

Department Name and Number			
<p>Recommended SCNS Course Identification</p> <p>Prefix ___ ___ ___ Level ___ Course Number ___ ___ ___ Lab Code ___</p> <p>Full Course Title _____</p> <p>Transcript Title (please limit to 21 characters) _____</p>			
Effective Term and Year		Rotating Topic <input type="checkbox"/> yes <input type="checkbox"/> no	
Amount of Credit ___	Contact Hour: Base ___ or Headcount ___		S/U Only <input type="checkbox"/> yes <input type="checkbox"/> no
Repeatable Credit <input type="checkbox"/> yes <input type="checkbox"/> no If yes, ___ total repeatable credit allowed			
Variable Credit <input type="checkbox"/> yes <input type="checkbox"/> no If yes, ___ minimum and ___ maximum credits per semester			
Course Description (50 words or less)			
Prerequisites		Co-requisites	
Degree Type (mark all that apply) <input type="checkbox"/> Baccalaureate <input type="checkbox"/> Graduate <input type="checkbox"/> Professional <input type="checkbox"/> Other _____			
Category of Instruction <input type="checkbox"/> Introductory <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced			

Rationale and place in curriculum

Department Contact	Name	Phone	Email
College Contact	Name	Phone	Email

All UCC1 forms and each UCC2 form that proposes a change in the course description or credit hours must include this checklist in addition to a complete syllabus. Check the box if the attached syllabus includes the indicated information.

Syllabus MUST contain the following information:

- ☐ Instructor contact information (and TA if applicable)
- ☐ Course objectives and/or goals
- ☐ A topical outline (at least tentative) of subjects to be covered
- ☐ Required and recommended textbooks
- ☐ Methods by which students will be evaluated and their grades determined
- ☐ Policy related to class attendance
- ☐ Policy related to make-up exams or other work
- ☐ Statement related to accommodations for students with disabilities
- ☐ Information on current UF grading policies for assigning grade points

It is recommended that syllabi contain the following information:

1. Critical dates for exams and other work
2. Class demeanor expected by the professor (e.g., tardiness, cell phone usage)
3. UF's honesty policy
4. Contact information for university counseling and mental health services

The University's complete Syllabus Policy can be found at:

<http://www.aa.ufl.edu/policy/SyllabiPolicy.pdf>

Course Prerequisites for ICM3 Course

course#	course Title	Cred
BMS 6810	Introduction to Clinical Medicine 1	8
BMS 6003	Genetics and Health	4
BMS 6031	Foundations of Medicine	6
BCC 6173	Introduction to Clinical Practice (Preceptorship)	3
BMS 6031	Fundamentals of Microbiology	4
BMS 6812	Introduction to Clinical Medicine 2	8
BMS 6816	Intro to Cancer Biology Clinical Onc	2
BMS 6092	Health Outcomes and Policy 2	1
BMS 6833	The Cardiovascular and Respiratory Systems	5
BMS 6638C	The Kidney and Urinary Tract	4
BCC 6173	Introduction to Clinical Practice (Preceptorship)	3

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Syllabus for Introduction to Clinical Medicine 3

Course Director

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Course Objectives **and Goals**

ICM 3 is part of an 18 month continuum designed to prepare students for clinical rotations that begin in the spring of the second year of medical school. ICM 3 is offered in the summer/fall of the second year of medical school and prepares students for ICM 4. ICM 4 is offered in the spring of the second year, prior to beginning clinical rotations. By the end of the 18 month curriculum students will demonstrate basic competencies in professional behavior; communication with patients families and other health professionals; the physical examination; differential diagnosis; documentation and understanding of the social context of healthcare. Students will also be introduced to concepts in population health.

Learning **objectives ICM 3**

At the end of this course students will:

- 1. Objective:** Demonstrate knowledge and skills required for **advanced communication**.

Competency Categories: Patient Care, Medical Knowledge, and Interpersonal Communication, and Professionalism

Learning activity: Interview patients in complex situations, including the triadic interview. Interview and counsel standardized patients who are victims of domestic violence. Interview a “difficult” patient who is argumentative or overly talkative.

Evaluation: Peers, small group leaders, and patients will provide feedback on medical knowledge, technique of interview, clinical decision-making content and process, and interpersonal communication.

- 2. Objective:** Demonstrate the **clinical reasoning** process in the diagnosis of the chief complaint and support the diagnosis with pertinent data obtained from historical, physical and other patient data.

Competency Categories: Patient Care, Medical Knowledge, and Interpersonal Communication

Learning activities: During three inpatient encounters and the Harrell Center focused encounters, the student will generate an appropriate differential diagnosis, collect data to test his/her preliminary diagnoses and write a plan indicating the relevant tests or procedures he/she would need to further define the diagnosis. This is the decision-

making aspect of the write-up. In small groups, presentations of specific disease states will be discussed in detail through the use of standardized patients with guided discussion by small group leaders. These small group discussions will further the students' skills in differential diagnosis generation and plan making.

Evaluation: Student is evaluated on process, accuracy and completeness of data collected, credible preliminary differential diagnosis, and justification of ordering tests and procedures and final diagnosis.

3. Objective: Take a **complete** history and perform a **complete** physical exam on assigned hospitalized, ED, or clinic patients and integrate the data into a concise and well-organized oral presentation. Write a history and physical including: chief complaint, history of present illness, past medical history, social history, family medical history, review of systems, physical exam findings, assessment and plan. Write a one to two page discussion paper using textbook and literature references for one of the three inpatient write-ups.

Competency Categories: Patient Care, Medical Knowledge, and Interpersonal Communication

Learning activity: Take a complete history and perform a complete physical examination on assigned hospitalized, clinic or ED patients and communicate findings orally to preceptor. A written history and physical will be turned in to the preceptor for feedback including a one to two page discussion for one write up.

Evaluation: Oral presentations and written history and physicals evaluated by preceptor using criteria in syllabus.

4. Objective: Take a **focused** history and perform a **focused** physical examination on assigned standardized patients who present with specific complaints.

Competency Categories: Patient Care, Medical Knowledge, and Interpersonal Communication

Learning activity: Take a **focused** history and perform a **focused** physical examination on standardized patients in the Harrell Center. Different tools/skills must be perfected in taking a focused history and deciding which elements of the physical exam would contribute to providing helpful information in ruling in or ruling out a certain diagnosis as compared to performing a complete history and physical.

Evaluation: The student will be videorecorded during this session. Additional feedback

will be provided during Week 11 video review session.

5. Objective: Demonstrate **professional behavior** toward patients, peers, staff and faculty. Display respect, honesty and compassion toward patients, peers, staff and faculty. Show appropriate work ethic by attending all learning activities, arriving on time, and actively participating in small group sessions.

Competency Category: Professionalism

Learning Activity: Patient (real and standardized) encounters. Small group interactions with faculty and peers. Didactic sessions. (All the above described activities).

Evaluation: Preceptor, peer and patient feedback provided on students' professional behavior.

6. Objective: Recognize normal anatomic structures in human neurologic, GI, musculoskeletal, dermatologic and reproductive/endocrine anatomy, both in gross form and as they appear in routine diagnostic imaging studies.

Competency Category: Medical Knowledge, Patient Care

Learning Activity: Gross Anatomy laboratory sessions, Anatomy lecture sessions, Radiology lecture sessions.

Evaluation: Weekly quizzes for the first seven weeks of ICM 3 and comprehensive written examinations at the end of each block of education (neurology, GI, musculoskeletal, dermatology, and reproductive/endocrine).

7. Objective: Understand topics in human behavior, in areas including neuropsychiatry, geropsychiatry, intoxication and addiction states and treatments, somatic manifestations of psychiatric illness, and human sexuality.

Competency Category: Medical Knowledge, Patient Care

Learning Activity: Human Behavior lecture sessions, small group sessions.

Evaluation: Weekly quizzes and comprehensive written examinations at the end of each block of education as above.

Required Texts

1. **Essential Clinical Anatomy**, Moore, K.L. & Agur, A., & Dalley, A. F., 4th Edition, Lippincott Williams & Wilkins 2011.
2. **Bates' Guide to Physical Examination and History Taking**, Lynn S. Bickley, Peter G. Szilagyi, Barbara Bates. Wolters Kluwer Health/Lippincott Williams & Wilkins 2008. Hardback - 964 pages - ISBN 078178
3. **Introductory Textbook of Psychiatry, 5th edition**, D. Black and Nancy Andreasen. American Psychiatric Press 2011.
4. **The Rational Clinical Examination: Evidence-Based Clinical Diagnosis**, David Simel and Drummond Rennie. JAMA & Archives Journals 2008. ISBN – 10:0071590307.

Evaluation of Students

Overview of methods by which students will be evaluated and their grades determined

This course will be graded as satisfactory/unsatisfactory. Students who do not pass the course will be required to either repeat the course or participate in a remediation to continue their course of study at the discretion of the course director. Students will have to pass **the medical knowledge** portion of the course (through quizzes and assessments). Students will have to pass the **clinical skills** portion of the courses as assessed through performance in small groups and within the Harrell Center. There will be a Clinical Skills Exam in the fall, which students will be required to pass prior to continuing in the course. And, students will also have to pass the **professionalism** portion of the course, which is to be assessed in small groups and anatomy teams. Information on current UF grading policies for assigning grade points is available at <http://www.registrar.ufl.edu/staff/grades.html>.

Weekly Quizzes

Weekly formative feedback on medical knowledge will be provided through online independent quizzes to be completed between Friday afternoon and Monday morning each week, for the first seven weeks of ICM. Quizzes will be on line opening Friday at 5 pm and closing Sunday at 11:59 pm. There will be about 20 questions covering the material from the previous week. Students will not be allowed to retake the quizzes but will be able to review which questions they got wrong and what the correct answers are. Students will be expected to work independently. The weekly quiz score will count for 20% of the grade. Students will be required to obtain an average of 75% on the weekly quizzes.

Assessments

There will be a comprehensive written examination at the end of each block of medical knowledge education. For some blocks, there will also be written examinations during the block to test medical knowledge gained up to that point. These will be in the computer testing center and students will work alone.

Students must average 75% overall and have greater than 70% on the Final Exam to demonstrate mastery of course content. Quizzes and Assessments will be cumulative.

Students who achieve a score under 75% on an exam will be required to meet with the course director and with Dr. Beverly Vidauretta for assessment of study skills.

Clinical Skills Exam

There will be a final practical clinical skills exam that students must pass by achieving a score of at least 70%. The Clinical Skills Exam will be done during the fall semester in the Harrell Center, to further assess students' clinical skills and application of medical knowledge to standardized patient scenarios. There will be ten stations and students will be required to pass this examination, with individualized remediation required from those students who do not pass.

Students will receive ongoing feedback from small group faculty during small group activities and from anatomy faculty during lab. Formal formative feedback on professionalism and communication skills will be provided to students by small group faculty midway through the course, and by anatomy faculty at the end of the semester.

ICM 3 Fall 2013 Assignments

1. Reflection upon Summer Experiences, due in first small group

2. Patient encounter write-ups

a. 3 comprehensive write ups based on patient encounters with faculty

Faculty will bring two students at a time to see one or two patients in the ED or hospital floors. Preferably the students will each interview a single patient, but if this is not possible secondary to patient availability, students can work in teams. Use the first 45 minutes to gather the patient's history. Use the next 30 minutes for the physical exam. The second student will do a full physical exam. At the completion of the history and physical, the students will present a full oral presentation to the supervising faculty member. Faculty will guide the students on what to consider in the differential diagnosis and plan when they do the write up, although to a lesser extent than in ICM 2. One of the main focuses of this exercise should be for students to generate an independent differential diagnosis for the patient's presentation. Students will be able to interview and examine the patients independently for two of the three encounters, but should be supervised for the history and examination for at least one of the encounters.

On the weeks that they are not seeing patients with faculty (only 4 will go at a time) students will have independent study time during the scheduled small group time.

Write ups should follow the form in the "Student Write-up Checklist for Elements of a Complete Medical History" located on the course website under checklists. Students will send word documents of their write ups by email to faculty within the following few days (faculty will give exact deadlines). Faculty will review the write ups and give students comments on the document (with track changes or other notes). Faculty will email the documents back to the students who will be responsible for uploading the write up with comments on to the assignment portion of the course web page.

For each write up students should read a chapter in an appropriate reference textbook on an aspect of the patient's history or physical exam. Students will write a paragraph at the end of each write up. Students will be expected to use outside resources to learn more about the patient's disease and formulate a simple assessment and suggestions for a plan. Appropriate resources include:

❑ The Rational Clinical Examination textbook

❑ Uptodate: <http://www.uptodate.com/home>

❑ American Family Physician

<http://www.aafp.org/online/en/home/publications/journals/afp.html>

❑ ACP in the clinic: <http://annals.org/intheclinic.aspx>

❑ Pubmed: <http://www.ncbi.nlm.nih.gov/pubmed>

❑ Peds or Internal Medicine Textbooks in MD Consult:

<http://www.mdconsult.com/php/390165311-4/home.html>

3. 1 Focused write up of patient encounters during community service

These will be based on patients students see outside of the hospital while volunteering in the community. These should include the elements noted in the “Student Write-up Checklist for Elements of a Focused Medical History” on the course website.

As with the encounters with faculty, students will email word documents of the write ups to their small group leader for feedback. Students will be responsible for submitting the write up with comments on to study core.

As with the patients they see with faculty, students will be expected to use outside resources to learn more about the patient’s disease and formulate a simple assessment and suggestions for a plan.

In addition, students should make note at the end of the write up of any social issues that may have contributed to the patient’s chief complaint or severity of disease. These issues might include: lack of health insurance, lack of medications, mental illness, homelessness, lack of transportation.

These should be sent to faculty within a week of the patient encounter.

4. Videorecording Reviews

- a. Students will be videorecording doing three interviews in the Harrell Center this semester: the triadic interview, victims of domestic violence, and dealing with “difficult” patients.
- b. After each interview students should watch their video and complete a videorecording review checklist. This should be sent to faculty on midnight the Sunday prior to the next small group. See the attached professionalism evaluation form (also available on the course website).

Service Learning

Students will be required to participate in 6 hours of clinical community service. This can be at a clinic serving an underserved population, a health fair or a health education session. Be sure that your hours are sent to Deena Weiss who tracks hours for the ICM course as well as the Community Service

Elective. Students will be required to provide a brief write-up of one of their community service activities to their Small Group facilitator for evaluation and feedback, as above.

Policy related to class attendance

Students must attend all anatomy labs, small group sessions, physical exam and interview practice sessions and patient presentations. Attendance at lecture is at the student’s discretion as lectures will be available on line. Students must attend at least 90% of required learning activities to pass the course.

Policy related to make-up exams or other work

Make up exams and activities will be arranged in cause of emergency at the discretion of the course director. Emergencies include: illness requiring medical care, vehicle breakdown, death of close family members.

Statement related to accommodations for students with disabilities

Accommodations will be provided for students with disabilities in accordance with the policy of the University of Florida Office Dean of Students Office.

END OF SEMESTER FEEDBACK FOR ICM 3

Student _____

Select the rating which best describes this student's typical performance of indicated competencies.

1. Professionalism:

<input type="checkbox"/> Needs Remediation	<input type="checkbox"/> Pass	<input type="checkbox"/> Exemplary
<ul style="list-style-type: none"> • Tendency to put self-interest above that of patients and peers. • Has some difficulty recognizing limitations • Tendency towards arrogance. • Has difficulty accepting constructive feedback. • Disrespectful to any member of small group, Harrell Center Staff and/or patients. • Does not consistently strive for excellence; cuts corners. • Missed small group, lectures, and Harrell Center sessions or is frequently late. • Disengaged from group activities due to texting or using laptop. • Fails to dress professionally. • Rarely prepares. • Does not review videos prior to small group. • Does not turn in assignments. • Strictly reports rather than reflecting on personal experiences in assignments. 	<ul style="list-style-type: none"> • Able to self-asses. • Actively seeks feedback. • Makes an active effort to treat faculty, peers and patients with respect and courtesy. • Participates in small group. • Strives for excellence. • Attended small group, lectures, and Harrell Center sessions except when excused. • Dresses professionally for videos. • Always brings prepared for small group, including doc.com questions. • Always reviews videos prior to small group. • All assignments turned in on time. • Demonstrates ability to reflect meaningfully on his or her experiences. 	<ul style="list-style-type: none"> • Insightful in identifying strengths and weaknesses and actively seeks feedback. • Professional demeanor (respect, courtesy, honesty, integrity) is a role model for fellow small group members. • Has high standards and strives for excellence. • Leads small group discussion and includes all other group members. • Always on time for small group, lectures, and Harrell Center sessions. • Gives helpful feedback to other students. • Takes advantage of opportunities for extra learning. • In reflections, verbalizes how he or she might have handled a situation differently. Identifies his or her role and emotions and the limitations those emotions added to the situation.

Professionalism




Comments: _____

2. Patient Care: History, Physical Examination, Information Management-recording and presenting data gathered from history and physical exam

 Needs Remediation	 Pass	 Exemplary
<ul style="list-style-type: none"> • Often unable to obtain all the elements of LOCATES • Has trouble organizing the history. • Social history, family history, past medical history and review of systems are missing key elements. • Does not consistently demonstrate proper technique when performing the physical examination. • Ignores patient's physical comfort and modesty during physical exam • Presentations are disorganized and missing critical information • Write ups are disorganized or incomplete and missing critical information. 	<ul style="list-style-type: none"> • Obtains LOCATES for a moderately advanced complaint. • Able to identify pertinent positives and negatives in the HPI. • Digs beyond simple questioning to explore details of patient history • Asks all relevant social history, family history and past medical history. • Uses proper technique in the physical examination of major body systems. • Shows awareness of patients' physical comfort and modesty during history and physical examination. • Write ups of elements of the history and physical, as assigned, are organized and complete • Generate a more advanced differential diagnosis from a patient complaint. • Document a simple diagnostic plan with guidance. • Gives a comprehensive oral presentation. 	<ul style="list-style-type: none"> • Consistently identifies pertinent positives and negatives in the HPI. • Digs beyond simple questioning to explore details of patient history. • Consistently performs physical exam using proper technique as needed without prompting. • Write ups are complete, well written and organized; advanced for this level of training, student clearly did additional reading • Independently documents a simple diagnostic plan. • Gives a high quality comprehensive patient presentation.

Patient Care Comments: _____

3. Interpersonal and Communication Skills:

 Needs Remediation	 Pass	 Exemplary
<ul style="list-style-type: none"> • Has trouble establishing trust and rapport with patients. • Has trouble conveying empathy. • Unaware of relevant cultural or psychosocial patient issues. • Unaware of patients' and his/her own non-verbal communication. • Hinders small group discussions. 	<ul style="list-style-type: none"> • Consistently establishes good rapport with clinical and standardized patients. • Effectively able to demonstrate empathy. • Engenders confidence. • Facilitates communication among small group members to optimize sessions. • Appropriately addresses some of the patients' cultural and psychosocial issues to try to gain a better understanding of how these factors affect patients' health. • Aware of and appropriately responds to patients' non-verbal communication. 	<ul style="list-style-type: none"> • Highly effective in establishing good rapport even with difficult patients. • Goes above and beyond to demonstrate empathy, engender confidence, and make sure patients' concerns are addressed. • Communication among small group members is enhanced by this student's involvement. • Consistently attuned to patients' cultural and/or psychosocial needs. • Unusual ability to interpret patients' needs based on verbal and non-verbal communication.

Interpersonal and Communication Skills

Comments: _____

Please provide an evaluation of the student's overall strengths and deficits/concerns. Specific examples would be helpful. Please indicate at least one thing the student should to work on next semester. **(REQUIRED)**

COLLEGE OF MEDICINE GENERAL POLICIES

Attendance:

<http://osa.med.ufl.edu/policies/attendance-and-absences/>

Attendance at lectures is strongly encouraged. Attendance is required for patient presentations, small group sessions, team based learning sessions and laboratory sessions. For most required activities attendance is tracked via the online sign in system via studycore. Planned absences must be approved by the course director. An unexcused absence from any required activity may impact the student's professionalism assessment in the course.

Videorecording:

The University of Florida College of Medicine will provide video recordings of lectures and other portions of the curriculum to its students. The goal of this initiative is to improve our learner centered curriculum allowing flexibility to balance personal and academic priorities and provide another tool to accommodate differing learning styles. The video recordings are intended for exclusive use by students enrolled in the College of Medicine. Other individuals who wish to view the recordings must receive permission from the responsible faculty member.

In accordance with the University of Florida Intellectual Property Policy, faculty members of the University of Florida maintain copyright ownership of their lectures. UF COM will maintain ownership of these recordings and will use recordings in accordance with this policy.

The UF COM policy for digital audio or video recording of lectures is as follows:

- 1 Whole class presentations (e.g. lectures) and other portions of the curriculum will be recorded. Such recordings will be maintained on the UF COM course management system (STUDYCORE). Due to the nature of patient confidentiality or the nature of the topic, there will be times when recording is not allowed. These are intended for exclusive use by the students enrolled in the course at the time, course faculty, and staff charged with delivering and administering the course.
2. Lecturers will be contacted with information about the recording policy. Faculty who give multiple lectures in a course may specify different terms for different sessions. Faculty who do not wish to be audio or videorecorded must notify the course director and Associate Dean for Medical Education with rationale for not recording at least 48 hours prior to the lecture(s). Absent the lecturer's express revocation of permission, in writing, lectures/presentations will be recorded. Reasons for non- recording include but are not limited to patient encounters and guest lecturers.
3. Recorded lectures will be posted on the UF COM secure website through Studycore. Lectures can be edited up to one week after recording.

4. All users of the recordings (students, faculty, staff and course directors) must agree to the terms and conditions of this policy prior to web site access. The lecture and any information contained in the recorded lecture are protected under copyright laws and may not be copied, displayed, broadcast or published without the consent of the lecturer and without giving proper attribution to the lecturer. UF COM will take reasonable measures to prevent the inappropriate use of such recordings by individuals with access to the web site on which the recorded lectures are posted, but cannot guarantee against possible misuse.

5. This prohibition includes placing the recording on any web page or the Internet for use by, or access to, any person, including the student. In addition to any legal ramifications, misuse of recordings will be considered as unprofessional behavior and appropriate disciplinary action will be taken according to UF COM policy and procedures.

6. The recorded lectures will be maintained on the university servers for up to two years, with materials accessible exclusively to the students enrolled in the course at the time of the recording along with the faculty, staff and course directors charged with delivering the lectures and administering the course at the time of recording.

7. No recorded lecture material, university maintained or otherwise, may be shared with any individual or organization within or outside the UF COM without prior written permission from the lecturer. Recordings are for educational use only and are to be considered confidential.

8. Materials used in lectures may be subject to copyright protection.

Evaluations:

<http://medinfo.ufl.edu:8050/year1/secure/ufcom-policy-student-evaluations.pdf>

Every required course is to be evaluated by students. Each student must complete at least 75% of all assigned faculty resident and small group leader evaluation forms. There is an expectation of 100% completion on overall course evaluations. Failure to complete evaluations within the established timeframe will be noted as a professional concern in a student's professionalism competency evaluation.

Professional Behavior:

Please see: <http://osa.med.ufl.edu/policies/professional-behavior/>

Accommodations

Students requesting classroom accommodation must first register with the Office of Student Affairs. The Office of Student Affairs will provide documentation to the student who must then provide this documentation to the Course Director when requesting accommodation.

Testing Center Policies & Procedures:

<http://docs.medinfo.ufl.edu/policies/testing-center-policy-and-procedures/>

Code of Ethics UF COM

We, the University of Florida College of Medicine, pledge to:

- ☐ Exemplify professionalism, honesty and integrity, recognizing that we represent ourselves, the University of Florida College of Medicine, and the broader medical community
- ☐ Treat each patient with unbiased compassion and respect
- ☐ Be accountable for our actions, humble in our shortcomings and willing to learn from our mistakes
- ☐ Advance the frontiers of medicine through life-long education, collaboration and research
- ☐ Act as a cohesive healthcare team, while valuing individual contributions and perspectives
- ☐ Embrace diversity and treat everyone with equal warmth, empathy and understanding
- ☐ Accept our societal responsibility to guide healthcare and advocate for patients on local, national and global scales
- ☐ Maintain and emotional, physical, and spiritual balance, in order to fulfill our duties both personally and professionally
- ☐ Remember our passion for medicine and allow it to guide us through our endeavors

University of Florida Honesty Policy regarding cheating and use of copyrighted materials:

The Student Honor Code, from the Student Guide produced by the University of Florida, Division of

Student Affairs, says the following:

(<http://www.dso.ufl.edu/studentguide/studentrights.php#studenthonorcode>) The following

has been reproduced from the University of Florida Regulations

<http://regulations.ufl.edu/chapter4/>

– Chapter 6C1-4 (Student Affairs) UF-4.041 Student Honor

Code. <http://regulations.ufl.edu/chapter4/4041-2010.pdf>