



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 2024-2025

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Course Description

The Society, Community, and the Individual (SCI) course is comprised of several 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.

Note: The Spanish Language components appears as a separate Syllabus.

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 instruction.
- 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 learn 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 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 biostatistical, 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 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 and punctuality for these community health experiences is mandatory.** Students must remember that these community preceptors are volunteers and our 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, community visits and panels, and to submit documentation of participation at the end of each semester unless otherwise designated. A reflection may be requested for panels unless otherwise specified, and students must complete a kickoff reflection survey in SCI I and a final reflection survey on all CHE in SCI IV at the end of Year 2.

CHE programming extends from SCI I-IV with 14 total visits. Visit attendance documentation is critical to passing this component of the SCI curriculum. For the AY 24-25 some new tracking methods are being secured. Guidance will be given on documentation methods in class, in Elentra, and in emails. It is your responsibility to review instructions for each semester and adhere to methods provided.

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, in SCI immersion, students do a community assessment. This project 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 in Elentra where students document and submit service-learning hours and 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. Student Service Chairs for each Class play a role in reviewing and approving their peer's service hours against our 100 Hour Club Guidelines (See Appendix).

A **service-learning symposium** is held annually, usually in the spring. Abstract submission is 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 late February or early March. 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.

Service and Service-Learning reflections are encouraged for all PLFSOM students throughout their four years of Medical School.

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 team-based learning (TBL) activities will include individual- and team-readiness assurance tests (iRATs/tRATS) that will

carry percentage point values towards the final grade; these Readiness Assessments will be continued in SCI III and will also carry percentage point values (see Syllabus Grading notes).

All SCI sessions except Immersion-only content (not further presented in the SCI I in the Fall) will be tested in Final Exams at the end of each semester. Exams will feature multiple choice questions and may also include a small number of multi-point open-ended questions. Because spaced learning is important for long-term learning, exams may include questions beyond the current semester. The use of open-ended questions and any sessions to be tested beyond the current semester will be confirmed through an email no less than 3 weeks before the exam.

Social Justice Curriculum

The PLSOM 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 programs 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 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:

1. 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)
2. Identify community assets and needs and have the opportunity to engage in service-learning projects to build on those assets and work to address identified needs. (PBL-3.5, SBP-6.2)
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, PC-1.2)
4. Use epidemiological principles to assess and evaluate the distribution and determinants of disease. (KP-2.4)
5. Describe how culturally-based beliefs, attitudes, and values affect the health and illness behaviors of individuals, groups, and communities and identify strategies to effectively work with patients and co-workers who have different cultural backgrounds. (PC 1.6, ICS-4.1, ICS-4.2, ICS-4.3, PRO 5.1, IPC-7.4).
6. Describe the concepts of family, community, and 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)
7. Describe and recognize the impact of environmental and occupation factors on the health of individuals and populations. (PC-1.7, KP-2.4, PBL-3.1, PBL-3.5)
8. 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)
9. Participate in and/or analyze barriers and facilitators to the successful delivery and quality improvement of health care by community physicians and other health care providers. (PC-1.1, PBL 3.2, ICS-4.2)
10. 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)

Table 2: PLFSOM Programmatic Goals and Assessment Methods

| Patient Care | | | |
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| Educational Program Objectives | | Assessment Methods | 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"> • Narrative Assessment | <ul style="list-style-type: none"> • Immersion Activities and Projects <small>(RUBRIC & ASSESSMENT TOOLS)</small>; When you see “RUBRIC & ASSESSMENT TOOLS” go to list at end of table to see designated team-based projects and Individual |

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| | | <ul style="list-style-type: none"> • Self-Assessment • Exam – Institutionally Developed, Written/Computer-based | <p>Activities & Assignments rubric and assessment tools.</p> <ul style="list-style-type: none"> • Community Health Experience (CHE) (SCI I intake survey and SCI IV reflection as Complete/Incomplete [C/I]) • SCI I & IV Final Exams |
| PC-1.2 | Make informed decisions about diagnostic and therapeutic interventions based on patient information and preferences, up-to-date scientific evidence, and clinical judgment. | <ul style="list-style-type: none"> • Research or Project Assessment • Exam – Institutionally Developed Written/Computer-based | <ul style="list-style-type: none"> • Team- Based Problem Set SCI II, III and IV Rubric • TBL iRATs/tRATs (SCI II & III) • SCI II, III & IV Final Exams |
| 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"> • Narrative Assessment • Self-Assessment • Research or Project Assessment • Exam – Institutionally Developed, Written/Computer-based | <ul style="list-style-type: none"> • Immersion Activities and Projects <small>(RUBRIC & ASSESSMENT TOOLS)</small> (Team based projects, Patient centered interviewing skills, cross-cultural vignettes) • Community health experience (CHE) (SCI I intake survey and SCI IV reflection [C/I]) • Team- Based Problem Sets SCI I Rubric • SCI I & IV Final Exams |
| PC-1.7 | Provide preventative health care services and promote health in patients, families and communities. | <ul style="list-style-type: none"> • Narrative Assessment • Self-Assessment | <ul style="list-style-type: none"> • Immersion Activities and Projects <small>(RUBRIC & ASSESSMENT TOOLS)</small> (Team based projects, Patient centered interviewing skills, cross-cultural vignettes) • Community health experience (CHE) (SCI I intake |

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| | | <ul style="list-style-type: none"> • Research or Project Assessment • Exam – Institutionally Developed, Written/Computer-based | <ul style="list-style-type: none"> • survey and SCI IV reflection [C/I]) • Team- Based Problem Set SCI I Rubric • SCI I & IV Final Exams |
| Knowledge for Practice | | | |
| Educational Program Objectives | | Assessment Methods | Details |
| 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"> • Narrative Assessment • Self-Assessment • Research or Project Assessment • Exam – Institutionally Developed, Written/Computer-based | <ul style="list-style-type: none"> • Immersion Activities and Projects <small>(RUBRIC & ASSESSMENT TOOLS)</small> (Team based projects, Patient centered interviewing skills, cross-cultural vignettes) • Community health experience (CHE) (SCI I intake survey and SCI IV reflection [C/I]) • Team- Based Problem Set SCI II & III & IV Rubric • TBL iRATs/tRATs (SCI II & III) • SCI I & II Final Exams |
| 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"> • Narrative Assessment • Research or Project Assessment • Exam – Institutionally Developed, Written/Computer-based | <ul style="list-style-type: none"> • Immersion Activities and Projects <small>(RUBRIC & ASSESSMENT TOOLS)</small> (Team based projects, Patient centered interviewing skills) • Team- Based Problem Set SCI II & IV Rubric • TBL iRATs/tRATs (SCI II & III) • SCI II & III Final Exams |
| KP-2.5 | Apply principles of social-behavioral sciences to | <ul style="list-style-type: none"> • Narrative Assessment | <ul style="list-style-type: none"> • Immersion Activities and Projects <small>(RUBRIC & ASSESSMENT TOOLS)</small> |

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| | 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"> • Research or Project Assessment • Self-Assessment • Exam – Institutionally Developed, Written/Computer-based | <p>(Team based projects, Patient centered interviewing skills, cross-cultural vignettes)</p> <ul style="list-style-type: none"> • Team- Based Problem Set SCI I & IV Rubric • Community health experience (CHE) (SCI I intake survey and SCI IV reflection [C/I]) • SCI I & IV Final Exams |
| 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 • Research or Project Assessment • Exam – Institutionally Developed, Written/Computer-based | <ul style="list-style-type: none"> • Immersion Activities and Projects ^(RUBRIC & ASSESSMENT TOOLS) (Team based projects) • Team- Based Problem Set SCI I, II, III and IV Rubric • SCI I & IV Finals |
| Practice-Based Learning and Improvement | | | |
| Educational Program Objectives | | Assessment Methods | Details |
| 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"> • Research or Project Assessment • Exam – Institutionally Developed, Written/Computer-based | <ul style="list-style-type: none"> • Team- Based Problem Set SCI I, II, III and IV Rubric • SCI I Final Exam |
| PBL-3.2 | Demonstrate an understanding of quality improvement principles and their application to analyzing and solving problems in patient and/or population-based care. | <ul style="list-style-type: none"> • Exam – Institutionally Developed, Written/Computer-based | <ul style="list-style-type: none"> • SCI I Final Exam |

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| PBL-3.4 | Locate, appraise and assimilate evidence from scientific studies related to patients' health problems. | <ul style="list-style-type: none"> • Research or Project Assessment • Exam – Institutionally Developed, Written/Computer-based | <ul style="list-style-type: none"> • Team- Based Problem Set SCI I, II, III and IV Rubric • TBL iRATs/tRATs (SCI II & III) • SCI II & III Final Exams |
| PBL-3.5 | Obtain and utilize information about individual patients, populations or communities to improve care. | <ul style="list-style-type: none"> • Narrative Assessment • Self-Assessment • Research or Project Assessment • Exam – Institutionally Developed, Written/Computer-based | <ul style="list-style-type: none"> • Immersion Activities and Projects <small>(RUBRIC & ASSESSMENT TOOLS)</small> (Team based projects, Patient centered interviewing skills, cross-cultural vignettes) • Community health experience (CHE) (SCI I intake survey and SCI IV reflection [C/I]) • Team- Based Problem Set (SCI I and immersion) <small>(RUBRIC & ASSESSMENT TOOLS)</small> • SCI I & IV Final Exams |

Interpersonal and Communication Skills

| Educational Program Objectives | | Assessment Methods | Details |
|--------------------------------|--|--|---|
| ICS-4.1 | Communicate effectively with patients and families across a broad range of socioeconomic and cultural backgrounds. | <ul style="list-style-type: none"> • Narrative Assessment • Research or Project Assessment • Self-Assessment • Exam – Institutionally Developed, | <ul style="list-style-type: none"> • Immersion Activities and Projects <small>(RUBRIC & ASSESSMENT TOOLS)</small> (Team-based Problem Set, Patient-Centered Interviewing, cross-cultural vignettes) • Team- Based Problem Set (SCI I and immersion) <small>(RUBRIC & ASSESSMENT TOOLS)</small> • Community health experience (CHE) (SCI I intake survey and SCI IV reflection [C/I]) • SCI I and IV Final Exams |

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| | | Written/Computer-based | |
| ICS-4.2 | Communicate effectively with colleagues and other health care professionals. | <ul style="list-style-type: none"> Self-Assessment Exam – Institutionally Developed, Written/Computer-based Peer Assessment Participation | <ul style="list-style-type: none"> Community health experience (CHE) (SCI I intake survey and SCI IV reflection [C/I]) SCI I and IV Final Exams Peer Assessment in the middle and at the end SCI II&III (SCI peer assessment rubric). Community health experience, TeamSTEPS and related IPE activities |
| ICS-4.3 | Communicate with sensitivity, honesty, compassion and empathy. | <ul style="list-style-type: none"> Narrative Assessment Self-Assessment Peer Assessment | <ul style="list-style-type: none"> Immersion Activities and Projects <small>(RUBRIC & ASSESSMENT TOOLS)</small> (Community health experience; small-group discussion) Community health experience (CHE) (SCI I intake survey and SCI IV reflection [C/I]) Peer Assessment in the middle and at the end SCI II&III (SCI peer assessment rubric). |
| | | | <ul style="list-style-type: none"> |
| Professionalism | | | |
| Educational Program Objectives | | Assessment Methods | Details |
| PRO-5.1 | Demonstrate sensitivity, compassion and respect for all people. | <ul style="list-style-type: none"> Narrative Assessment Research or Project Assessment | <ul style="list-style-type: none"> Immersion Activities and Projects <small>(RUBRIC & ASSESSMENT TOOLS)</small> (Team based projects, Patient centered interviewing skills, cross-cultural vignettes) Team- Based Problem Set SCI I Rubric |

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| | | <ul style="list-style-type: none"> • Self-Assessment | <ul style="list-style-type: none"> • Community health experience (CHE) (SCI I intake survey and SCI IV reflection [C/I]) |
| Systems-Based Practice | | | |
| Educational Program Objectives | | Assessment Methods | Details |
| 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"> • Research or Project Assessment • Self-Assessment • Exam – Institutionally Developed, Written/Computer-based | <ul style="list-style-type: none"> • Team- Based Problem Set SCI I & IV Rubric • Community health experience (CHE) (SCI I intake survey and SCI IV reflection [C/I]) • SCI I & IV Final Exams |
| 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"> • Research or Project Assessment • Self-Assessment • Exam – Institutionally Developed, Written/Computer-based | <ul style="list-style-type: none"> • Team- Based Problem Set SCI I & IV Rubric • Community health experience (CHE) (SCI I intake survey and SCI IV reflection [C/I]) • SCI I & IV Final Exams |
| 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 | <ul style="list-style-type: none"> • SCI I & IV Final Exams |
| 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"> • Research or Project Assessment • Self-Assessment • Exam – Institutionally Developed, | <ul style="list-style-type: none"> • Team- Based Problem Set SCI I Rubric • Community health experience (CHE) (SCI I intake survey and SCI IV reflection [C/I]) • SCI I & IV Exam |

| | | Written/Computer-based | |
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| Interprofessional Collaboration | | | |
| Educational Program Objectives | | Assessment Methods | Details |
| IPC-7.1 | Describe the roles and responsibilities of health care professionals. | <ul style="list-style-type: none"> • Research or Project Assessment • Self-Assessment • Exam – Institutionally Developed, Written/Computer-based • Participation | <ul style="list-style-type: none"> • Team- Based Problem Set SCI I Rubric • Community health experience (CHE) (SCI I intake survey and SCI IV reflection [C/I]) • Final SCI I Exam • TeamSTEPPS and related IPE activities |
| 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"> • Research or Project Assessment • Self-Assessment • Exam – Institutionally Developed, Written/Computer-based • Participation | <ul style="list-style-type: none"> • Team- Based Problem Set SCI I Rubric • Community health experience (CHE) (SCI I intake survey and SCI IV reflection [C/I]) • SCI I & IV Final Exams • TeamSTEPPS and related IPE activities |
| 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"> • Self-Assessment • Participation | <ul style="list-style-type: none"> • Community health experience (CHE) (SCI I intake survey and SCI IV reflection [C/I]) • TeamSTEPPS and related IPE activities |
| IPC-7.4 | Recognize and respond appropriately to circumstances involving | <ul style="list-style-type: none"> • Participation | <ul style="list-style-type: none"> • TeamSTEPPS and related IPE activities |

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| | conflict with peers, other health care professionals and team members. | <ul style="list-style-type: none"> Exam – Institutionally Developed, Written/Computer-based | <ul style="list-style-type: none"> SCI I & IV Final Exams |
| Personal and Professional Development | | | |
| Educational Program Objectives | | Assessment Methods | Details |
| PPD-8.4 | Utilize appropriate resources and coping mechanisms when confronted with uncertainty and ambiguous situations. | <ul style="list-style-type: none"> Narrative Assessment Exam – Institutionally Developed, Written/Computer-based | <ul style="list-style-type: none"> Immersion Activities and Projects <small>(RUBRIC & ASSESSMENT TOOLS)</small> (Patient centered interviewing skills) SCI I & IV Finals |
| <p>I. IMMERSION ACTIVITIES AND PROJECTS' RUBRIC & ASSESSMENT TOOLS:</p> <p>“RUBRIC & ASSESSMENT TOOLS” designated team-based projects and Individual Activities & Assignments rubric and assessment tools:</p> <p>Team-based projects (Team)</p> <ol style="list-style-type: none"> a. Community Assessment (CA) Rubric b. CA Presentation Rubric. <p>Individual Activity/Assignments: (Ind.)</p> <ol style="list-style-type: none"> a. Personal Success Logic Model (Complete/Incomplete) b. Individual Reflection Worksheet (Complete/Incomplete) c. Patient-centered Interviewing Rubric d. Cross-cultural Vignette Dialogue Rubric | | | |

Grading System

Graded Components

There are three (3) components of SCI that are graded: (1) Coursework (2) the Community Health Experience and (3) Spanish (see Part 2 of the Syllabus for Spanish component details).

SCI coursework grades come from the following 2 elements:

1. Written/Oral Assessments: Course work may include a combination of in-class quizzes, final exams, individual written assignments/reflections, and team-based problem sets (see specific grading criteria for each SCI semester course below). Students must obtain a 65% or greater cumulative score to pass each semester. This is a strict cut-off. Remediation decisions are based on the initial cumulative score at the end of the semester. If the cumulative score is less than 65%, students will be required to remediate those elements with grades of less than 65%, which may include the team-based problem set(s), individual written assignments/reflection(s), and/or the final exam. There is no remediation opportunity for the in-class quizzes. Students with an excused absence for a session with a graded quiz will be permitted to take an individual make-up quiz prior to the end of the semester. Students with an unexcused absence for a session with a graded quiz will forfeit the session grade (approximately 1.6-2.5% weighted contribution per in-class quiz to the final course grade). Because the problem set is teamwork, the problem set alone must be passed at 65%, and if not, the whole team will have to remediate the problem set.

2. Completion of the Community Health Experiences (CHE). To pass this component, students must attend all the assigned activities. Students must submit (on-line and in hard copy) the signed documentation from their preceptor verifying their attendance and (2) complete any required on-line reflections, including an SCI I CHE intake survey (10%) and SCI IV CHE exit survey (20%). An unexcused absence for an assigned CHE activity, or a failure to submit the required reflection by the due date, may result in a failure of this component. 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 [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 components 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

Successful remediation will convert the semester course grade 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 the respective SCI semester course 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 any of these components 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. Papers do not replace student's the required make-up of any missed visits.
3. For students who attend clinic but do not submit the required pre and post survey and any requested 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. For a first late submission, students will do a 600 Word Remediation Reflection; for those with a second late reflection, students must remediate by satisfactorily writing a 2000-word (approximately 5-page) or longer paper on a topic selected by the Course Director. Papers are due at the end of the semester of the incident.

More Specific Grading Criteria

Written/Oral Assessments

Final Exams

Students will have final exams in each semester of the year. 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 notified at least 2 weeks in advance if any specific sessions since the prior exam will be featured on an exam. An unexcused absence from an exam will result in a score of “0” for that exam.

SCI has the same policy as SPM for exam tardiness: “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 (1 in immersion, 1 in SCI I fall, and 1 each in SCI II-IV). These are team-based. 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.

Formative Assessments

Students will have access to weekly formative assessments (with Multiple Choice Questions and in some cases open ended questions). These should ideally be taken after reading/listening to the on-line posted teaching materials and before coming to class. Feedback on formative assessments will be given to students, automatically from the exam system.

Grading Distribution and Required Semester Elements

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

SCI I – Immersion and Fall (MS1)

Problem Sets:

- Immersion Activities including Community Assessment 20%
- Patient Centered Care/Health Systems Assignment 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).

4 Community Health Experiences Pass/Fail

SCI II – Spring (MS1)

Problem Set: Research Methods 30%

In class Team-Based Learning Activity 20%

(8 sessions x 2.5%); for excused absence students can do a remake exam worth 2.5%

Final Exam 50%

4 Community Health Experiences Pass/Fail

SCI III – Fall (MS2)

Problem Set: Evidence Based Medicine/Biostatistics Literature Analysis 30%

In class Team-Based Learning Activity 20%

(12 sessions x 1.6%); for excused absence students can do a remark exam worth 1.6%

Final Exam 50%

4 Community Health Experiences Pass/Fail

SCI IV – Spring (MS2)

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

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.

Pre and Post Survey Reflection

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

Standard Community Clinic Times

- Students will receive a schedule of their community clinics early in the semester; an announcement will be made when all visits have been scheduled for the Semester through an email from SCI to the Class. If asked, students are responsible for signing up for clinical slots by the deadline provided.
- NOTE: Until that email is released, students should keep their dates and times available for SCI visits.
- MS1 Community Health Experience visits will primarily be on either Tuesday or Wednesday afternoon from 1:00 PM until ~5:00 PM
- MS2 Community Health Experiences will primarily be on Wednesday or Thursday morning from 8:00 AM until ~12:00 PM.
- NOTE: NEW as of 2024-2025: Some visits will be scheduled for both MS1s and MS2s on other days of the week when other pre-clerkship courses are not scheduled.
- 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.

Important Dates

Please watch Canvas/Elentra for potential changes.

1. Examinations

MS1 Exam Dates

| Exam Date | Exams | Sign Up Deadline, if any |
|------------------|-------------------------|-----------------------------------|
| December 16,2024 | SCI Final I | |
| January 6, 2025 | SCI Remediation Round 1 | December 27, 2024 @ 12p.m. |
| May 5, 2025 | SCI Final II | |
| June 5,2025 | SCI Remediation Round 2 | May 30, 2025 @ 12p.m. |
| June 6,2025 | SCI Remediation Round 3 | May 20, 2025 @ 12p.m. |
| June 12,2025 | SCI Remediation Round 4 | June 6, 2025 @ 12p.m. |
| June 13,2025 | SCI Remediation Round 5 | June 6, 2025 @ 12p.m. |
| June 19,2025 | SCI Remediation Round 6 | June 13, 2025 @ 12 p.m. |
| June 20,2025 | SCI Remediation Round 7 | June 13, 2025 @ 12 p.m. |

MSII Exam Dates

| Date | MS2 Assessment Name c/o 2027 | Student Sign-up Deadline |
|--|---------------------------------|--------------------------|
| 12/19/2024 | SCI III Final | |
| 1/6/2025 | SCI Remediation Round 1 | 12/28/2024 |
| 2/20/2025 | SCI IV Final | |
| 3/7/2025 | SCI Remediation Round 2 | 3/1/2025 |
| 3/14/2025 | SCI Remediation Round 3 | 3/8/2025 |
| 3/22/2025 | SCI Remediation Round 4 | 3/15/2025 |
| <i>Please plan accordingly for the remediation rounds*</i> | | |

2. Team –Based Problem Sets

Problem set due dates will be posted in Elentra or in the designated platform. Due dates will be set to ensure they are not due the week before an exam. Problem set due dates are below. Problem sets will be given out at least one month before the deadline, except in the case of Immersion.

Problem Sets

MS 1 Fall

- 1) Immersion Activities including Community Assessment-July 17 -26, 2024
- 2) Patient Centered Care/Health System Sciences Assignment -November 4, 2024

MS1 Spring

- 3) Epidemiology and Research Methods/Literature Analysis, due on April 28, 2025

MS2 Fall

- 4) Evidence Based Medicine & Biostatistics Literature Analysis, due on Dec 9, 2024

MS2 Spring

- 5) USMLE-style Question Writing Assignment, due on March 3, 2025

3. Community Health Experience Reflections

Primary Preceptor Visits:

A Survey with early reflections in preparation for the CHE visit is required during the SCI I first Fall semester. The due date will be at least four weeks after it is released.

A Post CHE Reflection Survey is required following all CHE visits completed in SCI IV. It will be released at least 4 weeks before it is due.

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 Assignment's DropBox feature in the associated semester's SCI Course on-line in Elentra. See Remediation Paper Assignments in the Appendices.

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

MS1: Visit dates and times are Tuesdays and Wednesdays from 1:00-5:00 pm; other days and times may be used with advance notice

Fall – Spring – 8 visits

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

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

(Note: CHE MS1 year visit documentation cards due at the end of Fall and Spring semester; watch for updates on documentation methods to be announced in class and in Elentra)

MS2: Visit dates and times are Wednesdays and Thursdays from 8:00-NOON; other days and times may be used with advance notice

Fall -scheduled in any order through Fall

- 1) Ophthalmology Visit
- 2) Obstetrics and Gynecology Panel
- 3) Primary Preceptor Visit
- 4) Working with Interpreters Training

Spring

- 5) Dental Visit
- 6) Spring Policy Class/Mental Health Panel

CHE Reflection Survey over Year 1-2 (20% of the grade) due 7 full days after semester exams

(Note: CHE MS2 year visit documentation card only due at the end of the Spring semester; watch for updates on documentation methods to be announced in class and in Elentra.)

Community Health Remediation Papers for Missed Visits

MS1 and MS2

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

Late/Missed CHE Assignment: 7 full days after semester exams

1st offense: 600 words

2nd offense: Late Problem Set and CHE Visits Remediation Paper (2000 words)

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

See the Remediation Paper Assignments attached in the Syllabus Appendix.

Course Policies and Procedures

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. 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 will Fail SCI and be referred to the GPC. An unexcused absence from a graded assessment will result in a score of "0" for that assessment. Absences can be excused only through the PLFSOM absence management system [here](#).

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.

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.

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://el Paso.ttuhs c.edu/student services/accessibility/default.aspx>

Recommended Texts

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-ttuhs c.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.

A collection of Biostatistics and Epidemiology books for PLFSOM students can be found here:

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

Recommended/Reference for Social Foundations of Medicine:

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

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

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Levine, R. Case Studies in Global Health.

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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>

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

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

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