



# CLERKSHIP INFORMATION SHEET

## Ambulatory Care- Geriatrics Clerkship

Academic Year: 2024-2025

Duration of Clerkship: 6 Weeks

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## CLERKSHIP OVERVIEW

### CLERKSHIP CONTACTS

Clerkship Co-Director	Harish Jasti, MD	<a href="mailto:harish.jasti@mountsinai.org">harish.jasti@mountsinai.org</a>
Clerkship Co-Director	Laura Belland, MD	<a href="mailto:laura.belland@mssm.edu">laura.belland@mssm.edu</a>
Clerkship Coordinator (Ambulatory)	Jennifer Reyes	<a href="mailto:jennifer.reyes@mssm.edu">jennifer.reyes@mssm.edu</a> (212) 241 2855 Annenberg 13-40
Clerkship Coordinator (Geriatrics)	Sharon Forbes	<a href="mailto:Sharon.forbes@mssm.edu">Sharon.forbes@mssm.edu</a> (212) 241 4266 Annenberg 10-02

### MISSION STATEMENT OF THE CLERKSHIP:

The Ambulatory Care-Geriatrics Clerkship provides opportunities for students to interact with and participate in the care of patients in the outpatient setting and across the life span and spectrum of illness - acute illness, chronic disease management, and end-of-life care.

### GOALS OF THE CLERKSHIP:

To gain first-hand experience interacting with patients in an outpatient setting, providing patient-centered care focusing on social determinants of health, and addressing common outpatient diagnoses in a team-based setting, with special attention to the needs of older adults and those with complex illness across sites of care.

## OMCLERKSHIP POLICY OVERVIEW

### CLERKSHIP OBJECTIVES:

At the end of this clerkship, a student will be able to:

Clerkship Objective	MD Program Objective
Obtain pertinent history for adult and geriatric patients presenting with acute and chronic medical problems.	<ul style="list-style-type: none"><li>History Taking (I.A.1)</li></ul>
Perform a pertinent physical exam for adult and geriatric patients presenting with acute and chronic medical problems, including a geriatric assessment.	<ul style="list-style-type: none"><li>Physical Examination (I.B.1)</li></ul>
Communicate gathered clinical data effectively through oral and written presentations	<ul style="list-style-type: none"><li>Communication skills 3 (I.F.3)</li><li>Communication skills 5 (I.F.5)</li></ul>

Formulate an accurate differential diagnosis and management plan for adult and geriatric patients presenting with acute and chronic medical problems	<ul style="list-style-type: none"> <li>• Clinical Reasoning 1 (I.D.1)</li> <li>• Medical Decision Making 1 (I.E.1)</li> <li>• Characteristics and Mechanisms of Disease 5 (II.B.5)</li> </ul>
Identify and discuss individual barriers to care, including the social determinants of health.	<ul style="list-style-type: none"> <li>• Communication Skills 1 (I.F.1)</li> <li>• Communication Skills 2 (I.F.2)</li> <li>• Social Determinants of Health 1 (II.D.1)</li> <li>• Anti-oppression (IV.F.1)</li> </ul>
Function collaboratively as part of a health care team	<ul style="list-style-type: none"> <li>• Teamwork 1 (III.C.1)</li> <li>• Communication Skills 3 (I.F.3)</li> </ul>
Interact with patients and caregivers in a professional and respectful manner	<ul style="list-style-type: none"> <li>• Communication Skills 2 (I.F.2)</li> <li>• Honesty and Integrity 1 (IV.C.1)</li> <li>• Honesty and Integrity 2 (IV.C.2)</li> <li>• Respect 1 (IV.F.1)</li> </ul>

## WORK SCHEDULE/DUTY HOURS

### GENERAL CLINICAL SCHEDULE (SAMPLE):

#### Monday-Thursday:

Ambulatory clinic: Variable, depending on site; typically 8 AM – 5.30 PM

Geriatrics Outpatient (MSH/MSM/MSD): 8:30 AM – 4:30 PM

Geriatrics Inpatient and Palliative Care (MSH): 8 AM – 4 PM

Friday: Didactics and case conferences from 9 AM – 5 PM.

**No weekends** (except Direct Observation encounters at the Morchand Center).

### ORIENTATION DAY REPORTING:

Orientation takes place on the first day of the clerkship from 8:00 AM – 11:30 AM. Location will be communicated to you at least a week in advance.

## CLERKSHIP SCHEDULE AND HOURS:

Ambulatory Care- Geriatrics			
Assessments:			
Shelf Exam (AM)- 6 <sup>th</sup> Friday of the Clerkship			
Direct Observation (PM): 3 <sup>rd</sup> Saturday of the Clerkship ( <b>Except 1BC: Labor Day &amp; 2BC: Thanksgiving*</b> )			
Block	FlexTime (5 <sup>th</sup> Friday PM-ends at 5PM)	Direct Observations (PM):	Shelf Exams (AM):
1AB	Friday, August 2, 2024	Saturday, July 20, 2024	Friday, August 9, 2024
1BC	Friday, September 13, 2024	<b>Saturday, September 7, 2024*</b>	Friday, September 20, 2024
2AB	Friday, November 1, 2024	Saturday, October 19, 2024	Friday, November 8, 2024
2BC	Friday, December 13, 2024	<b>Saturday, December 7, 2024*</b>	Friday, December 20, 2024
3AB	Friday, February 7, 2025	Saturday, January 25, 2025	Friday, February 14, 2025
3BC	Friday, March 21, 2025	Saturday, March 8, 2025	Friday, March 28, 2025
4AB	Friday, May 9, 2025	Saturday, April 26, 2025	Friday, May 16, 2025
4BC	Friday, June 20, 2025	Saturday, June 7, 2025	Friday, June 27, 2025

## WORK HOUR POLICY

Please view the ISMMS Clinical Student Work Hour Policy, which outlines the instructional time limitations for third- and fourth-year students, [here](#).

<https://icahn.mssm.edu/education/students/handbook/student-work-hours>

## METHODS OF INSTRUCTION:

- Didactic Sessions, every Friday morning and afternoon, consisting of the following:
  - Student-led Case Conference Sessions: 2-3 groups of 6-9 students each facilitated by Social Work and Physician Faculty Preceptors
- Interactive Didactics: majority case based, including in-person and virtual, recordings, and Aquifer Geriatrics and CAPC online modules

## METHODS OF ASSESSMENT:

### DETERMINATION OF GRADING:

Grading decisions are ultimately at the discretion of the Grading Committee for each clerkship. The clerkship Grading Committee will review student performance and may modify grades assigned by the Clerkship Director if there is evidence of error, inaccurate data, bias and/or outliers. The procedure for assigning grades (Honors, Pass, Fail) is outlined in the ISMMS Grading – Years 3 and 4 policy, [here](#). (icahn.mssm.edu > Education > Medical Student Handbook > Assessment and Grading).

Below is a list of clerkship assessments mapped to each clerkship objective. Students must demonstrate competency in all objectives by passing each of the associated assessments. Some objectives are pass/fail, and some objectives are tiered honors/pass/fail. For tiered objectives, students may demonstrate honors-level

performance by meeting the criteria listed in the associated assessments. **To achieve a grade of Honors for the clerkship, students must demonstrate honors-level performance in 4 of 7** of the tiered objectives.

Students who exhibit a concerning pattern of behavior as outlined in the Behavioral Grading Criteria may have their clerkship grade impacted, among other actions. Please see below for more details.

#### CRITERION-REFERENCED ASSESSMENT/OBJECTIVE ASSESSMENT MAP

Objective	Assessment	Criteria Pass	Criteria Honors
Obtain pertinent history for adult and geriatric patients presenting with acute and chronic medical problems	<ul style="list-style-type: none"> <li>DO: History</li> <li>CE: History-taking skills</li> </ul>	DO $\geq$ 70% on 1 <sup>st</sup> or 2 <sup>nd</sup> attempt <b>AND</b> CE: On average, meets expectations (column 3)	DO $\geq$ 80% on 1 <sup>st</sup> attempt <b>AND</b> CE: On average, above expectations ( $\geq$ column 4)
Perform a pertinent physical exam for adult and geriatric patients presenting with acute and chronic medical problems, including a geriatric assessment	<ul style="list-style-type: none"> <li>DO: Physical exam</li> <li>CE: Physical examination</li> <li>Geri skills checklist completion</li> </ul>	DO $\geq$ 70% on 1 <sup>st</sup> or 2 <sup>nd</sup> attempt <b>AND</b> CE: On average, meets expectations (column 3) <b>AND</b> Geri Checklist uploaded	DO $\geq$ 80% on 1 <sup>st</sup> attempt <b>AND</b> CE: On average, above expectations ( $\geq$ column 4) <b>AND</b> Geri Checklist uploaded by due date
Communicate gathered clinical data effectively through oral and written presentations	<ul style="list-style-type: none"> <li>CE: Oral presentation</li> <li>CE: Written communication</li> </ul>	CE: On average, meets expectations (column 3)	CE: On average, above expectations ( $\geq$ column 4)
Formulate an accurate differential diagnosis and management plan for adult and geriatric patients presenting with acute and chronic medical problems	<ul style="list-style-type: none"> <li>CE: Knowledge base</li> <li>CE: Differential diagnosis/Assessment</li> <li>NBME subject exam</li> </ul>	CE: On average, meets expectations (column 3) <b>AND</b> NBME shelf $\geq$ 5 <sup>th</sup> %ile on 1 <sup>st</sup> or 2 <sup>nd</sup> attempt	CE: On average, above expectations ( $\geq$ column 4) <b>AND</b> NBME exam $\geq$ 15 <sup>th</sup> %ile on 1 <sup>st</sup> attempt*
Identify and discuss individual barriers to care, including the social determinants of health	<ul style="list-style-type: none"> <li>Case conference presentation</li> </ul>	Score $\geq$ 6 out of 10	Score $\geq$ 8 out of 10
Function collaboratively as part of an interprofessional health care team	<ul style="list-style-type: none"> <li>CE: Engagement</li> </ul>	CE: On average, meets expectations (column 3)	CE: On average, above expectations ( $\geq$ column 4)
Interact with patients and caregivers in a professional and respectful manner	<ul style="list-style-type: none"> <li>CE: CIS/Pt interaction</li> </ul>	CE: On average, meets expectations (column 3)	CE: On average, above expectations ( $\geq$ column 4)
N/A	Required Clinical Experiences	Log every RCE into One45 prior to end of clerkship	

**\*To meet this criterion, students may NOT have delayed sitting for the NBME subject exam due to lack of academic readiness. A student MAY delay the exam due to an excused absence (e.g. for illness) and still meet this criterion.**

**Note:** The clerkship grading committee will review any student who does not achieve Honors and at its discretion may modify scores upward if there is evidence of inaccurate data, bias and/or outliers

CE = Clinical Evaluation

DO = Direct Observation

RCE = Required Clinical Experience

CIS = Communication and Interpersonal Skills

NBME = National Board of Medical Examiners

## BEHAVIORAL GRADING CRITERIA

Any and all behaviors listed in the table below are concerning and will result in referral to the Office of Student Affairs. If the behavior is egregious and/or part of a concerning pattern of behavior, it may also result in referral to the Promotions Committee for consideration of disciplinary action and/or documentation in the Academic Progress section of the Medical Student Performance Evaluation (MSPE). Additionally, the list below is not exhaustive; there are behaviors not described below that may result in escalation and/or disciplinary action (see: [Student Code of Conduct](#)).

The following table is used to determine the impact of the listed behaviors **on the student's clerkship grade**. The Clerkship Director has the discretion to determine if the student has exhibited any of the listed behaviors and will incorporate these observations into the calculation of the student's final grade.

**1 mark** – Eligible for Honors. Referral/escalation as above

**2-3 marks** – Not eligible for Honors. Eligible for grade of Pass or Fail. Referral/escalation as above

**4 or more marks** – Fail grade. Referral/escalation as above

<i>Behavior</i>	<i>Marks (per occurrence)</i>	<i>Assessment Method</i>	<a href="#"><i>Relevant Policy</i></a>
<b>Unexcused Absences (including arriving late or leaving early) from...</b>			
Clinical experiences (e.g. patient encounters, team rounds, preceptor rounds)	1	CT*, CE**	Excused Absence Policy
Clerkship assessments (e.g. Direct Observations, NBME Subject Exam)	1	CT	
Classroom-based learning activities (e.g. didactics, sim sessions)	1	CT	
Clerkship meetings (e.g. orientation, mid-clerkship meetings)	1	CT	
<b>Unexcused Late Submissions^</b>			
Written case presentations (“write-ups”)	1	CT	Clerkship Specific Requirements
Skill or assessment card	1	CT	
Required online modules	1	CT	
Quizzes	1	CT	
<b>Other</b>			
Violates academic integrity policy	Fail Grade	CT	<a href="#">Academic Integrity Policy</a>

\*CT – Clerkship Team. Includes behaviors directly observed by clerkship team (e.g. Clerkship Director, Assistant/Associate Director, Site Director, Clerkship Coordinator, Site Coordinator) and/or communicated to clerkship team by another individual

\*\*CE – Clinical Evaluation form (via One45)

^In order to request an excused late submission of a clerkship assessment or assigned task, student must submit the request by email to the Clerkship Director and/or Associate Clerkship Director **prior to the deadline** for the assessment or assignment. The decision to grant (or deny) the request is at the sole discretion of the Clerkship Director.

#### FAIL & REMEDIATION REQUIREMENTS:

Students who fail a clerkship or clerkship assessment should refer to our ISMMS remediation policy, [here](https://icahn.mssm.edu/education/students/handbook/grading).

<https://icahn.mssm.edu/education/students/handbook/grading>

#### SHELF EXAM PERCENTILE TO CLERKSHIP SCORE CONVERSION

- There is one cutoff for the entire academic year
- SOURCE: NBME Data from 2022-23 AY Norms

Clerkship	Pass Cutoff (5 <sup>th</sup> Percentile)	15 <sup>th</sup> Percentile
Ambulatory Care	58	64

#### REQUIRED CLINICAL EXPERIENCES (RCE):

*RCE ensure that students have adequate exposure to a variety of specialty-relevant presenting complaints commonly seen in the clerkship's clinical setting. RCE are logged online in One45. This process tracks that students are meeting the educational goals of the clerkship.*

Students MUST have logged all RCEs in One45 by the day of the clerkship's shelf exam in order to pass the clerkship.

Students will perform all components listed next to each RCE:

Ambulatory Care- Geriatrics Clerkship	
Back Pain	<ul style="list-style-type: none"><li>• obtain patient history</li><li>• conduct a physical exam</li><li>• present the case including a discussion of differential diagnosis, assessment, and plan</li></ul>
Diabetes Mellitus	<ul style="list-style-type: none"><li>• obtain patient history</li><li>• interpret pertinent patient data</li><li>• present the case including a discussion of differential diagnosis, assessment, and plan</li></ul>
Dyslipidemia	<ul style="list-style-type: none"><li>• obtain patient history</li><li>• interpret pertinent patient data</li></ul>



<b>Hypertension</b>	<ul style="list-style-type: none"> <li>• obtain patient history</li> <li>• interpret pertinent patient data</li> <li>• present the case including a discussion of differential diagnosis, assessment, and plan</li> </ul>
<b>Joint Pain</b>	<ul style="list-style-type: none"> <li>• obtain patient history</li> <li>• conduct a physical exam</li> <li>• present the case including a discussion of differential diagnosis, assessment, and plan</li> </ul>
<b>Urinary Incontinence</b>	<ul style="list-style-type: none"> <li>• obtain patient history</li> <li>• present the case including a discussion of differential diagnosis, assessment, and plan</li> </ul>
<b>Cognitive Impairment / Dementia</b>	<ul style="list-style-type: none"> <li>• perform a cognitive assessment on an adult patient with cognitive concerns using MMSE/MOCA/Mini-Cog</li> <li>• present the case including a discussion of differential diagnosis, assessment, and plan</li> </ul>
<b>Depression / Mood disorder</b>	<ul style="list-style-type: none"> <li>• obtain patient history</li> <li>• perform a depression screen on an adult patient using PHQ-2 and/or PHQ-9</li> </ul>
<b>Functional Impairment / Falls</b>	<ul style="list-style-type: none"> <li>• obtain patient history</li> <li>• perform appropriate functional assessments (ADL/IADL/Chair Rise/Timed Up and Go/Balance Test) on an adult patient at risk of falling</li> </ul>
<b>Polypharmacy / adverse drug event</b>	<ul style="list-style-type: none"> <li>• perform medication reconciliation on an adult patient with polypharmacy or at risk for an adverse drug event.</li> </ul>
<b>Discuss atherosclerotic cardiovascular disease (ASCVD) risk</b>	<ul style="list-style-type: none"> <li>• discuss ASCVD risk with an adult patient.</li> </ul>
<b>Discuss age-appropriate cancer screening tests</b>	<ul style="list-style-type: none"> <li>• discuss age-appropriate cancer screening tests in an adult patient.</li> </ul>
<b>Discuss age-appropriate immunizations</b>	<ul style="list-style-type: none"> <li>• discuss age-appropriate immunizations in an adult patient.</li> </ul>
<b>Observe a family meeting on goals of care</b>	<ul style="list-style-type: none"> <li>• attend a family meeting focused on goals of care discussion in a patient with serious illness or at the end of life and subsequently discuss with the provider</li> </ul>

Start Date	End Date	Pod	Grades Due (6 wks from end date)
<b>7/1/2024</b>	8/9/2024	1AB	<b>9/20/2024</b>
<b>8/12/2024</b>	9/20/2024	1BC	<b>11/1/2024</b>
<b>9/30/2024</b>	11/8/2024	2AB	<b>12/20/2024</b>
<b>11/11/2024</b>	12/20/2024	2BC	<b>1/31/2025</b>
<b>1/6/2025</b>	2/14/2025	3AB	<b>3/28/2025</b>
<b>2/17/2025</b>	3/28/2025	3BC	<b>5/9/2025</b>
<b>4/7/2025</b>	5/16/2025	4AB	<b>6/27/2025</b>
<b>5/19/2025</b>	6/27/2025	4BC	<b>8/8/2025</b>

#### RECOMMENDED CLERKSHIP READINGS/TEXTS:

- **Step Up to Medicine** - [https://icahn-mssm.primo.exlibrisgroup.com/permalink/01MSSM\\_INST/1outckb/alma991001850618406206](https://icahn-mssm.primo.exlibrisgroup.com/permalink/01MSSM_INST/1outckb/alma991001850618406206)
- **Case Files Family Medicine** - <https://casefiles.mhmedical.com/CaseTOC.aspx?gbosContainerID=250&categoryID=40973>

## STUDENT RESOURCES AND POLICIES

### ATTENDANCE & ABSENCE REQUEST POLICY



Absence Requests should be submitted *at least* 4 weeks in advance of the first day of the clerkship (this does not pertain to illness or death in the family). It is the responsibility of the Clerkship Director to approve excused absences. More information about Attendance Standards can be found in the Student Handbook online, or by clicking [this link](#).

**To request clerkship absences, students must complete the *Year 3 & 4 Absence Request Form*, by scanning the QR code.**

### CONFLICT OF INTEREST (COI) POLICY

The COI policy ensures that a provider of any health services to a medical student has no current or future involvement in the academic assessment of, or in decisions about the promotion of that student. This applies to all faculty, residents, other clinical staff, and current or prior clinical or familial/intimate relationship with that faculty. Students and educators may submit the names of any individual with whom they have a conflict of interest to the Clerkship Director. The Clerkship Director will reassign any student. The reason given for the reassignment is duality of interest; the nature of the specific duality of interest situation need not be identified.

While the primary responsibility for reporting COI sits with each educator, students can also report potential conflicts of interest. **Students should report a possible COI to the Clerkship's Director and Coordinator.** Reports should be made *at least 4 weeks in advance* of the first day of the clerkship.

### SPECIAL ACCOMMODATIONS

The Icahn School of Medicine is committed to providing equal access to learning opportunities to students with documented disabilities. To ensure access to this class, and your program, please contact the Disability Officer, Christine Low, to engage in a confidential conversation about the process for requesting accommodations.

More information can be found online at <http://icahn.mssm.edu/education/students/disability> or by contacting the Disability Officer: [christine.low@mountsinai.org](mailto:christine.low@mountsinai.org)

### GRADING POLICY

Please view the ISMMS grading policy for Years 3 and 4 in our student handbook [here](#).

<https://icahn.mssm.edu/education/students/handbook/grading>

### WORK HOURS POLICY

Please view the ISMMS Clinical Student Work Hour Policy, which outlines the instructional time limitations for third- and fourth-year students, [here](#).

<https://icahn.mssm.edu/education/students/handbook/student-work-hours>

## SUPERVISION POLICY

Please view the ISMMS Supervision Policy for Years 3 and 4 [here](#).

<https://icahn.mssm.edu/education/students/handbook/year-3-4-policies-procedures>

## REMEDIATION POLICY

Please view the ISMMS the Year 3 remediation policy [here](#).

<https://icahn.mssm.edu/education/students/handbook/grading>

## ACADEMIC INTEGRITY POLICY

Please review the following Student Code of Conduct and Academic Integrity policies.

<https://icahn.mssm.edu/education/students/handbook/student-faculty-conduct>

## REQUIRED CLINICAL EXPERIENCES

Please view the ISMMS RCEs policy in the Student Handbook under Year 3 and 4 Policies and Procedures, [here](#).

<https://icahn.mssm.edu/education/students/handbook/grading>

## CONFIDENTIAL COMPLIANCE HOTLINE

1-800-853-9212 To report legal, ethical, quality, behavioral or practical concerns.

## TITLE IX

[TitleIX@mssm.edu](mailto:TitleIX@mssm.edu) Cell: 646-245-5934

## OMBUDS OFFICE

[ombudsoffice@mssm.edu](mailto:ombudsoffice@mssm.edu)

A confidential, informal, neutral, and independent resource for students to discuss any issue of concern.

## CONTACT INFORMATION:

### CLINICAL CURRICULUM TEAM

[clerkships@mssm.edu](mailto:clerkships@mssm.edu) ; 212-241-6691

### STUDENT AFFAIRS:

[Student.affairs@mssm.edu](mailto:Student.affairs@mssm.edu) ; 212-241-4426