



TEXAS TECH UNIVERSITY
HEALTH SCIENCES CENTER
EL PASO

Paul L. Foster School of Medicine

Syllabus

Society, Community, and the Individual (SCI)

PSCI 5221 (SCI I, Fall MS1)

PSCI 5212 (SCI II, Spring MS1)

PSCI 6211 (SCI III, Fall MS2)

PSCI 6212 (SCI IV, Spring MS2)

Academic Year 2023-2024

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NOTE: This Syllabus contains 2 major components- including the main SCI course content (Health System Sciences/Social Foundations of Medicine; Evidence-Based Medicine/Introduction to Clinical Research; Community Health and Clinical Experiences; Support for optional Service Learning activities) **and all the Spanish content that begins [here](#).**

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Course Description

Society, Community, and the Individual (SCI) is comprised of four essential components:

- 1) Health System Sciences/Social Foundations of Medicine
- 2) Evidence-Based Medicine/Introduction to Clinical Research
- 3) Community Health and Clinical Experiences
- 4) Support for optional Service Learning activities, and
- 5) Conversational and Medical/Clinical Spanish is a fifth curricular element of SCI.

(The Spanish Language Course content appears as a separate Syllabus [here](#).

These 5 course components are described below following an overview of the first year SCI Immersion, which is linked to the first semester of SCI (SCI I).

Immersion

Immersion, held the month before all other classes begin, in July, is designed to achieve the following:

- Students will be introduced to important SCI topics particularly Social Foundations of Medicine topics at a time when these issues do not compete for time and attention with other aspects of the curriculum.
- The lower stress during immersion gives students the opportunity to bond with their classmates more readily. It is hoped that this will help them emotionally and socially as the curriculum becomes more stressful.
- Students will participate in the community assessment and cultural competency activities, and present on both including a proposed community health intervention (logic model format).
- Students will receive accelerated conversational Spanish instructions, including Intensive Conversational Spanish at ~30 hours.
- Immersion also provides time for administrative and other non-SCI activities, such as the clinical communication skills, student oath, and an introduction to components of the pre-clerkship curriculum.

Important points to note:

- At the start, students are assigned to three different levels (advanced, intermediate and beginners) of Spanish speaking proficiency upon intake based on a placement exam (using the Immersion platform or similar) to allow for placement into conversational Spanish classes taught in Immersion. Students then go on to medical Spanish in the academic year.
- Unless otherwise specified, attendance is required at all SCI immersion activities.
- Immersion topics will not be tested on exams, however, and the team –based Community Assessment Problem Set work is worth 20% of the SCI I grade.
- Immersion is taught as an interprofessional learning experience with students from the Hunt School of Dental Medicine.

1- Health System Sciences/Social Foundations of Medicine

This component of SCI exposes students to a societal/population perspective on health and illness. We will provide students opportunities to learn how social, cultural, economic, political, and environmental forces affect and are affected by the health of individual patients. While this component will be the prime focus of the immersion, these topics will also be explored more deeply throughout the first and second year. The schedule of topics and their session level objectives will be found on the Department Medical Education learning platforms along with the times and locations of the sessions. Some sessions will integrate with College Colloquium, Scientific Principles of Medicine (SPM), and Medical Skills. In addition to lectures, students will have sessions in which they work in small groups with one another, such as during the Community Assessment Project and the Cultural Competence Project. There will also be panel discussions. This component will be assessed on exams that may include short answers, essays, and multiple choice questions.

All SCI Health System Sciences/Social Foundations of Medicine sessions in Year 1 of SCI (SCI I) are required. SCI IV sessions in Year 2 are a mix of optional and required; these will be noted at the start of the semester in the Learning Platform (Elentra).

2- Evidence-Based Medicine/Introduction to Clinical Research

Practicing physicians need the ability to find, select, critically assess and extract useful information from the medical literature so they can provide optimal, state-of-the-art care to their patients. This component will help students develop these important skills through five steps (Asking, Acquiring, Appraising, Applying, and Assessing). It will provide them with the essential tools to understand the foundations of clinical research, to become life-long learners

in medicine, and to serve as a foundation for their student research project. This course includes foundations in biostatistics, epidemiology, qualitative methods, and evidence-based medicine. It will help students—and subsequently their patients—in dealing appropriately with the uncertainties that are inherent to the practice of medicine. It will also help them understand the basis of sound medical reasoning as well as to correctly interpret, understand, and use the medical literature.

Students will also have graded team-based problem sets in this segment of the course. For problem sets, students are encouraged to work with and thus learn from one another. To enhance long-term learning, however, students need to solve or attempt to solve the problem set separately before working together. Students' teams will then submit the final team solution to be graded.

To enhance bio statistical, epidemiological, and qualitative data analysis skills, students will receive Problems Sets over the first and second year, with 1 in year one and 1 in year two (One in each semester SCI II and SCI III). In SCI IV students will help to write USMLE-style questions featuring SCI II and III content as part of a Problem Set.

All SCI sessions in Evidence-Based Medicine/Introduction to Clinical Research in Year 1 of SCI (SCI II) and in fall semester of Year 2 (SCI III) are required unless otherwise noted at the start of the semester in the Learning Platform (Elentra).

3- Community Health Experiences

Our goal is to provide students with clinical experiences during their pre-clerkship years to help remind them of their overall goal to become clinicians as well as to ground them for what they are learning in SPM, Medical Skills, College Colloquium, and the other SCI components. This will enable students to understand the relevance of what they are learning and how it is adapted in a clinical practice.

Approximately once a month during the school year, students will be assigned a clinical or community-based experience for up to a half a day. **Attendance is mandatory.** Students must remember that these community preceptors are volunteers and remember that students represent PLFSOM when they come to these activities, so professionalism is highly important. Students are responsible for having all of their necessary immunizations completed before attending.

Students will have two types of community health experiences: (1) clinics with primary care physicians. These will be the students' primary care preceptors with which we hope they will develop a productive, longitudinal experience. When attending clinic, students should tell their primary care provider what they are currently learning in SPM and Medical Skills so the preceptor can direct relevant patients to them if possible. Indeed, maximizing this integration is

a prime reason why we use primary care physicians. (2) Experiences with non-physician health care providers, such as dentists, optometrists, and pharmacists will be one time experiences. In addition to direct learning, students will have the opportunity to learn how they can effectively work with other health care providers to enhance the health of their patients. Working with non-physician health care providers is a part of a larger effort to enhance inter-professional collaboration and education.

This component requires students to attend all assigned clinics and community visits and panels to submit documentation of participation at the end of each semester unless otherwise designated. A reflection is required all panels unless otherwise specified and students must complete a reflection on all CHE at the end of Year 2.

4- Service-Based Learning

Service-learning is a structured learning experience that combines community service with preparation and reflection. Students engaged in service learning provide community service in response to community-identified concerns and learn about the context in which the service is provided, the connection between their service and their academic coursework, and their roles as citizens and professionals [Seifer SD. "Service learning: Community-campus partnerships for health professions education." *Academic Medicine* 1998; 73(3):273-277].

Although service-learning is not required, it is highly recommended. Service-learning will give students an opportunity to put what they are learning into practice in a real-life situation as well as to make a difference in the El Paso community and beyond.

The SCI team works to create opportunities for students to learn about opportunities for service early in their time at PLFSOM. As part of that, the SCI immersion, students do a community assessment. This projects gives students an opportunity to discover needs and assets in a local community and it often leads to interests in service in those or similar communities. SCI hosts other activities with community groups to help link students to community-based organizations.

A service-learning site is available through campus learning platforms (CHAMP/Canvas with likely transition to Elenra) where students can find opportunities as well as complete and submit service-learning reflection forms. Students who contribute more than 100 hours of service-learning will be eligible for the 100-Hour Club and be recognized at both the annual symposium as well as at graduation.

A **service-learning symposium** is held annually, usually in the spring. Abstract submission is usually due during the first weeks of the calendar year. In this symposium, students have the opportunity to share their service-learning activities with faculty, students, and members of the

community. Participation in this symposium as a presenter can be included in their applications for residency programs.

MS1 Requirement: SCI requires attendance at 2 hours (keynote, podium presentations, posters eligible) of the Service Learning Symposium for first year students; usually the Symposium is held in February. This requirement serves as a Spring MS1 Community Health Experience.

Students are encouraged to contact the SCI Service Learning Director, Dr. Rosenthal, if they have any questions about service-learning activities.

Strategies to Reinforce Learning

Throughout the Course, we will use these techniques to help foster long-term learning: active learning, spaced learning, interleaving, mixed practice, and desired difficulties. Students are encouraged to use whatever resource they feel will best help them learn the objectives for each session and are in fact encouraged to use multiple resources, not just the session slides. These objectives will be found on the Department's learning platforms for each session. Students should understand that the session slides are designed to facilitate class presentations; they are not designed to be a study aid. Indeed, learning theory suggests that students taking notes in class provides active learning. Thus, we do not provide study aids because evidence suggests that students who create their own study aids generally outperform students who use study aids generated by other people. Thus, slide sets are not annotated. . Classes will be a blend of lecture format with intervals when students break into pairs or small groups to work on a problem. Interactive testing polls and games will also be used to reinforce learning.

Each semester will feature 1-2 Problem Sets to be completed by teams to reinforce the application of the content featured in the semester. Content featured in Problem Sets may also be tested.

SCI II's Evidence-Based Medicine-Introduction to Clinical Research will include credit-bearing Team-based Learning individual and team-based Readiness Assessments that will carry percentage point values; this will be continued in SCI III for the Class of 2027. For the Class of 2026, Team-based Learning individual and team-based Readiness Assessments, however, they will not carry a percent value in the semester's grade. All SCI sessions except Immersion-only content will be tested in exams; in year 1 there are no midterm exams. Exams will feature multiple choice questions; they may include open-ended questions. Because spaced learning is important for long-term learning, midterm and final exams may include questions beyond those from the most recent exam. Open-ended questions and any sessions to be tested beyond those since the prior exam will be confirmed through an email no less than 2 weeks before the exam.

Social Justice Curriculum

Social Justice Content the Foster SCI curriculum and topics are aligned with the institutional curricular social justice goals and objectives that aims to advance the mission of the TTUHSC El Paso by ensuring that all degree program incorporate essential principles of social justice. The institutional social justice curricular areas/domains include:

- I. The social determinants of health (knowledge)
- II. Systemic racism and other forms of prejudice and discrimination based on marginalized and/or minority status (awareness)
- III. The biopsychosocial model of health (shared framework)
- IV. Health equity (fairness)
- V. Advocacy in healthcare (advocacy)
- VI. Healthcare and community inclusiveness (harmony)

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 students 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 that can be found at [PLFSOM AY 2023-24 PGOs](#). Also see Table 2 below for SCI assessment strategies for PGOs.

SCI course goals include the following (institutional goals are indicated in parentheses). Upon graduation, students will be able to:

- Articulate how political, social, community, organizational, and family systems affect and are affected by the health of individual patients. (KP-2.5, PBL-3.5, SBP-6.1, SBP-6.2, SBP-6.3)
- Identify, use, and assess bio statistical concepts and qualitative findings to critically evaluate the medical literature and practice evidence-based medicine. (KP-2.3, KP-2.6, PBL-3.1, PBL-3.4, SBP-6.3, PPD-8.4)
- Use epidemiological principles to assess and evaluate the distribution and determinants of disease. (KP-2.4)
- Describe how culturally-based beliefs, attitudes, and values affect the health and illness behaviors of individuals, groups, and communities. (PC-1.6, ICS-4.1, PRO-5.1)
- Effectively work with patients and co-workers who have different cultural backgrounds. (ICS-4.1, ICS-4.2, ICS-4,3, IPC-7.4)

- Describe the concepts of community and of systems within communities that impact health seeking behaviors and responses to treatment interventions. (KP-2.5, PBL-3.5, SBP-6.1, SBP-6.2)
- Describe and recognize the impact of environmental and occupation factors on the health of individuals and populations as well as identify and apply effective strategies for promoting health and reducing illness at the level of both the individual and the community. (PC-1.7, KP-2.4, PBL-3.1, PBL-3.5)
- Participate in and/or analyze barriers and facilitators to the successful delivery of health care by community physicians and other health care providers. (PC-1.1, ICS-4.2)
- Articulate the role of other health care providers in enhancing the health of their patients and work effectively with them in a collaborative manner. (ICS-4.2, SBP-6.4, IPC-7.1, IPC-7.2, IPC-7.3, IPC-7.4)
- Identify community assets and needs and have the opportunity to engage in service-learning projects to build on those assets and work address identified needs. (PBL-3.5, SBP-6.2)

Table 2: PLFSOM Programmatic Goals and Assessment Methods

Patient Care		
Educational Program Objectives		Outcome Measures
PC-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 style="list-style-type: none"> • Exam – Institutionally Developed, Written/Computer-based (SCI Midterms and Finals) • Narrative Assessment (Immersion team projects; Small-group interviewing skills; community health experience)
PC-1.6	Counsel and educate patients and their families to empower them to participate in their care and enable shared decision-making.	<ul style="list-style-type: none"> • Exam – Institutionally Developed, Written/Computer-based (SCI Midterms and Finals)
PC-1.7	Provide preventative health care services and promote health in patients, families and communities.	<ul style="list-style-type: none"> • Narrative Assessment (Immersion team projects) • Exam – Institutionally Developed, Written/Computer-based (SCI Midterms and Finals)
Knowledge for Practice		
Educational Program Objectives		Outcome Measures
KP-2.3	Apply evidence-based principles of clinical sciences to diagnostic and therapeutic decision-making and clinical problem solving.	<ul style="list-style-type: none"> • Exam – Institutionally Developed, Written/Computer-based (SCI Midterms and Finals; team-based problem sets)

KP-2.4	Apply principles of epidemiological sciences to the identification of health problems, risk factors, treatment strategies, resources, and disease prevention/health promotion efforts for patients and populations.	<ul style="list-style-type: none"> Exam – Institutionally Developed, Written/Computer-based (SCI Midterms and Finals; team-based problem sets)
KP-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 style="list-style-type: none"> Exam – Institutionally Developed, Written/Computer-based (SCI Midterms and Finals)
KP-2.6	Demonstrate an understanding of and engagement in the creation, dissemination and application of new health care knowledge.	<ul style="list-style-type: none"> Narrative Assessment (Immersion team projects) Exam – Institutionally Developed, Written/Computer-based (SCI Midterms and Finals; team-based problem sets)

Practice-Based Learning and Improvement

Educational Program Objectives		Outcome Measures
PBL-3.1	Identify gaps in one's knowledge, skills, and/or attitudes, and perform learning activities to address them.	<ul style="list-style-type: none"> Exam – Institutionally Developed, Written/Computer-based; team-based problem sets)
PBL-3.4	Locate, appraise and assimilate evidence from scientific studies related to patients' health problems.	<ul style="list-style-type: none"> Exam – Institutionally Developed, Written/Computer-based (SCI Midterms and Finals; team-based problem sets (Immersion community assessment)
PBL-3.5	Obtain and utilize information about individual patients, populations or communities to improve care.	<ul style="list-style-type: none"> Exam – Institutionally Developed, Written/Computer-based (SCI Midterms and Finals) Research or Project Assessment (Community Assessment project in Immersion)

Interpersonal and Communication Skills

Educational Program Objectives		Outcome Measures
ICS-4.1	Communicate effectively with patients and families across a broad range of socioeconomic and cultural backgrounds.	<ul style="list-style-type: none"> Exam – Institutionally Developed, Written/Computer-based (SCI Midterms and Finals) Narrative Assessment (Community health experience) Participation (Spanish language assessment) Exam – Institutionally Developed, Oral (Spanish comprehension quizzes, Spanish oral conversation)

		evaluations, Spanish doctor/patient oral interview exam)
ICS-4.2	Communicate effectively with colleagues and other health care professionals.	<ul style="list-style-type: none"> Exam – Institutionally Developed, Written/Computer-based (SCI Midterms and Finals) Participation (Community health experience, TeamSTEPPS and related IPE activities)
ICS-4.3	Communicate with sensitivity, honesty, compassion and empathy.	<ul style="list-style-type: none"> Narrative Assessment (Community health experience; small-group discussion)
ICS-4.4	Maintain accurate, comprehensive and timely medical records.	<ul style="list-style-type: none"> Narrative Assessment (Community health experience)
Professionalism		
Educational Program Objectives		Outcome Measures
PRO-5.1	Demonstrate sensitivity, compassion and respect for all people.	<ul style="list-style-type: none"> Narrative Assessment (Community health experience)
Systems-Based Practice		
Educational Program Objectives		Outcome Measures
SBP-6.1	Describe the health system and its components, how the system is funded and how it affects individual and community health.	<ul style="list-style-type: none"> Exam – Institutionally Developed, Written/Computer-based (SCI Midterms and Finals)
SBP-6.2	Demonstrate the ability to identify patient access to public, private, commercial and/or community-based resources relevant to patient health and care.	<ul style="list-style-type: none"> Narrative Assessment (Immersion team-based Problem Sets; Community health experience)
SBP-6.3	Incorporate considerations of benefits, risks and costs in patient and/or population care.	<ul style="list-style-type: none"> Exam – Institutionally Developed, Written/Computer-based (SCI Midterms and Finals)
SBP-6.4	Describe appropriate processes for referral of patients and for maintaining continuity of care throughout transitions between providers and settings.	<ul style="list-style-type: none"> Narrative Assessment (Community health experience)
Interprofessional Collaboration		
Educational Program Objectives		Outcome Measures
IPC-7.1	Describe the roles and responsibilities of health care professionals.	<ul style="list-style-type: none"> Participation (TeamSTEPPS and related IPE activities) Narrative Assessment (Community health experience)
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.	<ul style="list-style-type: none"> Participation (TeamSTEPPS and related IPE activities) Exam – Institutionally Developed, Written/Computer-based (SCI Midterms and Finals)

		<ul style="list-style-type: none"> • Narrative Assessment (Community health experience)
IPC-7.3	Participate in different team roles to establish, develop, and continuously enhance interprofessional teams to provide patient- and population-centered care that is safe, timely, efficient, effective, and equitable.	<ul style="list-style-type: none"> • Participation (TeamSTEPPS and related IPE activities)
IPC-7.4	Recognize and respond appropriately to circumstances involving conflict with peers, other health care professionals and team members.	<ul style="list-style-type: none"> • Participation (TeamSTEPPS and related IPE activities) • Exam – Institutionally Developed, Written/Computer-based (SCI Midterms and Finals)
Personal and Professional Development		
Educational Program Objectives		Outcome Measures
PPD-8.4	Utilize appropriate resources and coping mechanisms when confronted with uncertainty and ambiguous situations.	<ul style="list-style-type: none"> • Exam – Institutionally Developed, Written/Computer-based (SCI Midterms and Finals)

Grading System

Graded Components

There are three (3) components of SCI in addition to Spanish (see Part 2 of the Syllabus for Spanish component details) that are graded: (1) Health System Sciences/Social Foundations of Medicine, (2) Evidence-based Medicine/Introduction to Clinical Research, and (3) the Community Health Experience.

To pass SCI, students must pass each of these three assessments/requirements:

1. **Written/Oral Assessments:** These assessments will assess competency in two SCI components: (1) Social Foundations of Medicine and (2) Introduction to Clinical Research. These components are assessed through midterms, finals, and problem sets. Students must obtain a 65% or greater average for the semester to pass each semester. This is a strict cut-off; there is no curve in SCI.
2. **Completion of the Community Health Experiences.** To pass this component, students must attend all the assigned activities. They must submit (on-line and in hard copy) the signed documentation from their preceptor verifying their attendance and (2) complete the required on-line reflections. An unexcused absence will result in a failure of this component as can late submissions of reflections. Requests for excused absences can be submitted through the PLFSOM online absence/leave request system [here](#). Please refer to the PLFSOM '[Pre-clerkship phase attendance policy](#)' for guidelines on excused absences.

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 official student transcript, students will receive a grade of Pass or Fail for SCI each semester. Students must pass all three of the assessments noted above to pass SCI; failure of one results in failure of SCI. Remediation for the components is possible before receiving a final grade of Fail for the SCI course as outlined below.

Remediation

Students can successfully remediate these assessments/requirements, and successful remediation will convert the grade for that section from 'Deferred' (DE) to 'Pass' (PA). Students who do not pass the course after their remediation attempt will receive a grade of 'Fail' (FA) for SCI on their transcript and will be referred to the Grading and Promotion Committee (GPC). Students can remediate as follows:

1. **Written/Oral Assessments:** Students who score below a 65% average for the semester on these assessments will have the opportunity to take a remediation exam and will receive a pass if they score at or above 65% on this examination. A score below 65% will result in a grade of Fail for SCI and a referral to the GPC.
2. **Completion of the Community Health Experience.** Students who have an unexcused absence from the community health experience must make up the visit and must remediate by satisfactorily writing a 4000-word (approximately 10-page) or longer paper on a topic selected by the Course Director. Papers are due at the end of the semester of the incident. In addition, a professionalism concern will be sent to the student's college mentors and documented as an 'event card' on e-portfolio. A second unexcused absence at any time during the pre-clerkship curriculum (which includes both the MS1 and MS2 years) will result in a failure of SCI and a referral to the GPC. Please note that inability to attend a community health experience due to lack of immunizations is an unexcused absence. Students may not arrange date changes for their clinical visits directly with providers unless the provider initiates a request. Any changes must be confirmed with the SCI coordinator and as directed, with the Course Director.

For students who attend clinic but do not submit the required on-line reflection in the required time, a professionalism concern will be sent to the student's college mentors and documented as an 'event card' on e-portfolio. For a second late submission at any time during the pre-clerkship curriculum (which includes both the MS1 and MS2 years), an additional professionalism concern will also be sent to the student's college mentors and documented as an 'event card' on e-portfolio. A third late submission at any time during the pre-clerkship curriculum (which includes both the MS1 and MS2 years) will result in a failure of SCI and a referral to the GPC. An unexcused absence counts as a missed reflection.

More Specific Grading Criteria

1. Written/Oral Assessments

Midterm and Final Exams

Students will have final exams in each semester of the year and in the fall of the second year (SCI III), they will also have a midterm exam. Exams will assess competency in (1) Health System Sciences/Social Foundations of Medicine and (2) Evidence-based Medicine/Introduction to Clinical Research. The content of the course is cumulative so each examination may build on content covered previously. As noted earlier in this Syllabus, students will be advised with at

least 2 weeks if any specific sessions since the prior exam will be featured on an exam.. This cumulative element is particularly for the Introduction to Clinical Research material. An unexcused absence from an exam will result in a score of "0" for that exam.

We have the same policy for tardiness for examinations as SPM, and SCI will abide by the latest SPM policy: "Tardiness for a formative or summative assessment is disruptive, unprofessional, discourteous, and strongly discouraged. Students who arrive up to 10 minutes late for an assessment will be permitted entry to the assessment area entirely at the discretion of the chief proctor and with regard to the effect that such entry may have on the students already present in the assessment environment. Students who are permitted late entry to the assessment must finish at the scheduled end time. Students who arrive more than 10 minutes late for an assessment will be denied entry and recorded as absent".

Problem Sets

Throughout the SCI I-IV semesters, students will be required to complete Problem Sets. These are team-based and students are encouraged to do so; each team must submit just one combined Problem Set of their work for grading. SCI problem sets are Pass/Fail at the 65% threshold; the standard set point for the course. If problem sets are late, teams will be penalized 25 % for each 24 hours of delay. A score of zero will be given for problem sets submitted after 4 days. Any problem set receiving a score less than 65% (Fail) must be resubmitted until a score above 65% is achieved. This must be successfully accomplished within one week after the final exam for the semester to pass SCI. Failure to do so will result in a failure of SCI and a referral to the GPC.

Social Justice Curriculum Element: Bias Training:

Year 1 Requirement: MS1s are required to take the campus-developed on-line asynchronous "Check Your Blind Spots Unconscious Bias" training in the Fall SCI I semester. The training will be posted by the end of September and must be completed within three days of the last fall semester final exam. This is a Pass/Fail (complete incomplete) assignment."

Grading Distribution and Required Semester Elements

Course passing threshold 65%

Note: All Problems Sets must be at Course passing threshold 65%

MSI Grading Distribution and Required Semester Elements - fall

SCI I - Immersion and fall

Problem Sets:

- Immersion Community Assessment 20%
- Health System Literacy 20%

Comm. Health Experience - Self-Assessment of Goals & Learning	10%
Final Exam	50%
EXAM NOTE: Only content covered in Sessions after Immersion will be on the Exam (may include any Immersion content that is re-visited in the fall).	
• Bias Training	Complete/Incomplete
• 4 Community Health Experiences	Pass/Fail

MSI Grading Distribution and Required Semester Elements - Spring

SCI II - Spring

• Problem Set: Research Methods Problem Set	30%
• In class Team-Based Learning activity	20%
• (10 sessions x 2%); for excused absence students can do an online iRAT worth 2%	
• Final Exam	50%
• 4 Community Health Experiences	Pass/Fail

MS II Grading Distribution and Required Semester Element -Fall

SCI III – Fall

Problem Set	30%
Literature Analysis	
Midterm Exam	30 %
Final Exam	40 %
• 4 Community Health Experiences	Pass/Fail

Note: As in SCI II, for the Class of 2027, in class Team-Based Learning activity worth 20% will replace the midterm exam and other graded elements will be similar to SCI II.

MSII Grading Distribution and Required Semester Elements -Spring

SCI IV – Spring

Problem Set:	
• USMLE Exam-Style Question Prep	30%
Year 1-2 CHE Reflection on Lifelong Learning	20%

Final Exam

50%

- 2 Community Health Experiences

Pass/Fail

2. Completion of the Community Health Experience

Documenting the visit

For each community health experience, students are responsible for having their preceptor document their visit by signing their preceptor documentation card that needs to be submitted to the relevant program coordinator, at the end of each semester. Documenting a visit without attending clinic will result in an automatic failure of the Community Clinic Experience and SCI based on professionalism without the option for remediation as well a referral to the GPC. Students are advised to take a picture of their signed form after each visit in case they lose their signature card. Cards must be submitted within 1 week (7 days) after the final exam of the semester the card is due. Card submission instructions will be printed on the card. Failure to submit the card will result in a failure of SCI and a referral to the GPC.

Reflection

For selected Community Health Experience Panels, at the start of SCI IV students will receive an individualized LINK from SCI-ELPaso@ttuhsc.edu to complete an on-line Community Health Reflection. Students are responsible for keeping and using the appropriate link.

Standard Community Clinic Times

Students will receive a schedule of their community clinics. If asked, students are responsible for signing up for clinical slots by the deadline provided.

- MS1 Community Health Experience visits will be on either Tuesday or Wednesday afternoon from 1:00 PM until ~5:00 PM
- MS2 Community Health Experiences will be on Wednesday or Thursday morning from 8:00 AM until ~12:00 PM.
- Unfortunately, given the complexity of multiple schedules and limited preceptor time, students need to abide by the schedule unless the student is granted an excused absence. Because community preceptors can cancel their clinics at any time, students should keep these alternative times as free as possible in case they need to be rescheduled. Students should not negotiate alternative clinic times with their clinic preceptors or fellow students. Instead, they should work through the SCI program coordinator.

Missing a Clinic

It is **essential** that students attend clinics as scheduled. Students need to follow the procedures outlined below that are appropriate to their situation:

Students missing a scheduled community clinic need to do the following as soon as possible:

- E-mail the Department of Medical Education through the PLFSOM absence management system [here](#).
- Contact the respective SCI program coordinator as soon as possible. Please include the preceptor's name and the date of the missed clinic as well as times available within the next month for potential rescheduling.
- Contact their preceptor to let them know they will not be at clinic.

If the student discovers that the preceptor is not available, the student needs to contact the respective SCI program coordinator. Please include the preceptor's name and the date of the missed clinic as well as times available within the next month for potential rescheduling. The SCI program coordinator will work with the preceptor to schedule a make-up clinic at a time when the student does not have scheduled class activities or during another month within the academic year in which case the student may have two preceptor visits during the same month. If an available time cannot be found, the student is not responsible for making up this clinic.

If the clinic visit is missed due to an excused absence as determined by Student Affairs, the SCI program coordinator will work with the preceptor to schedule a make-up clinic at a time when the student does not have scheduled class activities or during another month within the academic year in which case the student may have two preceptor visits during the same month. If an available time cannot be found, the student is not responsible for making up this clinic.

If the clinic visit is missed due to an unexcused absence, the student is required to submit the 4000-word or longer remediation paper at the direction of Dr. Rosenthal. Papers are due at the end of the semester of the incident. The SCI program coordinator will attempt to schedule a make-up clinic at a time when the student does not have scheduled class activities or during another month within the academic year in which case the student may have two preceptor visits during the same month. Attending this clinic is required but does not replace submitting the remediation paper.

If the clinic visit is missed due to an SCI mistake, the SCI program coordinator will work with the preceptor to schedule a make-up clinic at a time when the student does not have scheduled class activities or during another month within the academic year in which case the student may have two preceptor visits during the same month. If an available time cannot be found, the student is not responsible for making up this clinic.

Students are required to follow up about the missed visit remediation paper with Dr. Rosenthal.

Attendance

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 is required for all Spanish classes. For both excused and unexcused absences, students are responsible for completing assignments during their absence and can be assigned alternative activities to make up for their absence from classroom participation.

Students who have an unexcused absence will need to remediate as outlined in the section on remediation. Students who fail to adequately remediate or who have a third unexcused absence during an academic year or who have a second unexcused absence during conversational Spanish during Immersion will Fail SCI and be referred to the GPC.

An unexcused absence from a graded evaluation will result in a score of "0" for that activity.

Absences can be excused only through the PLFSOM absence management system [here](#)

Important Dates

Please watch Canvas/Elentra for potential changes.

1. Examinations

MS1

Exam Date	Exams	Sign Up Deadline
December 18, 2023	SCI Final I	
January 10, 2024	Remediation Round 1	December 27, 2023 @ 12 PM
May 6, 2024	SCI Final II	
June 6, 2024	Remediation Round 2	May 24, 2024 @ 12 PM
June 7, 2024	Remediation Round 3	May 24, 2024 @ 12 PM
June 13, 2024	Remediation Round 4	May 31, 2024 @ 12 PM
June 14, 2024	Remediation Round 3	May 31, 2024 @ 12 PM
June 20, 2024	Remediation Round 4	June 7, 2024 @ 12 PM
June 21, 2024	Remediation Round 4	June 7, 2024 @ 12 PM

MSII

Exam Date	Exams	Sign Up Deadline
November 02, 2023	SCI III Midterm	
December 21, 2023	SCI III Final	
January 08, 2024	Remediation Round 1	December 28, 2023 @ 12 PM*
February 22, 2024	SCI IV Final	
March 8, 2024	Remediation Round 2	March 1, 2024 @ 12 PM*
March 15, 2024	Remediation Round 3	March 8, 2024 @ 12 PM*
March 22, 2024	Remediation Round 4	March 15, 2024 @ 12 PM*
<i>Please plan accordingly for the remediation rounds*</i>		

2. Team –Based Problem Sets

Problem set due dates will be posted in Elentra.in the Learning Platform (Elentra) or in the designated platform. Due dates will be set to ensure they are not due the week before an exam. The anticipated month that problem sets will be given are noted below.

Problem Sets

MS 1 Fall

- 1) Community Assessment
- 2) Health System Literacy

MS1 Spring

- 3) Epidemiology and Research Methods Literature Analysis

MS2 Fall

- 4) Biostatistics Analysis

MS2 Spring

- 5) USMLE-style Question Writing Assignment

3. Community Health Experience Reflections

Students are encouraged to do their reflection immediately following their Community Health visits. That being said, deadlines allow more time than that as indicated below.

Primary Preceptor Visits: Reflections are required at the end of Year 2

Specialty Community Health Experiences: Each semester the CHE Panel will require a Reflection. These will be due within 2 -3 weeks of the Panel.

Missed Visits Remediation Papers: Remediation papers for missed visit are due at the end of the semester when the visit was missed. These must be turned in within one week of the final unit/semester exam through the Assignments feature in the associated semester's SCI Course on-line in Elenra or other designate on-line platform.

The visit dates below are subject to change with notice depending on community partners.

MS1

Fall – Spring – 8 visits

CHE Personal Self-Directed Learning Goals due 7 days after the end of Unit 1 Exam (10% of Grade)

- 1) Health Facility Visit
- 2-3) Primary Preceptor (2-3 over year)
- 4) Pharmacy Visit (1 over year)
- 5) Internal Medicine visit (1 over year)
- 6) Service Learning Symposium
- 7) Health/Patient Panel – topic TBN
- 8) Public Health Department Experience (or similar)

MS2

Fall –scheduled in any order through Fall

- 1) Ophthalmology Visit
 - 2) Obstetrical and Gynecology Panel
 - 3) Primary Preceptor Visit
 - 4) Working with Interpreters Training
- (NOTE: Fall Primary Preceptor Visit – no Reflection until Spring)*

Spring

5) Dental Visit

6) Spring Policy Class/Mental Health Panel

CHE Reflection over Year 1-2 **due 7 full days after semester exams**

Community Health Remediation Papers for Missed Visits

MS1 and MS2

Deadlines for remediation papers are as indicated below unless otherwise negotiated.

Missed Reflection (1st time) 7 full days after semester exams

1st offense: 600 words

2nd offense: 2000 words

Missed Visit Remediation Paper (4000 words) are due in the SCI Course on-line platform in Canvas:

MS1s and MS2s Fall 7 full days after semester exams

MS1 Spring 7 full days after semester exams

MS2 Spring 7 full days after semester exams

Course Policies and Procedures

Attendance Policies

For both excused and unexcused absences, students are responsible for the material they missed. They may be required to complete the activity scheduled for the required session or may be assigned an alternative activity.

Unexcused absences are not acceptable for those activities that are designated as required attendance and will be forwarded to the college mentors for monitoring.

SCI I-IV Session are required unless otherwise posted at the start of the semester

SCI follows PLFSOM absence and tardiness policies; see the Student Handbook for details.

Social Foundations of Medicine and Introduction to Clinical Research

Attendance is required during the immersion period and presentations that involve most invited presenters. These will be indicated in Elentra, and students will be informed in advance when these sessions require attendance.

Important: Students are responsible for all the material presented during classes. Academic material presented in class is testable whether or not it is a part of the slide presentations or written material. Students are also responsible for administrative announcements made in class. It is the responsibility of students not attending class to obtain this material, academic and administrative, from their fellow students. Students are also responsible for information sent to them by e-mail from SCI team members.

The Community Health Experiences

Attendance is required for all activities.

Professional Attire

During the community health experiences as well as when working with standardized patients, students need to dress in a modest and understated manner, commensurate with proper decorum for clinical work as required for Medical Skills. Please see their syllabus for any updates; SCI will abide by the most recent version from Medical Skills. Briefly,

- Men are required to wear business casual attire. This includes slacks, a collared dress shirt, dress shoes, and optionally a necktie. Inappropriate attire includes polo shirts, running shoes, blue jeans, cargo pants, shorts, or T-shirts.
- Women are required to wear business casual attire. This includes slacks, dresses, or a skirt with blouse and dress shoes. Inappropriate attire includes low cut necklines, see-through blouses, bare midriffs, and short skirts or dresses that reveal the thigh above the knee.
- Closed-toe shoes are required in all clinical settings. Heels should be modest (3" or less). Sandals and shoes with open toes are prohibited in clinical areas by OSHA regulations because of the hazards posed by spills, needles, and sharp instruments.
- Grooming should be hygienic. Students must shower, use deodorant, and use daily oral hygiene. Long hair must be tied back so that it does not contact the standardized patient or interfere with the physical examination. Facial hair such as beards and

sideburns must be neat, clean, and well-trimmed. Fingernails should be clean and length of nails should not be so long as to interfere with the proper performance of the physical examination.

- Students will wear their short white coats during Community Health Experiences unless specifically advised otherwise by their preceptor.

Professionalism

Professionalism is a core competency in Medicine, one that is taken extremely seriously in SCI. Students have failed SCI due to professionalism problems. Students are expected to adhere to the Standards of Professional Conduct outlined in the PLFSOM student handbook. In particular, students should not attempt to copy, post, share, or use SCI exam questions. Students should not submit false claims of attendance at their community clinic or alter documents. Depending on the nature of the problem and as determined by the course director, failure to act professionally may result in a grade of Fail for SCI, regardless of the student's performance in other aspects of the course, and the student will be referred to the GPC. Violations of professionalism could result in expulsion from the PLFSOM.

Disability Support Services

TTUHSC El Paso 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 Academic Success and Accessibility Office (ASAO), 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 the ASAO as soon as possible. Please note: faculty are not allowed to provide classroom accommodations to a student until appropriate verification from ASOA has been provided to the school and disseminated to the appropriate faculty member(s). For additional information, please visit the ASAO website: <https://el Paso.ttuhs c.edu/student services/office-of-academic-and-disability-support-services/default.aspx>.

Appendix

Recommended texts are available electronically or on reserve in printed form in the library. A curated list of relevant electronic textbooks is also available through the TTUHSC-EP Library at:

<https://el Paso-ttuhsc.libguides.com/PLFSOMtextbooks>.

Recommended/Reference for Introduction to Clinical Research:

LINKS: For these resources - please do not use VPN. If you are off campus, LINKS will need to go through the Library Log on page. Once you are logged in for a browser session, resources should be accessible.

Daniel WW, Cross CL. Biostatistics: A Foundation for Analysis in the Health Sciences. Tenth edition. Wiley, 2013. Prior students recommend this text. Has questions.

Dawson B, Trapp RG. Basic and Clinical Biostatistics, 4th edition. New York: Lange Medical Books, McGraw-Hill, 2005. An introductory text for biostatistics but not as user friendly as most Lange texts, perhaps due to the nature of the subject. Has questions. Celentano, David D and Moyses Szklo. Gordis Epidemiology, 6th Edition. Elsevier, 2020.

Greenberg R, Daniels S, Flanders W, Eley J, Boring J. Medical Epidemiology: Population Health and Effective Health Care. Fifth Edition. Lange, 2015. Has questions.

A Lange medical book: Publisher: New York, N.Y.: McGraw-Hill Education LLC., c2015Edition: 5th ed. Available at:

<http://libraryaccess.el Paso-ttuhsc.edu/login?url=http://accessbiomedicalscience.mhmedical.com/book.aspx?bookid=1430>

Hennekens CH, Buring JE. Epidemiology in Medicine. Philadelphia: Lippincott Williams and Wilkins, 1887. A classical introductory text for epidemiology. Has questions.

Myriam-Hunnik MG, Weinstein. Decision Making in Health and Medicine: Integrating Evidence and Values. 2014. An excellent text on clinical decision making. Has questions (but without answers).

Pezzullo JC. Biostatistics for Dummies. 2013. This appears to be a reasonable introductory text. There are, however, some errors in it.

Reigeiman. Studying and Study and Testing a Test: Reading Evidence-based Health Research. 2012.

Rosner B. Fundamentals of Biostatistics, 6th edition. Pacific Grove, CA: Doxbury. 2006. An excellent advanced text in biostatistics. Has questions.

Rothman KJ, Greenland S. Modern Epidemiology, 2nd edition. Philadelphia: Lippincott Williams and Wilkens, 1998, an advanced text for epidemiology. Has questions (but without answers).

Straus SE, Glasziou P, Richardson WS, Haynes. Evidence-Based Medicine: How to Practice and Teach it. Fourth Edition. A classic text.

Weaver A, Goldberg. Clinical Biostatistics and Epidemiology Made Ridiculously Simple. 2102. A short text, <100 pages, that will provide a concise review for the USMLE exam but does not include all of the testable material covered in SCI.

Wheelan C. Naked Statistics. This book provides a good conceptual basis for a general und & Moyses Szklo understanding of statistics

Recommended/Reference for Social Foundations of Medicine:

Beaufort B Longest, Jr, Darr K. Managing health services organizations and systems. Available at:

<http://libraryaccess.elpaso.ttuhsu.edu/login?url=http://ebookcentral.proquest.com/lib/ttuhsu-elpaso/detail.action?docID=4816402>.

Bernheim RG, Childress JF, Melnick A, Bonnie RJ. Essentials of Public Health Ethics. Available at:

<http://libraryaccess.elpaso.ttuhsu.edu/login?url=http://ebookcentral.proquest.com/lib/ttuhsu-elpaso/detail.action?docID=4441268>.

Coughlin SS, American Public Health Association. Case studies in public health ethics. Available at:

<http://libraryaccess.elpaso.ttuhsu.edu/login?url=http://ebookcentral.proquest.com/lib/ttuhsu-elpaso/detail.action?docID=836779>.

Katz R. Essentials of public health preparedness. Available at:

<http://libraryaccess.elpaso.ttuhsu.edu/login?url=http://ebookcentral.proquest.com/lib/ttuhsu-elpaso/detail.action?docID=3319390>.

Hunting KL, Gleason BL. Essential case studies in public health-putting public health into practice. Available at:

<http://libraryaccess.elpaso.ttuhsu.edu/login?url=http://www.r2library.com/Resource/Title/0763761311>

Levine, R. Case Studies in Global Health.

<https://libraryaccess.elpaso.ttuhs.edu/login?url=https://ebookcentral.proquest.com/lib/ttuhs-c-elpaso/detail.action?docID=4440150>

Morabia, Alfredo. Enigmas of health and disease: how epidemiology helps unravel scientific mysteries. New York: Columbia University Press, 2014

<https://libraryaccess.elpaso.ttuhs.edu/login?url=https://ebookcentral.proquest.com/lib/ttuhs-c-elpaso/detail.action?docID=1634831>

Pacyna JM, Pacyna EG. Environmental determinants of human health. Available at:
<http://libraryaccess.elpaso.ttuhs.edu/login?url=http://ebookcentral.proquest.com/lib/ttuhs-c-elpaso/detail.action?docID=4720726>.

Porta. Miguel. Editor. A dictionary of epidemiology. Contributor(s): Porta, Miguel S [editor.] | Greenland, Sander, 1951- [editor.] | Hernan, Miguel [editor.] | Silva, Isabel dos Santos [editor.] | Last, John M, 1926- [editor.] | International Epidemiological Association [sponsor.].

Material type: Book Series: Oxford quick reference: Publisher: Oxford: Oxford University Press, [2014] Copyright date: 2014

<https://libraryaccess.elpaso.ttuhs.edu/login?url=https://ebookcentral.proquest.com/lib/ttuhs-c-elpaso/detail.action?docID=1679277>

Riegelman RK, Kirkwood B. Public health 101 : healthy people--healthy populations. Available at:

<http://libraryaccess.elpaso.ttuhs.edu/login?url=http://ebookcentral.proquest.com/lib/ttuhs-c-elpaso/detail.action?docID=4441234> .

Skochelak SE, Hawkins RE, Lawson LE, Starr SR, Borkan JM, Gonzalo JD. Health Systems Science. Elsevier. The American Medical Association. 2017.

Turnock BJ. Public health : what it is and how it works. Available at:

<http://libraryaccess.elpaso.ttuhs.edu/login?url=http://ebookcentral.proquest.com/lib/ttuhs-c-elpaso/detail.action?docID=4441402>.

Turnock BJ. Essentials of Public Health. Available at:

<http://libraryaccess.elpaso.ttuhs.edu/login?url=http://ebookcentral.proquest.com/lib/ttuhs-c-elpaso/detail.action?docID=4441374>

Wilensky SE, Teitelbaum JB. Essentials of Health Policy and Law. 2020. Available at:

<http://libraryaccess.elpaso.ttuhs.edu/login?url=http://search.ebscohost.com/login.aspx?direct=true&scope=site&db=nlebk&db=nlabk&AN=2029553>

Zimmerman, RS et al. Introduction to global health promotion and Society for Public Health Education (SOPHE). [Society for Public Health Education \[sponsoring body.\]](#). Available at:

<https://libraryaccess.elpaso.ttuhs.edu/login?url=https://ebookcentral.proquest.com/lib/ttuhs-c-elpaso/detail.action?docID=4519243>

Reserve Resources

On the “third pillar of medical education” developed with the American Medical Association:

- Skochelak SE, et al. Health Systems Science. AMA Education Consortium. AMA Education Consortium. Elsevier. 2017. An overview of Health Systems Science: Gonzalo JD,

Ehrenfeld JD. Health Systems Science Review. AMA Education Consortium. AMA Education Consortium. Elsevier. 2019. Cases and questions for review.

PART 2



TEXAS TECH UNIVERSITY
HEALTH SCIENCES CENTER,
EL PASO

Paul L. Foster School *of* Medicine

Syllabus

Medical Spanish (PSPA)

(This evaluation is included in SCI)

Contact Information

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Course Coordinator

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luzgamez@ttuhsc.edu

College Course Location:

MEB 2110, MEB 2115 & MEB 2120

Course Hours:

MS1: Mondays 9:00 AM – 4:00 PM

MS2: Thursdays 8:00 AM – 5:00 PM

Course Description

PSPA is a portion of the evaluation for Society, Community, and the Individual (PSCI). In Immersion, Spanish is focus on Language Foundations and Conversation as a preparatory step before starting the Medical Spanish during the following fall and spring semesters in the first and second year pre-clerkship. **Attendance is required at all PSPA Immersion and regularly scheduled semester activities.**

While the Spanish instructors will provide additional material for each of their sections, this syllabus supersedes any other material given to students. In their third and fourth year of dental school, students will be taking care of a large number of patients who speak Spanish but not English. The Spanish component is designed to facilitate communication with these patients as well as others the student will likely encounter after graduation. It also helps students understand the cultural context of some of the patients they will care for at the PLFSOM. PSPA is highly integrated with MDSK and MSPM, so that when students learn pertinent questions to ask about chest pain, for example, they will also learn how to do so in Spanish.

Students will be assigned to small groups based upon their Spanish speaking ability. Spanish instruction is divided into these parts:

- Intensive Conversational Spanish: ~30 hours during the Immersion.
- Medical Spanish: weekly one-hour meetings for all students after immersion for three semesters and one semester optional. In addition, a self-paced Medical Spanish course and certification program will be provided using the online Canopy medical Spanish platform. A completion of each Canopy level (Levels 1-3) needs to be completed after the second semester of the first year (Spring).

Goals for Conversational and Medical Spanish (PSPA)

- Students will be able to enhance their level of competency in conversational Spanish. Fluency is not a realistic goal.
- Students will be able to apply culturally appropriate conversational skills aligned to their level of competency in the Spanish language.
- Students will be able to develop a familiarity with medical Spanish sufficient to communicate in a limited but useful way with Spanish-speaking patients.
- Students will be able to recognize when their language competency constitutes a significant limitation that must be assisted by the services of a skilled interpreter.

Instructional Methods

The primary educational method for all Spanish instruction will be a task-based communicative approach.

- This approach considers language to be an activity: language is doing something, for some reason, in a particular context, and not just a series of grammar rules.
- Task-based instruction makes use of real-life situations that students must negotiate, as opposed to exercise-based instruction in which drills and learned patterns make students more of a passive learner than an active user of language.
- Situational, linguistic, and cultural contexts are very important in this language teaching approach.
- Learning experiences will be based on this approach and will be devised around activities that require students to actively participate in both scripted and improvised situations in which they will use Spanish according to their language competencies.
- Attendance to any in-person classes is mandatory: Success in conversational and medical Spanish, both within and beyond the class, depends greatly on active participation during class time.
- Students may bring a hard-copy of a Spanish-English dictionary to class (when applicable). They may not use electronic devices (e.g., laptops, iPads, and cell phones) in class unless specified by the instructor.

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 students 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 that can be found at [PLFSOM AY 2023-24 PGOs](#). Also see Table 2 above for SCI assessment strategies for PGOs.

PSPA course goal include the following (institutional goals are indicated in parentheses). Upon graduation, students will be able to:

- Converse effectively with patients in both conversational and medical Spanish. (ICS-4.1)

Course components

A copy of the course calendar will be provided during the first day of classes of each semester. Conversational and Medical Spanish have these required components:

- 1) Attendance
- 2) Professionalism
- 3) Participation
- 4) Vocabulary activities
- 5) Oral and written practices
- 6) Listening activities
- 7) Performance Encounter simulations
- 8) Presentations

Textbooks and Other Learning Resources

Required

There is no required text for the Medical Spanish Courses. Assigned materials will be available through Elentra website, and may be researched during specific classes.

Recommended/References

Ortega P. Spanish and the Medical Interview: A Textbook for Clinically Relevant Medical Spanish. Second edition. Elsevier, 2015.

Grading / Evaluation

Graded Components

The PSPA components are graded. To pass the course students must pass the assessments/requirements. In order to pass PSPA, students need an overall of 70% or higher to pass the course during Immersion Spanish as well as the Fall and Spring semesters during the first and second year.

Language Competency and Testing

Competency levels are defined according to criteria set by ACTFL for the following: Novice 1 and 2, Intermediate 1 and 2, and Advanced 1 and 2. These same criteria will be used for placement

of students into their groups using the Immersion exam. This exam will be used as an exit exam during the second year. Grading will be based on meeting the course objectives and always according to students' competency level; i.e., beginning students will not be assessed according to the same criteria used to grade more advanced students. Because learning a language requires cumulative knowledge and practice, students may need to change to a different level as determined by the Spanish faculty.

Evaluation of students will be guided by rubrics devised for specific exercises and levels of competencies. These rubrics will be given closer to the examination. They will assess: comprehensibility, comprehension, language forms and phrases/vocabulary appropriate to the task and student level, as well as cultural understanding and completion of the assigned task. Based on the previous information, grading are set in the following categories.

For Immersion Conversational Spanish, all students will be assessed with this distribution:

- 20%: Professionalism and daily attendance
- 20%: Daily participation and oral comprehension class assignments (5)
- 20%: Participation/Assignments for off-campus activities (grocery & mural)
- 20%: Final Assessment (oral interview)
- 20%: Final group presentation (group project video)

For Medical Spanish, final grades will be assessed with this distribution:

- 20%: Professionalism and Attendance
- 20%: Participation: 10% for presentation, 10% for active participation in discussion
- 20%: Two listening and comprehension quizzes, 10% each
- 20%: Two five-minute Spanish oral conversation evaluation, 10% each
- 20%: Final participative event that will consist of a 5-7 minute doctor-patient oral interaction or interview

Students who do not meet expectations will need to successfully undergo remediation under the direction of the Course Director of the Spanish coursework to advance to the next semester. Students are ultimately encouraged to challenge and pass the bilingual assessment exam affiliated with Canopy during the third year of their medical journey.

To pass Spanish in the Fall semester of the first year, students must pass both conversational Spanish during the immersion as well as the medical Spanish during the remainder of the Fall (you can find the rubric for oral assessments in the appendix section). To pass Spanish in the following Spring semester, students must pass Canopy level 1. During the second year, canopy

level II and level III must be completed during the Fall and Spring semesters. For the semesters using Canopy, students need an overall of 70% or higher to pass and 100% of completion of the lessons scheduled during that semester.

NOTE: On the official student transcript, students will receive a grade of Pass or Fail for PSPA each semester. Students must pass all components of the assessments to pass PSPA; failure of one will result in failure, so failure of PSPA will result in repeating the year you not passing. Remediation for the components is possible before receiving a final grade of Fail for the PSPA course as outlined below.

Remediation

Students can successfully remediate these assessments/requirements, and successful remediation will convert the grade for that section from 'Deferred' (DE) to 'Pass' (PA). Students who do not pass the course after their remediation attempt will receive a grade of 'Fail' (FA) for PSPA on their transcript and will be referred to the Grading and Promotion Committee (GPC). Students can remediate as follows:

3. Spanish Language Assessment. Failure to complete the Canopy modules by the associated deadline (Level I by the end of semester II; Level II by the end of semester III; and Level III by the end of semester IV) will lead to a grade of 'deferred' (DE) for the associated SCI semester course and automatic placement of the student on 'Academic Warning' per the [GPAS policy](#). Module completion is required in order to receive a semester course grade of 'pass' (PA), and please note that students with grades of 'DE' are not eligible for promotion to the next year.
4. Attendance is required in Spanish during immersion and other selected Spanish language events as designated on Elentra. All unexcused absences and tardies will be recorded in e-portfolio, and students who have an unexcused absence can remediate by completing an assignment designated by the Spanish instructor. The instructor may, for example, assign additional reading material with an oral presentation in Spanish of that material to the class or the instructor. If the student does not complete the remediation(s) at a satisfactory level or if the student has a second unexcused absence during Immersion, the student will receive a grade of Fail for PSPA and will be referred to the GPC. Please note that unexcused absences in immersion count toward the total unexcused absences during the first academic year. A tardy beyond 10 minutes counts as an absence.

Attendance Policies

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 is required for all Spanish classes. For both excused and unexcused absences, students are responsible for completing assignments during their absence and can be assigned alternative activities to make up for their absence from classroom participation.

Students who have an unexcused absence will need to remediate as outlined in the section on remediation. Students who fail to adequately remediate or who have a third unexcused absence during an academic year or who have a second unexcused absence during conversational Spanish during Immersion will Fail PSPA and be referred to the GPC. An unexcused absence from a graded evaluation will result in a score of "0" for that activity. Excused absence requests must be made through the online PLFSOM absence/leave request management system [here](#).

Professionalism

Professionalism is a core competency in Medicine, one that is taken extremely seriously in PSPA. Students have failed PSPA due to professionalism problems. Students are expected to adhere to the Standards of Professional Conduct outlined in the PLFSOM student handbook. In particular, students should not attempt to copy, post, share, or use PSPA exam questions or prompts for oral assessment. Students should not submit false claims of attendance at their community clinic or alter documents. Depending on the nature of the problem and as determined by the course director, failure to act professionally may result in a grade of Fail for PSPA, regardless of the student's performance in other aspects of the course, and the student will be referred to the GPC. Violations of professionalism could result in expulsion from the PLFSOM. An event card might be delivered to the student to record any situation related to professionalism (see appendix 2).

Electronic Devices

Use of electronic devices (e.g., laptops and cell phones) or non-study materials are not permitted during sessions, unless specifically allowed or requested by the instructor for curricular processes. For some sessions, they will be required.

Professionalism, Plagiarism, and Copyright Policies

In Medical Spanish, as with all other courses at the Paul Foster School of Medicine, students will adhere to the Student Honor Code as well as the plagiarism and copyright policies described in the Student Handbook or be subject to disciplinary action.

Professional Attire

During the course, students need to dress in a modest and understated manner, commensurate with proper decorum for clinical work as required for Medical Skills. Please see their syllabus for any updates; SCI and PSPA will abide by the most recent version from Medical Skills. Briefly,

- Men are required to wear business casual attire. This includes slacks, a collared dress shirt, dress shoes, and optionally a necktie. Inappropriate attire includes polo shirts, running shoes, blue jeans, cargo pants, shorts, or T-shirts.
- Women are required to wear business casual attire. This includes slacks, dresses, or a skirt with blouse and dress shoes. Inappropriate attire includes low cut necklines, see-through blouses, bare midriffs, and short skirts or dresses that reveal the thigh above the knee.
- Closed-toe shoes are required in all clinical settings. Heels should be modest (3" or less). Sandals and shoes with open toes are prohibited in clinical areas by OSHA regulations because of the hazards posed by spills, needles, and sharp instruments.
- Grooming should be hygienic. Students must shower, use deodorant, and use daily oral hygiene. Long hair must be tied back so that it does not contact the standardized patient or interfere with the physical examination. Facial hair such as beards and sideburns must be neat, clean, and well-trimmed. Fingernails should be clean and length of nails should not be so long as to interfere with the proper performance of the physical examination.
- Students will wear their short white coats during Community Health Experiences unless specifically advised otherwise by their preceptor.

Academic Support Services

TTUHSC El Paso 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 Academic Success and Accessibility Office (ASAO), 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 the ASAO as soon as possible. Please note: faculty are not allowed to provide classroom accommodations to a student until appropriate verification from ASOA has been provided to

the school and disseminated to the appropriate faculty member(s). For additional information, please visit the ASAO website: <https://el Paso.ttuhs c.edu/student services/office-of-academic-and-disability-support-services/default.aspx>.

Appendix

APPENDIX 1:
Rubrics for Oral conversations and
Final Assessment

	Exceeds Expectations (5)	Meets Expectations (4-3)	Does Not Meet Expectations (2-1)	Comments and Suggestions:
Performance, delivery, and body language	Speech had a natural and smooth pace. Great level of detail and creativity. No errors of register. Stayed in character all the time	Occasional interruption or hesitation, but continuity is not broken. Few errors of register. Stayed in character most of the time	Constant interruptions, pauses, or hesitation. Several errors of register. Unable to stay in character	
Vocabulary	Uses a wide array of vocabulary in an accurate manner	Limited use of vocabulary in an accurate manner	Inaccurate use of vocabulary	
Language Structures	Language structures are used correctly with very few errors or none at all	Proper use of language structures with some errors	Several errors in language structures that hinder communication	

APPENDIX 2:
Event Card (also available in Elentra)

Student Name:
Faculty/Staff/Student Name:
Date:
Course (Circle One): MSPM MSK COL SCI OSCE Other
Description of Event:
Did this demonstrate exceptional professionalism? (Circle One) Yes No
Did this demonstrate a lapse in professionalism? (Circle One) Yes No
Suggestions for improvement?