Clinical Integration III

MEDC 214.4
YEAR 2 TERM 1
Clinical Integration III – Course Overview

COURSE DESCRIPTION

This is the third of four courses in the Clinical Integration series. Clinical Integration III is designed to provide students with opportunities to gather and integrate knowledge and clinical reasoning skills. These attributes will be further developed in the Clinical Integration IV Course (Term 4).

Students will engage in Ethics, Interprofessional Problem-Based Learning, Information Literacy, and Clinical Reasoning Cases aimed at developing critical thinking skills and integrating the information learned in the other courses both during this term and from previous terms (Year 1 - Term 1 and 2).

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

OVERALL COURSE OBJECTIVES/COMPETENCIES

By the completion of Clinical Integration I course, students will be expected to:

1. Utilize Clinical Reasoning in:
   • Analyzing the patient interview
     • Determine appropriate questions to understand the disease process, illness experience and relevant patient context
     • Interpret the answers
   • Analyzing components of the physical examination
     • Determine appropriate maneuvers
     • Interpret the findings
   • Synthesizing information to develop a rational differential diagnosis and a working diagnosis
   • Analyzing management
     • Determine appropriate investigations
     • Interpret the information
     • Synthesize the information to further define the patient’s problem
   • Analyzing diagnostic errors
     • Identify common errors in information gathering and synthesis
     • Develop strategies to decrease errors in diagnosis

2. Utilize the Patient-Centered Clinical Method (PCCM) to integrate illness experience and patient context into active shared decision-making around management.

3. Demonstrate ethico-legal reasoning.

4. Demonstrate effective information literacy skills to find relevant information.
5. Critically appraise pertinent information.
7. Exhibit professionalism.
8. Collaborate effectively.

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

COURSE CONTACTS

Course Chair: Dr. Deirdre Andres – d.andres@usask.ca – (306) 655-4200
Course Director: Dr. Matt Kushneriuk – matt.kushneriuk@usask.ca – (306) 966-7202
Pre-Clerkship Administrative Coordinator (Saskatoon): Sonja MacDonald – sonja.macdonald@usask.ca – (306) 966-5354
Education Consultant (Regina): Christa Kaytor – christa.kaytor@saskhealthauthority.ca (306) 766-3157
Administrative Assistant: Kimberly Basque – kimberly.basque@usask.ca – (306) 966-6151

COURSE SCHEDULE

Please check one45 DAILY to ensure that you have the most current schedule information. The latest change can be made to a session (unless it is a true emergency) is 48 hours in advance of the scheduled sessions. If changes are made to a session which has already been scheduled in one45, affected students will be notified directly via email by the UGME Office.

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

https://share.usask.ca/medicine/one45/kbase/Curriculum.aspx
<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
<th>Session</th>
<th>Learning Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>August 14</td>
<td>1:30 – 4:20</td>
<td>Orientation &amp; Clinical Reasoning Case</td>
<td>Small Group – see one45</td>
</tr>
<tr>
<td>August 21</td>
<td>8:30 - 9:20, 9:30-12:20</td>
<td>Information Literacy Ethics Lecture/Small Groups</td>
<td>Small Groups Lecture/Small Groups</td>
</tr>
<tr>
<td>August 28</td>
<td>1:30-2:20</td>
<td>Information Literacy</td>
<td>Small Groups – see one45</td>
</tr>
<tr>
<td>September 4</td>
<td>1:30 – 4:20</td>
<td>Clinical Reasoning Case</td>
<td>Small Groups – see one45</td>
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<tr>
<td>September 18</td>
<td>8:30 – 9:20</td>
<td>Information Literacy</td>
<td>Small Group – see one45</td>
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<td></td>
<td></td>
<td>9:30 – 12:20</td>
<td>Clinical Reasoning Case</td>
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<tr>
<td>October 2</td>
<td>2:30 - 4:20</td>
<td>iPBL - HIV</td>
<td>Small Group – see one45</td>
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<tr>
<td>October 9</td>
<td>8:30-12:20</td>
<td>Clinical Reasoning Case</td>
<td>Small Group – see one45</td>
</tr>
<tr>
<td>October 9</td>
<td>2:30 – 4:20</td>
<td>iPBL - HIV</td>
<td>Small Group – see one45</td>
</tr>
<tr>
<td>October 16</td>
<td>2:30 - 4:20</td>
<td>iPBL - HIV</td>
<td>Small Group – see one45</td>
</tr>
<tr>
<td>November 6</td>
<td>2:30 – 4:20</td>
<td>Clinical Reasoning Case</td>
<td>Small Group – see one45</td>
</tr>
<tr>
<td>November 27</td>
<td>8:30 – 12:20</td>
<td>Clinical Reasoning Case</td>
<td>Small Group – see one45</td>
</tr>
<tr>
<td>December 6</td>
<td>9:00-12:00</td>
<td>Final Exam</td>
<td>Small Group – see one45</td>
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</table>
COURSE DELIVERY

Sessions vary in length and are scheduled throughout the term. For most sessions, students will work interactively in small group settings. For Clinical Reasoning Cases and iPBL sessions, learning is student-directed, and students assign themselves roles to help facilitate the case discussion. A facilitator is present to guide students through the case (e.g. answering questions for clarification, redirecting them if they get off track, etc.).

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/

COURSE MATERIAL ACCESS

Relevant handouts will be posted on one45. Cases will be released on Blackboard at the start of the Clinical Reasoning Case session.

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

COURSE ASSESSMENT OVERVIEW

The Clinical Integration III course is an entirely pass fail course based on student performance relative to course competencies/objectives.

Formative Assessment - Working through the cases gives the student the opportunity to apply knowledge from multiple courses including Clinical Skills, Medicine & Society, and Principles of Biomedical Sciences. This process provides formative feedback about the student’s medical knowledge and reasoning and helps to prepare the student for assessments in other courses.

Summative Assessment – In addition to the assignments as outlined below, there will be a number of questions within the Clinical Reasoning Cases that will utilize standard-based assessment.
OVERALL COURSE OBJECTIVE/COMPETENCY COMPONENTS **NEW**

During this term students will utilize a new model of assessment, Competency-Based Medical Education (CBME). This type of assessment is a marked shift from previous Clinical Integration courses and has been implemented as per student feedback.

In order for a student to progress from the early stages of learning to the level of competence necessary to function in a clinical setting, they will need to demonstrate they are competent at least as many times as described in the table below across all assessment points aligned with that particular competency. As students will have multiple opportunities throughout the term for assessment of each competency, it is expected that feedback will be provided earlier in the term and will be better able to target individual education needs.

**All assignments are mandatory to complete.**
### Objectives/Competencies

<table>
<thead>
<tr>
<th>Milestones</th>
<th>Where competency may be assessed</th>
<th>Number of successful competency assessments to display competence</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1. Utilize Clinical Reasoning (CR) in:</strong></td>
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<tr>
<td>Analyzing the patient interview:</td>
<td>Cases, Final Exam</td>
<td>5</td>
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<tr>
<td>- To determine appropriate questions required to understand the disease process, illness experience, and relevant patient context.</td>
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<tr>
<td>- To interpret the answers.</td>
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<tr>
<td>Analyzing components of the physical examination:</td>
<td>Cases, Final Exam</td>
<td>5</td>
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<tr>
<td>- To determine appropriate maneuvers.</td>
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<td>- To interpret the findings.</td>
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<tr>
<td>Synthesizing information to develop a rational differential diagnosis and a working diagnosis</td>
<td>Cases, Final Exam</td>
<td>5</td>
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<tr>
<td>Analyzing management:</td>
<td>Cases, Final Exam</td>
<td>5</td>
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<tr>
<td>- To determine appropriate investigations.</td>
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<tr>
<td>- To interpret the information.</td>
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<tr>
<td>- To synthesize the information to further define the patient’s problem.</td>
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<tr>
<td>Analyzing diagnostic errors:</td>
<td>Cases, Final Exam</td>
<td>3</td>
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<tr>
<td>- To identify common errors in information gathering and synthesis.</td>
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<tr>
<td>- To develop strategies to decrease errors in diagnosis.</td>
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<tr>
<td><strong>2. Utilize the Patient-Centred Clinical Method (PCCM) to integrate illness experience and patient context into active shared decision-making around management.</strong></td>
<td>Cases, Final Exam</td>
<td>5</td>
</tr>
<tr>
<td><strong>3. Demonstrate ethico-legal reasoning.</strong></td>
<td>Cases, Final Exam, Ethics Assignment</td>
<td>8</td>
</tr>
<tr>
<td>See Ethics Module for milestones.</td>
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<tr>
<td><strong>4. Demonstrate effective information literacy skills to find relevant information.</strong></td>
<td>Information Literacy Assignment</td>
<td>1</td>
</tr>
<tr>
<td>See Information Literacy Module for milestones.</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>5. Critically appraise pertinent information.</strong></td>
<td>Cases, Final Exam</td>
<td>2</td>
</tr>
<tr>
<td><strong>6. Demonstrate self-directed learning.</strong></td>
<td>Self-Directed Learning Assignment</td>
<td>3</td>
</tr>
<tr>
<td>See Self-Directed Learning Module for milestones.</td>
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<td></td>
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<tr>
<td><strong>7. Exhibit professionalism.</strong></td>
<td>Individually Assessed</td>
<td>n/a</td>
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<tr>
<td>- Failure to exhibit professional behavior will be adjudicated on an individualized basis.</td>
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<tr>
<td><strong>8. Collaborate effectively.</strong></td>
<td>iPBL Assignment</td>
<td>1</td>
</tr>
<tr>
<td>See Interprofessional Problem-Based Learning (iPBL) Module for milestones.</td>
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</table>
DESCRIPTION OF ASSESSMENTS:

Full details will be provided during the course orientation.

Assessment 1: Ethics Written Assignment
Due Date: TBA
Description: The required written assignment will be a discussion of one of several cases in a short essay format. More information in regard to details of this assignment will be provided at course orientation. Detailed description and rubric will be posted on BlackBoard.

Assessment 2: Clinical Reasoning Cases
Due Date: In-class assignments will be due at the end of each Clinical Reasoning Case. Take home assignments will be due the week following the Clinical Reasoning Case session. All assignments must be submitted by 11:59 PM on their due date.
Description: Each Clinical Reasoning Case session will be assessed based on either a take-home clinical question that is to be completed in structured essay form and will be marked by the tutor/facilitator (if applicable, rubrics will be made available in one45) or an in-class assignment. Cases may include content from Term III and all previous terms completed. Additionally, the focus of the cases will be on the Clinical Integration objectives/competencies but may also assess objectives drawn from Foundations, Clinical Skills, and Medicine and Society. Some cases may contain aspects of self-directed learning. Detailed description and rubric will be posted on BBLearn.

Assessment 3: Self-Directed Learning Assignment
Due Date: Part 1, Elements 1&2 August 21, 2019 by 23:59
Part 2, Element 1 - November 6, 2019 by 23:59
Part 2, Element 2 - November 13, 2019 by 23:59
Part 3, Element 1 - November 27, 2019 by 23:59
Description: This assignment will allow students the opportunity to reflect on their learning and identify an area they would like to gain additional learning around. By working through the process of this assignment students will have the opportunity to reflect on their learning, create a goal to enhance their learning, learn, receive feedback from their peers and colleagues on their growth, and make a plan for monitoring the effectiveness of their new learning.
Assessment 4: Interprofessional Problem-Based Learning (iPBL) Assignment
Due Date: Wednesday October 23, 2019 11:59 pm
Description: The required written assignment will be posted on Blackboard and due 1 week after the last iPBL session.

Assessment 5: Information Literacy Assignment
Due Date: September 25, 2019 11:59pm
Description: A take-home assignment bringing together the material covered in the three sessions will be posted on Blackboard.

Final Exam (Required):
Date: December 6, 2019
Length: 3 hours
Type: Summative, cumulative, examination.

COURSE POLICY FOR SUCCESSFUL COMPLETION & REMEDIATION
For successful course completion for the purposes of promotion, students will achieve the minimum number of successful competency assessment points in all course objectives/competencies.

REMEDICATION AND COURSE FAILURE
If a student fails to meet one or two course objectives/competencies they may be offered remediation and supplemental assessment to a maximum of one remediation attempt per objective/competency. Failure of more than two course objectives/competencies or failure of a supplemental exam will result in a course failure. Note: failure of the “exhibits professionalism” objectives/competency may result in an outright course failure. Students who are eligible for remediation will be required to meet with the Course Director and/or Course Chair to identify areas of weakness and develop a structured remediation and learning plan and complete a supplemental assessment. After the final examination period, the implications of failing to successfully complete course components will be adjudicatated at the Term 1 Promotions Committee and a final decision to grant remediation/supplemental work will be determined by the Student Academic Management Committee.
ATTENDANCE EXPECTATIONS

See Student Information Guide for MD Program Attendance and Absence policy.

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

Students who miss a Case or iPBL without appropriate approval or following appropriate notification steps in the event of illness (see Attendance Policy) will be assigned a mark of zero for that session and may result in a meeting to discuss Professionalism. In this situation, students are strongly encouraged to review case materials to address the learning objectives of the case.

Students who have an approved absence or unavoidable absence due to illness (see Attendance Policy) should notify the Course Director, and the Pre-Clerkship Coordinator in Saskatoon or the Education Consultant in Regina. Students will be given an opportunity to complete the case independently and submit the assignment, which will be weighted as 7% (or prorated to reflect missing in-class marks if those are part of the missed session).

COURSE EVALUATIONS QUALITY IMPROVEMENT

The following changes reflect course quality review recommendations and student feedback:

1. A self-directed learning assignment has been created.

2. There will be more variety in the type of assignments used in this course to ensure better yield in terms of learning. A focus will be placed on timely feedback for students. Competency-Based Medical Education (CBME) has been established.

3. Attempts will be made to align the content of the Clinical Reasoning Cases with knowledge students are currently studying in Foundations or other courses.
COURSE MODULES

Clinical Reasoning Module

MODULE CONTACTS

Module Director: Dr. Matt Kushneriuk – matt.kushneriuk@usask.ca – (306) 966-7202
Administrative Assistant (Saskatoon): Kimberly Basque - kimberly.basque@usask.ca - (306) 966-6151
Administrative Officer (Regina): Sherry Lindenbach - sherry.lindenbach@saskhealthauthority.ca – (306) 766-0578
Administrative Coordinator (Regina): Holly Doell – holly.doell@saskhealthauthority.ca (306) 766-0552

MODULE DESCRIPTION

In these small group learning experiences, the student will work through patient “cases” in order to have practice applying knowledge from the various courses in this third term and to further develop clinical reasoning skills. All material covered in Year 1 (Terms 1 & 2) can be drawn on as well. In some cases, a flipped classroom model may be utilized.

MODULE COMPETENCIES/MILESTONES

Competencies:

1. Utilize Clinical Reasoning (CR) in:

   i. Analyzing the Patient Interview:
      - To determine appropriate questions required to understand the disease process, illness experience, and relevant patient context.
      - To interpret the answers.

   ii. Analyzing Components of the Physical Examination:
      - To determine appropriate maneuvers.
      - To interpret findings.

   iii. Synthesizing Information to Develop a Rational Differential Diagnosis and a Working Diagnosis
iv. Analyzing Management:
   - To determine appropriate investigations.
   - To interpret the information.
   - To synthesize the information to further define the patient’s problem.

v. Analyzing Diagnostic Errors:
   - To identify common errors in information gathering and synthesis.
   - To develop strategies to decrease errors in diagnosis.

2. Utilize the Patient-Centred Clinical Method (PCCM) to integrate illness experience and patient context into active shared decision-making around management.

3. Demonstrate ethico-legal reasoning.


MODULE ASSESSMENT

The assessment will focus on Clinical Reasoning Cases. The details for this assessment will be posted on one45.

**NOTE: DUE TO BBLEARN FORMATTING ALL CLINICAL REASONING CASES WILL BE LABELED “TESTS” RATHER THAN ASSIGNMENTS, HOWEVER, FOR THE PURPOSES OF THE UNDERGRADUATE MEDICAL EDUCATION ASSIGNMENT SUBMISSION POLICY THEY WILL BE CONSIDERED ASSIGNMENTS.**
**Interprofessional Problem-Based Learning (iPBL) Module**

**MODULE CONTACTS**

Module Co-Director: Nassrein Hussein – nassrein.hussein@usask.ca - (306) 955-5433  
Module Co-Director: Sean Polreis – sean.polreis@usask.ca – (306) 966-1311  
Administrative Officer (Regina): Sherry Lindenbach – sherry.lindenbach@saskhealthauthority.ca – (306) 766-0578  
Administrative Coordinator (Regina): Kayla Trevena – kayla.trevena@saskhealthauthority.ca - (306) 766-0632

**MODULE DESCRIPTION**

Problem-based learning (PBL) is an active learning process where students are expected to identify learning needs, locate the appropriate information, and formulate a solution to the problem posed.

In these small group learning experiences, students will work through patient “cases” in order to have practice applying knowledge from the various courses in this third term and to further develop clinical reasoning skills. All material covered in Year 1 (Terms 1 & 2) can be drawn on as well. Health professions’ students work in teams to gain knowledge and experience in interprofessional collaboration.

Some of the key components of the National Competency Framework established by the Canadian Interprofessional Health Collaborative (CIHC) are introduced to health professions’ students participating in Interprofessional Problem-Based Learning (iPBL) and students have an opportunity to develop knowledge, skills, attitudes and behaviors for effective interprofessional collaborative practice.

**MODULE OBJECTIVES/COMPETENCIES/MILESTONES**

**Competency:**

8. Collaborate Effectively

**Milestones:**

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

2. Team Functioning
   - Describe how the use of effective group processes contributes to patient care.
3. Interprofessional Communication
   • Describe how elements of effective interprofessional communication improve team function.

4. Collaborative Leadership
   • Describe leadership and decision-making behaviours that are likely to contribute to group effectiveness.

5. Patient/client/family/community-centred care
   • Determine useful communication approaches based on an understanding of the patient/family and the situation/context and the implications for management.

6. Interprofessional Conflict Resolution
   • Describe steps and strategies for conflict resolution within interprofessional groups.

MODULE ASSESSMENT
Assessment for the iPBL of Clinical Integration III will be based on the student's attendance at small group sessions and satisfactory completion of a written assignment. Please refer to the assessment breakdown above. The required written assignment will be posted on Blackboard and due 1 week after the last iPBL session, **Wednesday, October 23, 2019 11:59 PM**.
**Ethics Module**

**MODULE CONTACTS**

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

Lecturer: Dr. Susan Hayton

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

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

**MODULE DESCRIPTION**

This module is intended to provide further discussion and analysis on the topics: End of Life Decision Making, and Medical Assistance in Dying. Students will be expected to demonstrate an accurate understanding of ethical principles, guidelines, laws, and present a reasonable argument for a course of action.

Students will continue to develop an analytic method of problem-solving that will prepare them to handle ethical dilemmas in real clinical situations. Students will have the opportunity to think critically about controversial issues in a group environment facilitated by healthcare professionals.

Students are encouraged to reflect upon their personal morals, beliefs and values, and recognize the impact that these beliefs have on patient care.

**MODULE OBJECTIVES/COMPETENCIES/MILESTONES**

**Competency:**

3. Demonstrate Ethico-Legal Reasoning

**Milestones:**

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

**MODULE DELIVERY**

Lecture-based sessions are designed to deliver information about approaches to ethical problem solving, and to educate students about the legal and ethical requirements associated with certain aspects of patient care.
Small group discussion sessions provide an opportunity for students to discuss different approaches to ethical problem solving, and to practice working through complex ethical dilemmas under the guidance of 1-2 facilitators and fellow classmates. Feedback will be written by facilitators and delivered to students via email.

RECOMMENDED RESOURCES


Sections in Case Workbook by Dr. K. Ogle on the Four Principles: Beneficence, Non-Maleficence, Autonomy, and Justice (Pages 11-17). Workbook accessible on one45.

MODULE ASSESSMENT

This assessment will focus on ethical reasoning and critical thinking in a written essay. The details for this assessment will be posted on one45. The written assignment is due: Wednesday, August 28, 2019 by 23:59.
Information Literacy Module

MODULE CONTACTS
Module Director (Saskatoon): Erin Watson – erin.watson@usask.ca – (306) 966-7327
(Regina): Michelle Dalidowicz: michelle.dalidowicz@saskhealthauthority.ca; 306-766-8936
Administrative Assistant: (Saskatoon): Kimberly Basque – kimberly.basque@usask.ca – (306) 966-6151
Administrative Coordinator (Regina): Alexis Robb – alexis.robb@saskhealthauthority.ca – (306) 766-0556

MODULE DESCRIPTION
This module reinforces and expands upon students’ existing information literacy knowledge to develop information literacy skills specifically for the medical context.

MODULE OBJECTIVES/COMPETENCIES/MILESTONES

Competency:
4. Demonstrate Effective Information Literacy Skills to Find Relevant Information

Milestones:
1. Examine good quality information resources for answering various clinical information needs.
2. Create a clearly defined, searchable question relevant to clinical scenario provided.
3. Develop a well-constructed search strategy to find primary literature relevant to the question.
4. Identify pre-appraised/point of care resources.
5. Select pre-appraised/point of care resources.
6. Navigate pre-appraised/point of care resources.

MODULE ASSESSMENT
A take-home assignment bringing together the material covered in the three sessions will be posted on Blackboard on September 18, 2019 and due September 25, 2019 by 23:59.
Self-Directed Learning Module

MODULE CONTACTS
Module Director: Dr. Matt Kushneriuk – matt.kushneriuk@usask.ca – (306) 966-6151
Administrative Assistant (Saskatoon): Kimberly Basque - kimberly.basque@usask.ca - (306) 966-6151
Administrative Officer (Regina): Sherry Lindenbach - sherry.lindenbach@saskhealthauthority.ca – (306) 766-0578
Administrative Coordinator (Regina): Holly Doell – holly.doell@saskhealthauthority.ca (306) 766-0552

MODULE DESCRIPTION
Students will have the opportunity to reflect on their learning and identify an area they would like to gain additional knowledge. By working through this process students will have the opportunity to reflect on their learning, create a goal to enhance their learning, learn, receive feedback from their peers and colleagues on their growth, and make a plan for monitoring the effectiveness of their new learning. Please view this as an opportunity to explore an area of difficulty or interest through the use of self-directed learning.

MODULE OBJECTIVES/COMPETENCIES/MILESTONES

**Competency:**
6. Demonstrate Self-Directed Learning

**Milestones:**
Being a self-directed learner involves a five-step process:
1. Reflecting on and identifying individual learning needs, including setting a personal learning goal to guide the self-directed learning process.
2. Seeking out credible resources to address the learning need and enhancing their learning.
4. Applying lessons learned to the resolution of the learning need.
5. Identifying a plan for monitoring future effectiveness.

MODULE ASSESSMENT
This module will be assessed through a longitudinal assignment spread throughout the term that will allow students the opportunity to reflect on their learning and identify an area they would like to gain additional learning around. By working through the process of this assignment students will have the opportunity to reflect on their learning, create a goal to enhance their learning, learn, receive feedback from their peers and colleagues on their growth, and make a plan for monitoring the effectiveness of their new learning.
IMPORTANT AND RELEVANT STUDENT INFORMATION

The following information is extremely important for your success in medical school. Please refer to the UGME Policies page and the Student Information Guide for the following policies:

UGME CONTACT INFORMATION
EMAIL COMMUNICATIONS
ETHICS AND PROFESSIONALISM
PROGRAM EVALUATION
GUIDELINES FOR PROVIDING FEEDBACK
EMERGENCY PROCEDURES
MD PROGRAM ATTENDANCE POLICY
ASSESSMENT POLICY
PROMOTION STANDARDS
CONFLICT OF INTEREST
NON-ININVOLVEMENT OF HEALTH CARE PROVIDERS IN STUDENT ASSESSMENT
APPEALS PROCEDURES
STUDENT DISCRIMINATION, HARRASSMENT, AND MISTREATMENT PROCEDURE
ACCOMMODATION OF STUDENTS WITH DISABILITIES
OFFICE OF STUDENT AFFAIRS

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

UNDERGRADUATE MEDICAL EDUCATION ASSIGNMENT SUBMISSION POLICY

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

All due dates or timelines for assignment submission are published in the student course syllabus.1

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

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.
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.

**NOTE: due to BBLEARN formatting all clinical reasoning cases will be labeled “Tests” rather than assignments, however, for the purposes of the Undergraduate Medical Education Assignment Submission Policy they will be considered assignments.**

**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](http://www.nlm.nih.gov/bsd/uniform_requirements.html)

**PROFESSIONALISM**

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

**RECORDED OF THE LECTURES**

Most lectures will be recorded and posted to the course Blackboard site under Course Materials. However, each lecturer reserves the right to choose whether or not their lectures will be recorded. Lecture recordings are not intended to be a replacement for attending the session but to enhance understanding of the concepts.
COPYRIGHT
Course materials are provided to you based on your registration in a class, and anything created by your professors and instructors is their intellectual property, unless materials are designated as open education resources. This includes exams, PowerPoint/PDF slides and other course notes. Additionally, other copyright-protected materials created by textbook publishers and authors may be provided to you based on license terms and educational exceptions in the Canadian Copyright Act (see http://laws-lois.justice.gc.ca/eng/acts/C-42/index.html)

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

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

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

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

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

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

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

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

STUDENT SUPPORTS

COLLEGE OF MEDICINE, OFFICE OF STUDENT AFFAIRS

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

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

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

Student Affairs Director (Regina), Dr. Nicole Fahlman – nicole.fahlman@saskhealthauthority.ca (306) 209-0142

Student Affairs Director, Dr. Tiann O’Carrol – tiann.ocarroll@usask.ca (306) 529-0777

STUDENT LEARNING SERVICES

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

**ABORIGINAL STUDENTS’ CENTRE**

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

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

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