



CLERKSHIP INFORMATION SHEET

Pediatric Clerkship

Academic Year: 2024-2025

Duration of Clerkship: 5 Weeks

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CLERKSHIP OVERVIEW

CLERKSHIP CONTACTS

| | | |
|---|-------------------------------|---|
| Clerkship Director | Deanna Chieco, MD, EdM | deanna.chieco@mssm.edu |
| Associate Clerkship Director | Dessie Tsevdos, MD | despina.tsevdos@mountsinai.org |
| Clerkship Coordinator | Kristen Bohovich | kristen.bohovich@mssm.edu (212) 241 6934 1184 5 th Ave, 8 th Fl |
| Elmhurst Hospital Center Site Director | Gwen Raphan, MD | gwen.raphan@mssm.edu |
| Valley Hospital | TBD | |

MISSION STATEMENT OF THE CLERKSHIP

The Pediatrics Clerkship introduces students to the breadth of pediatric care and promotes clinical skill development in multiple pediatric settings, including inpatient, ambulatory, well-baby nursery, and emergency pediatric care.

GOALS OF THE CLERKSHIP

- Provide students with patient encounters and learning activities that teach about acute and chronic conditions and well child care for pediatric patients of all ages.
- Provide students with the opportunity to develop the physical exam, oral and written communication skills necessary to care for pediatric patients and their families.

CLERKSHIP POLICY OVERVIEW

CLERKSHIP OBJECTIVES

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

| Clerkship Objective | MD Program Objective |
|--|---|
| Demonstrate knowledge of common acute and chronic pediatric illnesses, newborn care, and well-child care. | <ul style="list-style-type: none">• Characteristics and Mechanisms of Disease 4 (II.B.4)• Characteristics and Mechanisms of Disease 5 (II.B.5)• Clinical Reasoning 1 (I.D.1)• Clinical Reasoning 2 (I.D.2)• Medical Decision Making 3 (I.E.3) |
| Obtain an age-specific and developmentally appropriate history, including pertinent elements such as immunizations, nutrition, birth history, developmental history, and social history. | <ul style="list-style-type: none">• History Taking (I.A.1)• Communication Skills 1 (I.F.1)• Social Determinants of Health (II.D.1) |
| Perform an age-specific and developmentally appropriate physical exam, including completion of a comprehensive newborn exam, assessment of growth parameters for all patients, and demonstration of a child-centered approach. | <ul style="list-style-type: none">• Physical Examination (I.B.1)• Communication Skills 2 (I.F.2) |
| Demonstrate effective oral communication skills by conveying pertinent information from the history, physical exam, data, assessment and plan to the medical team, patients and families in an organized manner. | <ul style="list-style-type: none">• Communication Skills 2 (I.F.2)• Communication Skills 3 (I.F.3)• Communication Skills 4 (I.F.4)• Teamwork 1 (III.C.1)• Service 1 (IV.A.1) |
| Demonstrate effective written communication skills ensuring an accurate and complete electronic medical record including all required elements, appropriate readability and professional documentation. | <ul style="list-style-type: none">• Communication Skills 5 (I.F.5)• Honest and Integrity 1 (IV.C.1) |
| Integrate clinical information from the history, physical exam, and other available data to make a prioritized differential diagnosis and assessment for a pediatric patient. | <ul style="list-style-type: none">• Clinical Reasoning 1 (I.D.1)• Clinical Reasoning 2 (I.D.2) |
| Initiate an appropriate diagnostic and treatment plan and follow-up on the patient's progress, incorporating evidence-based medicine or clinical pathways when relevant to the plan. | <ul style="list-style-type: none">• Medical Decision Making 1 (I.E.1)• Medical Decision Making 3 (I.E.3)• Healing and Therapeutics 4 (II.C.4) |
| Engage effectively with children across the age and developmental spectrum and demonstrate respect for the contributions of caregivers. | <ul style="list-style-type: none">• Communication skills 1 (I.F.1)• Communication skills 2 (I.F.2)• Social Determinants of Health 1 (II.D.1)• Service 1 (IV.A.1)• Service 3 (IV.A.3)• Empathy (IV.D.1) |

| | |
|---|---|
| Communicate honestly, respectfully, and directly with patients, families, peers and healthcare professionals. | <ul style="list-style-type: none"> • Respect (IV.E.1) |
| | <ul style="list-style-type: none"> • Communication skills 1 (I.F.1) • Communication skills 2 (I.F.2) • Communication skills 3 (I.F.3) • Honest and Integrity 1 (IV.C.1) • Honesty and Integrity 2 (IV.C.2) |

WORK SCHEDULE/DUTY HOURS

GENERAL CLINICAL SCHEDULE (SAMPLE):

- **Inpatient Clinical Care:**
 - There are approximately 2-3 weeks of inpatient ward experience, which may include 1 week of evening shifts
 - Inpatient start time depends on site and coincides with the resident sign out schedule, approximately 6:30-7am until 5:30pm.
 - Evening shift times at MSH are from 5-11pm.
- **Pediatric Emergency Medicine:**
 - There are approximately 4-5 ED shifts per rotation.
 - ED shifts have varied hours, including evening shifts. There is one weekend day ED shift required. ED shifts are approximately 7-8 hours.
- **Outpatient Pediatric Clinics:**
 - There are approximately 4-5 days of outpatient pediatrics. Sites may be located at the main hospital site or at affiliated sites throughout the boroughs. Clinic may start at either 9am or 1pm.
- **Well Baby Nursery**
 - All students will spend approximately 1 week in the newborn nursery and/or NICU.

ORIENTATION DAY REPORTING:

All students, regardless of hospital assignment, are required to attend Orientation at the specified time/location in the Welcome Email (location changes according to availability).

CLERKSHIP SCHEDULE:

| Pediatrics | | | |
|--|--|--|---------------------------|
| Assessments: Shelf Exam (AM)- 5 th Friday of the Clerkship Direct Observation (AM): 3 rd Sunday of the Clerkship | | | |
| Block | Flextime (3 rd Wednesday Off- Ends at 12PM) | Direct Observations (AM): (Except 3A*) | Shelf Exams (AM): |
| 1A | Wednesday, July 17, 2024 | Sunday, July 21, 2024 | Friday, August 2, 2024 |
| 1B | Wednesday, August 21, 2024 | Sunday, August 25, 2024 | Friday, September 6, 2024 |
| 2A | Wednesday, October 16, 2024 | Sunday, October 20, 2024 | Friday, November 1, 2024 |
| 2B | Wednesday, November 20, 2024 | Sunday, November 24, 2024 | Friday, December 6, 2024 |
| 3A | Wednesday, January 22, 2025 | Sunday, February 2, 2025* | Friday, February 7, 2025 |
| 3B | Wednesday, February 26, 2025 | Sunday, March 2, 2025 | Friday, March 14, 2025 |
| 4A | Wednesday, April 23, 2025 | Sunday, May 4, 2025* | Friday, May 9, 2025 |

Updated: 3/4/2024

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|----|-------------------------|----------------------|-----------------------|
| 4B | Wednesday, May 28, 2025 | Sunday, June 1, 2025 | Friday, June 13, 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>

SITE ROTATION CHARACTERISTICS

Each site's schedules will vary slightly in terms of exact timing. All sites have inpatient, outpatient, ED, and newborn nursery clinical experiences.

Mount Sinai Health System:

- Inpatient and ED experiences occur at the main site.
- Students are assigned to either MSH or MS West well-baby nursery for their rotation
- Students are assigned to 1 outpatient clinic for their rotation. Locations include Mount Sinai Doctors affiliated practices, including the Faculty Practices at 98th Street, 85th Street, Queens, and Brooklyn Heights, Mount Sinai Pediatric Associates (Annenberg building), as well as several other community-based practices.

Elmhurst Hospital:

- All inpatient, nursery, outpatient, and ED clinical experiences occur at the main site.

Valley Hospital:

- All inpatient, nursery, outpatient, and ED clinical experiences occur at the main site.

METHODS OF INSTRUCTION

- **Inpatient Pediatrics:** Students will be the primary manager for 1-4 patients and will be involved in all aspects of their patients' care on the inpatient wards.
- **Outpatient Pediatric Clinics:** Students will gain exposure to well child care and pediatric urgent care in the outpatient setting.
- **Pediatric Emergency Medicine:** Students will be exposed to urgent and emergent pediatric illnesses in the pediatric emergency department.
- **Well Baby Nursery:** All students will learn the newborn exam and well-baby care in the newborn nursery.

Didactics

- **Clinical Case Presentation Oral and Written Sessions:** Students will present cases to their peers and a preceptor. They will submit at least one written H&P to the preceptor. Students will discuss clinical reasoning and management including evidence-based medicine. Students will receive feedback on their written and oral presentations from the preceptor.
- **Lectures:** Students will have multiple didactic sessions on orientation day, mid-rotation day, and interspersed throughout the clerkship. Students will attend the educational conferences available at their inpatient site that the house staff attend (morning report, noon conference, grand rounds, etc).

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 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

| Pediatric Clerkship Learning Objectives | Assessment(s) | Grading Criteria: Pass | Grading Criteria: Honors |
|---|---|---|--|
| Medical Knowledge Demonstrate knowledge of common acute and chronic pediatric illnesses, newborn care, and well-child care. | <ul style="list-style-type: none"> NBME Clinical Evaluations (knowledge base) Aquifer Modules | NBME \geq 5%ile 1 st or 2 nd attempt AND CE: On average, meets expectations (column 3) AND Complete Aquifer modules | NBME \geq 15%ile 1 st attempt* AND CE: On average, above expectations (\geq column 4) AND Complete Aquifer modules on time |
| History-taking Skills Obtain an age-specific and developmentally appropriate history, including pertinent elements such as immunizations, nutrition, birth history, developmental history, and social history. | <ul style="list-style-type: none"> Clinical Evaluations (history taking) Direct Observation: Morchand Center Direct Observation: History-taking in Workplace Setting | CE: On average, meets expectations (column 3) AND DO Morchand: PASS (\geq 60/100) 1 st or 2 nd attempt AND Complete DO in History-Taking | CE: On average, above expectations (\geq column 4) AND DO Morchand: \geq 80/100 1 st attempt AND Complete DO in History-Taking |
| Physical Exam Perform an age-specific and developmentally appropriate physical exam, including completion of a comprehensive newborn exam, | <ul style="list-style-type: none"> Clinical Evaluations (physical exam) Direct Observation: Newborn Exam | CE: On average, meets expectations (column 3) AND | CE: On average, above expectations (\geq column 4) AND |

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| assessment of growth parameters for all patients, and demonstration of a child-centered approach. | | Meet Competency - DO Newborn Exam | Meet Competency - DO Newborn Exam |
| Oral Presentation Demonstrate effective oral communication skills by conveying pertinent information from the history, physical exam, data, assessment, and plan to the medical team, patients, and families, in an organized approach. | <ul style="list-style-type: none"> Clinical Evaluations (oral presentation) Oral Case Presentation | CE: On average, meets expectations (column 3) AND $\geq 5/10$ on Case Presentation | CE: On average, above expectations (\geq column 4) AND $\geq 8/10$ on Case Presentation |
| Written Communication Demonstrate effective written communication skills ensuring an accurate and complete electronic medical record including all required elements, appropriate readability, and professional documentation. | <ul style="list-style-type: none"> Clinical Evaluations (written communication) Written Case Presentation | CE: On average, meets expectations (column 3) AND $\geq 5/10$ on Case Presentation 1 st or 2 nd attempt | CE: On average, above expectations (\geq column 4) AND $\geq 8/10$ on Case Presentation 1 st attempt (and submitted on time) |
| Clinical Reasoning: Differential Diagnosis/Assessment Integrate clinical information from the history, physical exam, and other available data to make a prioritized differential diagnosis and assessment for a pediatric patient. | <ul style="list-style-type: none"> Clinical Evaluations (differential diagnosis/assessment) | CE: On average, meets expectations (column 3) | CE: On average, above expectations (\geq column 4) |
| Plans and Follow-Up Initiate an appropriate diagnostic and treatment plan and follow-up on the patient's progress. Incorporate evidence-based medicine or clinical pathways when relevant to the plan. | <ul style="list-style-type: none"> Clinical Evaluations (plans/follow up) | CE: On average, meets expectations (column 3) | CE: On average, above expectations (\geq column 4) |
| Communication skills and humanistic patient care Recognize the role of culture, values, beliefs, and social determinants of health in influencing health and illness. Engage effectively with children across the age and developmental spectrum and demonstrate respect for the contributions of caregivers. | <ul style="list-style-type: none"> Clinical Evaluations (communication and interpersonal Skills)" Aquifer Modules: SDOH | CE: On average, meets expectations (column 3) AND Complete SDOH Aquifer modules | CE: On average, above expectations (\geq column 4) AND Complete SDOH Aquifer modules on time |

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|---|--|--|--|
| Professionalism Communicate honestly, respectfully, and directly with patients, families, peers, and other healthcare professionals. | <ul style="list-style-type: none"> Clinical Evaluations: (dependability & engagement) | CE: On average, meets expectations (column 3) | |
| N/A | Required Clinical Experiences | Log every RCE in One45 prior to end of clerkship | |

***To meet this criterion, student 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.**

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

NBME = National Board of Medical Examiners

SDOH = Social Determinants of Health

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> | Relevant Policy |
|---|-------------------------------|--------------------------|---------------------------------|
| Unexcused Absences (including arriving late or leaving early) from... | | | |
| 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 | |
| Unexcused Late Submissions^ | | | |
| Written case presentations (“write-ups”) | 1 | CT | Clerkship Specific Requirements |
| Skill or assessment card | 1 | CT | |
| Required online modules | 1 | CT | |
| Quizzes | 1 | CT | |
| Other | | | |
| Violates academic integrity policy | Fail Grade | CT | 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

**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](#). (icahn.mssm.edu > Education > Medical Student Handbook > Assessment and 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 |
|------------|--|-----------------------------|
| Pediatrics | 63 | 68 |

REQUIRED CLINICAL EXPERIENCES (RCE):

RCE ensures 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:

| Pediatrics Clerkship | |
|---|--|
| Abdominal Pain | <ul style="list-style-type: none"> • obtain the patient history • conduct a physical exam |
| Anemia | <ul style="list-style-type: none"> • interpret pertinent patient data |
| Fever (Pediatric) | <ul style="list-style-type: none"> • obtain the patient history • conduct a physical exam • present the case including a discussion of differential diagnosis, assessment, and plan |
| Neonatal Jaundice | <ul style="list-style-type: none"> • obtain the patient history • conduct a physical exam • present the case including a discussion of differential diagnosis, assessment, and plan |
| Otitis Media | <ul style="list-style-type: none"> • obtain the patient history • conduct a physical exam |
| Rash | <ul style="list-style-type: none"> • obtain the patient history • conduct a physical exam • present the case including a discussion of differential diagnosis, assessment, and plan |
| Respiratory Illness (Croup, Bronchiolitis or Asthma) | <ul style="list-style-type: none"> • obtain the patient history • conduct a physical exam • present the case including a discussion of differential diagnosis, assessment, and plan |
| Vomiting | <ul style="list-style-type: none"> • obtain the patient history • conduct a physical exam • present the case including a discussion of differential diagnosis, assessment, and plan |
| Plot Growth/Developmental Milestones | <ul style="list-style-type: none"> • plot growth parameters and developmental milestones for a child of any age |
| Assess Immunization Status | <ul style="list-style-type: none"> • assess the immunization status/need of a child of any age |
| Assess Nutritional Needs | <ul style="list-style-type: none"> • assess breastfeeding or formula nutritional needs in the newborn period |

CLERKSHIP GRADE SUBMISSION DEADLINES

| Start Date | End Date | Pod | Grades Due (6 wks from end date) |
|------------|-----------|-----|----------------------------------|
| 7/1/2024 | 8/2/2024 | 1A | 9/13/2024 |
| 8/5/2024 | 9/6/2024 | 1B | 10/18/2024 |
| 9/30/2024 | 11/1/2024 | 2A | 12/13/2024 |
| 11/4/2024 | 12/6/2024 | 2B | 1/17/2025 |
| 1/6/2025 | 2/7/2025 | 3A | 3/21/2025 |
| 2/10/2025 | 3/14/2025 | 3B | 4/25/2025 |
| 4/7/2025 | 5/9/2025 | 4A | 6/20/2025 |
| 5/12/2025 | 6/13/2025 | 4B | 7/25/2025 |

Updated: 3/4/2024

RECOMMENDED CLERKSHIP READINGS/TEXTS:

- Harriet Lane Handbook

Reference books:

- The Red Book
- Rudolph's Fundamentals of Pediatrics
- 3 Nelson's Pediatrics Textbook
- Zitelli's Atlas of Pediatric Physical Diagnosis
- Smith's Recognizable Patterns of Human Malformations
- Fleisher and Ludwig's Textbook for Pediatric Emergency

For NBME subject exam preparation

- Blueprints – Pediatrics
- Case Files
- Appleton and Lange Question Book

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, [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 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