

EMER 7610: CORE SUB-INTERNSHIP IN EMERGENCY MEDICINE

Phase 3a

AY2025-26

COURSE DIRECTORS

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COURSE ADMINISTRATORS

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COURSE DESCRIPTION

The Emergency Medicine Sub-Internship is a 4-week immersive course in which students expand their fund of knowledge and clinical skills during a rigorous clinical experience in which patient care responsibilities, workload, and work hours closely parallel those of a resident intern in the specialty.

COURSE OBJECTIVES

By the end of the course, students will be able to

Patient Care

- 1.1 Obtain an accurate and appropriately focused history in an organized manner (PC1)
- 1.2 Conduct an organized, appropriately focused and correctly performed physical exam, utilizing bedside ultrasound where appropriate, and distinguishes normal and abnormal findings (PC2)
- 1.3 Order and interpret clinical testing and recommends further testing as appropriate (PC3)
- 1.4 Integrate patient data to formulate an assessment, develop a working diagnosis, and prioritize a broad list of alternate potential diagnoses (PC4)

1.5 Propose a basic therapeutic plan that incorporates evidence-based guidelines, patient values, and social/structural determinants of health (PC5)

1.6 Concisely and accurately document a summary of the clinical encounter, including a synthesis of clinical reasoning (PC6)

1.7 Concisely and accurately present a summary of the clinical encounter, including a synthesis of clinical reasoning (PC7)

Medical Knowledge

2.1 Demonstrate the biomedical science knowledge relevant to the course (MK1)

2.2 Demonstrate the clinical science knowledge relevant to the course (MK2)

Interpersonal and Communication Skills

3.1 Communicate and interact effectively with patients, their families, and caregivers using strategies to build therapeutic alliances, including demonstrating active listening and addressing barriers to communication (e.g., language, health literacy, cultural, disability) (ICS1)

3.2 Communicate and interact effectively with team members to support a culture of mutual respect and collaboration, including active listening, seeking and integrating alternate perspectives, employing closed loop communication, and accurately interpreting verbal and non-verbal cues. (ICS2)

Professionalism

4.1 Demonstrate respect, responsibility, integrity, and ethical behavior in learning and patient care environments.

4.2 Recognize deteriorating patients who require urgent or emergent care, recommend initial evaluation and management, and seek help. (P1)

4.3 Performs tasks and responsibilities in a timely manner with attention to quality and detail (P1)

Practice-Based Learning and Improvement

5.1 Independently seek and integrate formal and informal feedback to develop goals for learning and self-improvement to address gaps in knowledge, skills, and/or attitudes. (PBLI1)

5.2 Identify key clinical questions, locate and appraise information resources, and assess applicability to individual patients. (PBLI2)

Systems-Based Practice

6.1 Participate effectively in coordinating patient care for patients in the inpatient setting, including delivering and receiving effective handoff communication from one healthcare team to another. (SBP1)

CLINICAL COURSE FORMAT & SCHEDULE

Timeline

The Core Sub-Internship in Emergency Medicine is 28 days in duration.

Didactics/Clinical Experiences:

1. **Orientation/Simulation – Attendance Required** – Students will participate in orientation and an in-person simulation lab experience on the first day of the rotation. See email from course coordinator.
2. **Expert Educator Shift** - Students will be observed in history, physical exam, and clinical reasoning on the first Tuesday and/or Thursday of the rotation. See email from course coordinator for details.
3. **Conferences – Attendance Required** - Students will attend residency conferences as scheduled on every Wednesday from approximately 8-1 pm. See email from course coordinator outlining weekly schedule and location.
4. **Ultrasound Imaging – Hands on Session** – Students will participate in an in-person hands-on ultrasound session as scheduled on the second Tuesday of the rotation. See Canvas for details.

Schedule

The complete calendar and list of objectives for each event/activity can be found on the course's Canvas site. Canvas can be accessed at: <https://utah.instructure.com/>

Attendance Expectations

For any reason, a student cannot pass if they are absent greater than 1 day in excess of the expected clinical and educational work free days for the course. Students are responsible for notifying the course director, coordinator and relevant clinical team members with any absence; making up a missed day may be required if absence is in excess of maximum allowed.

Students should expect to fully participate in course activities (i.e., arrive on time and leave at end of shift once patient handoff complete) consistent with Educational Work expectations in SOM Student Handbook. Poor student judgment in choosing to be absent (including arriving late or leaving early) from the required clinical experiences would be expected to be reflected in the preceptor evaluations and MSPE paragraphs. (See MD Program Policies, Procedures, and Resources for additional information and examples, <https://utah.instructure.com/courses/1037043>).

Specific to Emergency Medicine Sub-Internship

- Students should expect to fully participate in course activities as described in the course syllabus and consistent with Clinical and Educational Work expectations. This includes completing the entirety of each scheduled shift (i.e. arriving on time and leaving at the end of the shift after all patient-care duties are completed).
- Students must attend and complete 14 entire shifts during this four-week period. Shifts will be scheduled in the morning, evening and/or overnight and include weekends and holidays. Students may not change the dates or times of their scheduled shifts or leave shifts early without permission from course coordinator.
- If a student needs to be excused from a shift or part of a shift, the student will need to make up that shift in its entirety so that they meet the requirement of completing 14 shifts in their entirety. Students remain responsible for required assignments, content mastery, and completion of required clinical experiences, including make-up of any missed clinical shifts.

Educational and Instructional Modalities

Modality	Percentage
Clinical	95%
Didactic	5%

Role of the Student in this Clinical Course

Sub-Internship students are expected to function at the level of an early resident intern with respect to core responsibilities, patient load, and work hours. For assigned patients, students should conduct and document the initial history and physical examination, retrieve clinical information from the electronic medical record and other sources, present the patient to the supervising resident and preceptor, finalize the admission plans with the supervising resident or preceptor and patient, and discuss admission orders/diagnostic testing/therapy with the resident/preceptor.

Core Chief Complaints, Core Diagnoses & Clinical Encounter Criteria

During the Core Sub-Internship in Emergency Medicine, students are expected to experience and participate in a variety of clinical encounters with patients. The following table outlines the types of patient encounters expected for each student during the rotation. Students are required to log all of their encounters in the Case Log Application available via Tools. Each student remains responsible for completion of the patient log; any student with concerns that he/she is in jeopardy of not fulfilling the requisite number of encounters or specified level of responsibility for a particular core chief complaint, core diagnosis, or setting should notify the Course Director one week prior to the end of the clerkship to ensure that these experiences can be arranged. Students are expected to seek out and document these foundational diagnoses during their clinical experiences. Where noted, alternatives to authentic clinical encounters may be allowed.

Students are required to see at least one of the clinical encounters listed in the table below with the total number of encounters equaling 40 over the course of the rotation. Clearly, there can be overlap of these chief complaints (ie altered mental status due to sepsis/head trauma/psychiatric reasons/toxicology) and such cases can meet criteria for more than one encounter. Students should seek out and experience as broad an array of medical complaints as possible to ensure a representative experience in Emergency Medicine.

Core Chief Complaint, Diagnosis, Visit Type, Procedure	Allowed Clinical Settings	Level of Student Responsibility*	Number Required	Alt**
Minimum Number of Patients	Inpatient	DPC	40	
Chest Pain	Inpatient	DPC	1	
Dyspnea /Respiratory Distress (Shortness of Breath)	Inpatient	DPC	1	
OB/GYN Complaint	Inpatient	DPC	1	
Psychiatric Complaint	Inpatient	DPC	1	
Trauma (including MSK Injuries)	Inpatient	DPC	1	
Abdominal Pain	Inpatient	DPC	1	
Neurologic Complaint (includes CVA, headache, focal neurologic complaints)	Inpatient	DPC	1	
Back Pain	Inpatient	DPC	1	
Sepsis	Inpatient	DPC	1	

Altered Mental Status	Inpatient	DPC	1	
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*Levels of Student Responsibility: Provide Direct Patient Care (DPC), Participate as a Team Member for Patient Care (TMPC), Observe Patient Care (OPC)

**Alternative Experiences: Where indicated with a ✓ online cases, textbook reading, and or didactic experiences are allowed as alternatives to clinical experiences.

Required Textbook(s)/Readings

None

Additional Resources

- saem.org
- aliem.com
- embasic.org

GRADING SYSTEM

Each score from the assessment table is converted to a score between 0-4, where 2.0 represents the minimum passing score and 4.0 is the maximum score. The final overall numerical course score is the weighted average of each score from the table. Final overall course scores are rounded to one decimal point using standard rounding (e.g. 3.49 = 3.5).

Pass

Students earn a grade of Pass by achieving EACH of the following criteria:

- Completing each MUST COMPLETE assessment, assignment, and expectation
- Passing each MUST PASS¹ assessment, assignment and expectation

Tiered grading:

- **Honors:** final numerical score of 3.5 or greater and meets criteria for Pass
- **High Pass:** final numerical course score of 3.0, and meets criteria for Pass
- **Pass:** final numerical course score of 2.0 or greater, and meets criteria for Pass

Fail²

- A student who does not successfully complete all MUST COMPLETE assessments, assignments, and expectations by the Friday following the last day of the course at 5 pm MDT will receive a course grade of Fail
- A student who does not achieve a passing score on each MUST PASS assessment, assignment, and expectation will receive a course grade of Fail.
 - For MUST PASS assessments that allow repeat attempts, failure to achieve a passing score on each outstanding MUST PASS assessment within three 4-week blocks of the final day of the rotation will result in a course grade of Fail.

¹For additional details about MUST PASS assessments, assignments, and expectations, see:

- The syllabus Assessment Table for additional details about MUST PASS assessments within the course.
- MD Program Policies, Procedures, and Resources for the standard practice on automatic actions resulting from not achieving passing scores on the first attempt for MUST PASS MAJOR ASSESSMENTS with allowed repeat attempts.

²A student who receives a course grade of Fail will be referred to the Promotions Committee for further action. All course failures will be noted in the Medical Student Performance Evaluation (MSPE).

Preceptor Evaluations

All Phase 4 Courses employ a common preceptor evaluation form that instructs evaluators to select performance-based behaviors along multiple dimensions that best represent the student's highest sustained performance during the preceptor's period of observation. The preceptor evaluations are must pass elements of the course. The passing student must achieve an overall score of 2.0 for the preceptor evaluations. A student who does not achieve a passing score for the preceptor evaluation component will receive a grade of FAIL for the course.

Mid-Course Formative Feedback

All Phase 4 Courses employ a common mid-course formative feedback form that includes both a student self-assessment and faculty/resident assessment of student section. This self-assessment and feedback is intended to be formative in nature and will not be used in the calculation of preceptor evaluation data for final grade determination. Students will be instructed on the process of self-assessment and formative feedback and will be responsible for timely completion and submission of

the data to the Course Director according to individual course specified process for selection of preceptors and occurrence frequency. Students with formative feedback suggesting need for remediation should contact the Course Director to develop a learning plan.

Ultrasound Scavenger Hunt, Modules and Quiz

During this rotation, students will participate in the ultrasound scavenger hunt where they will report findings on 5 or more ultrasound scans. A short quiz based on the material presented in the ultrasound learning module must also be completed. Visiting students will participate in an ultrasound catch-up session with Dr. Jenn Cotton or an Ultrasound Fellow on the second Tuesday of the rotation.

SAEM Online Exam

The SAEM Online Exam is a must pass element of the Core Sub-Internship in Emergency Medicine. Students who do not achieve a passing score of 60% on the first attempt of the SAEM Exam will be required to work with the course director to develop and complete an individualized learning plan; after completing the individualized learning plan, the student will be offered an additional attempt to earn a passing score on the assessment. Any student not achieving a passing score on the second attempt of the assessment will be assigned a grade of Fail for the assessment and a course grade of FAIL.

ASSESSMENT TABLE

This table summarizes the assessments, performance standards, and submission deadlines for assessments employed within the course. Canvas contains additional details about the assessments, submission format, performance standards, and timelines.

EDUCATION PROGRAM OBJECTIVES ASSESSED	COURSE OBJECTIVE ASSESSED	ASSESSMENT, ASSIGNMENT, OR EXPECTATION	DESCRIPTION	MUST COMPLETE, MUST PASS, OR FORMATIVE?	NARRATIVE FEEDBACK INCLUDED (YES/NO)?	PERFORMANCE STANDARD / PASSING SCORE	ENGAGEMENT CONTRIBUTION!	DUE DATE
PC 1-5	1.1-1.5	In-person simulation	See Canvas assignments for further details	Must Complete	No	Completion by the required due date	1 point	1 st Monday of Course by 11:59pm
PC 2-4	1.2, 1.3, 1.4	Ultrasound Modules,	See Canvas assignments	Must Complete	No	Completion by the	1 point each, 3 total	4 th Mon of Course

		Scavenger Hunt, Quiz	for further details			required due date		by 11:59pm
PC 1-4, 6-7, ICS 1-2, P1, PBLI 1	1.1, 1.2, 1.3, 1.4, 1.6, 1.7, 3.1, 3.2, 4.1, 5.1	Mid-Course Formative Feedback	See Canvas assignments for further details	Must Complete	Yes	Completion by the required due date	1 point	2 nd Friday of Course by 11:59pm
P1	4.3	Case Log	See Canvas assignments for further details	Must Complete	No	Completion by the required due date	1 point	4 th Friday of Course by 11:59pm
P1	4.3	Work Hours Log	See Canvas assignments for further details	Must Complete	No	Completion by the required due date	1 point	4 th Friday of Course by 11:59pm
PC 1-4, 6-7, ICS 1-2, P1, PBLI 1	1.1, 1.2, 1.3, 1.4, 1.6, 1.7, 3.1, 3.2, 4.1, 5.1	Expert Educator Shifts	See Canvas assignments for further details	Must Complete	No	Completion by the required due date. This item is weighted as 5% of the final grade.	1 point	1 st Thur of Course by 11:59pm
MK 1-2	2.1, 2.2	SAEM Online Exam	55-point multiple choice question exam based on CDEM readings.	Must Pass		The minimum passing score of 60%. This item is weighted as 10% of the final grade. A student who does not earn a passing	0 point	See Canvas

						score on the first attempt will be offered a single retake opportunity to earn a passing score.		
Major Assessments								
P1	4.2	Overall Course Engagement Score	The scores serves as a measure of engagement in the course and represents one dimension of professional behavior. Students receive points by submitting work on time and in the correct format	Must Pass	No	80% (7/8 engagement points) Must complete items must be submitted on time to receive engagement points for course. A student who does not earn a passing score on the first attempt will be allowed a single repeat attempt to earn a		

						passing score.		
PC 1-4, 6-7, ICS 1-2, P1, PBLI 1	1.1, 1.2, 1.3, 1.4, 1.6, 1.7, 3.1, 3.2, 4.1, 5.1	Preceptor Evaluations	Faculty complete a common preceptor evaluation that includes performance-based behaviors across multiple competencies that reflect students' highest sustained performance	Must Pass	Yes	<p>The minimum passing preceptor evaluation average score is 2.0. A student who does not achieve an overall preceptor evaluation average score of 2.0 will receive a course grade of FAIL with no repeat attempt allowed.</p> <p>This item is weighted as 85% of the final grade.</p>		
		Narrative Clinical Performance Comment Summary	The course director will provide narrative comments that describe student's performance, providing					

			specific examples to illustrate program objective achievement					
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¹Engagement points achieved by submitting the complete assignment/assessment in the correct format by required due date

MD PROGRAM POLICIES, PROCEDURES, AND RESOURCES

Updated policies and procedures related to attendance, assessment, promotion, advancement, and graduation, as well as resources available through the MD program can be viewed at:

<https://utah.instructure.com/courses/1037043>



