

MEDICAL STUDENT POLICY

<p>Policy Title: Elective Requirements Policy for Clinical Phases</p>	<p>Curricular Structure: ASCEND</p>
<p>Approved By: Executive Oversight Committee (EOC)</p>	<p>Last Approved: 5/17/24</p>

RELEVANT LCME ELEMENT(S):

9.9 Student Advancement and Appeal Process

POLICY STATEMENT:

This policy ensures that all medical students gain diverse and substantial elective experiences that are integral to their professional development and readiness for residency. Students are encouraged to pursue electives that align with their interests and career aspirations, within these requirements.

It establishes the elective requirements for medical students during the Clerkship Phase (Phase 2) and Integration and Transitions Phase (Phase 3). It defines the duration, type, and allocation of elective experiences necessary for graduation.

POLICY REQUIREMENTS:

Students must complete 20 weeks of elective rotations during Phase 2 and Phase 3 combined:

- A. Clinical Electives (14 Weeks minimum) of which at least 4 weeks must be dedicated to a medicine subspecialty or critical care elective.
- B. Remainder of elective time can be fulfilled through
 - Additional clinical electives
 - Scholarly pursuit beyond the 4 week AOC requirements
 - Non-clinical MD rotations/courses
 - Service/longitudinal electives (up to a maximum of 4 weeks)
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MD/PhD legacy curriculum students re-joining during Ascend curriculum

Students must complete 16 weeks of elective rotations during Phase 2 and Phase 3 combined:

- A. Clinical Electives (12 Weeks minimum) of which at least 4 weeks must be dedicated to a medicine subspecialty or critical care elective.
- B. Remainder of elective time can be fulfilled through
 - Additional clinical electives

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- Scholarly pursuit beyond the AOC requirements
- Non-clinical MD rotations/courses
- Service/longitudinal electives (up to a maximum of 4 weeks)

For Primary Care Scholars Program students who have completed the InterACT clerkship in the legacy curriculum and re-joining during ASCEND curriculum.

Students must complete 14 weeks of elective rotations during Phase 2 and Phase 3, of which 8 weeks must be clinical.

- A. Clinical Electives (8 Weeks minimum)
- B. Remainder of elective time can be fulfilled through
 - Additional clinical electives
 - Scholarly pursuit beyond the AOC requirements
 - Non-clinical MD rotations/courses
 - Service/longitudinal electives (up to a maximum of 4 weeks)

PROCEDURES:

- A. Elective Planning and Approval:
 - Students must submit an elective plan to the Office of Curricular Affairs for approval 2 weeks before the elective period begins.
 - The elective plan must specify the chosen electives, including the duration and objectives of each.
- B. Documentation and Monitoring:
 - The Office of Curricular Affairs will document the approval of elective plans and monitor the completion of elective requirements.
 - Students must provide evidence of completion for each elective, which includes a supervising faculty member's evaluation and any other required documentation.
- C. Assessment of Electives:
 - Each elective will have its own set of competencies and assessment criteria, which will be communicated to the student before the elective starts.
 - Successful completion of an elective is contingent upon meeting these criteria.
- D. Non-Clinical and Service Elective Restrictions:
 - For non-clinical MD rotations/courses and service/longitudinal electives, students must demonstrate how these electives will contribute to their medical education and career goals.
 - A maximum of 4 weeks can be allocated to service/longitudinal electives.
- E. Submission Deadlines:
 - All elective plans must be submitted for approval at least 2 weeks prior to the start date of the elective period.



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- Documentation of completion for each elective must be submitted no later than 6 weeks after the elective rotation ends.

RELATED POLICIES:

Graduation Requirements Policy
Curriculum Completion Requirements Policy
USMLE Step 1 and Step 2 Completion Policy
Mentored Scholarly Project Policy

REVISION HISTORY: