

CLERKSHIP INFORMATION SHEET

Inpatient Medicine Clerkship Academic Year: 2024-2025 Duration of Clerkship: 6 Weeks

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CLERKSHIP OVERVIEW

CLERKSHIP CONTACTS

Clerkship Director **Eve Merrill, MD** <u>eve.merrill@mountsinai.org</u>

Associate Clerkship

Director

Rex Hermansen, MD Rex.Hermansen@mountsinai.org

Clerkship Coordinator Navjeet Kaur Navjeet.kaur@mssm.edu

Maritza Brown, MD

Elmhurst Hospital Center

(EHC) Site Direct

Mount Sinai West (MSW) Anand Shukla, MI

Site Director

Anand Shukla, MD Anand.shukla@mountsinai.org

Mount Sinai Morningside

(MSM) Site Director

MSW/MSM Site

Coordinator

Argelis Rivera, MD argelis.rivera@mountsinai.org

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Angus Cheung Angus.Cheung@mountsinai.org

MISSION STATEMENT OF THE CLERKSHIP

The Inpatient Medicine clerkship provides opportunities for students to interact with and participate in the care of patients with complex, multisystem illnesses in the inpatient setting and across the spectrum of illness progression from stable chronic disease to acute illness, to end-of-life care. Our mission is to provide a safe, comfortable, exciting, equitable, and just learning environment for our students that both challenges and supports them.

GOALS OF THE CLERKSHIP

By the end of the clerkship, students will have the knowledge, skills and clinical reasoning ability to be an acting intern and be stewards of quality, high value care and patient safety for their patients.

CLERKSHIP POLICY OVERVIEW

CLERKSHIP OBJECTIVES

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

Clerkship Objective	MD Program Objective
Demonstrate knowledge in Internal Medicine in the inpatient setting.	Medical Decision Making 3 (I.E.3)
Demonstrate proficiency in history taking in the Medicine inpatient setting.	History Taking 1 (I.A.1)Communication skills 1 (I.F.1)
Demonstrate proficiency in physical examination in the Medicine inpatient setting.	Physical Examination 1 (I.B.1)
Demonstrate the minimum proficiency as a reporter on the RIME schema (Reporter-Interpreter-Manager-Educator).	 Clinical Reasoning 1 (I.D.1) Medical Decision Making 1 (I.E.1)
Formulate an accurate assessment and management plan for patients in the Medicine inpatient setting.	 Medical decision making 1 (I.E.1) Medical decision making 2 (I.E.2) Healing and Therapeutics 4 (II.C.4)
Integrate and interpret data from history, physical exam and tests to generate a problem list and differential diagnosis.	Clinical Reasoning 1 (I.D.1)Medical Decision Making 1 (I.E.1)
Interact with peers, supervisors and other members of the health care team in a professional and respectful manner.	 Communication Skills 3 (I.F.3) Communication Skills 5 (I.F.5) Teamwork 1 (III.C.1) Honesty and integrity 1 (IV.C.1)
Interact with patients, families and/or caregivers in a professional and respectful manner.	 Communication Skills 2 (I.F.2) Communication Skills 4 (I.F.4) Honesty and integrity 1 (IV.C.1) Honesty and integrity 2 (IV.C.2) Respect 1 (IV.E.1)
Take initiative and demonstrate reliability in completing patient care tasks and communicating clinical data across all clerkship settings.	Teamwork I (III.C.1)Communication Skills 5 (I.F.5)

WORK SCHEDULE/DUTY HOURS

CLERKSHIP WORK HOUR CHARACTERISTICS

Students should be prepared to work 1 weekend day during their 3 weeks at their away site. Students will participate in a 4-day nightfloat experience while at Mount Sinai Hospital. Students will take extended call (stay until 8pm instead of departing at 5pm) approximately once per week during the 6-week clerkship.

GENERAL CLINICAL SCHEDULE AT MSH (SAMPLE)

6:30-7:00 am - Hand-off

7:00-7:30 am – Pre-rounding (Interns pre-round on old patients, Residents pre-round on new patients)

7:30-8:00 am – Resident led rounds on old patients

8:00-10:00 am – Attending Work Rounds

12:00-1:00 pm – Noon Conference

5pm - Depart (standard day)

8pm - Depart (extended day AKA "long call")

GENERAL NIGHTFLOAT SCHEDULE (SAMPLE)

10:00 pm - Arrive to hospital and meet "buddy" intern

10:00 pm-6:30 am – Perform H&Ps on new patients, assist "buddy" intern with cross-coverage of old patients

8:00-9:00am – Present new admissions to the day team including the attending

ORIENTATION DAY REPORTING

On the first day of your rotation, all students will have remote (Zoom) orientation with Drs. Merrill and Hermansen starting at 8 am. Site-specific orientation will be determined by site directors and communicated to students. Students can expect to meet their teams and begin caring for hospitalized patients. For students starting on days, the first day will end at 5pm. For students starting on nights, the first shift will begin at 10pm on day 1 and end at 9am the following morning.

- Mount Sinai Hospital: 1pm on the first day, in person at MSH.
- **Mount Sinai West:** After the main orientation, proceed to MS West. Site director Dr. Anand Shukla will send specific instructions on where and when to meet for orientation on day 1.
- Mount Sinai Morningside: After the main orientation, proceed to the MS Morningside campus Clark Building 440 W 114th street. Take the Clark elevators to the 5th floor (can ask security to direct you to the elevators for Pavilion 3). Pavilion 3 is a long, tan colored hallway connected to the end of Clark 5 (just walk straight through) and the department of medicine is the last door on the right. There you will meet one of the Chief Residents. They will take you to your respective teams and you will meet with Dr. Rivera, for in-person orientation in the afternoon.
- Elmhurst: After the main orientation, proceed to the Department of Medicine office, C6-10 Monday. When you arrive at the Department of Medicine ask Millie to have Dr. Maritza Brown paged. Please have a seat and wait, Dr. Brown will meet you. The office number is (718) 334-3444.

CLERKSHIP SCHEDULE

Inpatient Medicine

Assessments:

Shelf Exam (AM)- 6th Friday of the Clerkship

Direct Observation (AM): 3rd Saturday of the Clerkship (Except 1BC: Labor Day & Except 2BC:

Thanksgiving)

Block	FlexTime (2 nd Friday PM off, 5 th Friday PM off)	Direct Observations (AM):	Shelf Exams (AM):
1AB	Friday, July 12, 2024 Friday, August 2, 2024	Saturday, July 20, 2024	Friday, August 9, 2024
1BC	Friday, August 23, 2024 Friday, September 13, 2024	Saturday, September 7, 2024	Friday, September 20, 2024
2AB	Friday, October 11, 2024 Friday, November 1, 2024	Saturday, October 19, 2024	Friday, November 8, 2024
2BC	Friday, November 22, 2024 Friday, December 13, 2024	Saturday, December 7, 2024*	Friday, December 20, 2024
ЗАВ	Friday, January 17, 2025 Friday, February 7, 2025	Saturday, January 25, 2025	Friday, February 14, 2025
3BC	Friday, February 28, 2025 Friday, March 21, 2025	Saturday, March 8, 2025	Friday, March 28, 2025
4AB	Friday, April 18, 2025 Friday, May 9, 2025	Saturday, April 26, 2025	Friday, May 16, 2025
4BC	Friday, May 30, 2025 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, <u>here.</u>

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

METHODS OF INSTRUCTION

Clinical instruction will include five weeks of experiential clinical work while embedded within a general medicine ward team. Additionally, there will be one week (4 shifts of 11 hours each) of "nightfloat" where the student will see new admissions to the hospital and assess acute conditions in previously admitted patients.

Students will have 8 hours of case or problem-based didactics throughout the six-week clerkship. Didactics are split into two 3-hour sessions on the 2^{nd} and 5^{th} Friday mornings of the clerkship. After didactics, students will have the remainder of the day protected for Flex Time.

Additionally, students will meet with an attending preceptor one to two times weekly. Preceptor sessions are times for students to talk about their cases apart from the pressures of the floors, at a level appropriate to their experiences, and with other learners at the same level. Preceptor sessions will occur throughout the clerkship, except during the one week "nightfloat" rotation.

Students will have a different preceptor at each training site of the clerkship (i.e., one preceptor for Inpatient Medicine at Mount Sinai, one preceptor for Inpatient Medicine at another clinical training site).

Lastly, students will participate in a simulation session one afternoon half-day while at MSH which will offer the unique opportunity to work through two cases of decompensating hospitalized patients. They will get the opportunity to work on differential building, medical decision making, and clinical management. They will also receive real time feedback from faculty preceptors to guide them through the case.

METHODS OF ASSESSMENT

DETERMINIATION 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. here.

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 5 out of 8** 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

Inpatient Medicine Clerkship Objectives	Assessment(s)	Criteria for Pass	Criteria for Honors
Demonstrate knowledge in Internal Medicine in the inpatient setting	CE: Knowledge baseNBME subject exam	CE: On average, meets expectations (column 3) AND NBME SHELF EXAM ≥5% 1 st or 2 nd attempt	CE: On average, above expectations (>= column 4) AND NBME >= 15 th percentile 1 st attempt*
Formulate an accurate assessment and management plan for patients in the Medicine inpatient setting	 CE: Plans & Follow up DO: History (Post DO Assessment and Plan) 	CE: On average, meets expectations (column 3) AND >70% on DO: History (Assessment and Plan) 1st or 2nd attempt	CE: On average, above expectations (>= column 4) AND >80% on DO: History (Assessment and Plan) 1st attempt (and submitted on time)

Demonstrate proficiency in history taking in the Medicine inpatient setting Demonstrate proficiency in physical examination in the Medicine inpatient setting	 CE: History taking skills DO: History CE: Physical exam skills DO: Physical Exam 	CE: On average, meets expectations (column 3) AND >= 70% on DO: History 1 st or 2 nd attempt CE: On average, meets expectations (column 3) AND >= 70% on DO: PE 1 st or 2 nd	CE: On average, above expectations (>= column 4) AND >= 80% on DO: History 1 st attempt CE: On average, above expectations (>= column 4) AND >= 80% on DO: PE 1 st attempt
Demonstrate the minimum proficiency as a reporter on the RIME schema (Reporter-Interpreter-Manager-Educator)	• CE: RIME scale	CE: Meets "Reporter" on RIME scale	
Communicate gathered clinical data effectively through oral and written presentations	 CE: Oral Presentation CE: Written Communication Case presentation Written 	CE: On average, meets expectations (column 3) AND Case presentation (written): >=70%	CE: On average, above expectations (>= column 4) AND Case presentation (written): >=80% and submitted on time
Integrate and interpret data from history, physical exam, and tests to generate a problem list and differential diagnosis	CE: Differential Dx/Assessment	CE: On average, meets expectations (column 3)	CE: On average, above expectations (>= column 4)
Interact with patients, families and/or caregivers in a professional and respectful manner	• CE: CIS – patient	CE: On average, meets expectations (column 3)	CE: On average, above expectations (>= column 4)
Interact with peers, supervisors, and other members of the healthcare team in a professional and respectful manner	• CE: CIS - team	CE: On average, meets expectations (column 3)	

Take initiative and demonstrate reliability in completing patient care tasks and communicating clinical data	CE: Dependability/ Engagement	CE: On average, meets expectations (column 3)	CE: On average, above expectations (>= column 4)
N/A	Required Clinical Experiences	Log every RCE in 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 (eg for illness) and still meet this criterion.

CE = Clinical Evaluation

DO = Direct Observation

RCE = Required Clinical Experience

NBME = National Board of Medical Examiners

CIS = Communication and Interpersonal Skills

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

Behavior	Marks (per occurrence)	Assessment Method	<u>Relevant Policy</u>
Unexcused Absences (inclu	ding arriving lat	e or leaving early)	from
Clinical experiences (e.g. patient encounters, team rounds, preceptor rounds)	1	CT*, CE**	
Clerkship assessments (e.g. Direct Observations, NBME Subject Exam)	1	СТ	Excused Absence Policy
Classroom-based learning activities (e.g. didactics, sim sessions)	1	СТ	

Clerkship meetings (e.g. orientation, mid- clerkship meetings)	1	СТ	
Unexcu	sed Late Submis	sions^	
Written case presentations ("write-ups")	1	СТ	
Skill or assessment card	1	СТ	Clerkship Specific
Required online modules	1	СТ	Requirements
Quizzes	1	СТ	
Other			
Violates academic integrity policy	Fail Grade	СТ	Academic Integrity Policy

^{*}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

^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, 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 th Percentile)	15 th Percentile
Inpatient Medicine	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. You can read more about RCEs in our policy in the Student Handbook under Year 3 and 4 Policies and Procedures, here. (icahn.mssm.edu > Education > Medical Student Handbook > Assessment and Grading).

Students will perform all components listed next to each RCE:

^{**}CE – Clinical Evaluation form (via One45)

Inpatient Medicine Clerkship			
bdominal Pain (Adult) • obtain patient history			
	conduct a physical exam		
Acid-Base Disorder	interpret pertinent patient data		
Altered Mental State	obtain patient history		
	 conduct a physical exam 		
Anemia	interpret pertinent patient data		
Electrocardiogram (EKG) Interpretation	Interpret pertinent patient data		
Chest Pain	obtain patient history		
	 conduct a physical exam 		
	 interpret pertinent patient data 		
Congestive Heart Failure	obtain patient history		
	 conduct a physical exam 		
	interpret pertinent patient data		
Chest Xray Interpretation	Interpret pertinent patient data		
Diabetes Mellitus	obtain patient history		
	 conduct a physical exam 		
Dyspnea/Shortness of Breath	obtain patient history		
	 conduct a physical exam 		
	 interpret pertinent patient data 		
Fever (Adult)	obtain patient history		
	conduct a physical exam		
	interpret pertinent patient data		
Fluid or Electrolyte Disorder (Medical)	interpret pertinent patient data		
Gastrointestinal Bleeding	obtain patient history		
	 conduct a physical exam 		
	interpret pertinent patient data		
Liver Disease/ Injury	obtain patient history		
	conduct a physical exam		
Pneumonia	obtain patient history		
	conduct a physical exam		
Renal Disease	obtain patient history		
	conduct a physical exam		
	interpret pertinent patient data		
Thromboembolic Disease	obtain patient history		
	conduct a physical exam		

CLERKSHIP GRADE SUBMISSION DEADLINES

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

RECOMMENDED CLERKSHIP READINGS/TEXTS

- *Step Up to Medicine: Outstanding resource. Outline-format. Very thorough. Covers all topics on the shelf, and helpful for reference during other clerkships as well.
- *UpToDate Online: It summarizes the best clinical evidence that dictates the current standard of care for almost anything you can think of. This is highly used by housestaff, and can be a very useful starting point for your EBM assignments (you cannot cite UpToDate articles in EBM assignments, but you can use their citations and link out to the original papers they've cited).
- *WhiteBook: Massachusetts General Hospital Dept of Medicine Housestaff App: https://mghwhitebook.app/home
- AMBOSS
- Qbank (UWorld)
- Pocket Medicine (by M. Sabatine): Excellent pocket reference book for quick review of work up, differential diagnosis, treatment. Highly used by housestaff.
- **Medicine Recall:** Question and answer format, typical pimping questions series. Fairly useful for rounds, not so much for the shelf.
- Andreoli and Carpenter's Cecil Essentials of Medicine, 9th Edition. This soft-cover book is a condensed version of Cecil's Textbook of Medicine (which you are not required to have). Cecil's Essentials is the best reviewed text of its kind, and it is well written and readable.
- Internal Medicine Essentials Text and Questions:). The textbook is written for students going through the clerkship and is concise and clearly written. The question book provides over 500 self-assessment questions to help learn and reinforce key concepts and prepare for the NBME subject exam. Both are available via the library: http://www.r2library.com/Resource/Title/1938921097.

^{*=}current students recommend

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

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, <u>here.</u>

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 <u>here</u>.

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

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

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

CONFIDENTIAL COMPLIANCE HOTLINE

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

TITLE IX

TitleIX@mssm.edu Cell: 646-245-5934

OMBUDS OFFICE

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; 212-241-6691

STUDENT AFFAIRS:

Student.affairs@mssm.edu; 212-241-4426