Elective Clinical Rotations

MEDC 407.34
Year 4 Term 1 and 2
COURSE DESCRIPTION
This course is designed to allow medical students to further pursue their own interests and to individualize elective experiences in keeping with their individual professional goals. Knowledge, skills, and attitudes are further developed in a clinical context selected by students. They may also experience an opportunity to conduct research relevant to medical practice.

Prior to the completion of the course an integrated OSCE will be held that is linked to the overall clerkship experience focusing on aspects of medical expert, communicator, and professional.

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 this course, students will be expected to:
Medical Expert
1. Obtain a relevant patient-centered history including a description of the symptoms, relevant positive and negative features, and illness experience.
2. Conduct a patient centred physical exam identifying positive and negative physical signs while optimizing patient comfort.
3. Diagnose common and undifferentiated clinical presentations.
4. Develop an appropriate management plan including selection and interpretation of relevant investigations and pharmacologic/non-pharmacologic therapies.

Communicator
1. Adapt personal communication style to meet patient’s needs such as: communication style, knowledge level and cultural context.
2. Communicate information about clinical encounters and management plans to supervising physicians and/or team member including hand-over of care.
3. Maintain accurate, comprehensive, legible, and up-to-date medical records.

Collaborator
1. Collaborate with patients, families, and care-givers to be active participants in their care.
2. Demonstrate positive relationships with preceptors and colleagues during each elective experience.

Health Advocate
1. Recognize barriers to healthcare and health promotion that may be unique to the patients or community encountered.
2. Identify advocacy measures for addressing the needs of all stakeholders encountered within a clinical experience.

Scholar
1. Identify opportunities for learning and growth through reflection and assessing personal performance through formal and informal feedback.
2. Describe the principles of evidence-informed medicine when creating a patient-centered care plan.

Professional
1. Demonstrate professional behavior such as: punctuality, completing tasks in a timely fashion, appropriate attire, and respectful attitudes to patients, families, and other health care providers.
2. Apply ethical principles including patient autonomy, privacy, and confidentiality.
3. Demonstrate self-knowledge, recognize limits of knowledge/experience and seek help appropriately.

Leader
1. Demonstrate effective time management.
2. Employ information technology effectively in patient care.
3. Develop a career development plan with strategies for enhancement of professional goals and practice.

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

SASKATOON SITE
Dr. Jessie Baptiste
Email: jessie.baptiste@gmail.com
Phone: (306) 655-1227
Saskatoon RUH
Email: carolyn.blushke@usask.ca
Phone: (306) 966-7693
Fax: (306) 966-2601

Lara Hugo (Administrative Assistant)
Email: lah827@mail.usask.ca
Phone: (306) 966-5891

REGINA SITE
Dr. Joelle McBain (Course Chair)
Email: mcbainjoe@me.com
Phone: (306) 766-4890
Regina RGH
Email: Annie.Ethier@saskhealthauthority.ca
Phone: (306) 766-4890
Fax: (306) 766-4833

PRINCE ALBERT SITE
Nicole Toutant (Administrative Coordinator)
Email: nicole.toutant@usask.ca
Phone: (306) 765-6787
Fax: (306) 765-6783
Prince Albert VGH 420
https://medicine.usask.ca/
COURSE MATERIAL ACCESS
Course materials will be specific to each elective.

Undergraduate Diagnostic Imaging Fundamentals E-Book
The Undergraduate Diagnostic Imaging Fundamentals, by Dr. Brent Burbridge (MD, FRCPC) is an e-book resource to augment the presentation for imaging of common clinical conditions. Guiding principles related to minimizing radiation exposure, requesting appropriate imaging, and static images are enhanced and discussed. Additionally, users can access other imaging from the Dicom viewer (ODIN) to further advance their experience with viewing diagnostic imaging pathologies.

https://openpress.usask.ca/undergradimaging/

RECOMMENDED MEDICAL INSTRUMENTS
A stethoscope is required. The hospitals provide examining kits consisting of ophthalmoscope/otoscope and reflex hammer on most wards (the quality and availability of these is variable). PPE (Personal Protective Equipment) is strongly encouraged and available in most patient areas. This is not limited to standard precautions which are the basic level of infection control which should be used in all patients all of the time.

RESOURCES
Each elective will have different resources based on the specialty and location. http://www.choosingwiselycanada.org/recommendations/

COURSE ASSESSMENT OVERVIEW

<table>
<thead>
<tr>
<th>Component</th>
<th>Component Requirement</th>
<th>Weighting in Final Mark</th>
</tr>
</thead>
<tbody>
<tr>
<td>Summative Clinical Assessment (ITAR)* from Electives</td>
<td>70%</td>
<td>80%</td>
</tr>
<tr>
<td>OSCE</td>
<td>Pass</td>
<td>20%</td>
</tr>
<tr>
<td>Total Course Mark</td>
<td></td>
<td>100%</td>
</tr>
</tbody>
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SUMMATIVE CLINICAL ASSESSMENT (ITARs)
The summative clinical assessments (ITARs) are set to a pass mark of 70% and will be weighted equally in the determination of the final grade.

OSCE
There will be one OSCE for the electives course. The OSCE pass mark will be set using an approved standard setting method as indicated by the College of Medicine’s Assessment Policy. The standard setting method will reflect the specific difficulties of items in this test form and pass marks may vary from assessment to assessment.
This final OSCE will occur after the elective time is done and will be adjusted to a pass mark of 70%. It will cover a systems approach that integrates skills learned throughout the clerkship and electives year. ie. Medical expert, communicator, professional, advocator etc.
COURSE REMEDIATION AND PASS/FAILURE POLICY

The requirements for successful completion of the Electives Course are listed below. Please note that students must meet the overall Year 4 graduation standards in order to graduate: (see Student Information Guide)

- Students will be considered to have successfully completed the Electives Course if they have achieved a minimum 70% average grade in each of the elective rotations and a “passing” grade on the OSCE.

- Students who have not received the required 70% average grade in any of the elective rotations, or who failed the OSCE, will be deemed to be experiencing academic difficulty. The severity of academic difficulty will be based on a weighted grade deficit assessment (see Table 1 for grade deficit point allocation rubric). Students accumulating 1 or more deficit points at any point in the course will be required to meet with the Course Director and/or a course sub-committee of at least 3 people (made up of a relevant Elective coordinator; Year 4 Chair and Year 3 chair or designates) to discuss ways to improve academic performance and to plan remediation. The student is encouraged to invite a Student Services representative present if desired. With any further accrual of deficit points, the student will be required to meet with the sub-committee again. If these grade deficits are not identified until the end of term, then a sub-committee meeting may not be held, but the academic outcomes will be determined by the promotions committee.

- Students who are identified as being in academic difficulty as defined in (B) above may be offered remediation for the elective rotation and/or OSCE for which they did not achieve the standard. The Year 4 chair in consultation with a relevant elective coordinator will determine the specific type of remediation needed for each individual student, targeted to the areas of academic weakness. This remediation may be in the form of additional rotational weeks, supplemental assignments, and/or supplemental examinations as determined by the rotation director and/or course chair(s).

- A student who has accrued 4 or more grade deficit points in Electives Course will be considered to have been unsuccessful in the Electives Course and will NOT be offered further supplemental assignments and/or examinations as per usual course policy. Further decisions regarding academic outcomes will be adjudicated by the Clerkship Promotions Committee and the Student Academic Management Committee.

- Success in any supplemental assessment will be accorded a maximum grade equivalent to the minimum requirement for that component of the course (70% for a Rotation and the standard- set “pass” score for each OSCE). Remediation will most likely occur by the end of Year 4.

- Students with significant professionalism concerns may also be deemed unsuccessful in the course on the basis of unprofessional conduct.

Table 1: Deficit Point Allocation

<table>
<thead>
<tr>
<th></th>
<th>Initial Deficit Points</th>
<th>Failed Remediation Deficit Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Elective Rotation</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>OSCE</td>
<td>1</td>
<td>2</td>
</tr>
</tbody>
</table>
ATTENDANCE EXPECTATIONS

All scheduled electives are mandatory – see Electives Policy.

Unexplained absences will be treated very seriously and will prompt a meeting to discuss professionalism, with associated documentation. These absences may be reflected in the final grade and may constitute grounds for failure of the rotation, even if the student has passed other assessments. Students should contact the UGME office, and rotation coordinator or departmental administrative assistant and preceptor for that particular elective as soon as possible if an absence is necessary.

COURSE EVALUATIONS QUALITY IMPROVEMENT
The following changes reflect course quality review recommendations and student feedback:
- Solid Organ Transplant and Integrative Medicine are now included as elective options.

COURSE MODULES
Clinical Elective Rotations
All clerks must complete a minimum of 20 weeks of electives. There are 22 weeks of electives scheduled, with the potential for 1 week (plus 1 week carry over from Year 3) of vacation time, and the potential for two weeks of remediation. Fifteen weeks are set prior to the CARMS application deadline. Students should be aware however that the Medical Students Performance Record (MSPR)/Dean’s letter is submitted to CARMS at the beginning of November, therefore it is recommended to focus on the first 13 weeks of elective time for obtaining appropriate comments and/or reference letters. The Office of Career Advising and Mentorship is available for further guidance for elective planning. Three weeks of protected time will be set for CARMS interviews.

Specific elective schedules will be dependent on the elective chosen.

Call – Call may be expected on some of the elective rotations. This will need to be arranged individually between the preceptor and/or the department coordinator for that elective.

For immunization information please see here: https://afmcstudentportal.ca/immunization

Electives General Information

ELECTIVES POLICY
1. Purpose
1.1. To state elective expectations regarding approved sites, duration, clerk assessment forms and elective evaluations, the appropriate procedure for elective approval and change/cancellation requests, immunization requirements, as well as malpractice and personal insurance.
1.2. To outline the importance of additional electives with the understanding that clerks need vacation time to support their mental, physical, and spiritual wellness.
1.3. To ensure compliance with Accreditation Standards:
- Standard 6.5a: There are opportunities for elective experiences in the medical curriculum particularly in the later years of the educational program that permit medical clerks to gain exposure to and deepen their understanding of medical specialties reflecting their career interests and to purse their individual academic interests.
- Standard 6.5b: The medical school has policies or practices that encourage medical clerks to use electives
to pursue a broad range of interests in addition to their chosen specialty.

2. Definitions

**UGME**: Undergraduate Medical Education.

**CACMS**: The Committee on Accreditation of Canadian Medical Schools (CACMS) was founded to act as the reliable authority for the accreditation of programs of medical education leading to the MD degree in Canada. The CACMS accredits complete and independent medical schools whose students are geographically located in Canada for their education, and which are offered by universities that are chartered and operated in Canada. (Reference: https://cacms-cafmc.ca/about-cacms)

**Summative assessment**: The quantitative assessment used to measure students’ understanding and theoretical application skills after a predetermined period of instruction of a section, chapter, unit, module, or course.

**Formative assessment**: The assessment used formally and informally to monitor as well as support students’ learning progress during instruction of a course/rotation. It typically involves qualitative or narrative feedback (rather than quantitative scores) to focus on specific content details and aspects of performance.

**CaRMS**: Canadian Resident Matching Service.

**AFMC**: Association of Faculties of Medicine of Canada.

3. Scope

This policy applies to U of S College of Medicine undergraduate students in the graduating class of 2018 and onward.

4. Policy Guidelines

Clerks are responsible for arranging their electives. Electives may be completed at:
- Any CACMS accredited medical school and/or LCME accredited North American medical school.
- Approved international sites.
- Other sites as approved by the UGME Year Chair.

Clers will not be granted credit for an elective supervised by a member of their immediate or extended family as well as anyone with whom they have a personal relationship with or have another conflict of interest. Additionally, clerks will not be granted credit for an elective with any physician providing care to them, or physicians with the Office of Student Affairs. [https://medicine.usask.ca/policies/conflict-of-interest.php](https://medicine.usask.ca/policies/conflict-of-interest.php)

Clerks are strongly encouraged to meet with a Career Advisor prior to their electives application to develop a personalized learning plan for their elective year. The electives worksheet will then be submitted to the UGME office [ugme.electives@usask.ca](mailto:ugme.electives@usask.ca) and sent to the appropriate Year Chair/ Site Coordinator for approval, recognizing that changes may occur due to scheduling. Focus will be placed on the 12 weeks of electives prior to CaRMS.

All elective applications must be requested through the appropriate Department Coordinators. Electives cannot be scheduled directly with an individual preceptor or site as this impedes departmental scheduling and coordination of clerks. Clerks looking for a certain experience must include this request in their elective form or speak with the Department Coordinator. Before starting an elective, clerks must have approval from the Year Chair or Year Site Coordinator. Clerks must ensure pertinent information regarding each elective is current and accurate in One45, and are responsible for completing and submitting the elective summative assessment form as well as the elective evaluation.

All clerks must complete a minimum of 20 weeks of electives. There are 22 weeks of electives scheduled, with the potential for 1 week (plus 1 week carry over from Year 3) of vacation time, and the potential for two weeks of remediation/independent learning time. Please note the maximum amount of time away from an elective in order to be considered complete is 3 days out of a 2-week elective. One-week electives can
be counted towards the total number, but no vacation time will be allowed during this week.

An elective must be passed in order to receive credit. If a student fails an elective for whatever reason, they may be required to remediate, even if they have met the 20 week minimum. Most electives are a minimum of two weeks in duration. Typically, a maximum of 6 weeks will be allowed. Electives start on Monday (Tuesday in the case of statutory holidays) and end on Friday. Weekends are for travel time. It is recommended that Clerks choose to participate in electives in Saskatchewan during the CaRMS match results to facilitate working on the second iteration and accessing the support to do so.

5. Procedures
5.1 Electives in Departments at U of S Sites
Clerks must submit the in-province (Internal) elective application forms to the Department Coordinator for approval at least 1 month prior to the start date of the proposed elective through the Sharepoint site. In-province elective applications can be submitted up to 26 weeks in advance of the elective start date. Refer to the elective course syllabus for detailed timeline information. The application form is available online with a valid NSID and password and can be accessed at:

https://share.usask.ca/medicine/ugme/electives/SitePages/Home.aspx
https://share.usask.ca/medicine/ugme/electives/SitePages/Home.aspx
https://share.usask.ca/medicine/ugme/electives/SitePages/Home.aspx
https://share.usask.ca/medicine/ugme/electives/SitePages/Home.aspx

Clerks must review the elective objectives and develop individual objectives that apply in conjunction with their elective supervisor.

The Department Coordinator, with their administrative support, will submit their approval or rejection of the requested elective through the online SharePoint form system. The Year Chair/Site Coordinator will be notified at this point if the elective is approved. Clerks will be notified at this point if the elective application is rejected. The Year Chair/Site Coordinator will give final approval or rejection of the elective application and clerks will be notified of either status. All electives must receive approval from the appropriate departments and Year Chair/Site Coordinator to be considered official. Students are then responsible for either accepting or cancelling the approved elective. Site specific UGME staff will ensure entry of elective information into One45. Once submitted, the elective will be considered finalized.

Preceptors will be sent a Summative Assessment form from the UGME Office by the last week of the elective. The clerk is responsible for ensuring an elective Summative Assessment form is completed by the preceptor, as well as submitted to and received by the UGME Office. Clerks will be notified within 2 weeks of the end date of the elective if a Summative Assessment form has not been received. Clerks must ensure the UGME Office receives their final Summative Assessment form from the appropriate preceptor within 6 weeks of the elective end date. Failure to do so will be considered a failed elective and no credit will be granted. The clerk is responsible for completing the appropriate elective evaluation within 4 weeks of the elective end date and submitting it to the UGME Office.

5.2 Electives in Other Canadian Provinces
Clerks must apply through the AFMC portal for electives at all other Canadian medical schools. Most application timelines are 26 weeks prior to the start date of the elective. Refer to the AFMC portal for official timelines: https://www.afmcstudentportal.ca/ https://www.afmcstudentportal.ca/ https://www.afmcstudentportal.ca/ https://www.afmcstudentportal.ca/
- AFMC Clerk Registration Information
- AFMC Clerk Application Process
- AFMC Help Documents

For confirmed electives to be added to One45, the clerk must email the official confirmation from the AFMC Portal to: ugme.electives@usask.ca. In order to be approved, the student must include a preceptor name
and email with the AFMC confirmation. Once submitted, the elective will be considered finalized. The clerk is responsible for ensuring an elective Summative Assessment form is completed by the preceptor, as well as submitted to and received by the UGME Office. Clerks can send the Summative Assessment Form through One45 by setting up a temporary account through the Sharepoint site: https://share.usask.ca/medicine/ugme/electives/Lists/Outofprovince%20Elective%20Preceptors/NewForm.aspx. Clerks will be notified within 2 weeks of the end date of the elective if a Summative Assessment form has not been received. Clerks must ensure the UGME Office receives their final Summative Assessment form from the appropriate preceptor within 6 weeks of the elective end date. Failure to do so will be considered a failed elective and no credit will be granted. The clerk is responsible for completing the appropriate elective evaluation within 2 weeks of the elective end date and submitting it to the UGME Office.

For electives 4 weeks or longer, it is strongly recommended that the clerk requests their preceptor to provide mid-point formative feedback and complete a Formative Assessment form; however, a Formative Assessment form is not required to be submitted to the UGME Office.

5.3 International Electives

The minimum elective duration is 2 weeks with a maximum of 8 weeks. Clerks must submit the international electives application form to the Year Chair for approval at least 6 months before the start date of the proposed elective. The application can be found on the Sharepoint site: https://share.usask.ca/medicine/ugme/electives/_layouts/15/start.aspx#/SitePages/Home.aspx A closer application time may be considered if the DSA pre-departure orientation from the Division of Social Accountability has already been completed; however, a minimum of 2 months prior to the start date of the elective is required. Clerks must meet with the Global Health Manager, Division of Social Accountability and participate in the DSA pre-departure orientation course, if they have not already done so. Participation is tracked. Please note that if the pre-departure orientation from the Division of Social Accountability has not been completed, this must be complete prior to the elective being approved.

Clerks must register with the International Student and Study Abroad Center (ISSAC). ISSAC requires all students to complete the Travel Safety Plan as well as provide emergency contact information and confirmation of insurance. If the elective is deemed to be in a high-risk area as per ISSAC criteria, the Year Chair (or designate) will be notified and the elective will be denied. Appeals of denied international electives can be made to the Dean of Medicine with a carbon copy (cc) to the Manager, Undergraduate Medical Education.

The clerk is responsible for ensuring the UGME Office has received confirmation of registration with the ISSAC office as well as the Division of Social Accountability. Once confirmations and the international elective form are received, the elective will be considered for final approval. The Year Chair will give final approval or rejection of the elective application and clerks will be notified of either status. For approved electives to be added to One45, the clerk must email the official confirmation of DSA orientation completion from the ISSAC to: ugeme.electives@usask.ca. Once submitted, the elective will be considered finalized.

Clerks may be required to purchase additional malpractice insurance depending on the elective location (Refer to article 15. Insurance for more details). Extra funding opportunities may exist through the Division of Social Accountability in the form of research and travel awards. Please contact the Division of Social Accountability Office for inquiries and/or additional information.

The clerk is responsible for ensuring an elective Summative Assessment form is completed by the International Elective preceptor and submitted to the UGME Office. Clerks will be notified within 2 weeks of the end date of the elective if a Summative Assessment form has not been received. It is their responsibility to contact the preceptor and ensure the Summative Assessment form is completed. Clerks must ensure the UGME Office receives their final Summative Assessment form from the appropriate preceptor within 6 weeks of the elective end date. Failure to do so will be considered a failed elective and no credit will be
The clerk is responsible for completing the appropriate elective evaluation within 6 weeks of the elective end date and submitting it to the UGME Office. For electives 4 weeks or longer, it is strongly recommended that the clerk requests their preceptor to provide mid-point formative feedback and complete a Formative Assessment form; however, a Formative Assessment form is not required to be submitted to the UGME Office.

The clerk must participate in a post-elective debriefing with the Division of Social Accountability.

This meeting will include feedback on the elective learning environment, overall learning experience, and any challenges faced. The clerk should notify the UGME upon their return from their elective. If the clerk requires further supports related to experiences during their elective, these will be facilitated through the Office of Students Affairs.

6. Diversity Requirement
As per a national agreement among 4-year M.D. programs, clerks must complete a minimum of 3 diversity electives, each a minimum of 2 weeks in length. This is defined as any discipline/specialty that is a direct entry into CaRMS, and must include 3 different general areas (e.g. Internal Medicine, Surgery, Anesthesia, Emergency Medicine, Pediatrics, Psychiatry, Family Medicine, PM&R, Pathology, Radiology, Nuclear Medicine, etc.). Elective diversity allows the clerk to experience a broader scope of medicine and may help with residency preparation.

Please note the AFMC has changed the diversity requirements for the Class of 2021. Please see the AFMC website for updates.

7. Vacation
In Year 4, clerks are entitled to 3 weeks of vacation: 1 week of their choice and 2 weeks during the December break. To ensure proper work-life balance and maintenance of overall wellness, it is strongly encouraged that all clerks utilize the entirety of their allotted vacation time. Clerks may defer up to 1 week of vacation time from Year 3 into Year 4.

Please note the maximum amount of time away from an elective in order to be considered complete is 3 days out of a 2-week elective. One-week electives can be counted towards the total number, however they cannot be combined with a week of vacation and count as 2 weeks of electives. Clerks are discouraged from taking electives during the holiday break in December due to potential supervision concerns, as many clinical learning sites have fewer staff and residents during this time. If a clerk proposes to undertake an elective during this time, the clerk must provide written documentation from their preceptor stating they will receive adequate supervision.

8. Additional (Early) Elective Time
Clerks can be considered for an additional 3 weeks of elective time during Year 3 (to a maximum of 25 weeks total of electives). The clerk must be in good academic standing as well as meeting expectations on all rotations to be considered and approved for additional elective time. The Year Chair must approve the extra elective time prior to beginning the elective application process. Clerks will not be approved, nor will receive credit, for more than 25 weeks of electives. Please note that even if an elective is completed in Year 3, all scheduled weeks of electives in Year 4 must still be completed (outside of vacation and education time).

9. Application Procedure for Additional (Early) Elective Time
The clerk must submit a written request to the Year Chair no later than 1 month prior to the start date of the elective. The request must include a description of the additional elective and rationale for why the additional elective time is needed. Additional elective time requested during the December break must be accompanied by correspondence from the proposed elective Department Coordinator indicating that there will be adequate clinical supervision of the clerk. The clerk must also apply for and have vacation time approved prior to applying for elective.

The relevant Year Chair reviews additional elective requests. If the following criteria are met, the additional
elective time will typically be approved:
- The clerk is in good academic standing;
- The request does not exceed the maximum 25 weeks of electives; and
- There is clear rationale for the additional elective time.

The Year Chair will communicate the application status to the clerk as soon as possible, but ideally within 2 weeks of the request submission. If a request is rejected, the clerk will be provided with an explanation. Application appeals can be submitted by the clerk to the Assistant Dean, Academic.

10. Cancellation Policy
Electives should be cancelled by the clerk at least 6 weeks prior to the start date of the elective. Failure to do so will result in a discussion regarding professionalism and possible documentation through a Professionalism Report/Discussion Form. Exceptional circumstances requiring an elective cancellation will be considered.

Clerks must notify the department where and when the elective was to take place. In addition, the UGME Office must be notified of the cancellation at: ugte.elective@usask.ca. Please note that electives done at schools through the AFMC portal and international electives may have their own cancellation policy. Clerks will be expected to adhere to individual school’s guidelines and procedures.

11. Immunizations
All clerks must have received their mandatory immunizations OR shown proof of immunity prior to the start date of all electives. This is generally required during the application process. Any clerk not having met this requirement must report to the Occupational Health and Safety Office to update any missing immunizations. Immunization requirements are listed at: https://afmcstudentportal.ca/immunization. For patient protection, all clerks (who do not have medical contradictions) are expected to be immunized for influenza. Clerks will be advised of any updates to provincial or regional public health policies for Saskatchewan electives. Additional immunization requirements (i.e. international electives) will be at the student’s expense.

12. N95 Mask Fittings
All clerks are required to have a current and valid N95 mask fitting.

13. Police Information Check
External electives generally require a current criminal record and may require a vulnerable person’s check. These can be organized through the local Police Department. Please check the AFMC portal for individual school requirements. It is the student’s responsibility to provide the UGME and CPSS with any changes to the original Criminal Record Check submitted for clerkship.

14. Blood/Body Fluid Exposure
The Medical Student Exposure to Infectious and Environmental Hazards Policy and local health region/authority occupational health procedure can be accessed at: http://medicine.usask.ca/policies/medical-student-exposure-to-infectious-and-environmental-hazards.php

15. Insurance
University of Saskatchewan clerks are covered under the U of S CURIE insurance policy for up to 25 weeks of electives. This includes any contractual liability, professional and malpractice liability, cross liability, and tenant’s legal and employer’s liability arising out of their elective duties. Coverage applies to any electives taken within Canada.
Not all international electives are covered under CURIE (i.e. U.S. electives) and additional insurance will need to be purchased at the student’s expense. It is the student’s responsibility to ensure that insurance is purchased prior to the start date of the elective and to provide proof of insurance coverage to the UGME Office 2 weeks prior to the start date of the approved elective. If it is found that insurance is not in place, the elective will be cancelled and no credit received.

Please contact the UGME Office for any insurance inquiries at: ugm.electives@usask.ca

16. Distribution
This policy will be distributed to students as well as Department Coordinators and Site Directors.

17. College of Medicine Responsibilities
The Assistant Dean, Academic, is responsible for providing oversight to the overall administration of the Clerkship Electives Policy within the College of Medicine.
The Manager, Undergraduate Medical Education, with the assistance of the Undergraduate Medical Education Office, is responsible for the implementation, monitoring, maintenance, and evaluation of the Clerkship Elective Policy within the College of Medicine campus in Saskatoon, Saskatchewan.

18. Non-Compliance
Clerks not complying with the procedures outlined above will have their elective cancelled and no credit received. Instances or concerns of non-compliance with the U of S Clerkship Elective Policy should be brought to the attention of the Vice-Dean, Education or the Associate Dean, Undergraduate Medical Education, within the College of Medicine.

19. Contact
Sherry Pederson
Manager, UGME
Email: sherry.pederson@usask.ca
Phone: (306) 966-6142
Fax: (306) 966-2601
B526 Health Sciences Building, U of S
107 Wiggins Road
Saskatoon, SK S7N 5E5

INDEPENDENT LEARNING (IF APPLICABLE)
Independent, self-directed reading and exercises applicable to each elective will be important. Students are strongly encouraged to read around important clinical concepts specific to each elective.

COURSE DELIVERY
Students will learn through a variety of methods including:
- Independent self-directed reading
- In-patient and out-patient exposures

University of Saskatchewan Elective Information
The elective program is designed to allow medical students to pursue their own interests and to design programs in keeping with their individual goals. Elective opportunities are available in the program areas listed below (not all electives are available at all sites). Further information may be found under the specific program in discipline-specific sections below.
The online application form for electives is available on Sharepoint and on the University of Saskatchewan, College of Medicine website.

https://share.usask.ca/medicine/ugme/electives/SitePages/Home.aspx
https://share.usask.ca/medicine/ugme/electives/SitePages/Home.aspx
https://share.usask.ca/medicine/ugme/electives/SitePages/Home.aspx
https://share.usask.ca/medicine/ugme/electives/SitePages/Home.aspx
https://share.usask.ca/medicine/ugme/electives/SitePages/Home.aspx

Please complete the form and submit it to the department in which you wish to do the elective.
Aboriginal Health

CONTACT
Valerie Arnault-Pelletier, Aboriginal Coordinator
Phone: (306) 966-5901
Cell: (306) 230-0683
Email: valerie.arnault@usask.ca

APPLICATION TIMELINE
26 weeks to 2 months prior to start date

APPLICATION REQUIREMENTS
Minimum Length: 2 weeks
Vacation/Educational Leave: Not permitted during this elective.

DESCRIPTION
This elective in Aboriginal Health has been developed by the University of Saskatchewan and Northern Medical Services in conjunction with All Nations Healing Hospital in Fort Qu’Appelle (under the Regina Qu’Appelle Health Region) and the Dakota Whitecap First Nation. The Clerk can choose to do his or her elective at either of these two sites. Before the elective is approved, the Clerk will be required to meet with Valerie Arnault-Pelletier, the Aboriginal Coordinator, to discuss his or her goals as well as receive an orientation package for the elective. Clerks will be under the supervision of a preceptor at their chosen site who will determine the Clerk’s schedule.

Application and Debriefing Process
1. Students who are interested in this elective are required to make an appointment with the Aboriginal Coordinator.
   a. Orientation materials will be provided at this time.
2. Students must fill out an elective application form and submit it to the Aboriginal Coordinator for approval.
3. After the completion of the elective, students are required to make an appointment with the Aboriginal Coordinator to discuss their elective experience.

A comprehensive approach will be assessed through these guiding objectives:
1. Obtain a patient-centered history and physical examination on patients with Aboriginal health issues.
2. Develop a differential diagnosis, clinical approach and initial management of a patient presenting with an Aboriginal health issue.
3. Adjust personal communication style to patient and extra professional team needs considering knowledge level, background, culture etc.
4. Identify advocacy measures relevant to the health promotion of their patients, families, and communities.
5. Manage workload effectively.
6. Demonstrate self-directed learning utilizing the appropriate resources.
7. Demonstrate professional behavior informed by ethical/legal standards such as: informed consent, confidentiality, capacity, patient autonomy.
A focus will be on providing a culturally safe and relationship-centred care model for First Nations and Metis patients, their families and communities. Work will be done with Aboriginal health care professionals and traditional healer in the provision of care.
Anesthesia

CONTACTS

SASKATOON SITE
Megan Murk (Electives Coordinator)
Email: Megan.Murk@saskhealthauthority.ca

REGINA SITE
Kim Gilbert (Electives Coordinator)
Email: kimdawn.gilbert@saskhealthauthority.ca

PRINCE ALBERT SITE
Nicole Toutant (Electives Coordinator)
Email: nicole.toutant@usask.ca
Phone: (306) 765-6787

APPLICATION TIMELINE
26 weeks prior to elective start date

APPLICATION REQUIREMENTS
Minimum length: 1 week
Recommended length: 2 weeks

BLACKOUT DATES – SASKATOON
July 1 – Aug 4, 2019
Dec 23, 2019 – Jan 5, 2020
Feb 17 – 23, 2020
Apr 13 – 19, 2020

DESCRIPTION
This elective is aimed at broadening the clerk’s knowledge base and clinical skills in anesthesia. This may be done through a variety of instructional methods and require the clerk to be self-directed in regards to learning opportunities. A comprehensive approach will be assessed through these guiding objectives:

1. Obtain a patient-centered history and physical examination on a patient presenting with common anesthetic disorders/presentations
2. Develop a differential diagnosis, clinical approach and initial management of a patient presenting with common anesthetic disorders/presentations
3. Adjust personal communication style to patient and extra professional team needs considering knowledge level, background, culture etc.
4. Identify advocacy measures relevant to the health promotion of their patients, families, and communities
5. Manage workload effectively
6. Demonstrate self-directed learning utilizing the appropriate resources.
7. Demonstrate professional behavior informed by ethical/legal standards such as: informed consent, confidentiality, capacity, patient autonomy
The clerk will be expected to have an in-depth clinical knowledge about commonly encountered anesthesia situations which may include but are not limited to: pre-operative evaluation and optimization, intraoperative anesthesia management and monitoring, and post-operative care including recovery room, intensive care unit and pain management, vascular access and airway management.
Clinical Ultrasound

CONTACT
Dr. Nicholas Humniski
Email: njh196@mail.usask.ca

APPLICATION TIMELINE
26 weeks prior to start date.

APPLICATION REQUIREMENTS
Their requests should include a CV, including relevant logbook, highlighting their efforts in developing their clinical ultrasonography skills during their undergraduate medical education. Students will be accepted on merit basis and at minimum must be in good standing with the College of Medicine.

Minimum Length: **Elective only available from February 3 – February 16, 2020**

DESCRIPTION
Clinical Ultrasound is focused ultrasonography performed and interpreted at the patient’s bedside by a health care provider in conjunction with his or her clinical examination. It is distinct from the physical examination, adding anatomic, functional and physiologic information to the management and care decisions of the patient.

The Clinical Ultrasound Elective in Clerkship (CUSEC) comprises of two components (with the first qualifying students for the second as a pre-requisite).

The prerequisite is a longitudinal apprenticeship during the first year of clerkship. This is undertaken by students upon successful completion of their Clinical Skills IV course. Students record supervised and unsupervised scans in a logbook or preferably in the EchoLog app (available on iTunes). Students should complete several scans before the beginning of their 4th year of clerkship to be eligible for CUSEC.

The elective is an intensive 2-week clinical ultrasonography training experience (taking place in the 2nd year of clerkship) in Saskatoon, SK. The first week of the CUSEC is non-service in nature. It comprises of a 5 day “finishing school” where skills will be honed on standardized as well as real patients, pathology cases and video libraries reviewed, and competency assessed.

**Longitudinal apprenticeship component (pre-requisite)**
The apprenticeship is focused on image generation skill development. This will require a combination of directly and in-directly supervised scans (in the form of saved images)

Scan requirements for the longitudinal clinical ultrasound apprenticeship.

<table>
<thead>
<tr>
<th>Clinical Application</th>
<th># of supervised scans (approx.)</th>
<th># of unsupervised recorded scans</th>
</tr>
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<tbody>
<tr>
<td>Scan for pericardial effusion</td>
<td>25</td>
<td>25</td>
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<tr>
<td>Scan for pleural effusion/hemothorax</td>
<td>15</td>
<td>15</td>
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</table>
Scan for free fluid in the abdomen/ hemoperitoneum | 25 | 25
Scan for hydronephrosis (moderate and severe) | 15 | 15
Scan for bladder volume | 5 | 10

**Clinical Ultrasonography Elective in Clerkship in 4th Year**

During the 2-week-long elective in clinical ultrasonography, trainees will spend time with instructors polishing their skills (both on real and standardized patients), reviewing cases, and completing a competency assessment. During this intensive elective in clinical ultrasonography, we will also introduce 2 new applications: scanning the lung (pneumothorax and interstitial lung syndrome) and AAA. The students will then spend the 2nd week on clinical rotation employing their new skills.

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<th>Monday</th>
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<th>Thursday</th>
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<tbody>
<tr>
<td>Morning</td>
<td>Review of U/S concepts and introduce AAA and Thoracic U/S</td>
<td>Scanning in hospital</td>
<td>Case presentations (1/trainee)</td>
<td>Problem based learning</td>
<td>Competency Assessment (visual, clinical integration)</td>
</tr>
<tr>
<td>Afternoon</td>
<td>Scanning in CLRC (pathology included)</td>
<td>Video/case review</td>
<td>Scanning in CLRC</td>
<td>Final Review</td>
<td>Competency Assessment (skills)</td>
</tr>
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</table>

A comprehensive approach will be assessed through these guiding objectives:

1. Obtain a patient-centered history and physical examination on a patient presenting with common point of care ultrasound disorders/presentations. (when applicable)
2. Develop a differential diagnosis, clinical approach and initial management of a patient presenting with common point of care ultrasound disorders/presentations. (when applicable)
3. Apply basic ultrasound physics, machine controls and transducers in acquiring ultrasound images on patients.
5. Describe the limitations of ultrasound technology: its user-dependence, common imaging artifacts and imaging pitfalls.
6. Adjust personal communication style to patient and extra professional team needs considering knowledge level, background, culture etc.
7. Identify advocacy measures relevant to the health promotion of their patients, families, and communities.
8. Manage workload effectively.
9. Demonstrate self-directed learning utilizing the appropriate resources.
10. Demonstrate professional behavior informed by ethical/legal standards such as: informed consent, confidentiality, capacity, patient autonomy.

The clerk will be expected to have an in-depth clinical knowledge about commonly encountered point of care ultrasound situations which may include but are not limited to: pleural effusion/hemothorax, ascites/hemoperitoneum, pericardial effusion, hydronephrosis, bladder volume, thoracic ultrasound, and abdominal aortic aneurysm.
Community Health & Epidemiology

CONTACT
Dr. Anne Leis (Rotation Coordinator)
Phone: (306) 966-7878
Email: anne.leis@usask.ca

APPLICATION TIMELINE
26 weeks to one month prior to elective start date

APPLICATION REQUIREMENTS
Minimum Length: 2 weeks

DESCRIPTION
This elective will allow the student to work closely with a clinician-scientist actively engaged in both clinical work and clinical quality improvement research. Working closely with the clinician-scientist the student will be exposed to both the research and clinical aspects of such a career option. This may be done through a variety of instructional methods and require the clerk to be self-directed in regards to learning opportunities. Students will be assessed on the following guiding objectives:

1. Obtain a patient-centered history and physical examination on a patient presenting with common disorders/presentations encountered in community health and epidemiology.
2. Develop a differential diagnosis, clinical approach and initial management plan of a patient presenting with common disorders/presentations encountered in community health and epidemiology.
3. Adjust personal communication style to patient and extra professional team needs considering knowledge level, background, culture etc.
4. Identify advocacy measures relevant to the health promotion of their patients, families, and communities.
5. Manage workload effectively.
6. Demonstrate self-directed learning utilizing the appropriate resources.
7. Demonstrate professional behavior informed by ethical/legal standards such as: informed consent, confidentiality, capacity, patient autonomy.
Emergency Medicine

CONTACTS

SASKATOON SITE
Leah Chomyshen (Electives Coordinator)
Email: leah.chomyshen@usask.ca
Phone: (306) 655-1466

REGINA SITE
Ann Finch (Electives Coordinator)
Email: Ann.Finch@saskhealthauthority.ca
Phone: (306) 766-3706

PRINCE ALBERT SITE
Nicole Toutant (Electives Coordinator)
Email: nicole.toutant@usask.ca
Phone: (306) 765-6787

APPLICATION TIMELINE
26 weeks prior to elective start date

APPLICATION REQUIREMENTS
Minimum Length: 1 week

DESCRIPTION
This elective is aimed at broadening the clerk’s knowledge base and clinical skills in emergency medicine. This may be done through a variety of instructional methods and require the clerk to be self-directed in regards to learning opportunities. A comprehensive approach will be assessed through these guiding objectives:

1. Obtain a patient-centered history and physical examination on a patient presenting with common disorders/presentations encountered in emergency medicine.

2. Develop a differential diagnosis, clinical approach and initial management of a patient presenting with common disorders/presentations encountered in emergency medicine.

3. Adjust personal communication style to patient and extra professional team needs considering knowledge level, background, culture etc.

4. Identify advocacy measures relevant to the health promotion of their patients, families, and communities.

5. Manage workload effectively.

6. Demonstrate self-directed learning utilizing the appropriate resources.

7. Demonstrate professional behavior informed by ethical/legal standards such as: informed consent, confidentiality, capacity, patient autonomy.

The clerk will be expected to have an in-depth clinical knowledge about commonly encountered emergency medicine disorders/presentation which may include but are not limited to: abdominal pain, bone/joint pain, chest pain, syncope/vertigo, fever, headache, dyspnea/cough, respiratory distress, nausea/vomiting, intoxication/agitation, altered level of consciousness/seizures, back/flank pain, poisoning/overdose, vaginal bleeding in the first trimester, acute pain, cardiac arrest, anaphylaxis/airway obstruction, burns, injury related to temperature extremes, trauma, shock, stroke.
Family Medicine

CONTACTS

SASKATOON SITE
Tracy Lewis (Electives Coordinator)
Email: Dafm.ugme@saskatoon.usask.ca
Phone: (306) 655-4211

REGINA SITE
Kristen Fuchs (Electives Coordinator)
Email: Kristen.Fuchs@saskhealthauthority.ca
Phone: (306) 766-0449

PRINCE ALBERT SITE
Nicole Toutant (Electives Coordinator)
Email: nicole.toutant@usask.ca
Phone: (306) 765-6787

APPLICATION TIMELINE
26 week to 2 months prior to elective start date

Please note: APPLICATIONS MUST BE MADE THROUGH THE SHAREPOINT SITE. In the event that you have discussed an elective with a preceptor prior to applying please add that information to the application in the comments section and administrative assistants will do their best to accommodate your request. All preceptors must have an active teaching appointment with the U of S. Applications will be considered at sites other than the ones listed on the Sharepoint site as long as the preceptor has an active teaching appointment at the U of S. Applications will be processed by the date in which they were received regardless of the elective start date. It is advisable to apply early.

Applications will be confirmed or rejected a minimum of 8 weeks prior to the start date of the elective. Turn around time to place an elective is on average 2 months but could be longer depending on the availability of preceptors or capacity at sites to take learners. It is NOT NECESSARY to complete an elective at a teaching unit in order to be considered for a Family Medicine residency program in Saskatchewan.

APPLICATION REQUIREMENTS
Minimum Length: 1 week for urban electives; 2 weeks for rural electives

Urban Locations: Saskatoon, Regina, Prince Albert
Rural Locations: Moose Jaw, Weyburn, Estevan, Swift Current, Outlook, North Battleford, Ile a la Crosse, La Ronge, Athabasca, Melfort, Wynyard, Yorkton, Melville, Humboldt, Rosthern, Pelican Narrows

Other sites may be acceptable as long as a preceptor with an active faculty teaching appointment is available.

DESCRIPTION
This elective is aimed at broadening the clerk’s knowledge base and clinical skills in family medicine.

It is expected that the clerk participating in an elective in Family medicine will continue to build on the skills learned in their Core Rotation. Family medicine is a discipline committed to the care of an individual at any
and all life stages, and as such family doctors accept responsibility for the full scope of care of patients in health and illness.

Because of the diverse nature of family medicine, an elective may concentrate on an area of special interest such as sports medicine, palliative care or women’s or men’s health. In this type of elective it will still be expected that the basic skills of family medicine (medical expert, communicator, collaborator, advocate etc) be practiced in a more focused population.

1. Obtain a patient-centered history and physical examination on a patient presenting with common disorders/presentations encountered in family medicine.

2. Develop a differential diagnosis, clinical approach and initial management of a patient presenting with common disorders/presentations encountered in family medicine.

3. Adjust personal communication style to patient and extra professional team needs considering knowledge level, background, culture, age etc.

4. Identify advocacy measures relevant to the health promotion of their patients, families, and communities.

5. Manage workload effectively.

6. Demonstrate self-directed learning utilizing the appropriate resources.

7. Demonstrate professional behavior informed by ethical/legal standards such as: informed consent, confidentiality, capacity, patient autonomy, legal documentation.

The clerk will be expected to have an in-depth clinical knowledge about commonly encountered disorders/presentations in family medicine which may include but are not limited to: excisions, suturing, applying casts, placing of IUDs and performing endometrial biopsies, joint aspirations and injections, vasectomies, IM injections, vaccinations.
Integrative Medicine

CONTACTS

SASKATOON SITE
Dr. Louise Gagne
Email: lgagne@sasktel.net
(306) 477-5683

APPLICATION TIMELINE
4 months prior to start date

APPLICATION REQUIREMENTS
Minimum Length: 2 weeks (available once in the spring and once in the fall beginning in 2020)

Vacation/educational leave: Not permitted during this elective

NOTE: In the event of there being more than one applicant for the elective, priority will be given to a student who demonstrates some prior knowledge of or exposure to integrative medicine.

DESCRIPTION
This elective will allow the student to work closely with physicians who have advanced training in integrative and functional medicine. Working closely with the clinician, the student will actively participate in all aspects of the clinical encounter. A variety of instructional methods will be used and will include time allotted for self-directed learning. Students will complete the CME online course “Environmental Health: An Integrative Approach” available through the University of Arizona Center for Integrative Medicine and achieve a minimum score of 70% on the final assessment. (This course is available at no cost.)
https://integrativemedicine.arizona.edu/education/online_courses.html

Students will be assessed on the following guiding objectives:

1. Obtain a patient-centered history and physical examination on a patient presenting with common disorders/presentations encountered during an integrative medicine consultation.

2. Obtain an expanded patient centered history to identify potentially modifiable lifestyle, dietary and environmental risk factors.

3. Develop a differential diagnosis, clinical approach and initial individualized management plan of a patient presenting with common disorders/presentations encountered during an integrative medicine consultation.

4. Adjust personal communication style to patient and extra professional team needs considering knowledge level, background, culture, etc.

5. Identify advocacy measures relevant to the health promotion of their patients, families and communities.

6. Manage workload effectively.

7. Demonstrate self-directed learning utilizing the appropriate resources.

8. Demonstrate professional behavior informed by ethical/legal standards such as: informed consent, confidentiality, capacity, and patient autonomy.
9. Demonstrate use of assessment and educational tools to enhance the quality of the patient physician clinical encounter.
Internal Medicine

CONTACTS

SASKATOON SITE
Angela Kuffner (Electives Coordinator)
Email: angela.kuffner@usask.ca
(306) 844-1476

REGINA SITE
Shanda Litke (Electives Coordinator)
Email: shanda.litke@saskhealthauthority.ca
Phone: (306) 766-3447

PRINCE ALBERT SITE
Nicole Toutant (Electives Coordinator)
Email: nicole.toutant@usask.ca
Phone: (306) 765-6787

APPLICATION TIMELINE
26 week to two months prior to elective start date

APPLICATION REQUIREMENTS
Minimum Length: 2 weeks (Saskatoon); 1 week (Regina)

DESCRIPTION

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<tr>
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<td>Infectious Diseases</td>
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<td>Nephrology</td>
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Prince Albert offers a general internal medicine elective.

Cardiology

This elective is aimed at broadening the clerk’s knowledge base and clinical skills in cardiology. This may be done through a variety of instructional methods and require the clerk to be self-directed in regards to learning opportunities. A comprehensive approach will be assessed through these guiding objectives:

1. Obtain a patient-centered history and physical exam on a patient presenting with a core cardiology presentation such as: chest pain.
2. Develop a differential diagnosis, clinical approach and initial management of a patient presenting with a core cardiology disorder/presentation such as: chest pain.

3. Interpret an ECG.

4. Adjust personal communication style to patient and extra professional team needs considering knowledge level, background, culture etc.

5. Identify advocacy measures relevant to the health promotion of their patients, families, and communities.

6. Manage workload effectively.

7. Demonstrate self-directed learning utilizing the appropriate resources.

8. Demonstrate professional behavior informed by ethical/legal standards such as: informed consent, confidentiality, capacity, patient autonomy.

**Dermatology**

This elective is aimed at broadening the clerk’s knowledge base and clinical skills in dermatology. This may be done through a variety of instructional methods and require the clerk to be self-directed in regards to learning opportunities. A comprehensive approach will be assessed through these guiding objectives:

1. Obtain a patient-centered history and physical examination on a patient presenting with a core dermatologic presentation.

2. Develop a differential diagnosis, clinical approach and initial management of a patient presenting with common dermatologic disorders/presentations encountered in dermatology.

3. Discuss epidemiology, risk factors and management of common squamous cell carcinoma, basal cell carcinoma and malignant melanoma.

4. Adjust personal communication style to patient and extra professional team needs considering knowledge level, background, culture etc.

5. Identify advocacy measures relevant to the health promotion of their patients, families, and communities.

6. Manage workload effectively.

7. Demonstrate self-directed learning utilizing the appropriate resources.

8. Demonstrate professional behavior informed by ethical/legal standards such as: informed consent, confidentiality, capacity, patient autonomy.

**Endocrinology**

This elective is aimed at broadening the clerk’s knowledge base and clinical skills in endocrinology. This may be done through a variety of instructional methods and require the clerk to be self-directed in regards to learning opportunities. A comprehensive approach will be assessed through these guiding objectives:

1. Obtain a patient-centered history and physical examination on a patient presenting with a core endocrinology presentation.

2. Develop a differential diagnosis, clinical approach and initial management of a patient presenting with common disorders/presentations encountered in endocrinology.

3. Adjust personal communication style to patient and extra professional team needs considering knowledge level, background, culture etc.
4. Identify advocacy measures relevant to the health promotion of their patients, families, and communities.

5. Manage workload effectively.

6. Demonstrate self-directed learning utilizing the appropriate resources.

7. Demonstrate professional behavior informed by ethical/legal standards such as: informed consent, confidentiality, capacity, patient autonomy.

The clerk will be expected to have an in-depth clinical knowledge about commonly encountered Endocrine disorders/presentation which may include but are not limited to: diabetes mellitus, adrenal insufficiency, secondary hypertension, thyroid disorders/presentation, calcium and phosphate abnormalities.

**Gastroenterology**

This elective is aimed at broadening the clerk’s knowledge base and clinical skills in gastroenterology. This may be done through a variety of instructional methods and require the clerk to be self-directed in regards to learning opportunities. A comprehensive approach will be assessed through these guiding objectives:

1. Obtain a patient-centered history and physical examination on a patient presenting with a patient with a core gastroenterology presentation.

2. Develop a differential diagnosis, clinical approach and initial management of a patient presenting with a core gastroenterology presentation.

3. Adjust personal communication style to patient and extra professional team needs considering knowledge level, background, culture etc.

4. Identify advocacy measures relevant to the health promotion of their patients, families, and communities.

5. Manage workload effectively.

6. Demonstrate self-directed learning utilizing the appropriate resources.

7. Demonstrate professional behavior informed by ethical/legal standards such as: informed consent, confidentiality, capacity, patient autonomy.

The clerk will be expected to have an in-depth clinical knowledge about commonly encountered Gastroenterology disorders/presentation which may include but are not limited to: liver abnormalities including ascites, abnormal liver enzymes/function, jaundice, bowel disorders/presentation including irritable bowel syndrome, inflammatory bowel disease, constipation, diarrhea, hematemesis and melena, nausea, vomiting, weight gain and loss.

**General Internal Medicine**

The clerk will be expected to have an in-depth clinical knowledge about commonly encountered general internal medicine situations which may include but are not limited to: arterial and venous thromboembolism, diabetes mellitus, cardiac risk reduction, congestive heart failure, COPD, pre-operative evaluation and optimization, perioperative management of common medical problems ie. atrial fibrillation, hypotension, respiratory distress, ACS; medical problems associated with pregnancy ie. gestational hypertension and diabetes, pre-eclampsia/eclampsia

1. Obtain a patient-centered history and physical examination on a patient presenting with common undifferentiated internal medicine disorders/presentations
2. Develop a differential diagnosis, clinical approach and initial management of a patient presenting with common anesthetic disorders/presentations

3. Adjust personal communication style to patient and extra professional team needs considering knowledge level, background, culture etc.

4. Identify advocacy measures relevant to the health promotion of their patients, families, and communities

5. Manage workload effectively

6. Demonstrate self-directed learning utilizing the appropriate resources.

7. Demonstrate professional behavior informed by ethical/legal standards such as: informed consent, confidentiality, capacity, patient autonomy

**Geriatrics**

This elective is aimed at broadening the clerk’s knowledge base and clinical skills in geriatrics. This may be done through a variety of instructional methods and require the clerk to be self-directed in regards to learning opportunities. A comprehensive approach will be assessed through these guiding objectives:

1. Obtain a patient-centered history and physical examination on a patient presenting with a core geriatric presentation.

2. Develop a differential diagnosis, clinical approach and initial management of a patient presenting with a core geriatric presentation.

3. Adjust personal communication style to patient and extra professional team needs considering knowledge level, background, culture etc.

4. Identify advocacy measures relevant to the health promotion of their patients, families, and communities.

5. Manage workload effectively.

6. Demonstrate self-directed learning utilizing the appropriate resources.

7. Demonstrate professional behavior informed by ethical/legal standards such as: informed consent, confidentiality, capacity, patient autonomy.

**Hematology**

This elective is aimed at broadening the clerk’s knowledge base and clinical skills in hematology. This may be done through a variety of instructional methods and require the clerk to be self-directed in regards to learning opportunities. A comprehensive approach will be assessed through these guiding objectives:

1. Obtain a patient-centered history and physical examination on a patient presenting with a core hematologic presentation.

2. Develop a differential diagnosis, clinical approach and initial management of a patient presenting with a core hematologic presentation.

3. Adjust personal communication style to patient and extra professional team needs considering knowledge level, background, culture etc.

4. Identify advocacy measures relevant to the health promotion of their patients, families, and communities.

5. Manage workload effectively.

6. Demonstrate self-directed learning utilizing the appropriate resources.
7. Demonstrate professional behavior informed by ethical/legal standards such as: informed consent, confidentiality, capacity, patient autonomy.

**Intensive Care Unit (ICU)**
This elective is aimed at broadening the clerk’s knowledge base and clinical skills in intensive care unit. This may be done through a variety of instructional methods and require the clerk to be self-directed in regards to learning opportunities. A comprehensive approach will be assessed through these guiding objectives:

1. Obtain a patient-centered history and physical examination on a patient presenting with a patient with a core presentation encountered in the ICU.
2. Develop a differential diagnosis, clinical approach and initial management of a patient presenting with a core presentation encountered in the ICU.
3. Adjust personal communication style to patient and extra professional team needs considering knowledge level, background, culture etc.
4. Identify advocacy measures relevant to the health promotion of their patients, families, and communities.
5. Manage workload effectively.
6. Demonstrate self-directed learning utilizing the appropriate resources.
7. Demonstrate professional behavior informed by ethical/legal standards such as: informed consent, confidentiality, capacity, patient autonomy.

**Infectious Diseases**
This elective is aimed at broadening the clerk’s knowledge base and clinical skills in infectious disease. This may be done through a variety of instructional methods and require the clerk to be self-directed in regards to learning opportunities. A comprehensive approach will be assessed through these guiding objectives:

1. Obtain a patient-centered history and physical examination on a patient presenting with a core Infectious Disease presentation.
2. Develop a differential diagnosis, clinical approach and initial management of a patient presenting with a core Infectious Disease presentation.
3. Discuss the epidemiology and risk factors of patients with HIV and Hepatitis B and C.
4. Adjust personal communication style to patient and extra professional team needs considering knowledge level, background, culture etc.
5. Identify advocacy measures relevant to the health promotion of their patients, families, and communities.
6. Manage workload effectively.
7. Demonstrate self-directed learning utilizing the appropriate resources.
8. Demonstrate professional behavior informed by ethical/legal standards such as: informed consent, confidentiality, capacity, patient autonomy.

The clerk will be expected to have an in-depth clinical knowledge about commonly encountered infectious disease disorders/presentation which may include but are not limited to: fever, infections of bodily systems, HIV, hepatitis B and C.
**Nephrology**

This elective is aimed at broadening the clerk’s knowledge base and clinical skills in nephrology. This may be done through a variety of instructional methods and require the clerk to be self-directed in regards to learning opportunities. A comprehensive approach will be assessed through these guiding objectives:

1. Obtain a patient-centered history and physical examination in a patient who presents with a core nephrology presentation such as: acute kidney injury.
2. Develop a differential diagnosis, clinical approach and initial management of a patient presenting with a core Nephrology presentation such as: acute kidney injury, chronic kidney injury and electrolyte abnormalities.
3. Discuss the complications of patients with a reduced GFR.
4. Discuss the indications and potential complications for acute dialysis.
5. Interpret an arterial blood gas.
6. Adjust personal communication style to patient and extra professional team needs considering knowledge level, background, culture etc.
7. Identify advocacy measures relevant to the health promotion of their patients, families, and communities.
8. Manage workload effectively.
9. Demonstrate self-directed learning utilizing the appropriate resources.
10. Demonstrate professional behavior informed by ethical/legal standards such as: informed consent, confidentiality, capacity, patient autonomy.

The clerk will be expected to have an in-depth clinical knowledge about commonly encountered nephrology disorders/presentations which may include but are not limited to: acute kidney injury, chronic kidney injury, electrolyte abnormalities, need for acute dialysis.

**Neurology**

This elective is aimed at broadening the clerk’s knowledge base and clinical skills in neurology. This may be done through a variety of instructional methods and require the clerk to be self-directed in regards to learning opportunities. A comprehensive approach will be assessed through these guiding objectives:

1. Determine the neuroanatomical location of the patient’s symptoms/finding.
2. Obtain a patient-centered history and physical examination on a patient presenting with common neurology disorders/presentations.
3. Develop a differential diagnosis, clinical approach and initial management of a patient presenting with a common neurology disorders/presentations.
4. Adjust personal communication style to patient and extra professional team needs considering knowledge level, background, culture etc.
5. Identify advocacy measures relevant to the health promotion of their patients, families, and communities.
6. Manage workload effectively.
7. Demonstrate self-directed learning utilizing the appropriate resources.
8. Demonstrate professional behavior informed by ethical/legal standards such as: informed consent, confidentiality, capacity, patient autonomy.

The clerk will be expected to have an in-depth clinical knowledge about commonly encountered neurological disorders/presentation which may include but are not limited to: diplopia/visual abnormalities,
dizziness/vertigo, ataxia, headache, weakness/paralysis, sensory abnormalities (numbness/tingling), aphasia and speech disorders/presentation, altered mental state/coma, seizure, delirium/dementia.

**Oncology**

This elective is aimed at broadening the clerk’s knowledge base and clinical skills in oncology. This may be done through a variety of instructional methods and require the clerk to be self-directed in regards to learning opportunities. A comprehensive approach will be assessed through these guiding objectives:

1. Obtain a patient-centered history and physical examination on a patient presenting with common oncologic disorders/presentations.
2. Develop a differential diagnosis, clinical approach and initial management of a patient presenting with a common oncologic disorders/presentations.
3. Adjust personal communication style to patient and extra professional team needs considering knowledge level, background, culture etc. (*Communicator, Collaborator*)
4. Identify advocacy measures relevant to the health promotion of their patients, families, and communities.
5. Manage workload effectively.
6. Demonstrate self-directed learning utilizing the appropriate resources.
7. Demonstrate professional behavior informed by ethical/legal standards such as: informed consent, confidentiality, capacity, patient autonomy.

**Respirology**

This elective is aimed at broadening the clerk’s knowledge base and clinical skills in respirology. This may be done through a variety of instructional methods and require the clerk to be self-directed in regards to learning opportunities. A comprehensive approach will be assessed through these guiding objectives:

1. Obtain a patient-centered history and physical examination on a patient presenting with a core respirology presentation.
2. Develop a differential diagnosis, clinical approach and initial management of a patient presenting with a core respirology presentation.
3. Adjust personal communication style to patient and extra professional team needs considering knowledge level, background, culture etc.
4. Identify advocacy measures relevant to the health promotion of their patients, families, and communities
5. Manage workload effectively.
6. Demonstrate self-directed learning utilizing the appropriate resources.
7. Demonstrate professional behavior informed by ethical/legal standards such as: informed consent, confidentiality, capacity, patient autonomy.

The clerk will be expected to have an in-depth clinical knowledge about commonly encountered neurological disorders/presentation which may include but are not limited to: cough/hemoptysis, dysnea/wheezing, hypoxia/hypercapnia, pneumonia, thromboembolic disease, pleural effusion, asthma/COPD.
Rheumatology
This elective is aimed at broadening the clerk’s knowledge base and clinical skills in rheumatology. This may be done through a variety of instructional methods and require the clerk to be self-directed in regards to learning opportunities. A comprehensive approach will be assessed through these guiding objectives:

1. Obtain a patient-centered history and physical examination on a patient presenting with a core rheumatologic presentation.
2. Develop a differential diagnosis, clinical approach and initial management of a patient presenting with a core rheumatologic presentation.
3. Discuss the indications and complications of joint aspiration
4. Adjust personal communication style to patient and extra professional team needs considering knowledge level, background, culture etc.
5. Identify advocacy measures relevant to the health promotion of their patients, families, and communities.
6. Manage workload effectively.
7. Demonstrate self-directed learning utilizing the appropriate resources.
8. Demonstrate professional behavior informed by ethical/legal standards such as: informed consent, confidentiality, capacity, patient autonomy.

The clerk will be expected to have an in-depth clinical knowledge about commonly encountered emergency medicine disorders/presentation which may include but are not limited to: joint pain (oligo, polyarthralgia), musculoskeletal pain, arthritis (crystal induced, osteoarthritis, inflammatory), connective tissue disorders/presentation.
Diagnostic Radiology (Medical Imaging)

CONTACTS

SASKATOON SITE
Prachi Bandivadekar (Electives Coordinator)
Email: prachi.b@usask.ca
Phone: (306) 844-1271

REGINA SITE
Francine Kurk (Electives Coordinator)
Email: Francine.Kurk@saskhealthauthority.ca
Phone: (306) 766-3708

APPLICATION TIMELINE
26 weeks prior to elective start date

APPLICATION REQUIREMENTS
Minimum Length: 2 weeks

DESCRIPTION
This elective is aimed at broadening the clerk’s knowledge base and clinical skills in Diagnostic Radiology. This will be achieved through a variety of instructional methods. The goal of this elective is to develop a better understanding of Diagnostic Radiology (Medical Imaging) as a medical specialty through exposure to the major modalities in the department, by observing the imaging workflow, attending rounds, and through self-learning materials.

By familiarizing oneself with guidelines developed to facilitate the appropriate use of Medical Imaging, the student will enhance their knowledge of how clinicians can be involved in ordering the most appropriate imaging examinations and facilitating patient care through improved communication with the Diagnostic Radiology department when ordering patient examinations. A comprehensive approach will be assessed through these guiding objectives:

1. Correlate knowledge of anatomy with the images viewed.
2. Describe how medical x-rays are generated and what imaging modalities use x-rays to create images.
3. Describe some of the potential hazards of exposure to radiation, especially for children.
4. Describe and diagnose common diseases using imaging technologies
5. View and interpret imaging examinations.
6. Apply a methodology for viewing and interpreting plain x-ray examinations of the abdomen, chest, and skeletal system.
**DESCRIPTION**

This elective is aimed at broadening the clerk’s knowledge base and clinical skills in obstetrics and gynecology. This may be done through a variety of instructional methods and require the clerk to be self-directed in regards to learning opportunities. A comprehensive approach will be assessed through these guiding objectives:

1. Obtain a patient-centered history and physical examination on a patient presenting with common obstetrical and gynecological disorders/presentations.

2. Develop a differential diagnosis, clinical approach and initial management plan of a patient presenting with common obstetrical and gynecological disorders/presentations.

3. Adjust personal communication style to patient and extra professional team needs considering knowledge level, background, culture etc.

4. Identify advocacy measures relevant to the health promotion of their patients, families, and communities.

5. Manage workload effectively.

6. Demonstrate self-directed learning utilizing the appropriate resources.

7. Demonstrate professional behavior informed by ethical/legal standards such as: informed consent, confidentiality, capacity, patient autonomy.

The clerk will be expected to have an in-depth clinical knowledge about commonly encountered obstetrical and gynecological disorders/presentation which may include but are not limited to:
Obstetrical Issues - uncomplicated pregnancy including prenatal screening, medical diseases complicating pregnancy – hypertension, diabetes, heart disease, renal disease, multiple gestation, ectopic pregnancy, spontaneous abortion, ante-partum hemorrhage, isoimmunization including Rh disease, pre-term/post-term labour, pre-labour rupture of membranes, chorioamnionitis, polyhydramnios/oligohydramnios, intrauterine growth restriction, intrauterine fetal death, uncomplicated delivery, complicated delivery – prolonged labour, breech, malpresentation, forceps and/or vacuum assisted, caesarian, non-reassuring fetal heart rate, uncomplicated post-partum care.

Occupational Health

CONTACTS

SASKATOON SITE
Dr. Niels Koehncke
Email: niels.koehncke@usask.ca
Phone: (306) 966-2387

APPLICATION TIMELINE
26 weeks to three months before elective start date

MINIMUM LENGTH
2 weeks

DESCRIPTION
This elective is aimed at broadening the clerk’s knowledge base and clinical skills in occupational and agricultural medicine. This may be done through a variety of instructional methods and require the clerk to be self-directed in regards to learning opportunities. Development of articles or a small resource for rural workers on an occupational health topic, seminar presentation, and/or participation in occupational site visits and may be required. Students will gain experience and exposure to occupational medicine issues from a clinical, administrative, regulatory, and consulting perspective as opportunities present. A comprehensive approach will be assessed through these guiding objectives:

1. Obtain a patient-centered history and physical examination on a patient presenting with common disorders/presentations encountered in occupational medicine.
2. Develop a differential diagnosis, clinical approach and initial management plan of a patient presenting with common disorders/presentations encountered in occupational medicine.
3. Adjust personal communication style to patient and interprofessional team needs considering knowledge level, background, culture etc.
4. Identify advocacy measures relevant to the health promotion of their patients, families, and communities.
5. Manage workload effectively.
6. Demonstrate self-directed learning utilizing the appropriate resources.
7. Demonstrate professional behavior informed by ethical/legal standards such as: informed consent, confidentiality, capacity, patient autonomy.

Please be advised that there is possible travel to rural site locations for site visits with the preceptor.
Palliative Care

CONTACTS

SASKATOON SITE
Tracy Lewis (Electives Coordinator)
Email: dafm.ugme.saskatoon@usask.ca
Phone: (306) 655-4211

REGINA SITE
Francine Kurk (Electives Coordinator)
Email: Francine.Kurk@saskhealthauthority.ca
Phone: (306) 766-3708

PRINCE ALBERT SITE
Nicole Toutant (Electives Coordinator)
Email: nicole.toutant@usask.ca
Phone: (306) 765-6787

APPLICATION TIMELINE
Saskatoon: Scheduled as requests are received, 26 weeks prior to start date. Maximum two learners at a time.

Regina: Submit requests 26 weeks to two months in advance. Accepts 2 residents and 1 clerk at a time, subject to preceptor availability.

MINIMUM LENGTH
Saskatoon: will accept only 1 week electives

Regina: 1-2 weeks clerks; 4+ weeks residents

DESCRIPTION
This elective is aimed at broadening the clerk’s knowledge base and clinical skills in palliative care. This may be done through a variety of instructional methods and require the clerk to be self-directed in regards to learning opportunities. A comprehensive approach will be assessed through these guiding objectives:

1. Obtain a patient-centered history and physical examination on a patient presenting with symptom management at the end of life.
2. Develop a differential diagnosis, clinical approach and initial management plan of a patient presenting with symptom management at the end of life.
3. Adjust personal communication style to patient and extra professional team needs considering knowledge level, background, culture etc.
4. Identify advocacy measures relevant to the health promotion of their patients, families, and communities.
5. Manage workload effectively.
6. Demonstrate self-directed learning utilizing the appropriate resources.
7. Demonstrate professional behavior informed by ethical/legal standards such as: informed consent, confidentiality, capacity, patient autonomy.
The clerk will be expected to have an in-depth clinical knowledge about commonly encountered palliative care issues which may include but are not limited to: pain management, nausea/vomiting/bowel obstruction, dyspnea, delirium in a terminally ill patient.
Pathology

CONTACTS

SASKATOON SITE
Deb Quirion (Electives Coordinator)
Email: deb.chamberlain@usask.ca
Phone: (306) 655-8050

REGINA SITE
Francine Kurk (Electives Coordinator)
Email: Francine.Kurk@saskhealthauthority.ca
Phone: (306) 766-3708

PRINCE ALBERT SITE
Nicole Toutant (Electives Coordinator)
Email: nicole.toutant@usask.ca
Phone: (306) 765-6787

APPLICATION TIMELINE
Saskatoon: 26 weeks prior to elective start date
Regina: Submit requests as soon as possible. Accepts one rotator at a time.

MINIMUM LENGTH
Saskatoon: 1 week (maximum 6 weeks)
Regina: 4 weeks

DESCRIPTION
General Pathology is a dynamic, multi-faceted diagnostic specialty that encompasses a wide range of disciplines to choose from for electives. Prospective elective students may choose to spend time in one or more of the following areas, all of which make up what is known as general pathology: hematopathology, transfusion medicine, medical microbiology, clinical chemistry, molecular genetics, and surgical (anatomical) pathology. Within surgical (anatomical) pathology, opportunities are present to focus on specific areas of interest including gynecological pathology, dermatopathology, urological pathology, gastrointestinal pathology, cytology, breast pathology, and forensic pathology.

This elective is aimed at broadening the clerk’s knowledge base and clinical skills in pathology. Students are expected to have a prior knowledge of histology before applying for this elective in surgical (anatomical) pathology. There will be expectations that the student(s) will join the pathologists at the multihead microscope, participate in rounds and academic half day. They may be asked to present a case to the pathologists. A comprehensive approach will be assessed through these guiding objectives:

1. Develop a differential diagnosis, clinical approach and initial management plan of a patient presenting with common disorders/presentations encountered in pathology.
2. Adjust personal communication style to patient and extra professional team needs considering knowledge level, background, culture etc.
3. Identify advocacy measures relevant to the health promotion of their patients, families, and communities.

4. Manage workload effectively.

5. Demonstrate self-directed learning utilizing the appropriate resources.

6. Demonstrate professional behavior informed by ethical/legal standards such as: informed consent, confidentiality, capacity, patient autonomy.
Pediatrics

CONTACTS

SASKATOON SITE
Michelle Haley (Electives Coordinator)
Email: Michelle.Haley@saskhealthauthority.ca
Phone: (306) 844-1271

REGINA SITE
Tracey Murray (Electives Coordinator)
Email: Tracey.Murray@saskhealthauthority.ca
Phone: (306) 766-3707

PRINCE ALBERT SITE
Nicole Toutant (Electives Coordinator)
Email: nicole.toutant@usask.ca
Phone: (306) 765-6787

SWIFT CURRENT
Dr. Krittika Bhende
Email: krittika.bhende2@saskhealthauthority.ca
Office phone: (306) 773-7711

APPLICATION TIMELINE
26 to six weeks prior to elective start date

MINIMUM LENGTH
1 week

DESCRIPTION

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This elective is aimed at broadening the clerk’s knowledge base and clinical skills in pediatric and adolescent medicine. This may be done through a variety of instructional methods and require the clerk to be self-directed in regards to learning opportunities. If on the wards, Clerks are expected to take responsibility, under supervision, of the day-to-day care of their assigned patients. A comprehensive approach will be assessed through these guiding objectives:

1. Obtain a patient-centered history and physical examination on a patient presenting with common pediatric and adolescent disorders/presentations.

2. Develop a differential diagnosis, clinical approach and initial management plan of a patient presenting with common pediatric and adolescent disorders/presentations.

3. Adjust personal communication style to patient and extra professional team needs considering knowledge level, background, culture etc.

4. Identify advocacy measures relevant to the health promotion of their patients, families, and communities.

5. Manage workload effectively.

6. Demonstrate self-directed learning utilizing the appropriate resources.

7. Demonstrate professional behavior informed by ethical/legal standards such as: informed consent, confidentiality, capacity, patient autonomy.

The clerk will be expected to have an in-depth clinical knowledge about commonly encountered pediatric and adolescent medicine disorders/presentation which may include but are not limited to: pallor (anemia), bruising and bleeding, lymphadenopathy, respiratory symptoms – cough, wheeze, stridor, acute respiratory distress, fever, heart murmur, dehydration, head and neck symptoms – otalgia, pharyngitis, rash, GI symptoms – vomiting, abdominal pain, diarrhea, constipation, headache, acute CNS symptoms – altered level of consciousness, seizures, meningitis, sepsis, osteomyelitis/septic arthritis, failure to thrive, obesity, GU symptoms – polyuria/nocturia, dysuria, hematuria, frequency/urgency, limp, child with a chronic illness.
Physical Medicine & Rehabilitation (PM&R)

CONTACTS

SASKATOON SITE
Julie Otto (Electives Coordinator)
Email: Julie.Otto@saskhealthauthority.ca
Phone: (306) 655-8669

Dr. Kiersten Stuart (Departmental Clerkship Director Saskatoon)
Email: Kiersten.stuartkobitz@saskhealthauthority.ca

REGINA SITE
Kim Gilbert (Electives Coordinator)
Email: KimDawn.Gilbert@saskhealthauthority.ca
Phone: 306-766-3710

Dr. Amanda Kleisinger (Departmental Clerkship Director Regina)
Email: Amanda.kleisinger@usask.ca

APPLICATION TIMELINE
26 - 4 weeks prior to elective start date. Applications received later will be considered on an individual basis.

MINIMUM LENGTH
1 week (maximum of 4 weeks)

DESCRIPTION
Physical Medicine and Rehabilitation focuses on restoring physical function and improving physical independence. Physiatrists (specialists in PM&R) treat conditions of the bones, muscles, joints, brain, nerves and spinal cord, which can affect other systems of the body and limit a person’s ability to function.

As our specialty involves multiple systems, all clerks may consider an elective in PM&R. In particular, clerks who are interested in a career in PM&R or a complimentary specialty such as Neurology, Orthopedics, Rheumatology, Neurosurgery or Family Medicine are encouraged to apply. Students will have the opportunity to further develop their skills of history taking, functional history and assessment, and physical examination in core PM&R domains such as musculoskeletal, neurological, acquired brain injury, stroke rehabilitation, spinal cord injury, multiple sclerosis, prosthetics and orthotics, pain medicine and pediatric rehabilitation (Regina site).

An elective in Physiatry can involve a variety of clinical experiences including acute care consults, inpatient rehabilitation ward exposure, and outpatient clinics. Neuromuscular assessment and diagnosis is also provided by some faculty members, allowing the student exposure to nerve conduction studies (NCS) and needle electromyography (EMG).

The Department of Physical Medicine and Rehabilitation is a fully distributed program between Regina and Saskatoon with faculty and residents based out of both cities. The Residency Program Director is based in Regina. A comprehensive approach will be assessed through these guiding objectives:

1. Obtain a patient-centered and functional history and physical examination for a patient presenting with common PM&R disorders/presentations.
2. Develop a differential diagnosis, clinical approach and initial management plan for a patient presenting with common PM&R disorders/presentations

3. Demonstrate the ability to communicate effectively with patients and all members of the interdisciplinary team.

4. Identify advocacy measures relevant to the health promotion of patients, families, and communities.

5. Demonstrate self-directed learning utilizing the appropriate resources.

6. Demonstrate professional behavior informed by ethical/legal standards such as: informed consent, confidentiality, capacity, patient autonomy and others.
Psychiatry
Sub-Specialties: Child, Forensic Geriatric & General Adult
Elective Site: Saskatoon

CONTACTS

SASKATOON SITE
Laura White (Electives Coordinator)
Email: laura.j.white@usask.ca
Phone: (306) 844-1312

REGINA SITE
Krista Schultz (Electives Coordinator)
Email: Krista.Schultz@saskhealthauthority.ca
Phone: (306) 766-3704

PRINCE ALBERT SITE
Nicole Toutant (Electives Coordinator)
Email: nicole.toutant@usask.ca
Phone: (306) 765-6787

APPLICATION TIMELINE
26 weeks to 3 months prior to elective start date

MINIMUM LENGTH
2 weeks

DESCRIPTION
This elective is aimed at broadening the clerk’s knowledge base and clinical skills in psychiatry. This may be done through a variety of instructional methods and require the clerk to be self-directed in regards to learning opportunities. A comprehensive approach will be assessed through these guiding objectives:

1. Obtain a patient-centered history and mental status examination on a patient presenting with common psychiatric disorders/presentations.

2. Develop a differential diagnosis, clinical approach and initial management plan of a patient presenting with common psychiatric disorders/presentations.

3. Adjust personal communication style to patient and interdisciplinary team needs considering knowledge level, background, culture etc.

4. Identify advocacy measures relevant to the health promotion of their patients, families, and communities.

5. Manage workload effectively.

6. Demonstrate self-directed learning utilizing the appropriate resources.

7. Demonstrate professional behavior informed by ethical/legal standards such as: informed consent, confidentiality, capacity, patient autonomy.

The clerk will be expected to have an in-depth clinical knowledge about commonly encountered psychiatric disorders/presentation which may include but are not limited to: alcohol/substance use
disorders/presentation, anxiety disorders/presentation, bipolar disorders/presentation, schizophrenia and/or other psychotic disorders/presentation, depressive disorders/presentation, disorders/presentation usually diagnosed in childhood/adolescence, personality disorders/presentation.
APPLICATION TIMELINE
26 weeks to 1 month prior to elective start date

MINIMUM LENGTH
2 weeks

DESCRIPTION
Is an opportunity for students to build a knowledge base in the scientific approach to research design and testing. The overarching aim is to provide the student the opportunity to see whether they would like to pursue a career in academic medicine. This is also an opportunity for the student to enhance their portfolio. Project objectives and deliverables must be submitted as part of the elective application to the UGME office. Elective supervisors must sign off on the elective application confirming the project’s intent and timeline. The supervisor will be responsible for ensuring appropriate attendance of the student during the elective itself. It is also expected there will be regular meetings between the student and supervisor.

A comprehensive approach will be assessed through these guiding objectives:

1. Adjust personal communication style to patient and extra professional team needs considering knowledge level, background, culture etc.
2. Identify advocacy measures relevant to the health promotion of their patients, families, and communities.
3. Manage workload effectively
4. Demonstrate self-directed learning utilizing the appropriate resources.
5. Demonstrate professional behavior informed by ethical/legal standards such as: informed consent, confidentiality, capacity, patient autonomy.
Solid Organ Transplant

CONTACTS:
Dr Rahul Mainra
Email: Rahul.mainra@usask.ca
Phone: 306-655-5934

APPLICATION TIMELINE:
26 weeks prior

APPLICATION REQUIREMENT:
Minimum length: 2 weeks

BLACKOUT DATES:
Last Friday prior to Christmas until Last Friday following New Year

DESCRIPTION:
Solid organ transplantation is an exciting interdisciplinary field of medicine, surgery and lab medicine. Saskatchewan performs approximately 25-35 kidney transplants per year and physicians within the province follow recipients of kidney, pancreas, lung, liver and heart transplants. This elective will provide the student exposure to multiple types (kidney, lung, liver, heart, pancreas) of solid organ transplants and the management of these patients. During this elective the student may have opportunities to be involved in the following clinical duties:

1. Outpatient assessment of recipients of kidney, pancreas, lung, liver and heart transplants
2. Outpatient assessment of transplant suitability for patients with:
   a. End stage renal disease
   b. Liver cirrhosis
   c. Lung disease
   d. Heart failure
   e. Type 1 diabetes
3. Outpatient assessment of potential live kidney donors
4. Outpatient surgical assessment of kidney transplant recipients and/or potential live kidney donors
5. Inpatient assessment of the following:
   a. New (de novo) kidney transplant recipients
   b. Prior kidney transplant recipients admitted with medical/surgical complications
6. Observation in theatre of kidney transplant surgery
7. Determination of solid organ transplant recipient HLA typing and antibody determination

A comprehensive approach will be assessed through these guiding objectives:

1. Obtain a patient-centered history and physical examination on a patient presenting with common disorders/presentations encountered in solid organ transplantation.
2. Develop a differential diagnosis, clinical approach and initial management of a patient presenting with common disorders/presentations encountered in solid organ transplantation.
3. Communicate in a patient-centered manner.
4. Communicate effectively with team members.
5. Identify advocacy measures relevant to the health promotion of their patients, families, and communities.
6. Manage workload effectively.
7. Demonstrate self-directed learning utilizing the appropriate resources.
8. Demonstrate professional behavior informed by ethical/legal standards such as: informed consent, confidentiality, capacity, patient autonomy, legal documentation.

The clerk will be expected to have an in-depth clinical knowledge about commonly encountered situations within solid organ transplantation which may include but are not limited to: contraindications to organ transplantation, differential diagnosis of acute and chronic transplant dysfunction, surgical considerations of organ transplantation, contraindications to organ donation, importance of HLA typing and antibody determination.
Surgery

CONTACTS

SASKATOON SITE
Marilyn Baniak (Electives Coordinator)
Email: surgery.education@usask.ca
Phone: (306) 966-5678

REGINA SITE
Francine Kurk (Electives Coordinator)
Email: Francine.Kurk@saskhealthauthority.ca
Phone: (306) 766-3708

PRINCE ALBERT SITE
Nicole Toutant (Electives Coordinator)
Email: nicole.toutant@usask.ca
Phone: (306) 765-6787

APPLICATION TIMELINE
26 weeks to one month prior to elective start date

MINIMUM LENGTH
1 week

DESCRIPTION

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**Cardio Thoracic**
Cardiovascular Surgery
This elective is aimed at broadening the clerk's knowledge base and clinical skills in cardiovascular surgery. This may be done through a variety of instructional methods and require the clerk to be self-directed in regards to learning opportunities. A comprehensive approach will be assessed through these guiding objectives:
1. Obtain a focused patient-centered history and physical examination in a patient with cardiovascular disease.

2. Develop a differential diagnosis, clinical approach and initial management plan of a patient presenting with common disorders/presentations encountered in cardiovascular surgery.

3. Identify the physical, physiologic, and coagulation related considerations of cardiopulmonary bypass.

4. Discuss the benefits and limitations of cardiovascular surgical procedures.

5. Adjust personal communication style to patient and extra professional team needs considering knowledge level, background, culture etc.

6. Identify advocacy measures relevant to the health promotion of their patients, families, and communities.

7. Manage workload effectively.

8. Demonstrate self-directed learning utilizing the appropriate resources.

9. Demonstrate professional behavior informed by ethical/legal standards such as: informed consent, confidentiality, capacity, patient autonomy.

**Thoracic Surgery**

This elective is aimed at broadening the clerk’s knowledge base and clinical skills in thoracic surgery. This may be done through a variety of instructional methods and require the clerk to be self-directed in regards to learning opportunities. A comprehensive approach will be assessed through these guiding objectives:

1. Obtain a patient-centered history and physical examination on a patient presenting with common disorders/presentations encountered in thoracic surgery.

2. Develop a differential diagnosis, clinical approach and initial management plan of a patient presenting with common disorders/presentations encountered in thoracic surgery.

3. List the stages of lung cancer.

4. Discuss the difference between an exudative and transudative effusion, list examples.

5. Observe proper technique for chest tube insertion.

6. Interpret a CXR and CT chest image.

7. Adjust personal communication style to patient and extra professional team needs considering knowledge level, background, culture etc.

8. Identify advocacy measures relevant to the health promotion of their patients, families, and communities.

9. Manage workload effectively.

10. Demonstrate self-directed learning utilizing the appropriate resources.

11. Demonstrate professional behavior informed by ethical/legal standards such as: informed consent, confidentiality, capacity, patient autonomy.

The clerk will be expected to have an in-depth clinical knowledge about commonly encountered thoracic surgery disorders/presentations which may include but are not limited to: solitary pulmonary nodule, unilateral pleural effusion, dysphagia, gastroesophageal reflux disease, Barrett’s esophagus, hiatus hernia.
**Ear, Nose and Throat (Otolaryngology)**

**APPLICATION TIMELINE**
26 weeks to 4 months prior to elective start date

**MINIMUM LENGTH**
2 weeks

**DESCRIPTION**
This elective is aimed at broadening the clerk’s knowledge base and clinical skills in ENT. This may be done through a variety of instructional methods and require the clerk to be self-directed in regards to learning opportunities. A comprehensive approach will be assessed through these guiding objectives:

1. Obtain a patient-centered history and physical examination on a patient presenting with common disorders/presentations encountered in ENT.
2. Develop a differential diagnosis, clinical approach and initial management plan of a patient presenting with common disorders/presentations encountered in ENT.
3. Adjust personal communication style to patient and extra professional team needs considering knowledge level, background, culture etc.
4. Identify advocacy measures relevant to the health promotion of their patients, families, and communities.
5. Manage workload effectively.
6. Demonstrate self-directed learning utilizing the appropriate resources.
7. Demonstrate professional behavior informed by ethical/legal standards such as: informed consent, confidentiality, capacity, patient autonomy.

**General Surgery**
This elective is aimed at broadening the clerk’s knowledge base and clinical skills in general surgery. This may be done through a variety of instructional methods and require the clerk to be self-directed in regards to learning opportunities. A comprehensive approach will be assessed through these guiding objectives:

1. Obtain a patient-centered history and physical examination on a patient presenting with common disorders/presentations encountered in general surgery.
2. Develop a differential diagnosis, clinical approach and initial management plan of a patient presenting with common disorders/presentations encountered in general surgery.
3. Adjust personal communication style to patient and extra professional team needs considering knowledge level, background, culture etc.
4. Identify advocacy measures relevant to the health promotion of their patients, families, and communities.
5. Manage workload effectively.
6. Demonstrate self-directed learning utilizing the appropriate resources.
7. Demonstrate professional behavior informed by ethical/legal standards such as: informed consent, confidentiality, capacity, patient autonomy.

The clerk will be expected to have an in-depth clinical knowledge about commonly encountered general surgery disorders/presentations which may include but are not limited to:
Mass: neck/ thyroid mass, breast lump (including nipple discharge), abdominal mass (intra-abdominal and abdominal wall, including groin), scrotal mass, rectal/prostatic mass, lymphadenopathy

Pain: (acute and chronic) abdominal pain and/or distension, scrotal pain, joint pain, upper and lower limb pain

Blood: epistaxis, hemoptysis, upper and/or lower gastrointestinal bleed, hematuria

Trauma: head, chest, abdominal, pelvic, and limb injury, burns

Other: dysphagia/odynophagia, jaundice, urinary obstruction, shock

ENT: foreign body of nose or ear, tonsillitis, epistaxis, serous otitis, thyroid cancer/mass

Breast: benign masses (fibroadenoma, fibrocystic changes, abscess), malignant masses

Respiratory: solitary pulmonary nodule, pleural effusion (malignant and empyema), pneumothorax (spontaneous, traumatic, iatrogenic)

Vascular: aortic dissection, aortic aneurysm, varicose veins, occlusive peripheral vascular disease

Gastrointestinal: acute abdomen (including appendicitis/diverticulitis/GI tract perforation), bowel obstruction, esophageal obstruction, GERD/gastritis/peptic ulcer disease, duodenal ulcer, mesenteric ischemia, biliary colic/cholelithiasis/cholecystitis/cholangitis, liver masses (benign vs. malignant), pancreatitis, colorectal carcinoma, colitis (including toxic megacolon), inflammatory bowel disease, anorectal diseases (anal fissure, anorectal abscess/fistula, hemorrhoids), pilonidal disease, hernias (inguinal, femoral, umbilical, incisional)

Skin/Soft Tissue: necrotizing soft tissue infections, skin cancer, benign skin lesions (nevus, verrucae, epidermal inclusion cysts, lipoma)

Genitourinary: hematuria (benign and malignant causes), BPH, renal colic, prostate cancer, UTI, scrotal masses (hydrocele, spermatocele, varicocele), scrotal pain (torsion, epididymitis/orchitis)

Musculoskeletal: fractures (open and closed), dislocations, subluxations, compartment syndrome, septic joint, osteoarthritis

Neurological: cerebral neoplasms, CNS infections (meningitis and abscess), primary impact injury (concussion to profound coma), epidural hematoma, subdural hematoma, subarachnoid hemorrhage, spinal cord injury, peripheral nerve injury/entrapment (carpal tunnel syndrome)

Neurosurgery
This elective is aimed at broadening the clerk’s knowledge base and clinical skills in neurosurgery. This may be done through a variety of instructional methods and require the clerk to be self-directed in regards to learning opportunities. A comprehensive approach will be assessed through these guiding objectives:

1. Obtain a patient-centered history and physical examination on a patient presenting with common disorders/presentations encountered in neurosurgery.

2. Develop a differential diagnosis, clinical approach and initial management plan of a patient presenting with common disorders/presentations encountered in neurosurgery.
3. Describe the pharmacology of drugs commonly used in neurosurgery, such as Mannitol, Dilantin, Decadron.

4. Adjust personal communication style to patient and extra professional team needs considering knowledge level, background, culture etc.

5. Identify advocacy measures relevant to the health promotion of their patients, families, and communities.

6. Manage workload effectively.

7. Demonstrate self-directed learning utilizing the appropriate resources.

8. Demonstrate professional behavior informed by ethical/legal standards such as: informed consent, confidentiality, capacity, patient autonomy.

The clerk will be expected to have an in-depth clinical knowledge about commonly encountered neurosurgery disorders/presentations which may include but are not limited to: altered level of consciousness, low back pain, traumatic brain injury (subdural hematoma, epidural hematoma, subarachnoid hemorrhage, diffuse axonal injury), cauda equine syndrome, cerebral aneurysm, astrocytoma, brain metastasis, meningioma, hydrocephalus.
Ophthalmology

CONTACTS

SASKATOON SITE
Lorrisa Budz (Electives Coordinator)
Email: lorrisa.budz@usask.ca
Phone: (306) 655-8050

REGINA SITE
Francine Kurk (Electives Coordinator)
Email: Francine.Kurk@saskhealthauthority.ca
Phone: (306) 766-3708

PRINCE ALBERT SITE
Nicole Toutant (Electives Coordinator)
Email: nicole.toutant@usask.ca
Phone: (306) 765-6787

APPLICATION TIMELINE
26 weeks before elective start date

ELECTIVE TIME
Minimum Length – 1 week
Maximum Length – 2 weeks

DESCRIPTION
This elective is aimed at broadening the clerk’s knowledge base and clinical skills in ophthalmology. This may be done through a variety of instructional methods and require the clerk to be self-directed in regards to learning opportunities. A comprehensive approach will be assessed through these guiding objectives:

1. Obtain a patient-centered history and physical examination on a patient presenting with common ophthalmologic disorders/presentations.
2. Develop a differential diagnosis, clinical approach and initial management plan of a patient presenting with common ophthalmologic disorders/presentations.
3. Adjust personal communication style to patient and extra professional team needs considering knowledge level, background, culture etc.
4. Identify advocacy measures relevant to the health promotion of their patients, families, and communities.
5. Manage workload effectively.
6. Demonstrate self-directed learning utilizing the appropriate resources.

Demonstrate professional behavior informed by ethical/legal standards such as: informed consent, confidentiality, capacity, patient autonomy

Orthopedic Surgery
This elective is aimed at broadening the clerk’s knowledge base and clinical skills in orthopedic surgery. This may be done through a variety of instructional methods and require the clerk to be self-directed in regards to learning opportunities. A comprehensive approach will be assessed through these guiding objectives:
1. Obtain a patient-centered history and physical examination on a patient presenting with common disorders/presentations encountered in orthopedic surgery.

2. Develop a differential diagnosis, clinical approach and initial management plan of a patient presenting with common disorders/presentations encountered in orthopedic surgery.

3. Adjust personal communication style to patient and extra professional team needs considering knowledge level, background, culture etc.

4. Identify advocacy measures relevant to the health promotion of their patients, families, and communities.

5. Manage workload effectively.

6. Demonstrate self-directed learning utilizing the appropriate resources.

7. Demonstrate professional behavior informed by ethical/legal standards such as: informed consent, confidentiality, capacity, patient autonomy.

**Pediatric Surgery**

This elective is aimed at broadening the clerk’s knowledge base and clinical skills in pediatric surgery. This may be done through a variety of instructional methods and require the clerk to be self-directed in regards to learning opportunities. A comprehensive approach will be assessed through these guiding objectives:

1. Obtain a patient-centered history and physical examination on a patient presenting with common disorders/presentations encountered in pediatric surgery.

2. Develop a differential diagnosis, clinical approach and initial management plan of a patient presenting with common disorders/presentations encountered in pediatric surgery.

3. Review human anatomy, embryology, and normal physiology involving the head & neck, chest, abdomen, and inguinal region.

4. Discuss infant heat regulation and its relation to environmental controls.

5. Demonstrate the calculation of individualized drug dosages, and fluid and electrolyte requirements using standard formulas.


7. Adjust personal communication style to patient and extra professional team needs considering knowledge level, background, culture etc

8. Identify advocacy measures relevant to the health promotion of their patients, families, and communities.

9. Manage workload effectively.

10. Demonstrate self-directed learning utilizing the appropriate resources.

11. Demonstrate professional behavior informed by ethical/legal standards such as: informed consent, confidentiality, capacity, patient autonomy.

The clerk will be expected to have an in-depth clinical knowledge about commonly encountered pediatric surgery disorders/presentations which may include but are not limited to: Incarcerated inguinal hernia in the neonate, aspirated and ingested foreign bodies, acute abdomen in the neonate or infant or older child, acute gastrointestinal bleeding, blunt abdominal and thoracic trauma, torsion of testis & appendix testis, epididymitis, bilious vomiting, non-bilious vomiting.
Plastic Surgery
This elective is aimed at broadening the clerk's knowledge base and clinical skills in plastic surgery. This may be done through a variety of instructional methods and require the clerk to be self-directed in regards to learning opportunities. A comprehensive approach will be assessed through these guiding objectives:

1. Obtain a patient-centered history and physical examination on a patient presenting with common disorders/presentations encountered in plastic surgery ie. focused hand examination, facial exam in the setting of trauma. (Medical Expert, Communicator)
2. Develop a differential diagnosis, clinical approach and initial management plan of a patient presenting with common disorders/presentations encountered in plastic surgery.
3. Discuss each specific phase of wound healing.
4. Describe the options for wound closure.
5. Perform the application of common splints of the hand.
6. Adjust personal communication style to patient and extra professional team needs considering knowledge level, background, culture etc.
7. Identify advocacy measures relevant to the health promotion of their patients, families, and communities.
8. Manage workload effectively.
9. Demonstrate self-directed learning utilizing the appropriate resources
10. Demonstrate professional behavior informed by ethical/legal standards such as: informed consent, confidentiality, capacity, patient autonomy.

The clerk will be expected to have an in-depth clinical knowledge about commonly encountered plastic surgery disorders/presentations which may include but are not limited to: hand disorders/presentation (including carpal tunnel syndrome, trigger finger), facial fractures, hand fractures, burns (thermal, electrical, chemical), soft tissue injuries of the hand (tendons, ligaments etc), hand infections, hand tumors, skin malignancies (basal cell carcinoma, squamous cell carcinoma, melanoma), premalignant skin lesions (actinic keratosis), breast reconstruction (post mastectomy).

Urology
This elective is aimed at broadening the clerk’s knowledge base and clinical skills in urology. This may be done through a variety of instructional methods and require the clerk to be self-directed in regards to learning opportunities. A comprehensive approach will be assessed through these guiding objectives:

1. Obtain a patient-centered history and physical examination on a patient presenting with common urologic disorders/presentations.
2. Develop a differential diagnosis, clinical approach and initial management plan of a patient presenting with common urologic disorders/presentations.
3. List the indications and complications of urethral catheterization.
4. Demonstrate a male and female urethral catheterization using proper technique.
5. Identify the important landmarks on a KUB (Kidney/Ureter/Bladder) X-ray, including recognizing the presence of calculi.
6. Adjust personal communication style to patient and extra professional team needs considering knowledge level, background, culture etc.
7. Identify advocacy measures relevant to the health promotion of their patients, families, and communities.

8. Manage workload effectively.

9. Demonstrate self-directed learning utilizing the appropriate resources.

10. Demonstrate professional behavior informed by ethical/legal standards such as: informed consent, confidentiality, capacity, patient autonomy.

The clerk will be expected to have an in-depth clinical knowledge about commonly encountered urologic disorders/presentations which may include but are not limited to: acute testicular pain (including testicular torsion), testicular mass and/or swelling (including testicular cancer), microscopic and gross hematuria, urinary retention, urinary incontinence, lower urinary tract symptoms (LUTS) (including benign prostatic hyperplasia), acute flank pain (including renal colic), male sexual dysfunction, cancer of the prostate/bladder/kidney.

**Vascular Surgery**

This elective is aimed at broadening the clerk’s knowledge base and clinical skills in vascular surgery. This may be done through a variety of instructional methods and require the clerk to be self-directed in regards to learning opportunities. A comprehensive approach will be assessed through these guiding objectives:

1. Obtain a patient-centered history and physical examination on a patient presenting with common disorders/presentations encountered in vascular surgery.

2. Develop a differential diagnosis, clinical approach and initial management plan of a patient presenting with common disorders/presentations encountered in vascular surgery.

3. Review the anatomy and physiology of the arterial and superficial/deep venous system of the lower extremity.

4. Adjust personal communication style to patient and extra professional team needs considering knowledge level, background, culture etc.

5. Identify advocacy measures relevant to the health promotion of their patients, families, and communities.

6. Manage workload effectively

7. Demonstrate self-directed learning utilizing the appropriate resources.

8. Demonstrate professional behavior informed by ethical/legal standards such as: informed consent, confidentiality, capacity, patient autonomy

The clerk will be expected to have an in-depth clinical knowledge about commonly encountered vascular surgery disorders/presentations which may include but are not limited to: diabetes including foot complications, aortic aneurysmal disease, peripheral vascular disease, varicose veins, acute ischemic limb.
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 syllabus.

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 Course Administrative 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 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. [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.

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

ETHICS AND PROFESSIONALISM
There are several documents that delineate the expectations of society, the profession and the college with respect to the ethics and professionalism of medical doctors. Three such documents are replicated below. Note that breaches of professionalism that are egregious and/or refractory to correction may, in themselves and at the discretion of the Undergraduate Medical Education Committee, constitute sufficient grounds for removal from the program, regardless of performance in other aspects of the curriculum.

“Not everything that can be measured is important, and not everything that is important can be measured.” (Albert Einstein)

For more detailed information, please refer to the following links:
http://medicine.usask.ca/policies/ethics-professionalism.php#TheCollegeofMedicinestatementonprofessionalism2005
https://medicine.usask.ca/policies/professionalism-standard-operating-procedure.php

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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 https://students.usask.ca/health/centres/access-equity-services.php or contact AES at 306-966-7273 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 OSA.

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 please contact:

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

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

Student Affairs Director, Dr. Nicole Fahlman ar nicole.fahlman@usask.ca or 306-209-0142

Student Affairs Director, Dr. Tiann O’Carroll at tiann.ocarroll@usask.ca or 306-529-0777

COM Student Affairs Director (Prince Albert) Dr. Dale Ardell at drardellpc@sasktel.net or 306-763-8888
• **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/](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](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](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, brining 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/](https://www.facebook.com/aboriginalstudentscentre/)) to learn more.

**APPEALS PROCEDURES**
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](http://policies.usask.ca/policies/academic-affairs/academic-courses.php)

> 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.