

WSU ESFCOM LIC Assessment Package (Grading Policy and Overview)

While written exams are the primary means to determine grades in the pre-clerkship curriculum, grades in the LIC are primarily based on clinical assessments completed by your preceptors (residents, primary preceptor, and attending physicians) about your performance in the clinical setting. While the LIC is scheduled similarly across all clinical campuses, each student in the LIC will have a slightly different experience as he/she/they will work with different supervisors and see different patients. This approach to grading allows for that flexibility while still ensuring students meet the requirements to transition to Year 4.

At ESFCOM, you will receive an overall grade for the LIC (reported on your transcript and MSPE) and a clinical performance level for each Patient Care Domain (reported on your MSPE). We use a criterion-based system which means that there are no limits to the number of honors we can assign (i.e., if all students meet the honors criteria, all students will receive honors) and you are not competing against your classmates for grades.

Assessment methods used in the LIC:

Clinical Assessments:

1. All clinical assessments are triggered through EFlo. These assessment forms include behavioral descriptors (milestones) and ample space for narrative comments. We use three types of clinical assessments:
 - a. **Clinical Performance Assessment (CPA)** – This is a longitudinal assessment that includes questions across all the different clinical skills learned and assessed in a particular patient care domain. This form will be completed by primary preceptors or attendings and captures information about Year 3 milestones and expected levels of supervision. Timing of collection is dependent on individual student schedules and length of time in care domains. Collection requirements can be reviewed in the table below.
 - b. **Clinical Skills WBA (brief, focused assessment)** – These assessments focus on a single clinical skill and include only 1-2 questions and an area for narrative comments. They are designed to be completed immediately after a patient encounter to provide students with ongoing formative feedback from preceptors, residents, and attendings.
 - i. In the spirit of a growth mindset, it is to the student's benefit to collect WBAs early and often. This will ensure students receive the feedback they need to plan for personal improvement. Although low-stakes (formative but required), WBAs will be reviewed for evidence of learning.
 - c. **Interprofessional Attributes Tool (iPAT)** – The iPAT is a brief feedback instrument designed to capture information about initiative for learning, teamwork skills, communication, and professionalism. This form should be completed by other members of the healthcare team and then signed off by your primary preceptor.
2. Year 3 OSCE: Students will complete two OSCEs during the LIC.
 - a. Formative OSCE: The first OSCE will be completed during MED CLIN 522 and is typically around 5 stations. This OSCE is designed to provide you with formative feedback and support learning plan development
 - b. Summative OSCE: The second OSCE will be completed during MED CLIN 523 and is typically 6-8 stations. This OSCE is summative. Students are required to attain a passing score on the Summative OSCE to pass the LIC.
 - c. Students who fail the summative OSCE will be required to complete targeted skills development to address the identified skills gap.

Knowledge Exams and Other Assessments:

3. The LIC utilizes the NBME Comprehensive Clinical Sciences Exam as the core knowledge assessment.
 - a. Students will complete one formative CCSE and one summative CCSE

- b. The target score for the formative CCSE is 170. Students scoring less than 170 will meet with the Co-Directors to discuss resources and an approach to knowledge-building and consolidation.
 - c. The passing score for the summative CCSE is set at 190 +/- 1 Std dev
 - d. Students who fail an exam will have the opportunity to retake the exam but will not be eligible for honors for their overall LIC grade.
 - e. Students who fail an exam twice are eligible only for a final LIC grade of satisfactory. These students must pass the exam before they can be promoted to Year 4.
 - f. Students may elect to show their numeric score on their MSPE.
4. We incorporate a variety of assignments to support learning in the LIC. Some of these assignments are formative (required to complete) while others are summative. Rubrics will be available to guide skills expectations for each assignment. **For a full list of assignments and due dates please review the tables at the end of this package.**
5. Professionalism is a required element of all ESFCOM course work. Students are expected to exhibit the core attributes of professionalism (reliability, willingness to ask for help/admit limits, integrity, duty, respect, honesty, advocacy, etc.) throughout their clerkship training which includes attendance and participation in all required activities, respectful and timely communications with all faculty/staff, timely completion of all assignments and respectful and appropriate interactions with patients, families, communities, and care teams. If students do not meet these professionalism expectations their overall LIC grade will be impacted. The Clerkship Co-Directors are ultimately responsible for determining the level of concern of a particular professionalism lapse.
- i. Minor professionalism lapses include things like tardiness, turning in assignments or assessment forms late, not responding to emails, or not attending a single AHD session (unexcused absence).
 - ii. Egregious concerns or a pattern of ongoing problems despite reminders may also be grounds for course failure. Examples of this include, but are not limited to untrustworthy behavior, dishonesty, endangering patients, racist, sexist, or otherwise biased behavior, and/or a significant pattern of ongoing problems despite documented feedback on multiple occasions.

If a professionalism concern is identified as egregious, the concern will be reviewed by the Professionalism Excellence Advisory Committee (PEAC) and/or the SEPAC. The PEAC will provide a recommended course of action to the SEPAC.

Clinical Competence Panel

6. The LIC utilizes a grading committee (Clinical Competence Panel) to determine grades. The committee is chaired by the Associate Dean for Assessment and Evaluation and includes the Clerkship Co-Directors, the Clinical Education Directors and members from the pre-clerkship curriculum. Anyone with a conflict of interest removes themselves from grading decisions. The Clinical Competence Panel (CCP) meets quarterly (at the end of each MEDCLIN course) to review student progress in the LIC and provide feedback about skills development and guidance for learning plan development. Final grades for the LIC will be determined by the Clinical Competence Panel at the end of the year.
- a. All data gathered during the year is reviewed by the CCP and utilized to determine a grade. However, the emphasis is placed on the **skills/abilities a student can demonstrate at the end of the year**, so growth over the course of the year is encouraged and not penalized. The CCP is looking for evidence of learning and a pattern of performance; therefore, one individual assessment with an outlying score or comment will not be the determining factor for the grade.

Criteria for Overall Grades in the LIC: Honors, Near Honors, Satisfactory or Fail

	Honors	Near Honors	Satisfactory	Fail
Clinical Assessments	<ul style="list-style-type: none"> • Feedback (comments, milestones ratings, required level of supervision) consistently demonstrate skill level that 	<ul style="list-style-type: none"> • Feedback (comments, milestones ratings, required level of supervision) consistently demonstrates attainment of Year 3 	<ul style="list-style-type: none"> • Feedback (comments, milestones ratings, required level of supervision) consistently demonstrate attainment of Year 	<ul style="list-style-type: none"> • Comments, levels of supervision, milestones ratings do not consistently demonstrate achievement

	<p>exceeds year 3 milestones expectations (milestone levels of extending or higher) for all core clerkship skills (EPA 1, 2, 3, 5, 6, and 7) for patients with common conditions</p> <ul style="list-style-type: none"> Consistently demonstrates engagement with many core clinical skills with complex or undifferentiated patients by the end of the year Collected observations of two or more advanced EPAs (EPA 8, 10, 11, 15) 	<p>milestones expectations for all core clinical skills (EPA 1, 2, 3, 5, 6, and 7) with common conditions</p> <ul style="list-style-type: none"> Demonstrate skill levels that exceed year 3 milestones for some (but not all) core clinical skills for patients with common conditions Demonstrates some (but not all) clinical skills with complex or undifferentiated patients by the end of the year Collected observations of one or more advanced EPAs (EPA 8, -10, -11, 15) 	<p>3 milestones expectations for all core clinical skills (EPA 1, 2, 3, 5, 6, and 7) for patients with common conditions.</p>	<p>of minimum expectations for clinical skills for patients with common conditions</p>
Practice-based learning	<ul style="list-style-type: none"> Meets assessment collection requirements in all patient care domains (CPA, WBA, iPAT) Collects more than required clinical skills WBAs in most care domains Maintained consistent logging of patient care tasks (weekly) Evidence of ongoing goal-setting and learning plan development through the LIC (learning plans completed for all patient care domains); learning plans provide evidence of follow-thorough 	<ul style="list-style-type: none"> Meets assessment collection requirements in all patient care domains (CPA, WBA, iPAT) Collects more than required clinical skills WBAs in some care domains Mostly consistent with logging patient care tasks Evidence of goal-setting and learning plan development (learning plans completed for most patient care domains) 	<ul style="list-style-type: none"> Meets assessment collection requirements in all patient care domains (CPA, WBA, iPAT) Completes logging of patient care tasks; but not consistent through the year Limited evidence of goal-setting; completes learning plans for a limited number of patient care domains completes learning plans only in the last course of the LIC) 	<ul style="list-style-type: none"> Does not meet minimum assessment requirements in more than one care domain No evidence of goal setting; does not complete learning plans
Professional Attributes	<ul style="list-style-type: none"> No more than 1 minor professionalism lapse, no major or egregious professionalism lapses Professional Attributes: comments and ratings consistently demonstrates the student is exceeding professionalism expectations 	<ul style="list-style-type: none"> No more than 2 minor professionalism lapses, no major or egregious professionalism lapses Professional Attributes: comments and ratings demonstrate student is exceeding expectations 	<ul style="list-style-type: none"> No major or egregious professionalism lapses and no pattern of unprofessional behavior; no more than 3 minor professionalism lapses Professional Attributes: comments and ratings consistently demonstrate student is meeting year 3 professionalism expectations 	<ul style="list-style-type: none"> Pattern of unprofessional behavior or major or egregious professionalism lapses
Assignments and exams	<ul style="list-style-type: none"> Completes all formative assignments Exceeds expectations in identified summative assignments 	<ul style="list-style-type: none"> Meets expectations for all assignments (allowed one redo) Attains a passing score on the knowledge exam on first attempt 	<ul style="list-style-type: none"> Meets expectations for all assignments (allowed one redo) Achieves passing score on knowledge exam (allowed 3 retakes on knowledge exam) 	<ul style="list-style-type: none"> Does not meet expectations of all assignments even after one redo

- Attains a passing score on the knowledge exam on first attempt
- Achieves an overall “pass” on Year 3 OSCE
- Achieves an overall “pass” on Year 3 OSCE
- Achieves an overall “pass” on Year 3 OSCE
- Student does not achieve a passing score after 3 attempts.
- Does not achieve an overall “pass” on Year 3 OSCE

To achieve a grade of honors a student must meet **all** four Honors criteria
 A failing grade is assigned if a student meets **any** of the four Fail criteria

Clinical Assessments: Minimum Collection requirements for each Care Domain

		Adult Ambulatory	Adult Hospitalized	Pediatrics	OBGYN	Psych/BH	Surgery
Clinical Assessments	Clinical skills WBA	1 of: EPA 1a, 1b, 3, 5, 6	1 of: EPA 1a, 1b, 3, 5, 6	1 of: EPA 1a, 1b, 3, 5, 6	1 of: EPA 1a, 1b, 3, 5, 6	1 of: EPA 1a, 1b, 3, 5, 6	1 of: EPA 1a, 1b, 3, 5, 6
	CPA	2 (mid, end)	2 (mid, end)	1 (end)	2 (mid, end)	1 (end)	2 (mid, end)
	iPAT	1	1	1	1	1	1
Total forms		8 forms	8 forms	7 forms	8 forms	7 forms	8 forms

NOTE: These form collections are by care domains. EPA 2 and 7 in the care domain are still assessed using CPAs and assignments, but WBAs are not required for these individual EPAs.

Year 3 Expectations: Milestones and required levels of supervision for each of the Clinical Task (EPA)

For each of the clinical skills below, a milestones descriptor and a minimum level of supervision (green) has been identified that a student MUST achieve for **common** clinical conditions by the end of the LIC (as evidenced both in comments and in ratings). Blue signals levels of supervision that exceed expectations for each clinical skill when working with **common** clinical conditions.

EPA (Task)	Proactive, full supervision	Reactive on demand supervision		
		Do with all findings confirmed	Do with all key findings confirmed	Do with complex findings confirmed
EPA-1: Gather a history and perform a physical exam.	Requires residents or attendings to assist with all aspects of the history and physical	Can perform H&Ps under direct supervision by an attending or resident to ensure correct and complete information	Performs H&Ps independently; resident/ attending will need to ask additional questions or perform additional examination maneuvers	Performs H&Ps independently with minimal need for additional questioning or examination by resident or attending
EPA-2: Develop a differential diagnosis.	Requires the resident or attending to assist with all steps of clinical reasoning including differential diagnosis and formulation/ prioritization of problems	Requires significant coaching from the resident or attending in all steps of clinical reasoning including differential diagnosis and formulation/ prioritization of problems	Formulates and prioritizes an appropriate differential diagnosis; may require support adjusting differential with new information; requires support	Formulates and prioritizes an appropriate differential; adjusts differential with new information; requires support for complex, rare or nuanced conditions
EPA-3: Recommend and interpret common diagnostic tests.	Requires a resident or attending to provide step-by-step guidance when recommending or interpreting diagnostic studies/tests	Recommends & interprets some common diagnostic studies/tests, but requires assistance with the other routine tests and studies	Recommends and interprets studies/tests for common conditions; requires some support	Recommends and interprets studies for common and complex conditions and tests; may require assistance for less common conditions
EPA-5: Provide written documentation of a clinical encounter.	Documentation requires the resident or attending to re-present in order to convey necessary information	Documents patients independently but will need to look to the resident or attending for guidance or to answer additional questions	Documents patients succinctly and correctly; requires support for clarifications by the resident or attending	Documents patients without assistance from the resident or attending; may require support for complex cases
EPA-6: Provide an oral presentation of a clinical encounter.	Presentations requires the resident or attending to re-present in order to convey necessary information	Presents patients independently but will need to look to the resident or attending for guidance or to answer additional questions	Presents patients succinctly and correctly; requires support for clarifications by the resident or attending	Presents patients succinctly and correctly; requires support for clarifications by the resident or attending

EPA-7: Evidence Based Medicine	Needs help devising clinical questions, finding appropriate literature, interpreting literature, and applying findings to a given patient case	Devises appropriate clinical questions; relies on secondary sources; requires assistance with interpreting primary literature and applying findings to patient care	Devises appropriate clinical questions and identifies primary literature sources; requires assistance with complex topics and with application to patient care	Devises clinical questions, identifies most relevant primary or secondary sources, and appropriately applies to patient care; may require assistance for complex cases or rare conditions
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In addition to the above clinical skills, preceptors and care team members may be asked to assess professional attributes

Dependability, integrity, self-awareness	The student is on time and is prepared for all clinical duties; they fulfill responsibility to patients and team in a timely manner; they recognize limitations and seek help when needed.	Not yet met	Meets	Exceed expectations
Uses learning materials, prepares, and improves knowledge	The student demonstrates sufficient knowledge base; uses appropriate sources of information to prepare for patient care activities and addresses knowledge gaps.	Not yet met	Meets	Exceed expectations
Takes initiative and shows motivation for learning; integrates feedback	The student actively participates in the learning environment; remains open to and integrates feedback; implements plans for personal improvement.	Not yet met	Meets	Exceed expectations
Communicates effectively	The student uses patient-centered care; demonstrates empathy, compassion, and respect; demonstrates cooperation and communicates effectively with the entire health care team.	Not yet met	Meets	Exceed expectations
Manages clinical care	The student accepts advancing responsibility; they can maintain appropriate care for 3 patients simultaneously; can maintain care for patients of moderate complexity, when appropriate.	Not yet met	Meets	Exceed expectations

At the end of the LIC, you will also receive a **Clinical Performance Level** for each Patient Care Domain. This will be reported on your MSPE but is not reported on your transcript. We use a criterion-based system which means that there are no limits to the number of honors we can assign (i.e., if all students meet the honors criteria, all students will receive honors) and you are not competing against your classmates for grades.

Criteria for **clinical performance levels** for each care domain

	Honors	Near Honors	Satisfactory	Fail
Clinical Assessments	<ul style="list-style-type: none"> Feedback (comments, milestones ratings, required level of supervision) consistently demonstrate skill level that exceeds year 3 milestones expectations (milestone levels of extending or higher) for all core clerkship skills (EPA 1, 2, 3, 5, 6, and 7) for patients with common conditions Consistently demonstrates engagement with many core clinical skills with complex or undifferentiated patients by the end of the year Collected observations of two or more advanced EPAs (EPA 8, 10, 11, 15) 	<ul style="list-style-type: none"> Feedback (comments, milestones ratings, required level of supervision) consistently demonstrates attainment of Year 3 milestones expectations for all core clinical skills (EPA 1, 2, 3, 5, 6, and 7) with common conditions Demonstrate skill levels that exceed year 3 milestones for some (but not all) core clinical skills for patients with common conditions Demonstrates some (but not all) clinical skills with complex or undifferentiated patients by the end of the year Collected observations of one or more advanced EPAs (EPA 8, -10, -11, 15) 	<ul style="list-style-type: none"> Feedback (comments, milestones ratings, required level of supervision) consistently demonstrate attainment of Year 3 milestones expectations for all core clinical skills (EPA 1, 2, 3, 5, 6, and 7) for patients with common conditions. 	<ul style="list-style-type: none"> Comments and milestones do not consistently demonstrate achievement of minimum expectations for clinical skills for patients with common conditions
Practice-based learning	<ul style="list-style-type: none"> Meets assessment collection requirements in all patient care domains (CPA, WBA, iPAT) Maintained consistent logging of patient care tasks (weekly) Confirmed/adjusted schedules Evidence of ongoing goal-setting and learning plan development through the LIC (learning plans completed for all patient care domains); learning plans provide evidence of follow-through 	<ul style="list-style-type: none"> Meets assessment collection requirements in all patient care domains (CPA, WBA, iPAT) Mostly consistent with logging patient care tasks Confirmed/adjusted schedules Evidence of goal-setting and learning plan development (learning plans completed for most patient care domains) 	<ul style="list-style-type: none"> Meets assessment collection requirements in all patient care domains (CPA, WBA, iPAT) Completes logging of patient care tasks; but not consistent through the year Confirmed/adjusted clinical schedules; may have missed some weeks Limited evidence of goal-setting; completes learning plans for a limited number of patient care domains completes learning plans only in the last course of the LIC) 	<ul style="list-style-type: none"> Does not meet minimum assessment requirements in more than one care domain Did not meet/complete logging requirements; Did not confirm/adjust clinical schedules No evidence of goal setting; does not complete learning plans

Professional Attributes	<ul style="list-style-type: none"> No more than 1 minor professionalism lapse, no major or egregious professionalism lapses Professional Attributes: comments and ratings consistently demonstrate exemplary professionalism 	<ul style="list-style-type: none"> No more than 2 minor professionalism lapses, no major or egregious professionalism lapses Professional Attributes: comments and ratings demonstrate student is exceeding expectations 	<ul style="list-style-type: none"> No major or egregious professionalism lapses and no pattern of unprofessional behavior; no more than 3 minor professionalism lapses Professional Attributes: comments and ratings consistently demonstrate student is meeting year 3 professionalism expectations 	<ul style="list-style-type: none"> Pattern of unprofessional behavior or major or egregious professionalism lapses
Assignments	<ul style="list-style-type: none"> Completes all formative assignments Exceeds expectations on identified summative assignments 	<ul style="list-style-type: none"> Completes all formative assignments Exceeds expectations on some identified summative assignments 	<ul style="list-style-type: none"> Completes all formative assignments Meets expectations for all summative assignments (allowed one redo) 	<ul style="list-style-type: none"> Does not complete one or more formative assignment Does not meet expectations of summative assignments even after one redo

Clinical Competence Panel Reviews

The Clinical Competence Panel (CCP) meets quarterly (at the end of each MEDCLIN course) to review student progress in the LIC and provide feedback about skills development and guidance for learning plan development. Final grades for the LIC will be determined by the Clinical Competence Panel at the end of the year.

The following table outlines the rubric used by the CCP to assign an “on-track” at the end of each course. If you are not meeting one or more of the requirements outlined in the table below, you may be assigned an “on-track with monitoring” or “off-track” and will be asked to meet with the Clerkship Course Directors. The Clerkship Directors may offer Targeted Skills Development and support to help you get back on track for meeting the requirements for the end of the LIC. Any student found to be off-track is at risk of failing a course and may be required to repeat the LIC.

MEDCLIN 521 – on track	MEDCLIN 522 - on track	MEDCLIN 523 - on track	MEDCLIN 524 - on track
Clinical assessments <ul style="list-style-type: none"> At least 1 WBA from each Care Domain scheduled By the end of 521, minimum of 8 WBAs (must include 1 EPA-1a, 1 EPA-1b, 1 EPA-6) Skill level: Achieving Expected supervisory level: Do with assistance 	Clinical assessments <ul style="list-style-type: none"> By the end of 522, you have collected at least 3 WBAs in each Care Domain scheduled (total 18 WBAs) 1 CPA from each Care Domain Skill level: Achieving or higher Expected supervisory level: Do with all findings confirmed 	Clinical assessments <ul style="list-style-type: none"> By the end of 523, you should have collected 4 WBAs in each Care Domain (total 24 WBAs) Skill level: Achieving or higher Expected supervisory level: Do with all key findings confirmed 	Clinical assessments <ul style="list-style-type: none"> By the end of 524, you should have collected 6 WBAs in each Care Domain (total 30 WBAs) A total of 2 CPAs from each Care Domain Skill level: Achieving or higher Expected supervisory level: Do with all key findings confirmed

<ul style="list-style-type: none"> • Logbook entries completed • 1 self-assessment complete • 1 learning plan complete 	<ul style="list-style-type: none"> • Logbook entries completed on a weekly basis • 1 self-assessment complete • 2 learning plans complete 	<ul style="list-style-type: none"> • Logbook entries completed on a weekly basis; approximately 75% of tasks logged. • 1 self-assessment complete • 2 learning plans complete 	<ul style="list-style-type: none"> • Logbook entries completed weekly • 1 self-assessment complete • 1 learning plan complete
<ul style="list-style-type: none"> • All assignments completed • 1 formative subject exam completed 	<ul style="list-style-type: none"> • All assignments completed • 2 formative subject exams completed 	<ul style="list-style-type: none"> • All assignments completed • 1 formative subject exam completed 	<ul style="list-style-type: none"> • All assignments completed • 1 formative subject exam completed
	<ul style="list-style-type: none"> • Formative OSCE – target: overall pass • Formative CCSE – target score 170 		<ul style="list-style-type: none"> • Summative OSCE - pass • Summative CCSE – pass score
Assignments/tasks completed on time	Assignments/tasks completed on time	Assignments/tasks completed on time	Assignments/tasks completed on time

Clinical Portfolio Coaching in Year 3

As students transition to their clinical campuses and begin their full-time clerkship training, their learning and development is supported by several different individuals, including a Clinical Portfolio Coach. Students will be connected with a clinical portfolio coach at the beginning of the LIC and will remain with their clinical coach through the end of Year 4. Portfolio work is considered a formal method of assessment but is purely formative (engagement with the learning, and completion of portfolio deliverables (self-assessments, learning plans, reflections) is required but “performance” in each is not assessed). Portfolios prompt you to review and integrate feedback, discuss developing competence with a coach, discuss workplace challenges and set goals. Clinical Portfolio Coaches will meet with students individually to review learner dashboards, discuss expectations and progress, review feedback and facilitate the exploration of “strengths” and “blind spots”. The campus teams and the Assessment Office work closely with the coaches to ensure they have what they need to support student progression. Portfolio coaches do not formally assess students, but they will help ensure students understand LIC expectations, learn to self-assess and complete learning plans.

Targeted Skills Development

Targeted Skills Development (TSD) is an opportunity to address skills gaps and/or competencies not yet met. Skills gaps may be identified through routine review of the learner dashboards, a standardized assessment (OSCE or written exam), communications from preceptors and/or quarterly reviews by Clinical Competence Panel. Students will be supported with TSD as the course progresses.

The process for TSD will be determined by the Clerkship Co-Directors and will be tailored to the individual student. The Clerkship Co-Directors will partner with appropriate faculty and the Assessment Office to develop and deliver the TSD plan. The Assessment Office provides guidance about appropriate method for TSD. The Clerkship Co-Directors will provide the Assessment Office and Student Affairs with a record of the TSD plan for each student. This record will outline the format of the TSD, the date(s) on which it will occur, the faculty providing support, and documentation of successfully completed TSD activities. If the student is unsuccessful on a TSD attempt, the Clerkship Co-Directors will briefly outline how they were unsuccessful, and the Associate Dean for Assessment and Evaluation or Associate Dean for Curriculum will notify the Student Success Centre for formal student review and the development of an individualized support plan prior to additional TSD attempts.

TSD will not be part of the student's internal record but **will not** be indicated on the student's official transcript or Dean’s letter (MSPE).

Assessment Calendar

Term 1 - 521		Due Date
July	STS Project (F) Concentrate on learning how to use the Logbook and Learning plans	7/7/23
August	Subject Exam #1 (F) First set of Psych Modules (F), First 14 APGO Quizzes (F) Maintain Logbook and Learning Plans	8/25/23 8/28/23
Term 2 - 522		
September	Pediatric Assignment: Jaundice (S) OSCE (Vancouver/Everett, F) Maintain Logbook and Learning Plans	9/18/23 9/23/23-9/27/23
October	OSCE (Spokane/TriCities, F) Subject Exam #2 (F) Medicine SOAP Note (F) Maintain Logbook and Learning Plans	10/2/23-10/6/23 10/13/23 10/30/23
November	Wise MD Surgical Cases (F) Subject Exam #3 (F) Maintain Logbook and Learning Plans	11/13/23 11/22/23
Term 3 - 523		
December	Second set of Psychiatry Modules (F), Second 14 APGO Quizzes (F) Maintain Logbook and Learning Plans	12/4/23
January	Subject Exam #4 (F) Maintain Logbook and Learning Plans	1/19/24
February	CCSE (F) Third 14 APGO Quizzes (F) OSCE (S/TC Campuses, S) Maintain Logbook and Learning Plans	2/1/24, 2/2/24 2/19/24 2/26/24-3/1/24
March	OSCE (V/E Campuses, S) Subject Exam #5 (F) Surgery Case Log (F, due after 2 nd spotlight) Maintain Logbook and Learning plans	3/4/24-3/8/24 3/15/24 3/25/24
Term 4 - 524		
April	Final Set of Psychiatry Modules (F), Final 13 APGO Quizzes (F) Maintain Logbook and Learning plans	4/8/24
May	CCSE (S) Longitudinal OB or GYN Surgery Encounter (F) Subject Exam #6 (F)	5/2/24, 5/3/24 5/10/24 5/24/24

	Maintain Logbook and Learning Plans	
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Note: Subject Exams can be in any order. This assignment list is only for the LIC and does not include LMH or Med Scholar assignments.

Term 1 - 521	Care of the Patient with OBGYN Needs	Due Date
July		
August	First 14 APGO Quizzes (F)	8/28/23
Term 2 - 522		
September		
October		
November		
Term 3 - 523		
December	Second 14 APGO Quizzes (F)	12/4/23
January		
February	Third 14 APGO Quizzes (F)	2/19/24
March		
Term 4 - 524		
April	Final 13 APGO Quizzes (F)	4/8/24
May	Longitudinal OB or GYN Surgery Encounter (F)	5/10/24
Note: Subject Exams can be in any order. Due dates are on Year 3 General Information Course Page. This assignment list is only for this subject and does not include other care domains, CCSE, OSCE, Subject Exams, LMH, or Med Scholar assignments.		

Term 1 - 521	Care of the Patient with Psychiatric Needs	Due Date
July		
August	First set of Psych Modules (F)	8/28/23
Term 2 - 522		
September		
October		
November		
Term 3 - 523		
December	Second set of Psychiatry Modules (F)	12/4/23
January		
February		
March		
Term 4 - 524		
April	Final Set of Psychiatry Modules (F)	4/8/24
May		

Note: Subject Exams can be in any order. Due dates are on the Year 3 General Information Course Page. This assignment list is only for this subject and does not include other care domains, CCSE, OSCE, Subject Exams, LMH, or Med Scholar assignments.

Term 1 - 521	Care of the Hospitalized Patient	Due Date
July		
August		
Term 2 - 522		
September		
October	Medicine SOAP Note (F)	10/30/23
November		
Term 3 - 523		
December		
January		
February		
March		
Term 4 - 524		
April		
May		
<p>Note: Subject Exams can be in any order. Due dates are on the Year 3 General Information Course Page. This assignment list is only for this subject and does not include other care domains, CCSE, OSCE, Subject Exams, LMH, or Med Scholar assignments.</p>		

Term 1 - 521	Care of the Ambulatory Adult Patient	Due Date
July		
August		
Term 2 - 522		
September		
October		
November		
Term 3 - 523		
December		
January		
February		
March		
Term 4 - 524		
April		
May		

Note: Subject Exams can be in any order. Due dates are on the Year 3 General Information Course Page. This assignment list is only for this subject and does not include other care domains, CCSE, OSCE, Subject Exams, LMH, or Med Scholar assignments.

Term 1 - 521	Care of the Surgical Patient	Due Date
July		
August		
Term 2 - 522		
September		
October		
November	Wise MD Surgical Cases (F)	11/13/23
Term 3 - 523		
December		
January		
February		
March	Surgery Case Log (F, due after 2 nd spotlight)	3/25/24
Term 4 - 524		
April		
May		
<p>Note: Subject Exams can be in any order. Due dates are on the Year 3 General Information Course Page. This assignment list is only for this subject and does not include other care domains, CCSE, OSCE, Subject Exams, LMH, or Med Scholar assignments.</p>		

Term 1 - 521	Care of the Pediatric Patient	Due Date
July		
August		
Term 2 - 522		
September	Pediatric Assignment: Jaundice (S)	9/18/23
October		
November		
Term 3 - 523		
December		
January		
February		
March		
Term 4 - 524		
April		
May		

Note: Subject Exams can be in any order. Due dates are on the Year 3 General Information Course Page. This assignment list is only for this subject and does not include other care domains, CCSE, OSCE, Subject Exams, LMH, or Med Scholar assignments.