




Clinical Integration IV

MEDC 224.4

YEAR 2 TERM 2

 **COURSE SYLLABUS**
2018/19



UNIVERSITY OF SASKATCHEWAN

College of Medicine

MEDICINE.USASK.CA

COURSE DESCRIPTION

This is the fourth of four courses in the Clinical Integration series. Clinical Integration IV is designed to provide students with knowledge, skills, and experiences that support gathering and integration of knowledge, critical thinking, and clinical reasoning skills. This will consolidate learning from the first 3 Terms.

Students will receive an Ethics lecture and engage in discussion of Ethics cases.

Students will receive Integrative Medicine Lectures.

Information Literacy IV will be delivered in this module.

One Interprofessional Problem-Based Learning case will be held.

Clinical Reasoning cases will focus on developing clinical reasoning skills and integrating the information learned in the other courses, both during this term and from previous terms.

Completion of this course will contribute to attaining elements of the overall undergraduate program objectives ([Program Learning Objectives](#)).

OVERALL COURSE OBJECTIVES

By the completion of the Clinical Integration IV course, students will be able to:

1. Synthesize and present the relevant patient centered data.
2. Formulate a working diagnosis from a differential diagnosis list.
3. Select appropriate cost effective, evidence informed investigations.
4. Formulate a cost effective, evidence informed, patient centered management plan.
5. Identify resources and strategies to enhance health promotion and illness prevention.
6. Discuss, analyze, and propose approaches to legal and ethical issues.
7. Demonstrate effective interprofessional collaboration and work effectively as a team.
8. Apply critical appraisal to resolve identified issues.
9. Demonstrate effective patient communication integrating the elements of patient-centered clinical method.
10. Synthesize effective information literacy skills.
11. Demonstrate effective self-directed learning.
12. Model professional and ethical behavior.

The University of Saskatchewan Learning Charter is intended to define aspirations about the learning experience that the university aims to provide, and the roles to be played in realizing these aspirations by students, instructors and the institution. A copy of the Learning Charter can be found at: www.usask.ca/university_secretary/LearningCharter.pdf

COURSE CONTACTS

Course Director : Dr. Di Naidu – di.naidu@usask.ca - (306) 850-9997

Clinical Integration Course Chair : Dr. Deirdre Andres - d.andres@usask.ca – (306) 655-4200

Course Site Coordinator (Regina): Christa Kaytor - christa.kaytor@saskhealthauthority.ca - (306) 766-3157

Preclerkship Coordinator (Saskatoon): Sonja MacDonald – sonja.macdonald@usask.ca - (306) 966-5354

Administrative Assistant (Regina): Sherry Lindenbach - sherry.lindenbach@saskhealthauthority.ca – (306) 766-0578

Administrative Assistant (Saskatoon): Kimberly Basque – kimberly.basque@usask.ca - (306) 966-6151

COURSE SCHEDULE

Please check one45 **DAILY** to ensure that you have the most current schedule information. The latest a change can be made to a session (unless it is a true emergency) is 48 hours in advance of the scheduled sessions. If changes are made to a session which has already been scheduled in one45, affected students will be notified directly by the course administrators – in the event of rescheduling, a student who has an approved absence will not be negatively assessed in terms of professionalism.

All learning objectives (course, module, and session) can be accessed on the College of Medicine/Curriculum website under the appropriate year and course. A print version is also available. Please access the link below for the most current objectives.

<https://share.usask.ca/medicine/one45/kbase/Curriculum.aspx>

Date: 2019	Time	Session	Learning Activity
January 9	1:30-2:00	Course Orientation	Lecture
	2:10-4:30	Clinical Reasoning Case 1	Small Group – see one45
January 16	2:30-4:30	iPBL- Palliative Care	Small Group – see one45
January 23	2:30-4:30	iPBL- Palliative Care	Small Group – see one45
January 30	2:30-4:30	iPBL- Palliative Care	Small Group – see one45
February 6	1:30-2:30	Ethics lecture	Lecture
	2:30-4:30	Ethics Cases	Small Group – see one45
February 13	1:30-4:30	Clinical Reasoning Case 2	Small Group – see one45
February 27	1:30-4:30	Clinical Reasoning Case 3	Small Group – see one45
March 6	1:30-4:30	Clinical Reasoning Case 4	Small Group – see one45
March 13	8:30-12:30	Clinical Reasoning Case 5	Small Group – see one45
March 20	1:30-4:30	Clinical Reasoning Case 6	Small Group – see one45
March 27	1:30-4:30	Clinical Reasoning Case 7	Small Group – see one45

Date: 2019	Time	Session	Learning Activity
April 3	1:30-4:30	Clinical Reasoning Case 8	Small Group – see one45
April 10	1:30-3:20	Information Literacy	Discussion/demonstration – small group (see one45)
April 17	1:30-4:20	Clinical Reasoning Case 9	Small Group – see one45
April 22	1:30-4:20	Integrative Medicine	Lecture
April 24	1:30-4:20	Clinical Reasoning Case 10	Small Group – see one45
May 6	1:00-4:00	Final Exam	See one45

COURSE DELIVERY

Sessions vary in length and are scheduled throughout the term. For most sessions, students will work interactively in small group settings. For integrative cases and iPBL sessions, learning is student-directed and students assign themselves roles to help facilitate the discussion. A facilitator is present to guide students through the case (e.g. answering clarification questions, redirecting students if they get off track, etc.) and to ensure completion of case objectives. When lecturers consent, lectures are recorded.

COURSE MATERIAL ACCESS

Course materials, including syllabus, sessions, objectives, required reading, forms and other relevant documents are posted as handouts on one45.

Cases will be released on Blackboard at the initiation of the Integrative Case Session.

Relevant handouts will be available in Blackboard.

Suggested preparation for each session will include review of patient centered interview techniques, physical examination and clinical skills relevant to the case topics, and review of clinical reasoning lecture notes. It may be helpful to review websites such as <http://www.choosingwiselycanada.org>.

DIAGNOSTIC IMAGING EDUCATIONAL RESOURCES

<https://undergradimaging.pressbooks.com/> (Undergrad Diagnostic Imaging Book)

<http://sites.usask.ca/undergradimaging/> (access links to download the eBook as a pdf or file for an eBook reader)

COURSE ASSESSMENT OVERVIEW

Assessment	Course Value	Due Date: indicated below Due Time: 23:59
Ethics	5%	February 13, 2019
iPBL	10%	February 6, 2019
Information Literacy	10%	April 17, 2019
Clinical Reasoning Cases (5 assessed cases) <ul style="list-style-type: none"> • Clinical Reasoning Case #2 • Clinical Reasoning Case #3 • Clinical Reasoning Case #4 • Clinical Reasoning Case #6 • Clinical Reasoning Case #8 	50% (10% per case)	February 20, 2019 February 27, 2019 (In-class) March 6, 2019 (In-class) March 27, 2019 April 3, 2019 (In-class)
Final Exam	25%	May 6, 2019

* **NOTE: ALL ASSIGNMENTS, WITH THE EXCEPTION OF IN-CLASS AND THE FEBRUARY BREAK, ARE DUE 7 DAYS FOLLOWING THE ASSOCIATED SESSION.**

ASSESSMENT COMPONENTS

Assignment: *Ethics Assignment*

Value: **5%** of final grade*

Due Date: Due February 13, 2019 by 23:59.

Description: The required written assignment will be a discussion of one of several ethical problems in a short essay – approximately two pages (~ 500 words) in length (double-spaced, Times New Roman 12 font).

*There will also be several ethics based questions within the Clinical Reasoning Cases and/or Final Examination.

Assignment: *Clinical Reasoning Cases (10 cases total, 5 are assessed)*

Value: **50%** of final grade

Due Date: Clinical Reasoning Case #2 due February 20, 2019 by 23:59

Clinical Reasoning Case #3 due February 27, 2019 by the end of the session

Clinical Reasoning Case #4 due March 6, 2019 by the end of the session

Clinical Reasoning Case #6 due March 27, 2019 by 23:59

Clinical Reasoning Case #8 due April 3, 2019 by the end of the session

Description: Clinical Reasoning Cases will be assessed based on either a take-home clinical question that is to be completed in structured essay format and will be marked by the tutor/facilitator (rubric is visible in one45) and/or an in-class assignment and/or critical appraisal. Details will be provided during the session.

Assignment: *iPBL Assignment*

Value: **10%** of final grade

Due Date: Due February 6, 2019 by 23:59

Description: Written assignment using the students experience in their interprofessional group. Questions will be related to the competencies from the CIHC competency framework & their key elements

Detailed description will be posted on Blackboard and one45.

Assignment: *Information Literacy*

Value: **10%** of final grade

Due Date: Due April 17, 2019 by 23:59

Description: Written assignment.

Final Exam

Value: **25%** of final grade

Date: May 6, 2019

Length: 3 hours

Type: Open Book, Summative, and Cumulative examination.

COURSE POLICY FOR SUCCESSFUL COMPLETION & REMEDIATION

For successful course completion for the purposes of promotion, students are to:

- Obtain a cumulative mark of at least 70% on all the course assignments.
- Achieve a mark of at least 70% on the final exam.
- Complete all assignments.

Students who are not promoted as a result of being unsuccessful on the course will receive a grade of 'F' on their transcripts for the relevant course.

REMEDIATION AND COURSE FAILURE

If a student fails either the combined average of all the course assignments **or** the final examination, a maximum of one remediation attempt will be provided. Failure of a supplemental assessment will result in a course failure. If a student fails **both** the combined average of all the course assignments and the final examination, this will be considered a course failure and remediation will not be offered.

Students who are eligible for remediation will be required to meet with the Module/ Course Director and/or Course Chair to identify areas of weakness and develop a structured remediation and learning plan, and complete a supplemental assessment. The Module Director/Course Director and/or Course Chair retains the right to determine the specific type of remediation and supplemental assessment needed for each individual student, which may be in a different format than the original assessment.

After the final examination period, the implications of failing to successfully complete course components will be adjudicated at the Year 2 Term 2 Promotions Committee and a final decision to grant remediation/supplemental work will be determined by the Student Academic Management Committee.

ATTENDANCE EXPECTATIONS

See [Student Information Guide](#) for MD Program Attendance and Absence policy.

As per the Attendance Policy, all small group sessions are mandatory for attendance. This will include all Clinical Reasoning Cases, Ethics Small Groups, Integrative Medicine Small Group sessions, Information Literacy and the iPBL sessions.

Students who miss a Case or iPBL without appropriate approval or following appropriate notification steps in the event of illness (see Attendance Policy) will be assigned a mark of zero for that session, should expect to receive a Breach of Professionalism.

In the event of missing a session, students are expected to review case materials to address the learning objectives of the case.

Students who have an approved absence or unavoidable absence due to illness (see Attendance Policy) should notify the Year 2 Administrative Coordinator and Course Director, and will be given an opportunity to complete the case independently and submit the Clinical Question, which will be weighted as 7.5% (or prorated to reflect missing group dynamic marks if those are part of the missed session).

COURSE EVALUATIONS QUALITY IMPROVEMENT

As a result of feedback from previous student course evaluations the following changes have been made:

1. Students will be able to access case information as they progress through the Clinical Reasoning Case.
2. March 13 has been changed to a morning session to accommodate student attendance at the Health Innovation Public Policy Conference in the afternoon.
3. Short Snapper Type cases will be included.
4. Assignments for Clinical Reasoning Cases will be varied and some will be done in class.
5. Not all sessions will have an assignment. There will be 5 Clinical Reasoning Case assignments worth 10% each.
6. The iPBL assignment has been reviewed and modified.
7. Information Literacy has been introduced in all three previous terms.

COURSE MODULES

CLINICAL REASONING CASES MODULE

MODULE CONTACTS

Module Director: Dr. Di Naidu - di.naidu@usask.ca – (306) 850-9997

Administrative Assistant (Saskatoon): Kimberly Basque – kimberly.basque@usask.ca – (306) 966-6151

Administrative Coordinator (Regina): Holly Doell – holly.doell@saskhealthauthority.ca – (306) 766-0552

In these small group learning experiences, you will work through patient “cases” in order to have practice applying knowledge from previous and concurrent courses and to further develop your critical thinking and clinical reasoning skills. Some cases may include video interactions with simulated patients.

MODULE OBJECTIVES

1. Synthesize and present the relevant patient centered data.
2. Develop a working diagnosis from a differential diagnosis list.
3. Select appropriate cost effective, evidence informed investigations.
4. Develop a cost effective, evidence informed, patient centered management plan.
5. Identify resources and strategies to enhance health promotion and illness prevention.
6. Discuss, analyze, and propose approaches to legal and ethical issues.
7. Demonstrate effective interprofessional collaboration and work effectively as a team.
8. Apply critical appraisal to resolve identified issues.
9. Model professional and ethical behavior.
10. Demonstrate effective patient communication integrating the elements of patient-centered clinical method.
11. Demonstrate effective information literacy skills.
12. Demonstrate effective self-directed learning.

MODULE ASSESSMENT

There will be five periodic assessment opportunities for the 10 Clinical Reasoning Cases.

Some Clinical Reasoning Case sessions will be assessed based on a take-home clinical questionnaire that is to be completed in structured essay form and will be marked by the tutor/facilitator (rubric is visible in one45) and submitted to Blackboard.

Some sessions will be assessed based on appraisal of journal articles or guidelines completed during class-time and submitted at the end of the session.

Some questions found within the case will be completed as group work with peer marking See Assessment Components for value and due dates.

MODULE CONTACTS

Module Director: Sean Polreis – sean.polreis@usask.ca – (306) 966-1311

Interprofessional Education Program Coordinator (Saskatoon):

Getahun Lombano – getahun.lombano@usask.ca – (306) 955-1151

Administrative Coordinator (Regina): Kayla Trevena – kayla.trevena@saskhealthauthority.ca – (306) 766-0552

MODULE DESCRIPTION

Health professions' students work in teams to gain knowledge and experience in Interprofessional Collaboration. The team (comprised of approximately 10 students from 3 or more health disciplines with a trained tutor) is progressively provided with information on the health problems and social issues of a patient. In three 2-hour sessions, one week apart, the team will use a systematic, participatory, and collaborative approach to develop an evidence-based and patient-centered plan of care for the patient.

Students are exposed to interprofessional competencies first as an orientation at the beginning of each case and then throughout the case discussions as needed and finally at the end of each session. Students are guided to consider and discuss their roles, various dynamics that enable or interfere with effective interprofessional team collaboration, concepts of shared leadership, aspects of effective interprofessional communication including conflict resolution, and patient/family community-centered care. Thus some of the key components of the National Competency Framework established by the Canadian Interprofessional Health Collaborative (CIHC) are introduced to health professions' students participating in Interprofessional Problem-Based Learning (iPBL) and students have an opportunity to develop knowledge, skills, attitudes and behaviours for effective interprofessional collaborative practice. It is expected that students participate in these sessions in a respectful and collegial manner.

MODULE OBJECTIVES

By the end of this module the student will be able to:

1. Role Clarification

- Assess how you used other group members' skills & knowledge through consultation to care for the patient.
- Describe how other health care professionals (currently not on the team) could contribute to the care for the patient.

2. Team Functioning

- Describe problem resolution with ineffective team functioning within a group.

3. Interprofessional Communication

- Integrate elements of effective interprofessional communication to improve team function.

4. Collaborative Leadership

- Assess leadership and decision-making behaviours that are likely to contribute to group effectiveness.
- Investigate resources, including community resources, social service agencies, and government programs that contribute to quality care.

5. Patient/Family/Community-Centred Care

- Integrate the input & engagement of patient/family/community in designing & implementing care/services.

6. Interprofessional Conflict Resolution

- Implement strategies for conflict resolution within interprofessional groups.

ASSESSMENT

Assessment for the iPBL of Clinical Integration IV will be based on the student's attendance at small group sessions and satisfactory completion of a written assignment. Written assignment using the students experience in their interprofessional group. Questions will be related to the competencies from the CIHC competency framework & their key elements.

Detailed description will be posted on Blackboard and one45.

See Assessment Components for value and due dates.

INTEGRATIVE MEDICINE MODULE

MODULE CONTACTS

Module Director: Dr. Louise Gagne - lgagne@sasktel.net

MODULE DESCRIPTION

Integrative medicine is defined by the Arizona Center for Integrative medicine as, "...healing-oriented medicine that takes account of the whole person, including all aspects of lifestyle. It emphasizes the therapeutic relationship between practitioner and patient, is informed by evidence, and makes use of all appropriate therapies." The sessions in this module will explore an integrative approach to mental health, an introduction to the inter-relationships between the major hormonal systems in the body and also discuss primary prevention of type 1 and type 2 diabetes.

MODULE OBJECTIVES

1. Outline an integrative approach to mental health.
2. Describe an Integrative approach to managing common women's health concerns.
 - Describe how adrenal hormones affect sex hormones.
 - Outline several non-hormonal interventions for hot flashes.
 - List several modifiable underlying mechanisms shared by endometriosis, fibroids, PCOS and breast cancer.
3. Outline some factors that can play a role in the primary prevention of type 1 and type 2 diabetes.

ASSESSMENT

Integrative Medicine principles will be assessed in at least one of the Clinical Reasoning Cases and assignments, and/or the final exam.

See Assessment Components for value and due dates.

MODULE CONTACTS

Module Director: Ryan Meneses – rym482@mail.usask.ca

Administrative Assistant (Saskatoon): Kimberly Basque – kimberly.basque@usask.ca - (306) 966-6151

Administrative Coordinator (Regina): Alexis Robb – alexis.robb@saskhealthauthority.ca – (306) 766-0556

MODULE DESCRIPTION

This module is intended to introduce more difficult ethical cases for analysis and discussion. The module builds on the same skills learnt in Clinical Integrations I and III. Students will be expected to apply the same ethical principles to cases concerning Genetics/Reproductive Ethics and Abortion. By the end of this module, students should possess analytical problem-solving skills that will prepare them to handle real clinical cases that are ethically problematic.

Students will become well versed in applying a philosophical method of case analysis using the four principles of biomedical ethics originally expounded by Beauchamp and Childress. This analysis sets the foundation for ethical reasoning in medicine and elucidates the ethical dilemma in a clear and manageable way. After clarifying the ethical problem, an argument can be presented for a proper course of action.

The module is delivered through a lecture that covers the topics Genetics/Reproductive Ethics and Abortion. After the lecture, students will have the opportunity to discuss these ethical topics in a group setting facilitated by two tutors. These discussion groups help students recognize alternative viewpoints on challenging topics and the impact of their own biases. Students should find the insights gained in these discussions useful for their written ethics assignment.

MODULE OBJECTIVES

Upon completion of this module, students will be able to:

1. Identify legal and ethical principles, theories, and issues relevant to practical clinical settings.
2. Demonstrate knowledge of conflicting ethical principles and perspectives.
3. Analyze legal and ethical problems in a rational and logical manner.
4. Recognize personal biases and the impact of his/her own morals, beliefs and values.
5. Propose rationally justified solutions and approaches to legal and ethical issues.

MODULE DELIVERY

Large group (lecture-based) session is designed to deliver information about approaches to ethical problem solving, and to educate students about the legal and ethical requirements associated with certain aspects of patient care.

Small group session provides an opportunity for students to discuss different approaches to ethical problem solving, and to practice working through complex ethical dilemmas under the guidance of 1-2 mentors and fellow classmates.

RESOURCES

The recommended text is:

Doing Right: A Practical Guide to Ethics for Medical Trainees and Physicians, 2nd Edition by Philip Hebert (Oxford University Press, Toronto, 2009, ISBN 978-0-19-542841-4). The text can be purchased in the U of S Bookstore

Case Workbook by Dr. K. Ogle. Four Principles: Beneficence, Non-Maleficence, Autonomy, and Justice (Pages 11-17). Workbook provided

ASSESSMENT

Assessment for the Ethics component of Clinical Integration IV will be based on the student's attendance at small group sessions and satisfactory completion of a written assignment. The required written assignment will be a discussion of one of several cases in a short essay – approximately one page in length (double-spaced, Times New Roman 12 font, *maximum 500 words in length).

See Assessment Components for value and due dates.

MODULE CONTACTS

Module Director: Megan Kennedy – megan.kennedy@usask.ca - (306) 966-1496

Administrative Coordinator (Saskatoon): Kimberly Basque – kimberly.basque@usask.ca – (306) 966-6151

Administrative Coordinator (Regina): Alexis Robb – alexis.robb@saskhealthauthroity.ca – (306) 766-0556

MODULE DESCRIPTION

April 10, 2019 (2 hours)

Introduction to grey literature. Understanding and using resources to find drug advisories and recalls, and clinical trial information. Discussion of medical apps for mobile devices.

MODULE OBJECTIVES

Upon completion of this module, students will be able to:

1. Select the appropriate sources to answer questions relating to clinical trials, drug advisories, and recalls.
2. Discriminate between mobile apps that are more likely to provide accurate information and those that are less likely to do so.

ASSESSMENT

Students will need to apply the information covered in the Information Literacy session to complete the assignment.

See Assessment Components for value and due dates.

IMPORTANT AND RELEVANT STUDENT INFORMATION

The following information is extremely important for student success in medical school. Please refer to the [UGME Policies](#) page and the [Student Information Guide](#) for the following policies:

UGME CONTACT INFORMATION

EMAIL COMMUNICATIONS

ETHICS AND PROFESSIONALISM

PROGRAM EVALUATION

GUIDELINES FOR PROVIDING FEEDBACK

EMERGENCY PROCEDURES

MD PROGRAM ATTENDANCE POLICY

ASSESSMENT POLICY

PROMOTION STANDARDS

CONFLICT OF INTEREST

NON-INVOLVEMENT OF HEALTH CARE PROVIDERS IN STUDENT ASSESSMENT

APPEALS PROCEDURES

STUDENT DISCRIMINATION, HARASSMENT, AND MISTREATMENT PROCEDURE

ACCOMMODATION OF STUDENTS WITH DISABILITIES

OFFICE OF STUDENT AFFAIRS

Where a specific College of Medicine policy or procedure does not exist, the College refers to the U of S Academic Courses Policy at <http://policies.usask.ca/policies/academic-affairs/academic-courses.php>

UNDERGRADUATE MEDICAL EDUCATION ASSIGNMENT SUBMISSION POLICY

Any assignment submitted after 23:59 SK time on the specified date is deemed late (unless otherwise specified).

All due dates or timelines for assignment submission are published in the student course syllabus¹.

A late assignment may still be submitted up to three consecutive calendar days (72 hours) from the original deadline for that assessment. The assignment must be submitted to the appropriate year Administrative Coordinator in Saskatoon, or the Educational Consultant in Regina for years 1-2. Years 3-4 must submit to the Rotation Coordinator. The student, if submitting a late assignment that is deemed to be at or above the pass mark for that assignment will receive the pass mark for the assignment. If it is assessed as below the pass mark, the student will receive the actual grade assigned for the assignment.

Any late assignments not submitted by 23:59 on the third day will receive a mark of 0%. After this period, all mandatory assignments must still be submitted, or the student will be deemed to be missing a course

¹ Blackboard routinely updates their systems on certain Wednesday evenings. In the event that Blackboard is down for scheduled maintenance or due to technical difficulties, assignments are to be submitted by 0900 the following morning.

component, which will result in an incomplete course. Subsequent academic consequences will be determined at the promotions committee meetings.

In addition to the consequences specified herein, students submitting mandatory assignments late should anticipate a meeting to discuss professionalism, which may result in associated documentation.

All requests for a deferral of an assignment due date must be received a minimum of 72 hours prior to the deadline. All such requests must be sent to the Course Director or Rotation Coordinator and copied to the relevant Administrative Coordinator. The course director, in consultation with the year chair and appropriate course/module/rotation director will make a final decision and notify the student of the outcome. Exceptional, unforeseen circumstances will be considered on an individual basis as above.

CITATION FORMAT

Unless otherwise specified by the course or module director, the expected citation format is that of the International Committee of Medical Journal Editors (ICMJE). Examples of this citation format are available at www.nlm.nih.gov/bsd/uniform_requirements.html

PROFESSIONALISM

Students can be deemed unsuccessful on any course assessment for not achieving course expectations of professionalism. This would include, but is not limited to, any unapproved absences from a mandatory session, and/or submission of late assignments. Students failing to meet professional expectations in the course should anticipate a meeting with the Module/Course Directors and/or Year Chair to discuss the concern, which may result in associated documentation. For further information on professionalism, please refer to the UGME Procedures for Concerns with Medical Student Professional Behavior.

<http://medicine.usask.ca/policies/professionalism-standard-operating-procedure.php>

RECORDING OF THE LECTURES

Most lectures will be recorded and posted to the course Blackboard site under Course Materials. However, each lecturer reserves the right to choose whether or not their lectures will be recorded. Lecture recordings are not intended to be a replacement for attending the session but rather to enhance understanding of the concepts.

COPYRIGHT

Course materials are provided to students based on registration in a class, and anything created by professors and instructors is their intellectual property, unless materials are designated as open education resources. This includes exams, PowerPoint/PDF slides and other course notes. Additionally, other copyright-protected materials created by textbook publishers and authors may be provided to students based on license terms and educational exceptions in the Canadian Copyright Act (see <http://laws-lois.justice.gc.ca/eng/acts/C-42/index.html>)

Before copying or distributing others' copyright-protected materials, please ensure that use of the materials is covered under the University's Fair Dealing Copyright Guidelines available at <https://library.usask.ca/copyright/general-information/fair-dealing-guidelines.php>. For example, posting others' copyright-protected materials on the open web is not covered under the University's Fair Dealing Copyright Guidelines, and doing so requires permission from the copyright holder.

For more information about copyright, please visit <https://library.usask.ca/copyright/index.php> where there is information for students available at <https://library.usask.ca/copyright/students/rights.php>, or contact the University's Copyright Coordinator at <mailto:copyright.coordinator@usask.ca> or 306-966-8817.

INTEGRITY DEFINED (FROM THE OFFICE OF THE UNIVERSITY SECRETARY)

The University of Saskatchewan is committed to the highest standards of academic integrity and honesty. Students are expected to be familiar with these standards regarding academic honesty and to uphold the policies of the University in this respect. Students are particularly urged to familiarize themselves with the provisions of the Student Conduct & Appeals section of the University Secretary Website and avoid any behavior that could potentially result in suspicions of cheating, plagiarism, misrepresentation of facts and/or participation in an offence. Academic dishonesty is a serious offence and can result in suspension or expulsion from the University.

All students should read and be familiar with the Regulations on Academic Student Misconduct (www.usask.ca/secretariat/student-conduct-appeals/StudentAcademicMisconduct.pdf) as well as the Standard of Student Conduct in Non-Academic Matters and Procedures for Resolution of Complaints and Appeals (www.usask.ca/secretariat/student-conduct-appeals/StudentNon-AcademicMisconduct.pdf)

For more information on what academic integrity means for students see the Student Conduct & Appeals section of the University Secretary Website at: www.usask.ca/secretariat/student-conduct-appeals/forms/IntegrityDefined.pdf

EXAMINATIONS WITH ACCESS AND EQUITY SERVICES (AES)

Students who have disabilities (learning, medical, physical, or mental health) are strongly encouraged to register with Access and Equity Services (AES) if they have not already done so. Students who suspect they may have disabilities should contact the Student Affairs Coordinator at the Office of Student Affairs (OSA) for advice and referrals. In order to access AES programs and supports, students must follow AES policy and procedures. For more information, check www.students.usask.ca/aes, or contact AES at 966-7273 or aes@usask.ca.

Students registered with AES may request alternative arrangements for mid-term and final examinations.

Students must arrange such accommodations through the Office of Student Affairs (OSA) by the stated deadlines. Instructors shall provide the examinations for students who are being accommodated by the deadlines established by AES.

STUDENT SUPPORTS

COLLEGE OF MEDICINE, OFFICE OF STUDENT AFFAIRS

Student Affairs offers confidential support and advocacy at arm's length from the academic offices. For more information, in Saskatoon please contact:

COM Student Affairs Coordinator (Saskatoon): Edith Conacher edith.conacher@usask.ca (306) 966-4751

COM Student Affairs Coordinator (Regina): Lisa Persaud lisa.persaud@saskhealthauthority.ca (306) 766-0620

Student Affairs Director: (Regina): Dr. Nicole Fahlman nicole.fahlman@usask.ca (306) 209-0142

Student Affairs Director: Dr. Tiann O'Carroll at tiann.ocarroll@usask.ca – (306) 529-0777

STUDENT LEARNING SERVICES

Student Learning Services (SLS) offers assistance to U of S undergrad and graduate students. For information on specific services, please see the SLS web site <http://library.usask.ca/studentlearning/>.

STUDENT AND ENROLMENT SERVICES DIVISION

The Student and Enrolment Services Division (SESD) focuses on providing developmental and support services and programs to students and the university community. For more information, see the students' web site <http://students.usask.ca>.

FINANCIAL SUPPORT

Any student who faces challenges securing their food or housing and believes this may affect their performance in the course is urged to contact Student Central (<https://students.usask.ca/student-central.php>).

ABORIGINAL STUDENTS CENTRE

The Aboriginal Students Centre (ASC) is dedicated to supporting Aboriginal student academic and personal success. The centre offers personal, social, cultural and some academic supports to Métis, First Nations, and Inuit students. The centre is also dedicated to intercultural education, bringing Aboriginal and non-Aboriginal students together to learn from, with and about one another in a respectful, inclusive and safe environment.

Students are encouraged to visit the ASC's Facebook page (<https://www.facebook.com/aboriginalstudentscentre/>) to learn more.

As we gather here today, we acknowledge we are on Treaty Six Territory and the Homeland of the Métis. We pay our respect to the First Nation and Métis ancestors of this place and reaffirm our relationship with one another. We recognize that in the course of your studies you will spend time learning in other traditional territories and Métis homelands. We wish you safe, productive and respectful encounters in these places.