learning practices that promote the development of optimal medical skills including careful preparation, active engagement, and reflection on formative feedback from small group interactive learning, simulation session and debriefing, and debriefing of standardized patient encounter. (PBL-3.3)
- Participate effectively and collaboratively with a healthcare team in an urgent situation as demonstrated in simulation sessions in shock and TeamSTEPPS activities. (IPC-7.1, IPC-7.2, IPC-7.3, IPC-7.4)
- Through interactions with faculty, session instructors, standardized patients and peers, students will incorporate feedback received on a weekly basis on performance in interactive sessions and workshops. (PBL 3.3, KP2.5, ICS 4.2, ICS 4.3, PC 1.8)
# Outcome Measures

Students evaluation includes assignments, Team Based Learning, OSCEs and other modalities. The Assessment Methods incorporated throughout the course include Formative and Summative Activities and are defined by AAMC MEDBiquitous Curriculum Inventory Standards.

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<thead>
<tr>
<th>Patient Care</th>
<th>Educational Program Objectives (PGO)</th>
<th>Outcome Measures</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>PC-1.1</td>
<td>Gather essential information about patients and their conditions through history taking, physical examination, and the use of laboratory data, imaging studies, and other tests.</td>
<td>• Clinical Documentation Review</td>
<td>• OSCE SP visit note</td>
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<td>• Clinical Performance Rating/Checklist</td>
<td>• Dialysis note</td>
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<td>• Multisource Assessment</td>
<td>• SP checklist criteria for SP learning encounter</td>
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<td>• Stimulated recall</td>
<td>• Simulation sessions on shock: Sepsis and Hypovolemia</td>
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<td>• SPERRSA video review and discussion</td>
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<td>• Self-assessment</td>
<td>• SPERRSA video SOAP note review and discussion</td>
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<td>• Exam – Institutionally Developed, Clinical Performance</td>
<td>• End of Unit OSCE Physical Exam Skills Evaluation</td>
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<td>• Open Lab practice sessions</td>
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<td></td>
<td>• Exam – Institutionally Developed, Written/Computer-based</td>
<td>• Weekly Readiness Quizzes</td>
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<td>• Narrative Feedback</td>
<td>• SOAP Note workshop</td>
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<td>• Dialysis Visit Patient Note</td>
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<tr>
<td>PC-1.2</td>
<td>Make informed decisions about diagnostic and therapeutic interventions based on patient information and preferences, up-to-date scientific evidence, and clinical judgment.</td>
<td>• Participation</td>
<td>• Procedure skill building activities with feedback</td>
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<td>• Simulation Activities</td>
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<td>• Exam – Institutionally Developed, Written/computer-based</td>
<td>• OSCE Quiz</td>
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<td>• Weekly Readiness Quiz</td>
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<td>• Narrative Feedback</td>
<td>• SOAP Note workshop</td>
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<td>• Dialysis Visit Patient Note</td>
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<tr>
<td>PC-1.3</td>
<td>For a given clinical presentation, use data derived from the history, physical examination, imaging and/or laboratory investigation to categorize the disease process and</td>
<td>• Multisource Assessment</td>
<td>• Faculty debriefing following each SP encounter</td>
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<td></td>
<td></td>
<td>• Exam – Institutionally Developed, Clinical Performance</td>
<td>• End of Unit OSCE</td>
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<tr>
<td>PC-1.5</td>
<td>Recognize a patient requiring urgent or emergent care, and initiate evaluation and management.</td>
<td>• Clinical Performance Rating/Checklist</td>
<td>• SP checklist criteria for SP learning encounter</td>
</tr>
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<td>PC-1.5</td>
<td>Recognize a patient requiring urgent or emergent care, and initiate evaluation and management.</td>
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<td>• Faculty debriefing following each encounter</td>
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<td>PC-1.5</td>
<td>Recognize a patient requiring urgent or emergent care, and initiate evaluation and management.</td>
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<td>PC-1.5</td>
<td>Recognize a patient requiring urgent or emergent care, and initiate evaluation and management.</td>
<td>• Self-assessment</td>
<td>• SPERRSA video SOAP note review and discussion</td>
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<tr>
<td>PC-1.5</td>
<td>Recognize a patient requiring urgent or emergent care, and initiate evaluation and management.</td>
<td>• Participation</td>
<td>• Simulation activities with feedback</td>
</tr>
<tr>
<td>PC-1.5</td>
<td>Recognize a patient requiring urgent or emergent care, and initiate evaluation and management.</td>
<td>• Exam – Institutionally Developed, Written/Computer-based</td>
<td>• End of Unit OSCE Quiz</td>
</tr>
<tr>
<td>PC-1.5</td>
<td>Recognize a patient requiring urgent or emergent care, and initiate evaluation and management.</td>
<td>• Exam – Institutionally Developed, Clinical Performance</td>
<td>• End-of-Unit OSCE Physical Exam Skills Evaluation</td>
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<tr>
<td>PC-1.6</td>
<td>Counsel and educate patients and their families to empower them to participate in their care and enable shared decision-making.</td>
<td>• Clinical Performance Rating/Checklist</td>
<td>• SP checklist criteria for SP learning encounter</td>
</tr>
<tr>
<td>PC-1.6</td>
<td>Counsel and educate patients and their families to empower them to participate in their care and enable shared decision-making.</td>
<td>• Multisource Assessment</td>
<td>• TeamSTEPPS IPE scenario sessions – debriefing and feedback</td>
</tr>
<tr>
<td>PC-1.6</td>
<td>Counsel and educate patients and their families to empower them to participate in their care and enable shared decision-making.</td>
<td>• Stimulated Recall</td>
<td>• TeamSTEPPS IPE scenario sessions – debriefing and feedback</td>
</tr>
<tr>
<td>PC-1.7</td>
<td>Provide preventative health care services and promote health in patients, families and communities.</td>
<td>• Clinical Performance Rating/Checklist</td>
<td>• SP checklist criteria for SP learning encounter</td>
</tr>
<tr>
<td>PC-1.7</td>
<td>Provide preventative health care services and promote health in patients, families and communities.</td>
<td>• Clinical Documentation Review</td>
<td>• Weekly learning encounter SOAP note</td>
</tr>
<tr>
<td>PC-1.7</td>
<td>Provide preventative health care services and promote health in patients, families and communities.</td>
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<td>• OSCE exam SOAP note</td>
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<tr>
<td>PC-1.7</td>
<td>Provide preventative health care services and promote health in patients, families and communities.</td>
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<td>• SPERRSA video SOAP note review and discussion</td>
</tr>
<tr>
<td>PC-1.8</td>
<td>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.</td>
<td>• Participation</td>
<td>• Procedure skill building activities and workshops with feedback</td>
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### Knowledge for Practice

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<th>Educational Program Objectives</th>
<th>Outcome Measures</th>
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<tbody>
<tr>
<td><strong>KP-2.3</strong> Apply evidence-based principles of clinical sciences to diagnostic and therapeutic decision-making and clinical problem solving.</td>
<td>• Multisource Assessment</td>
<td>• Faculty lead SP Encounter Debrief</td>
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<td>• Exam – Institutionally Developed, Written/Computer-based</td>
<td>• End of Unit OSCE Quiz</td>
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<tr>
<td><strong>KP 2.4</strong> Apply principles of epidemiological sciences to identification of health problems, risk factors, treatment strategies, resources and disease prevention/health promotion efforts for patients and population.</td>
<td>• Clinical Performance Rating/Checklist</td>
<td>• End of Unit OSCE SP Encounter Checklist</td>
</tr>
<tr>
<td><strong>KP-2.5</strong> 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.</td>
<td>• Clinical Performance Rating/Checklist</td>
<td>• SP checklist criteria and verbal feedback – learning encounter),</td>
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<td>• Clinical Documentation Review</td>
<td>• Clinical Documentation Review</td>
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### Practice-Based Learning and Improvement

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<th>Educational Program Objectives</th>
<th>Outcome Measures</th>
<th>Activity</th>
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<tbody>
<tr>
<td><strong>PBL-3.3</strong> Incorporate feedback into practice.</td>
<td>• Incorporate feedback into practice.</td>
<td>• Mastery based assessment of physical examination skills</td>
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<td></td>
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<td>• SP encounter debrief</td>
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<td>• Stimulated recall</td>
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<td>• SPERRSA video review and discussion</td>
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### Interpersonal and Communication Skills

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<th>Educational Program Objectives</th>
<th>Outcome Measures</th>
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<tbody>
<tr>
<td><strong>ICS-4.1</strong> Communicate effectively with patients and families across a broad range of socioeconomic and cultural backgrounds.</td>
<td>• Clinical Performance Rating/Checklist</td>
<td>• SP checklist criteria for SP learning encounter</td>
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<tr>
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<td>• Peer Assessment</td>
<td>• Peer feedback – learning encounter</td>
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<td>• Exam – Institutionally Developed, Clinical Performance</td>
<td>• End of Unit OSCE SP Encounter Checklist</td>
</tr>
<tr>
<td><strong>ICS-4.2</strong> Communicate effectively with colleagues and other health</td>
<td>• Clinical Performance Rating/Checklist</td>
<td>• SP checklist criteria for SP learning encounter</td>
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<tr>
<td>ICS-4.3</td>
<td>Communicate with sensitivity, honesty, compassion and empathy.</td>
<td>• Peer Assessment</td>
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<td>• Multisource Assessment</td>
<td>• Weekly learning encounter debrief</td>
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<td>• Narrative Feedback</td>
<td>• SOAP Note workshop</td>
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<td>• Clinical Performance Rating/Checklist</td>
<td>• Dialysis Visit Patient Note</td>
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<tr>
<td>ICS-4.4</td>
<td>Maintain accurate, comprehensive and timely medical records.</td>
<td>• Clinical Documentation Review</td>
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<td>• Exam – Institutionally Developed, Clinical Performance</td>
<td>• OSCE exam SOAP note</td>
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<td>• Peer Assessment</td>
<td>• SPERRSA video SOAP note review and discussion</td>
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<td>• Exam – Institutionally Developed, Clinical Performance</td>
<td>• Online Patient log</td>
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<td>• End-of Unit OSCE Physical exam Skills Evaluation</td>
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### Professionalism

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<th>Educational Program Objectives</th>
<th>Outcome Measures</th>
<th>Activity</th>
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<tbody>
<tr>
<td>PRO-5.1 Demonstrate sensitivity, compassion and respect for all people.</td>
<td>• Clinical Performance Rating/Checklist</td>
<td>• SP checklist criteria for SP learning encounter</td>
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<td></td>
<td>• Exam – Institutionally Developed, Clinical Performance</td>
<td>• End of Unit OSCE SP Encounter Checklist</td>
</tr>
<tr>
<td>PRO-5.2 Demonstrate knowledge of and appropriately apply ethical principles pertaining to patient privacy, autonomy and informed consent.</td>
<td>• Clinical Performance Rating/Checklist</td>
<td>• SP checklist criteria from learning encounter</td>
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### Interprofessional Collaboration

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<th>Educational Program Objectives</th>
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<tbody>
<tr>
<td>IPC-7.1 Describe the roles and responsibilities of health care professionals.</td>
<td>• Participation</td>
<td>• TeamSTEPPS IPE scenario sessions – debriefing and feedback</td>
</tr>
<tr>
<td>IPC-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.</td>
<td>• Participation</td>
<td>• Simulation activities with feedback</td>
</tr>
<tr>
<td>IPC-7.3 Participate in different team</td>
<td>• Participation</td>
<td>• TeamSTEPPS IPE scenario</td>
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</table>
roles to establish, develop, and continuously enhance interprofessional teams to provide patient- and population-centered care that is safe, timely, efficient, effective, and equitable.

| IPC-7.4 | Recognize and respond appropriately to circumstances involving conflict with peers, other health care professionals and team members. | • Participation | • TeamSTEPPS IPE scenario sessions – debriefing and feedback • Simulation activities with feedback |

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.

Mid-Point Review
Every unit throughout the Medical Skills Course will offer a Mid-Point Review for each student. Each week there are Readiness Assurance Quizzes. At the mid-point of each unit, the grades of the weekly quizzes will be tabulated and comments with feedback on performance will include encouragement and guidance on studying for improved preparation.

Narrative Feedback
Each semester throughout the two-year Medical Skills Course students receive Narrative Feedback. Aside from the weekly verbal formative feedback that students receive on a regular basis, there are designated sessions that provide documented Narrative Feedback regarding students’ note writing skills and oral presentation. The Narrative Feedback is intended to provide guidance and detailed comments on the clinical documentation and clinical reasoning of the notes submitted.

There is a Narrative feedback session each semester in first year of Medical Skills. These sessions include written comments on note content, organization, exam documentation, clinical reasoning appropriateness for assessments and plan development. For example, the dialysis visit note,
includes a focus on the behavioral and psychosocial aspects of patient life. There are rubrics for faculty to provide consistent guidance for written comments on development of clinical writing and presenting skills.

**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 59.05) 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. Fifteen percent of each student’s final grade for each unit is derived from the performance on weekly quizzes and completion of the Online Patient Log (OP Log).
  - **Performance on weekly quizzes:** A readiness assurance quiz is regularly included before each Medical Skills session. Students achieving a cumulative performance of 80% or more on these quizzes will earn 10 points towards their unit grade. Students achieving a cumulative performance of 50% to 79% on these quizzes will earn 5 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 5 points towards their unit grade.

- **Performance on OSCE examinations:** Each Unit OSCE will have between 2-4 stations. One or more of these stations will be a Standardized Patient encounter (face to face SP encounter and/or SP encounter in quiz format). Assessment at each station will be based on demonstration of proficiency as assessed using predetermined criteria that assess history taking skills, physical examination technique, communication skills, clinical reasoning, documentation, and professional demeanor. Performance on the OSCE examinations will constitute 85% of the final course grade for each Unit. A passing score on the Physical Exam Skill Evaluation must be achieved to pass the OSCE.
  - **Physical Exam Skill Evaluation:** Each Unit may require that students demonstrate competency of a physical examination skill 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 to receive a passing score. Students will have 2 remediation opportunities to achieve a passing score on this activity. Early testing opportunities do not count towards one of the passing attempts.

- **OSCE Quiz**: Each unit OSCE has a quiz component of questions based on the preparation material for the unit, such as Exam Room Guide.
- **Standardized Patient Encounter**: The Standardized Patient encounter in the OSCE provides the SP checklist and evaluation of encounter note for content. These comprise part of the OSCE grade.

- **Course Passing Score**: Students must demonstrate a cumulative score of at least 75% in the course to receive a grade of Pass for each 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.

- **Team-based learning sessions**: One unit includes 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 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.

- **Remediation examinations**: Students who have attended the majority of sessions during the academic Unit and who achieve a cumulative course score of less than 75% will be offered an opportunity to take a remediation OSCE examination of the portion(s) with the lowest score(s). Remediation OSCE dates are already included in the course calendar for each student. Those students who achieve a cumulative score of less than 75% after the remediation 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).

- **End-of-Year 1 OSCE**: Students meeting the following criteria are required to take the End-of-Year 1 OSCE.
  
  a. Failure of more than one end-of-Unit OSCE (on first attempt) **OR**

  b. Failure of a remediation examination of any end-of-unit OSCE
• The end-of-Year 1 OSCE will have 3 standardized patient encounters. Assessment at each station will be based on demonstration of proficiency as assessed using predetermined criteria that assess history taking skills, physical examination technique, communication skills, clinical reasoning, documentation, and professional demeanor. Students must demonstrate a cumulative score of at least 75% in order to receive a grade of ‘Pass’ for an end-of-year 1 OSCE & ‘FA/PA’ (Failed First Attempt/Passed Remediation) for the corresponding semester grade of the medical skills course. Students who fail the end-of Year 1 OSCE will receive a grade of “Fail” for the second semester.

• **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 2 hours with an asynchronous online readiness quiz available before 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 in advance of the session.
- Open labs are held by Medical Skills instructors. Times are announced and posted with instruction prior.
- SPERRSA sessions are on predetermined dates for the semester. Attendance at one session per semester is required. Times and dates are announced and posted with instruction prior.

**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. In accordance with the Department of Medical Education policy updates, any unexcused absence or unexcused tardy will result in an event card each.

**Absences:** Students must notify the Course Coordinator in advance of an anticipated absence, preferentially **at least two working days prior to the 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 email the Course Directors and Coordinators as soon as possible. These notifications are in addition to the notice provided to the online **PLFSOM absence management system.** Excused absences are granted through the PLFSOM absence link. Unexcused absences will result in an event card.

**Make-up sessions:** On a case-by-case basis the Course Director in coordination with the TECHS staff may schedule make-up sessions for students with excused absences from sessions. **It is the responsibility of the student to schedule a make-up session after an absence, students must email Course Coordinators and Directors as soon as possible.**

**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 **PLFSOM absence management system.** Refer to the PLFSOM ‘Pre-clerkship phase attendance policy’ for guidelines on requesting an excused absence for planned events.

**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).

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.

5. 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.

**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.

Personal belongings: Students should bring only required equipment to each MSC session. Students are not allowed to bring backpacks, purses, or computers into TECHS. Failure to adhere to this policy may result in denied entry into TECHS until the student returns without the items listed above, which may result in unexcused tardy or even absence. TECHS is not responsible for lost or stolen items. Items left behind or forgotten inside TECHS will be sent to the TTUHSC El Paso Police Department.

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: TECHS is a secure area. Unauthorized entry is not permitted.

Property: Removing equipment from TECHS 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.

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.

**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 Elentra.

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.

**1. Identification Badge and White Coat**

All learners participating in sessions at TECHS are required to wear their white coats over their professional business attire each week. Identification badges will be visible and worn in the chest area on the outside of the white coat at all times while at TECHS. The photo ID badge will be helpful in identifying learners during sessions and in the event of an emergency.

**2. Clothing**

Clothing will be worn appropriate to the TECHS environment, which is considered a clinical 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 facility 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 exercise leggings.

f. Fabrics such as denim (any color), sheer, clinging, open weave knit, dressy metallic, sequins, and sweatshirts.

3. Shoes
Footwear should be worn at all times while at TECHS. 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.

4. Scrubs
MSI or MSII students are not permitted to wear scrubs unless advance designation or approval is granted by the TECHS 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.

5. 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 TECHS may not be worn.

b. Earrings will be limited 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.

6. 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.

7. 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. Since TECHS is considered a clinical environment, the same implemented masking rules that are in effect at campus clinics also apply.

8. Makeup
The wearing of makeup shall be complimentary to a learner’s natural features. Makeup should
be modest and minimal to create a professional image.

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

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 of 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.

Hygiene
1. Every participant in any training session at the TECHS Center shall follow infection control measures with regard 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. Fingernails 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. Long artificial nails are prohibited.

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 (e.g. College mentors 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 http://elpaso.ttuhsc.edu/opp/_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 a professionalism card. These cards will be handled according to policies established by the Department of Medical Education

After an accumulation of 5 violations of the above policies, such as dress code violation, or missing equipment/badges/white coat, a professionalism event card will be submitted. The response to unprofessional behavior will be determined by the Course Director and faculty depending on severity of incident.

Textbooks
A curated list of relevant electronic textbooks is also available through the TTUHSC-EP Library at: https://elpaso-ttuhsc.libguides.com/PLFSOMtextbooks.

The required textbook for the course is:

Optional textbooks for the course include:
• Alastair Innes J, Dover A, Fairhurst K, eds. MACLEOD’S CLINICAL EXAMINATION, 14th
Symptoms to Diagnosis, An Evidence-Based Guide, 3rd ed. (2014), by Scott D. Stern, Adam S. Cifu, Diane Altkorn

The Patient History, Evidence-Based Approach, (2012), by Mark Henderson


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 reflex hammer
4. A penlight
5. A white coat
6. Analogue wristwatch with second hand
7. Writing utensil: pen/pencil
8. A paper to write note during SP encounter

Note: Each exam room in the TECHS Center is equipped with an otoscope and an ophthalmoscope. Sphygmomanometers will be provided as needed. Therefore, students do not need to purchase these diagnostic instruments for the Medical Skills Course.

**Accessibility and Support Services**

Office of Accessibility Services
TTUHSC El Paso is committed to providing equitable access to learning opportunities for all students with documented learning disabilities. To ensure access to this course and your program, please contact the Office of Accessibility Services (OAS) by calling 915-215-4398 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 OAS as soon as possible. More information can be found on the OAS website: https://elpaso.ttuhscl.edu/studentservices/accessibility/default.aspx
Counseling Assistance
TTUHSC EP is committed to the well-being of our students. Students may experience a range of academic, social, and personal stressors, which can be overwhelming. If you or someone you know needs comprehensive or crisis mental health support assistance, on-campus mental health services are available Monday- Friday, 9 a.m. – 4 p.m., without an appointment. Appointments may be scheduled by calling 915-215-TALK (8255) or emailing support.elp@ttuhsc.edu. The offices are located in MSBII, Suite 2C201. Related information can be found at https://elpaso.ttuhsc.edu/studentservices/student-support-center/get-connected/ Additionally, the National Suicide Prevention Lifeline can be reached at 988

Staff and Faculty Roster and Scheduled Office Hours
Faculty will be available to meet with student by appointment in virtual meeting room or in person.

Course Director
Rebecca L Campos, MD, FAAFP, FAIHM, ABIHM
MEB 4146
Rebecca.L.Campos@ttuhsc.edu
915-215-4527

Course Co-Director
Mariela Lane, MD
Office: MEB 2220C
Tel: 915-215-4126
Marielan@ttuhsc.edu

Course Faculty
Namrata Singh, MD, FAAP
MEB 2230C
Namrata.Singh@ttuhsc.edu
915-215- 5726

Biff Palmer, MD
Office: MEB 2140
Tel: 915-215-4779
bipalmer@ttuhsc.edu

Thwe Htay, MD
Office: MEB 3rd floor Student Affairs
Tel: 915-215-4039
Thwe.Htay@ttuhsc.edu

Physician Assistant Educator
Damaris Rosado, MS, MPAS, PA-C
MEB 4147
915-215-4701
damaris.rosado@ttuhsc.edu

Nurse Educator
Laura Gorby, MSN, RN-BC
MEB 3185A
915-215-4583
laura.gorby@ttuhsc.edu
Course Coordinators:
Mayra Sandoval
Office: MEB 3185
Tel: 915-215-5951
Mayra.Sandoval@ttuhsc.edu

Sheila Torres
Office: MEB 3185
Tel: 915-215-5775
Sheila.Torres@ttuhsc.edu