2000

College of Osteopathic Medicine Second Year Student Course Syllabus Fall 2000-Winter 2001

Nova Southeastern University

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Interdisciplinary Generalist Curriculum (IGC)
Preceptorship III and IV
Second-Year Student Course Syllabus
For IDC 6513 (Fall 2000) and IDC 6722 (Winter 2001)

Published by the Interdisciplinary Generalist Curriculum Program Office
July 2000
**IGC COURSE SYLLABUS**

**COURSES:**
INTERDISCIPLINARY GENERALIST CURRICULUM (IGC)
PRECEPTORSHIP III & IV

**COURSE #s:**
IDC 6513 (Fall 2000) and IDC 6722 (Winter 2001)

**CREDIT HOURS:**
3 credits per semester

**YEAR/SEMESTER:**
M-2 FALL 2000 and WINTER 2001

**MEETING DATES:** (*Fall 2000 Semester*)

<table>
<thead>
<tr>
<th>DATE</th>
<th>DAY</th>
<th>TIME</th>
<th>PLACE</th>
<th>MEETING TYPE</th>
</tr>
</thead>
<tbody>
<tr>
<td>7/28/00</td>
<td>Friday</td>
<td>10:10 A.M. - 12:30</td>
<td>Hull Aud.</td>
<td>IGC Orientation &amp; Intro. to Managed Care</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1:30 - 3:00 P.M.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11/8/00</td>
<td>Wedn.</td>
<td>2:10 - 4:00 P.M.</td>
<td>Hull Aud.</td>
<td>Managed Care Panel</td>
</tr>
<tr>
<td>11/27/00</td>
<td>Monday</td>
<td>10:10 - 11:00 A.M.</td>
<td>Hull Aud.</td>
<td>IGC Wrap-Up Session</td>
</tr>
</tbody>
</table>

Note: See IGC course schedule, individualized student schedules, assigned COM²Serve schedules & assigned managed care schedules/directions for all field-based IGC sessions.

**TOTAL HOURS:**
67 HOURS (*Fall 2000 Semester*)
Includes 7 hours in Hull Auditorium + 60 hours in field assignments at Physician Mentor's offices, COM²Serve sites, or managed care organizations.

**COURSE DIRECTOR:**
DEBRA COHN STEINKOHL, M.H.S.A.
Administrative Director, IGC Program
Course Director, IGC Preceptorship III & IV
Assistant Professor, Dept. of Family Medicine

**CONTACT INFO:**
ROOM 1441 OR 1411 (4TH floor HPD Admin. Bldg.)
PHONE: (954) 262-1441 or 1411
FAX: (954) 262-4773 (back-up fax: 262-1798)
E-MAIL: steinkol@nova.edu
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**OFFICE HOURS:**
9:00 A.M. - 1:00 P.M. & 2:00 P.M. - 6:00 P.M.
Monday - Friday (or by appointment)

* Winter 2001 Semester meeting dates and hours are included in a separate addendum distributed at the beginning of the Winter Semester.
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**I. FACULTY ROSTER***

<table>
<thead>
<tr>
<th>IGC Administrative Director:</th>
<th>Managed Care Instructors</th>
</tr>
</thead>
<tbody>
<tr>
<td>Debra Cohn Steinkohl, M.H.S.A.</td>
<td>Alfredo Ginory, M.D.</td>
</tr>
<tr>
<td>Assistant Professor,</td>
<td>Vice President of Medical Affairs</td>
</tr>
<tr>
<td>Department of Family Medicine,</td>
<td>Jose Perez, M.D.</td>
</tr>
<tr>
<td>Division of Community Medicine</td>
<td>Clinical Medical Director</td>
</tr>
<tr>
<td></td>
<td>Health System One</td>
</tr>
<tr>
<td>IGC Co-Project Directors:</td>
<td></td>
</tr>
<tr>
<td>Camille Bentley, D.O.</td>
<td>Ronald Platt, M.D.</td>
</tr>
<tr>
<td>Assistant Professor</td>
<td>Exec. Vice President for Medical Affairs</td>
</tr>
<tr>
<td>Department of Family Medicine</td>
<td>HIP Health Plan of Florida</td>
</tr>
<tr>
<td>Acting Chair, Dept. of Family Medicine</td>
<td></td>
</tr>
<tr>
<td>Cyril Blavo, D.O., M.P.H. &amp; T.M.</td>
<td>Melvin Fletcher, M.D.</td>
</tr>
<tr>
<td>Professor, Department of Pediatrics</td>
<td>Vice President of Medical Affairs</td>
</tr>
<tr>
<td>Acting Chair, Department of Pediatrics</td>
<td>Blue Cross Blue Shield of Florida/</td>
</tr>
<tr>
<td>A. Alvin Greber, D.O.</td>
<td>Health Options</td>
</tr>
<tr>
<td>Professor, Dept. of Internal Med.</td>
<td></td>
</tr>
<tr>
<td>Chair, Dept. of Internal Medicine</td>
<td></td>
</tr>
<tr>
<td>NSU Managed Care Liaison:</td>
<td></td>
</tr>
<tr>
<td>Robert Oller, D.O.</td>
<td>Maria Labarga, M.D.</td>
</tr>
<tr>
<td>Chief Executive Officer</td>
<td>Vice President and Chief Medical Officer</td>
</tr>
<tr>
<td>NSU Health Care Systems</td>
<td>Foundation Health</td>
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<td></td>
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<tr>
<td></td>
<td>Edward H. Cottler, M.D.</td>
</tr>
<tr>
<td></td>
<td>Medical Director</td>
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<tr>
<td></td>
<td>David Kudzma, M.D.</td>
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<tr>
<td></td>
<td>Medical Director</td>
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<td></td>
<td>United Healthcare of Florida</td>
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<tr>
<td></td>
<td>Neil Natkow, D.O.</td>
</tr>
<tr>
<td></td>
<td>President &amp; Chief Executive Officer</td>
</tr>
<tr>
<td></td>
<td>PhyTrust</td>
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</tbody>
</table>

* For a complete list of Physician Mentors by specialty and organization, please refer to the August 2000 listing of IGC Primary Care Physician Mentors and COM²Serve Partners.
II. COURSE DESCRIPTION

The Interdisciplinary Generalist Curriculum (IGC) Program is comprised of three components: (1) The IGC Physician Mentor Program; (2) The IGC Managed Care Program; and (3) the College of Osteopathic Medicine in Community Service (COM³Serve) Program. The premise of the IGC Program is that exposure to professional role models is a significant determinant of medical students' career choices. In addition, an early clinical experience is an essential learning component for medical students to begin to correlate classroom knowledge with actual patient encounters.

The IGC Preceptorship III and IV courses expose second-year medical students to clinical settings by matching each student with a community-based physician mentor for a primary care rotation. Students are also exposed to the central role of the primary care physician in managed health care and to the various components of managed care organizations (MCOs) by assigning each student to rotate at the headquarters of one or more MCO teaching partners. In addition, students rotate through community-based clinics and other service organizations that provide health care to medically underserved or at-risk populations.

Instructional Activities and Methods

IGC Physician Mentor Program: During each semester, students accompany an assigned Primary Care Physician Mentor for 11, 12 or 13 four-hour sessions in his/her practice. Each physician in the IGC network of over 135 Physician Mentors is affiliated/contracted with one or more managed care companies. Students observe both patient care and administrative aspects of managed care under the direction of the Physician Mentor. Depending on the comfort level of the preceptor, students also perform patient histories and physical examinations within the limits of their ability.

IGC Managed Care Program: Students rotate for 3 four-hour sessions per year at the headquarters (or affiliated provider sites) of an IGC partner managed care organization (MCO). During the academic year (i.e., two semesters), students complete 3 MCO sessions (i.e., students who have 3 sessions assigned during the Fall Semester will have 12 Physician Mentor sessions, and they will have no MCO sessions during the Winter Semester). Students learn how a managed care organization operates by rotating through various departments/experiences such as Medical Operations, Case/Disease Management, Physician Committee Meetings, Utilization Management, Quality Management, and Provider/Practice Management. The learning experience is individually structured for each MCO depending on their unique operational dynamics, departmental composition, and the organization's philosophy.

College of Osteopathic Medicine in Community Service (COM³Serve) Program: Students rotate for a minimum of 2 four-hour sessions per academic year at COM³Serve partner organizations in order to fulfill the community service component of their IGC Preceptorship Course. These COM³Serve sessions are typically scheduled during the opposite
semester from the MCO sessions. Through the COM²Serve Program, medical students are involved in service learning with community health centers and other subsidized community clinics, as well as with homeless shelters, public health departments, disaster relief organizations, public schools, alcohol and drug abuse programs, and other community-based organizations. The COM²Serve partner organizations provide health care and other needed services to medically underserved, minority, and at-risk populations.

In addition to field rotations with primary care physicians, community service organizations, and managed care organizations, the IGC Program incorporates other teaching methodologies such as lectures, small group discussions and interactive seminars/panel discussions. Before leaving campus, students are given an orientation on the logistics and requirements of the IGC Program, including a review of the learning objectives. To assess the students’ progress and experiences, debriefing sessions and a wrap-up session are also held with the students.

### III. COURSE GOALS

The overall goals of the IGC Preceptorship III and IV courses include the following:

- To develop students’ interests in primary care through exposure to positive physician mentors who practice general internal medicine, family medicine, or general pediatrics.

- To educate students about the practices and principles of various types of integrated health care delivery systems (i.e., managed care) so that students may understand the specific challenges and opportunities which face physicians in managed care environments.

- To enhance student education in the “pre-clinical” years of medical school by providing clinical experience as a basis for applying/correlating campus-based classroom and small group education.

The long-term goal of the four-semester IGC Program is to prepare NSU-COM graduates for delivering quality patient care while working within a managed care environment, and to increase the number of graduates entering the three primary care disciplines of family medicine, general internal medicine, and general pediatrics.
IV. COURSE OBJECTIVES

IGC PHYSICIAN MENTOR PROGRAM LEARNING OBJECTIVES
(Note: this includes the COM³Serve Component of the IGC Course)

Upon successful completion of the IGC Preceptorship III and IV courses, the student will be able to:

1. apply the basic/clinical science knowledge and demonstrate clinical skills necessary to recognize medical problems and institute treatment in a primary care setting (consistent with the student’s current level of medical education).

2. demonstrate the ability to establish good patient rapport and achieve an appropriate level of comfort in working with patients and physicians, and the other members of the health care team.

3. provide case examples to describe how the Physician Mentor integrates information from the patient interview and physical examination into an assessment and treatment plan.

4. describe how the Physician Mentor incorporates ethical, socio-economic, and ethnocultural factors in medical decision-making.

5. describe how the Physician Mentor utilizes community resources for his or her patients.

6. summarize the specific ways in which the Physician Mentor conducts the business aspects of his/her practice and interfaces with managed care plans.

7. compare and contrast approaches to the care of diverse patient populations.

8. demonstrate self-directed learning by utilizing information resources relevant to patient care.

9. demonstrate an increased awareness of organizations and community efforts that provide health care and other needed services to medically underserved and at-risk patient populations, and participate in community service.

10. list career options in family medicine, general internal medicine or general pediatrics, and outline their most and least interesting features.
IGC MANAGED CARE PROGRAM LEARNING OBJECTIVES

Upon successful completion of the assigned managed care sessions, the student will be able to assess the impact that managed care might have on a physician's practice (i.e., through hands-on experience with a minimum of four out of the eight experiences below):

1. **Utilization Management (In-House):** By observing the pre-certification and authorization processes with an authorized representative of a managed care organization, the student will be able to examine the use of specific medical criteria, assignment of length of stay, and the denial process.

2. **Utilization Management (On-Site):** By making medical rounds with an onsite (hospital) review nurse or a hospitalist physician, the student will be able to examine the application of length of stay criteria and the determination of medical necessity for continued hospital stay. The student will also have an opportunity to examine the hospital discharge planning process and to understand the concept of continuity and coordination of care.

3. **Case Review/Rounds:** By observing the health plan's “grand rounds” of the review of hospitalized patients, the student will be able to cite three examples from one of each of the following: (a) how medical criteria impact in-patient admissions/length of stay; (b) initiation of case management; (c) the steps taken in the discharge planning process; (d) inpatient disease management; (e) the concurrent review process; (f) the steps taken by the MCO to ensure for the most cost-effective delivery of care.

4. **Case/Disease Management:** The student will be able to analyze the case management of chronic and catastrophic cases as well as the implementation of disease/illness management programs (e.g., asthma, diabetes, CHF, renal failure, high-risk pregnancy) conducted by the case manager.

5. **Quality Management/Improvement:** The student will be able to analyze how an MCO monitors and maintains the health care and services provided to its members to promote adequate access, acceptable outcomes, cost-efficiency, patient satisfaction and effect improvements as needed. The student will also be able to recognize the importance of appropriate medical record documentation.

6. **Provider/Practice Management:** The student will be able to analyze the process of provider management including credentialing, contracting, compensation models, provider orientations/education, procedures for referrals, authorizations, record-keeping, and billing issues.

7. **Medical Operations:** Through discussions with the medical director of an MCO, the student will be able to recognize factors that determine medical necessity, application of benefits, physician education, and the interrelationship with the plan’s physician network.

8. **Committee Meetings:** By attending physician committee meetings (e.g., Peer Review, Credentialing, Pharmacy & Therapeutics, Quality Improvement), the student will be able to recognize the important role that physicians play in ensuring for the quality of care delivered by MCOs.
GROUP ASSIGNMENTS:

The class is divided into two main groups (i.e., Group A and Group B), and 24 subgroups which are derived from a student's placement with one of six managed care organizations. Students taking IGC on Tuesdays are in Group A and students taking IGC on Thursdays are in Group B. Students rotate weekly with their IGC Physician Mentor with the exception of the three sessions per year with their assigned managed care organization and the two sessions per year with their assigned COM²Serve organizations.

ROTATION HOURS:

Physician Mentor sessions and COM²Serve sessions are approximately four hours in duration, and are usually scheduled on Tuesdays or Thursdays from 1:00 P.M. to 5:00 P.M. or from 2:00 P.M. to 6:00 P.M. (depending on the preceptor's lunch schedule). Some Physician Mentors ask their students to join them for hospital patient rounds or occasional lunch/dinner meetings that take place prior to 1:00 P.M. or after 6:00 P.M. In addition, several of the COM²Serve experiences are scheduled during evenings or weekends (e.g., health fairs). Students are generally required to attend IGC Managed Care Headquarters sessions from 1:00 p.m. to 5:00 P.M. Exceptions include nighttime physician committee dinner meetings at MCOs, certain field experiences that may specifically start at 1:30 or 2:00 P.M., or special lectures or symposia scheduled during the semester. Students must refer to their applicable MCO and COM²Serve schedules, direction sheets, and special memorandums for specific locations and rotation hours. A master IGC course schedule for regularly assigned sessions is included on the following page.
# M2 IGC Schedule

## *Fall Semester 2000*

### All M2's (Groups A & B) Gen'l IGC Sessions (Mandatory Attendance)

<table>
<thead>
<tr>
<th>Friday, July 28</th>
<th>IGC Orientation &amp; Intro. to Managed Care (Hull Aud)</th>
<th>10:10 P.M. - 12:30 P.M.</th>
<th>1:30 P.M. - 3:00 P.M.</th>
</tr>
</thead>
<tbody>
<tr>
<td>8-Aug</td>
<td>Physician Mentor Session</td>
<td>10-Aug</td>
<td>Physician Mentor Session</td>
</tr>
<tr>
<td>15-Aug</td>
<td>Physician Mentor Session</td>
<td>17-Aug</td>
<td>Physician Mentor Session</td>
</tr>
<tr>
<td>22-Aug</td>
<td>Physician Mentor, Managed Care or COM²Serve</td>
<td>24-Aug</td>
<td>Physician Mentor, Managed Care or COM²Serve</td>
</tr>
<tr>
<td>29-Aug</td>
<td>Physician Mentor, Managed Care or COM²Serve</td>
<td>31-Aug</td>
<td>Physician Mentor, Managed Care or COM²Serve</td>
</tr>
<tr>
<td>5-Sep</td>
<td>Physician Mentor, Managed Care or COM²Serve</td>
<td>7-Sep</td>
<td>Physician Mentor, Managed Care or COM²Serve</td>
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<tr>
<td>12-Sep</td>
<td>Physician Mentor, Managed Care or COM²Serve</td>
<td>14-Sep</td>
<td>Physician Mentor, Managed Care or COM²Serve</td>
</tr>
<tr>
<td>19-Sep</td>
<td>Physician Mentor, Managed Care or COM²Serve</td>
<td>21-Sep</td>
<td>Physician Mentor, Managed Care or COM²Serve</td>
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<tr>
<td>26-Sep</td>
<td>Physician Mentor, Managed Care or COM²Serve</td>
<td>28-Sep</td>
<td>Physician Mentor, Managed Care or COM²Serve</td>
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<td>3-Oct</td>
<td>Physician Mentor, Managed Care or COM²Serve</td>
<td>5-Oct</td>
<td>Physician Mentor, Managed Care or COM²Serve</td>
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<td>10-Oct</td>
<td>Physician Mentor, Managed Care or COM²Serve</td>
<td>12-Oct</td>
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<td>17-Oct</td>
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<td>19-Oct</td>
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<tr>
<td>24-Oct</td>
<td>Physician Mentor, Managed Care or COM²Serve</td>
<td>26-Oct</td>
<td>Physician Mentor, Managed Care or COM²Serve</td>
</tr>
<tr>
<td>31-Oct</td>
<td>Physician Mentor, Managed Care or COM²Serve</td>
<td>2-Nov</td>
<td>Physician Mentor, Managed Care or COM²Serve</td>
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<tr>
<td>7-Nov</td>
<td>Physician Mentor, Managed Care or COM²Serve</td>
<td>9-Nov</td>
<td>Physician Mentor, Managed Care or COM²Serve</td>
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### Wednesday, Nov 8

<table>
<thead>
<tr>
<th>IGC Managed Care Panel</th>
<th>Hull Auditorium</th>
<th>2:10 - 4:00 P.M.</th>
</tr>
</thead>
<tbody>
<tr>
<td>14-Nov</td>
<td>Physician Mentor, Managed Care or COM²Serve</td>
<td>16-Nov</td>
</tr>
</tbody>
</table>

### Monday, November 27

<table>
<thead>
<tr>
<th>IGC Wrap-Up Session</th>
<th>10:10 - 11:00 A.M. Hull Aud</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total: 3 IGC Meetings/Lectures</td>
<td><strong>Total: 15 IGC Sessions in Field (Group A)</strong></td>
</tr>
<tr>
<td><strong>Total: 15 IGC Sessions in Field (Group B)</strong></td>
<td></td>
</tr>
</tbody>
</table>

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** Students have a total of 15 community-based IGC sessions (i.e., 12 or 13 Physician Mentor sessions plus up to 3 MCO sessions or 1 - 2 COM²Serve Sessions). All students will have the same number of Physician Mentor, MCO, and COM²Serve sessions by the end of the Winter 2000 Semester.

Note: These IGC session dates do not include MCO physician committee meetings or COM²Serve sessions that take place during evening hours (or weekends). Evening sessions always substitute for a regular afternoon session (i.e., during the same week or at some other time during the semester).
VI. ATTENDANCE/PUNCTUALITY

ATTENDANCE

100% attendance in all IGC sessions is required in order to pass the course. Since there is no written examination offered in the IGC Course, student attendance must be ensured in order to meet the learning objectives and academic course requirements. Perfect attendance qualifies a student to "pass" the IGC course (or to "pass with honors" if other criteria are met). The attendance policy for IGC is the same as the requirements for reporting to a course examination. The procedure for attaining excused absences is outlined below, and differs according to IGC experience.

1. Attendance in the assigned number of Physician Mentor sessions is required unless there is a waiver granted for an excused absence that is pre-approved by the IGC Course Director (e.g., one Physician Mentor Session is waived per student per semester for attending out-of-town academic conferences). Students must seek prior approval from their Physician Mentor if they wish to reschedule an IGC Physician Mentor session. Students are also required to notify their Physician Mentor if they must be absent, and they must reschedule the session at a mutually agreeable time with their Physician Mentor. Students may contact the IGC office to assist in scheduling a make-up Physician Mentor session at a substitute site if a scheduling conflict should arise. This is particularly true when students are notified that their Physician Mentor session will be cancelled (e.g., when preceptors are absent).

2. Attendance at all Managed Care sessions and COM²Serve sessions is required unless there is a written excused absence pre-approved by the IGC Course Director. Even in the event of an emergency (i.e., non-life-threatening), students are required to contact the IGC Office prior to missing the scheduled session. Since these sessions are specially assigned according to detailed schedules, students whom "stand-up" a Managed Care or COM²Serve preceptor will receive a failing grade.

3. Attendance at all IGC auditorium sessions (i.e., including lectures, symposia, orientations, debriefings and wrap-up sessions) is required unless there is a written excused absence pre-approved by the IGC Course Director. Similar to the attendance policy for attending course examinations, students who have an unexcused absence from an IGC auditorium session will receive a failing grade.

TARDINESS

Students are expected to arrive at their Physician Mentor offices and Managed Care Corporations at the scheduled time specified for that rotation. It is professionally inappropriate to arrive late for rotations as this serves to inconvenience mentors who volunteer their time in the midst of busy schedules. Mentors can elect to dismiss a tardy student from that day's activities, which can result in an unexcused absence. In the event that a student expects to be late, he or she must seek prior approval from the preceptor at the clinical, COM²Serve or managed care site. If a student arrives late and has a convincing reason (e.g., a problem is encountered on the road such as a car accident or a break-down), it is up to the preceptor to determine whether or not the tardy arrival is excused.
VII. PROFESSIONAL CONDUCT

PROFESSIONAL Demeanor

Students must demonstrate professionalism and conduct themselves as courteous and responsible medical professionals at all times. Dignity, respect, and gratitude are valuable virtues in the development of a physician's character. Appropriate attitude, behavior and dress must be demonstrated at all assigned physician mentor sessions, managed care sessions, and at all IGC meetings. Physician Mentors provide a written assessment of student conduct on the Student Assessment by Preceptor and Managed Care Mentors assess student's professionalism directly on the Managed Care Program Attendance Log. Students can receive a failing grade in the IGC Course purely based on inappropriate attitude, behavior or dress.

COMPLIANCE WITH POLICY

While on rotations, students are expected to comply with the general rules and medical ethics established by the physician office or MCO-affiliated site and must conduct themselves appropriately with the personnel in charge of the organization (e.g., including security guards). Any problems or difficulties should be communicated immediately to the IGC Office.

DRESS CODE

Students shall maintain a critical awareness of personal hygiene and dress in a neat, clean, professional manner. Unless specifically instructed otherwise by the Physician Mentor, the COM²Serve preceptor, or the managed care preceptor, students will dress in professional attire along with a clean, white, NSU-approved clinical jacket along with a Nova Southeastern University identification badge. Professional attire is typically a suit and tie for men and a professional dress, skirt or pants ensemble for women. However, some Physician Mentor offices or COM²Serve sites may prefer a business casual form of dress (e.g., homeless shelters, public health department-sponsored home visits, pediatric practices, health fairs, etc.). Surgical scrubs are never appropriate for IGC rotations.

TITLE

Students will be treated as professionals by clinical personnel and vice versa. Students may be extended the courtesy of being referred to as “Student Doctor _____” in clinical settings. As a group, students will be referred to as "Student Physicians". Since courtesy and a professional demeanor are essential traits for physicians, students need to extend similar and appropriate courtesy to all preceptor office and managed care personnel at all times.
VIII. COURSE RESOURCES

All instructional materials are supplied by the IGC Program at no cost to the students. These resources include the following:

1. *Managed Care Made Manageable: An Introduction to Managed Care and Health Reform*, Second Edition; Mark J. Calderon, M.D.

2. A compilation of articles that address primary care and managed care.

IX. STUDENT LOGS/ASSIGNMENTS

Students will complete and submit most attendance logs, diagnostic patient logs, and assignments by the end-of-semester IGC Wrap-Up Session. The two exceptions include: (1) the COM³Serve Attendance Log/Written Assignment, which is due within five working days subsequent to attending a COM³Serve session; and (2) the Primary Care Written Assignment, which is due at the November 10th mid-semester IGC meeting for the Fall 2000 Semester, and at the mid-semester IGC meeting (date TBA) for the Winter 2001 Semester. All logs and assignments must be kept current so that they may be submitted for review at any interim point during the semester. If these items are not submitted on time, an incomplete grade (I) will be issued.

PHYSICIAN MENTOR ATTENDANCE LOG

The Physician Mentor Attendance Log must include the date and the Physician Mentor's original signature for each session attended. If the student has more than one preceptor at a given clinic site, all of these names must be included at the top of the log. If a student changes to another preceptor office during the semester, the dates for sessions spent with each preceptor must be clearly indicated. Any absences excused by the IGC Course Director (e.g., for attending student conventions) must be clearly indicated on the log, and a brief written description of the clinically-relevant information learned at these “substitute” sessions must be attached to the log.

MANAGED CARE HEADQUARTERS ATTENDANCE LOG

The Managed Care Headquarters Attendance Log must include all of the following information from the designated departmental preceptor assigned to an M2 student for each managed care session: (a) the preceptor's printed name; (b) the preceptor’s title; (c) the preceptor’s signature; (d) experience type or department name; (e) date; (f) a “yes” or “no” score under “punctuality”; and (g) a “yes” or “no” score under “displayed professional conduct”. Since many sessions are held at facilities visited only once by the student, it is imperative that students remember to bring their original attendance log to all IGC sessions.
IGC PATIENT DIAGNOSTIC LOG

A diagnostic log, containing patient profiles and diagnoses on patients seen, must be kept for each Physician Mentor session. The first page must include the Physician Mentor’s signature and the student’s name. Although volume of patients seen does not necessarily equate to quality of the learning experience, the number of documented patients must be sufficient (i.e., a minimum of 36 patients) in order to receive a passing grade.

PRIMARY CARE WRITTEN ASSIGNMENT

Students are required to complete a write-up that summarizes their learning experiences and perceptions of primary care practice while on rotations at their assigned Physician Mentor’s Office. For a passing grade (i.e., a score of "acceptable" or better in both Sections A and B), responses to the questions must be well thought out and clearly articulated. Students receiving a score of "not acceptable" in Section A and/or Section B will have one opportunity to re-do and resubmit the weak components of the assignment in order to meet the requirements for passing the IGC Course. Students who initially receive a "not acceptable" score on any IGC written assignment no longer qualify to receive a final grade of "pass with honors". This primary care assignment comprises two-thirds of the total "assignment" grade (i.e., Section A is one-third, and Section B is one-third). An initial score of "very good to outstanding" on at least one out of the two sections of this assignment, along with other course criteria, may qualify a student to receive a grade of "pass with honors" in IGC.

MANAGED CARE WRITTEN ASSIGNMENT

During the semester when students are scheduled to rotate in managed care organizations (MCOs), students are required to complete a one-page Managed Care Assignment for each of their field-based sessions. For a passing grade (i.e., a score of "acceptable" or better), responses must be well thought out and clearly articulated (e.g., several-word responses are not acceptable). Students receiving a score of "not acceptable" will have one opportunity to re-do and resubmit the weak components of the assignment in order to meet the requirements for passing the IGC Course. Students who initially receive a "not acceptable" score on any IGC written assignment no longer qualify to receive a final grade of "pass with honors". An initial score of "very good to outstanding" on this assignment, along with other course criteria (e.g., a score of " very good to outstanding" on a minimum of one out of two sections of the Primary Care Written Assignment), may qualify a student to receive a "pass with honors" in IGC. During the applicable semester (i.e., when the student’s MCO rotations are scheduled), this Managed Care Assignment comprises one-third of the total "assignment" grade.

COM²SERVE WRITTEN ASSIGNMENT

In the semester when students are scheduled to complete two COM²Serve sessions (or the equivalent) in designated community-based organizations, students are required to complete a one-page COM²Serve Assignment for each of their sessions. For a passing grade (i.e., a score of "acceptable" or better), responses must be well thought out and clearly articulated (e.g., several-
word responses are not acceptable). Students receiving a score of "not acceptable" will have **one** opportunity to re-do and resubmit the weak components of the assignment in order to meet the requirements for passing the IGC Course. Students who initially receive a "not acceptable" score on any IGC written assignment no longer qualify to receive a final grade of "pass with honors". An initial score of "very good to outstanding" on this assignment, along with other course criteria (e.g., a score of "very good to outstanding" on a minimum of one out of two sections of the *Primary Care Written Assignment*), may qualify a student to receive a "pass with honors" in IGC. During the applicable semester (i.e., when the student's COM'Serve rotations are scheduled), this *COM'Serve Assignment* comprises one-third of the total "assignment" grade.

### X. GRADING CRITERIA

The IGC Preceptorship III and IV Course are graded as follows:

<table>
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<tr>
<th>PH (Pass with Honors)</th>
<th>P (Pass)</th>
<th>F (Fail)</th>
</tr>
</thead>
</table>

The minimum requirements for achieving a grade of "Pass" include: (1) 100% attendance at all IGC meetings, physician mentor sessions and managed care sessions; (2) timely and accurate completion of all logs, evaluations, questionnaires and assignments; (3) a passing score on the *Student Assessment by Preceptor*; (4) a minimum score of "acceptable" on all components of the two applicable assignments (note: Sections A and B of the *Primary Care Written Assignment* comprises two-thirds of the total "assignment" grade, and either the *Managed Care Written Assignment* or the *COM'Serve Assignment* comprises the other one-third of the total "assignment" grade); (5) a passing score on the *Diagnostic Log*; (6) a positive score (i.e., "yes") assessing "Professional Conduct" on the *Managed Care Program Attendance Log* for all managed care sessions; and (7) no more than one "tardy" arrival on the *Managed Care Program Attendance Log*.

The minimum requirements for achieving a grade of "Pass with Honors" include: (1) see #1, #2, #5, and #6 above; (2) a score of "Pass with Honors" on the *Student Assessment by Preceptor*; (3) an average score of "very good to outstanding" on the two applicable assignments (note: Sections A and B of the *Primary Care Written Assignment* each comprises one-third of the "assignment" grade, and either the *Managed Care Written Assignment* or the *COM'Serve Assignment* comprises the other one-third of the "assignment" grade); and (4) no "tardy" arrivals on the *Managed Care Program Attendance Log*.

Abidance with all of the requirements detailed in this syllabus is required in order to receive a passing grade in the IGC Course. **Failure to meet the course requirements will result in a failing grade.**

### STUDENT ASSESSMENT BY PRECEPTOR

Students must receive a passing score on the *Student Assessment by Preceptor* form that is completed by the physician mentor during the student's last session. By the end of each semester, the student
is responsible for having their preceptor mail or fax a completed form (i.e., including all four sections along with the physician's signature) to the IGC office. Two “unsatisfactory” scores or an “unsatisfactory” score in “attendance/punctuality” constitutes a failure. In order to qualify for a grade of “pass with honors”, a student must receive "satisfactory" ratings in questions #1 and #2 of Section A, a minimum of 6 out of 9 “exceptional” ratings without any “below average” or “unsatisfactory” ratings in Section B, and an "exceptional" rating in Section C. An incomplete (“I” grade) will be issued if this form is not received by the end of the semester.

XI. EVALUATIONS/QUESTIONNAIRES

Students must complete all IGC evaluations and questionnaires on a timely basis as indicated (i.e., either at the IGC orientation or by the end-of-semester IGC wrap-up session). These include, but are not limited to, the IGC Physician Mentor Program Evaluation, the IGC Managed Care Program Evaluation, the Practice Choice and Primary Care Interest Factors Survey, Student Confidentiality Statements, Student Scheduling Forms, and any additional evaluations or questionnaires.

A number of aspects of the IGC Program are evaluated to ensure that NSU-COM students are getting the most out of their experiences. A variety of evaluation instruments and methods are used to gauge the effectiveness of students and preceptors, as well as the success of the overall program. All information is tabulated, analyzed, and presented to the Co-Project Directors for use in program planning.

PHYSICIAN MENTOR PROGRAM EVALUATION

Students’ evaluations of the Physician Mentor Program focus on their perception of “amount learned” and achievement of the program objectives. The results are used to determine strengths and weaknesses in the preceptor network. Preceptor-specific scores are available for review at the preceptor's request, and the decision of whether to continue individual IGC preceptor relationships are often based on these evaluations.

MANAGED CARE PROGRAM EVALUATION

Students’ evaluations of the IGC Managed Care Program focus on their perceptions of the learning experience, of the preceptors, and of the impact that the experience had on students’ interest in careers involving managed care. In addition, this evaluation depicts the most valuable and least valuable features of the rotation, and evaluates the department-specific learning experiences for each of the six MCOs. The results are used to determine strengths and weaknesses of training sessions conducted by the managed care corporations, and are therefore essential to the curricula planning and development process.
STUDENT SCHEDULE FORM FOR SWITCHING PHYSICIAN MENTORS

Students have the opportunity to change physicians after the Fall Semester in order to gain exposure to the other primary care disciplines. If a change is requested, students are given an opportunity to indicate a desired primary care specialty, location, and student partner. Selection preference is given to those students who had a driving time of greater than 40 minutes (from Physician Mentor’s office to home) during the previous semester.

XII. ROLE OF PRECEPTORS/INSTRUCTORS

PRIMARY CARE PHYSICIAN MENTORS

The Physician Mentor is chosen because of his/her role as a primary care physician (family medicine physician, general internist or general pediatrician), his/her desire to be a role model to medical students, and his/her affiliation and experience with managed health care. The Physician Mentor is sincerely appreciated by the students and the College and is invaluable to the success of this program. The names of the 2000/2001 Physician Mentors, sorted by the three primary care specialties, can be found in the August 2000 Listing of Primary Care Physician Mentors.

The mentor physician is expected to:

- orient the student to the role of a primary care physician, both in patient care and office/clinic operations;
- expose the student to patient care by giving the student the opportunity to observe the Physician Mentor in active practice;
- educate the student through discussions about primary care and managed health care, and through explanations of his/her medical decision-making;
- provide the student with the opportunity to perform patient histories and physical examinations (H & Ps) within the limits of the student’s ability. M-2 students are capable of doing a complete and comprehensive H & P and learn focused/symptom-oriented H & P in the course of their second year;
- adhere to student-specific teaching schedules including dates and times for teaching sessions. Preceptors must notify the student or call the IGC Office if they have to miss or reschedule teaching sessions;
- provide timely and constructive feedback on student performance, including student attitude, patient and medical team rapport, clinical skills and learning initiative. In addition, they must thoughtfully complete the student assessment form on a timely basis;
- Periodically review the IGC Course Syllabus (including course goals and learning objectives);
- sign off on the Patient Diagnostic Log, the Physician Mentor Attendance Log, and the Primary Care Written Assignment.

A medical student of Nova Southeastern University is not a licensed physician and, therefore, is legally and ethically not permitted to practice medicine. A student may be involved in assisting in
the care of a patient, but only under the direct supervision of a licensed physician. The preceptor is responsible for the medical care of the patient and for countersigning all allowable documents, progress notes and other records written by the student. A student may not administer therapy or medication, unless under the direct supervision of a licensed physician.

MANAGED CARE PRECEPTORS

The specific teaching responsibilities of the six Managed Care Organizations are included in written proposals/agreements tailored to each of the MCO teaching partners. In addition, the managed care preceptor is expected to:

- review the specific learning objectives for each MCO teaching session with the student;
- monitor the student's attendance, punctuality and professionalism, and complete the student's attendance logs;
- adhere to student-specific teaching schedules including dates and times for teaching sessions.

Preceptors must call the IGC Office if they have to miss or reschedule a teaching session.

COM²SERVE PRECEPTORS

Com²Serve partner organizations are selected because of their commitment to serving the health and well-being of underserved and at-risk populations, and Com²Serve preceptors are caring professionals who are selected based on their desire to assist medical students in reaching out to serve the vast needs in our community. The Com²Serve organizations are non-paid, volunteer service learning sites that are invaluable to the success of the IGC program. The names of the 2000/2001 Com²Serve partner organizations can be found in the August 2000 Listing of Com²Serve sites. The Com²Serve preceptor is expected to:

- monitor student attendance and complete student attendance logs;
- adhere to student-specific teaching schedules including dates and times for teaching sessions.

Preceptors must call the IGC Office if they have to miss or reschedule a teaching session.

XIII. ROLE OF STUDENT

The student is to take responsibility for his/her own learning by:

- acting in a professional manner with all preceptors, instructors and staff;
- meeting all schedule requirements and keeping track of all schedule revisions or updates;
- thoroughly and thoughtfully completing all logs, assignments, evaluations and questionnaires, and submitting these materials on a timely basis;
- consulting with the IGC Course Director on any problems or concerns encountered during the IGC rotation;
- taking an active role in striving to maximize IGC learning opportunities.
Section B.

LOGS

ASSIGNMENTS

ASSESSMENT FORMS

SCHEDULING FORMS

EVALUATIONS

Note: This contains a complete packet of forms for both the Fall 2000 and Winter 2001 Semesters.
FALL 2000 SEMESTER
IGC FORMS
The number of sessions required varies for M1 and M2 students by year and by semester. For M2s, the number of sessions varies by student sub-group (i.e., the number of managed care rotations and COM"Serve sessions within a semester impacts the number of Physician Mentor Sessions).
# Nova Southeastern University College of Osteopathic Medicine
## IGC Diagnostic Program Log

### Student Name:

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<th>Date</th>
<th>Patient Profile</th>
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Section A: (comprises 33.3% of grade for total "assignments")

1. Provide one case example (excluding mental health diagnosis) that describes how your Physician Mentor integrates information from the patient interview and physical examination into an assessment and treatment plan.

   A. Patient Age _________ Gender ____________

   B. Chief complaint:

   C. Key facts obtained through medical history:

   D. Key findings obtained through patient physician examination:

   E. Based on above, list a differential diagnosis:

   F. Final Diagnosis(es)

   G. Justify your final diagnosis including the use of any laboratory or diagnostic tests ordered:

2. In the case above, describe how your Physician Mentor considers at least one of the following factors into his/her medical decision making (i.e., diagnosis and/or treatment):
   (1) socio-economic (2) ethical (3) ethnocultural
3. **Name and describe three community resources that are available to assist one of the following patient populations:** (please circle the population you select)

- Infants or children
- Geriatric patients
- Special populations at risk (e.g., HIV, physically handicapped, medically indigent, substance abuse, etc.)

Community Resource #1:

Community Resource #2:

Community Resource #3:

4. **Summarize the specific ways in which the Physician Mentor must work with managed care plans in his/her practice. Provide one or two paragraphs incorporating a minimum of three of the following (and circle the three that you select).** (Note: It is sometimes helpful to consult with the Office Manager at your assigned IGC site.)

- Quality management/medical records
- MCO contract and reimbursement criteria
- Referrals to specialists or for diagnostic tests
- Pre-authorizations for surgery or hospitalizations
- Drugs covered by health plans
- Utilizing hospitalists
- Membership verification
- Conflict resolution with managed care organizations
- Concurrent review of hospitalized patients
- Other (please list) ___________________________________
5. From a case that you saw with your Physician Mentor, demonstrate the value of self-directed learning by utilizing a minimum of 3 information resources to seek out information relative to the case.

A. Indicate what information you are seeking:

B. List the three information resources utilized (note: you must use a minimum of one on-line search and one journal article); compare the usefulness of each in your specific search; and briefly summarize the information obtained:

   1. Resource #1 – On-Line Search (other than a journal article/abstract):

   2. Resource #2 – Journal Article:

   3. Resource #3 – Other

C. Where were these information resources accessed (i.e., your Physician Mentor's office, at home, library, etc).

6. Outline the features that interest you most and least about the primary care discipline (i.e., I.M., FM, Pediatrics) to which you were assigned for your IGC rotation. (Note: During the Winter 2001 Semester, you may leave this blank if the preceptor is the same as during the Fall 2000 Semester.)

A. Assigned Primary Care Discipline (please circle one):  Internal Medicine  Family Medicine  Pediatrics

B. Factors that interest you most:

C. Factors that interest you least:
COM²SERVE ASSIGNMENT (Fall 2000/Winter 2001)

Student Name: ____________________________

Name of Com²Serve Assignment/Organization: ____________________________

Date: ____________________________

Instructions: Please complete one assignment page for each of your Com²Serve rotations. This will be submitted within one week subsequent of the Com²Serve assignment. Responses must be clearly thought out and well articulated using complete sentences.

1. Approximately how many patients did you see (or # of cases)? ____________________________

2. Describe how you helped serve the community with this assignment?

____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

3. What did you personally gain/learn from this assignment?

____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

4. Describe why you feel this is, or is not, a worthwhile IGC experience?

____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Com²Serve Preceptor’s Name (Print) ____________________________

Title: ____________________________

Preceptor’s Signature: ____________________________

Phone # ____________________________
Student Name: __________________________________________

Name of Com²Serve Assignment/Organization: __________________________________________

Date: _____________________________________________________________________________

Instructions: Please complete one assignment page for each of your Com²Serve rotations. This will be submitted within one week subsequent of the Com²Serve assignment. Responses must be clearly thought out and well articulated using complete sentences.

1. Approximately how many patients did you see (or # of cases)? ________________________

2. Describe how you helped serve the community with this assignment?
   ______________________________________________________________________________
   ______________________________________________________________________________
   ______________________________________________________________________________

3. What did you personally gain/learn from this assignment?
   ______________________________________________________________________________
   ______________________________________________________________________________
   ______________________________________________________________________________

4. Describe why you feel this is, or is not, a worthwhile IGC experience?
   ______________________________________________________________________________
   ______________________________________________________________________________
   ______________________________________________________________________________

Com²Serve Preceptor's Name (Print) ________________________________________________

Title: __________________________________________________________________________

Preceptor's Signature: ___________________________________________________________________

Phone # __________________________________________________________________________
Nova Southeastern University College of Osteopathic Medicine  
IGC Managed Care Attendance Log

Fall 2000  ○  Winter 2001  ○  
Student Name: ______________________  
Last First  
Assigned Managed Care Organization(s): 

<table>
<thead>
<tr>
<th>Date</th>
<th>Department</th>
<th>Preceptor Name</th>
<th>Preceptor Title</th>
<th>Preceptor’s Signature</th>
<th>*Professional Conduct</th>
<th>Student was Punctual</th>
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* Professional Conduct: Did the student display professional conduct and demeanor during the session?
MANAGED CARE ASSIGNMENT (Fall 2000/Winter 2001)

Student Name: _________________________
Managed Care Organization: _________________________
Department Name: _________________________
Date: _________________________

Instructions: Please complete one assignment page for each of your managed care rotations and attach to the managed care attendance log. This will be submitted at the IGC Wrap-Up Session. Responses must be clearly thought out and well articulated using complete sentences.

A. What are the three most valuable things that you learned today? (be specific)

1. ____________________________________________

   ____________________________________________

   ____________________________________________

2. ____________________________________________

   ____________________________________________

   ____________________________________________

3. ____________________________________________

   ____________________________________________

   ____________________________________________

B. Please describe how this experience might impact your practice as a physician:

   ____________________________________________

   ____________________________________________

   ____________________________________________

C. Other Comments (Optional):

   ____________________________________________

   ____________________________________________

   ____________________________________________
Student Name: ____________________________

Managed Care Organization: ____________________________

Department Name: ____________________________

Date: ____________________________

Instructions: Please complete one assignment page for each of your managed care rotations and attach to the managed care attendance log. This will be submitted at the IGC Wrap-Up Session. Responses must be clearly thought out and well articulated using complete sentences.

A. What are the three most valuable things that you learned today? (be specific)

1. ____________________________________________

2. ____________________________________________

3. ____________________________________________

B. Please describe how this experience might impact your practice as a physician:

________________________________________________

________________________________________________

________________________________________________

C. Other Comments (Optional):

________________________________________________

________________________________________________
MANAGED CARE ASSIGNMENT (Fall 2000/Winter 2001)

Student Name: ________________________________

Managed Care Organization: ________________________________

Department Name: ________________________________

Date: ________________________________

Instructions: Please complete one assignment page for each of your managed care rotations and attach to the managed care attendance log. This will be submitted at the IGC Wrap-Up Session. Responses must be clearly thought out and well articulated using complete sentences.

A. What are the three most valuable things that you learned today? (be specific)
   1. __________________________________________________
   2. __________________________________________________
   3. __________________________________________________

B. Please describe how this experience might impact your practice as a physician:
   __________________________________________________
   __________________________________________________
   __________________________________________________

C. Other Comments (Optional):
   __________________________________________________
   __________________________________________________
Student Name: 
First: ___________________________ Last: ___________________________

Since our students are only in their first or second year, their ability to diagnose and manage patients should not be evaluated. We would like, however, to have your opinion on individual students' attitudes, demeanor, dependability and progress. Please fill in one rating for each item listed.

Grading Criteria for Student Assessment Form (Note: This is only one part of the student's overall grading criteria): To "Pass with Honors", the student must receive "satisfactory" ratings in both questions (i.e. #1 and #2) of Section A, and an "exceptional" rating in Section C. The student must also receive 6 or more "exceptional" ratings without any "below average" or "unsatisfactory" ratings in the other three questions of Section B. To "Pass", the student must receive no more than one "unsatisfactory" rating, but a student cannot pass if the "unsatisfactory" rating is in "attendance & punctuality". Any unsatisfactory rating will necessitate a follow-up by the applicable department chair.

Section A

1. Attendance and punctuality
   Satisfactory: □ Unsatisfactory: □
2. Professional appearance
   Satisfactory: □ Unsatisfactory: □

Section B

1. Conduct (exhibits professional demeanor, attitude & behavior)
   Exceptional: □ Above Average: □ Average: □ Below Average: □ Unsatisfactory: □
2. Patient rapport (communication skills & attitude)
   Exceptional: □ Above Average: □ Average: □ Below Average: □ Unsatisfactory: □
3. Medical team rapport (cooperates with other health professionals and office staff)
   Exceptional: □ Above Average: □ Average: □ Below Average: □ Unsatisfactory: □
4. Dependability
   Exceptional: □ Above Average: □ Average: □ Below Average: □ Unsatisfactory: □
5. Enthusiasm (seems to enjoy and show interest in learning)
   Exceptional: □ Above Average: □ Average: □ Below Average: □ Unsatisfactory: □
6. Inquisitiveness (asks questions when appropriate)
   Exceptional: □ Above Average: □ Average: □ Below Average: □ Unsatisfactory: □
7. Ability to be a self-directed learner (e.g. motivated to look up medical information)
   Exceptional: □ Above Average: □ Average: □ Below Average: □ Unsatisfactory: □
8. Medical knowledge (applies basic & clinical science according to the student's level of medical education)
   Exceptional: □ Above Average: □ Average: □ Below Average: □ Unsatisfactory: □
9. Progress through rotation (shows consistent effort & growth)
   Exceptional: □ Above Average: □ Average: □ Below Average: □ Unsatisfactory: □

Section C

1. Your overall rating of this student is:
   Exceptional: □ Above Average: □ Average: □ Below Average: □ Unsatisfactory: □

Section D

1. Please provide a summary statement to justify your ratings above.
   ____________________________________________________________
   ____________________________________________________________
   ____________________________________________________________

Any additional comments may be written on the back. A written explanation must accompany any unsatisfactory ratings. Thank you.

Physician Name (Please Print)
First: ___________________________ Last: ___________________________
Signature of Physician Mentor ___________________________ Phone ___________________________

Please return this form to the IGC Office, Nova Southeastern University College of Osteopathic Medicine, 3200 South University Drive, Ft. Lauderdale, FL 33328 (Room 1441). You may also fax this form to (954)262-4773. For questions, please call (954)262-1441.
For each item below, please COMPLETELY FILL IN the appropriate response with dark ink.

Note: This evaluation is for the Physician Mentor Program only and not the Managed Care component.

1. I was given an orientation by my mentor.

2. The learning objectives were discussed with me by relevant personnel.

3. My role in the physician's practice setting was defined.

4. I found the clinical experience consistent with the objectives set.

5. I had the opportunity to observe a clinician as a role model.

6. I was presented with knowledge that was meaningful and relevant to me.

7. The physician mentor explained the thinking process used in making decisions about patient care.

8. I was given the time to ask questions and receive additional information.

9. The physician demonstrated interest in me as a student.

10. The physician mentor seemed to enjoy teaching me.

11. I was given support and positive reinforcement by relevant personnel.

12. A. My physician mentor gave me feedback on my performance. 
   B. If yes to 12A, this feedback was constructive.

13. I had a chance to see many aspects of how a primary care physician office functions.

14. I was able to observe diagnostic problem solving during patient interviews.

15. I was able to observe the concept of "whole patient" care, including psychosocial and ethical issues.

16. Participation increased my knowledge of managed care.

17. Overall, how much did you learn in this program?

18. To what extent has this program increased your interest in practicing primary care medicine?

19. Prior to starting the IGC program, to what extent were you interested in practicing primary care medicine?

Fall 2000 / Winter 2001

NSU College of Osteopathic Medicine
IGC Physician Mentor Program Evaluation
IGC Physician Mentor Program Evaluation Form

20. If a student friend who had not yet gone through the IGC Physician Mentor Program asked you about your experience, what would you tell this person?

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

21. Additional Comments:

________________________________________________________________________

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NSU College of Osteopathic Medicine
2000/2001 IGC Student Scheduling Form
Switching Physician Mentors

Instructions: The purpose of this form is to help schedule you in your upcoming IGC rotation. Using black ink only, completely fill in the appropriate bubbles without using X's or check marks. When writing in boxes, please print only 1 character per box.

First Name: ___________________________ Last Name: ___________________________

Address: ________________________________________________________________

Home Phone #: ___________________________ Please check if your address or phone number has changed. □

Location of your residence - Dade: □ South □ Central □ North Palm Beach: □ South □ Central □ North

South Central North

<table>
<thead>
<tr>
<th>Broward</th>
<th>Between Griffin Rd. &amp; the Dade Boundary</th>
<th>Between Griffin Rd. &amp; Oakland Park Blvd.</th>
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Current Physician Mentor Name: ___________________________

Current Specialty: □ Family Medicine □ Internal Medicine □ Pediatrics

Location of current mentor: City or Town Name: __________________________

Average driving distance from current physician mentor's office to your home:

□ Under 15 minutes □ Between 30 and 45 minutes □ Between 15 and 30 minutes □ Over 45 minutes

Stay with this physician if possible? □ Yes □ No

Specialty desired for upcoming rotation: (This specialty must be different from your current specialty.)

□ Family Medicine □ Internal Medicine □ Pediatrics

Preferred Location: Dade: □ South □ Central □ North Palm Beach: □ South □ Central □ North

Broward: East of Turnpike: □ South □ Central □ North West of Turnpike: □ South □ Central □ North

Comments: ___________________________

□
WINTER 2001 SEMESTER
IGC FORMS
Nova Southeastern University College of Osteopathic Medicine
IGC Physician Mentor Attendance Log

Fall 2000 〇  Winter 2001 〇

Student Name: ___________________________ Last First

Student’s Year:  M-1 〇  M-2 〇

Name of Preceptor: ___________________________ Last First

<table>
<thead>
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The number of sessions required varies for M1 and M2 students by year and by semester. For M2s, the number of sessions varies by student sub-group (i.e., the number of managed care rotations and COM²Serve sessions within a semester impacts the number of Physician Mentor Sessions).
Nova Southeastern University College of Osteopathic Medicine
IGC Diagnostic Program Log

Student Name: ____________________________  ____________________________  ____________________________  ____________________________

Name of Preceptor: ____________________________  ____________________________  ____________________________  ____________________________

Preceptor's Signature: ____________________________ (1st page only)

<table>
<thead>
<tr>
<th>Date</th>
<th>Patient Profile (e.g. 15 year old male) No Names Please</th>
<th>Diagnoses (e.g. 1. Gastroenteritis 2. Otitis Media)</th>
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IGC PRIMARY CARE WRITTEN ASSIGNMENT

M-2 Fall 2000  M-2 Winter 2001

Student Name: ____________________________  ____________________________
   Last                        First

Preceptor Name: ____________________________  ____________________________
   Last                        First

Preceptor's Signature: ____________________________________________

---

Section A:  (comprises 33.3% of grade for total "assignments")

1. Provide one case example (excluding mental health diagnosis) that describes how your Physician Mentor integrates information from the patient interview and physical examination into an assessment and treatment plan.

   A. Patient Age ________  Gender ________

   B. Chief complaint:

   C. Key facts obtained through medical history:

   D. Key findings obtained through patient physician examination:

   E. Based on above, list a differential diagnosis:

   F. Final Diagnosis(es)

   G. Justify your final diagnosis including the use of any laboratory or diagnostic tests ordered:

2. In the case above, describe how your Physician Mentor considers at least one of the following factors into his/her medical decision making (i.e., diagnosis and/or treatment):
   (1) socio-economic  (2) ethical  (3) ethnocultural
Section B: (comprises 33.3% of grade for total "assignments")

3. **Name and describe three community resources that are available to assist one of the following patient populations:** (please circle the population you select)

- Infants or children
- Genetric patients
- Special populations at risk (e.g., HIV, physically handicapped, medically indigent, substance abuse, etc.)

Community Resource #1:

Community Resource #2:

Community Resource #3:

4. **Summarize the specific ways in which the Physician Mentor must work with managed care plans in his/her practice. Provide one or two paragraphs incorporating a minimum of three of the following (and circle the three that you select).** (Note: It is sometimes helpful to consult with the Office Manager at your assigned IGC site.)

- Quality management/medical records
- MCO contract and reimbursement criteria
- Referrals to specialists or for diagnostic tests
- Pre-authorizations for surgery or hospitalizations
- Drugs covered by health plans
- Utilizing hospitalists
- Membership verification
- Conflict resolution with managed care organizations
- Concurrent review of hospitalized patients
- Other (please list) ____________________________
5. From a case that you saw with your Physician Mentor, demonstrate the value of self-directed learning by utilizing a minimum of 3 information resources to seek out information relative to the case.

A. Indicate what information you are seeking:

B. List the three information resources utilized (note: you must use a minimum of one on-line search and one journal article); compare the usefulness of each in your specific search; and briefly summarize the information obtained:

1. Resource #1 – On-Line Search (other than a journal article/abstract):

2. Resource #2 – Journal Article:

3. Resource #3 – Other

C. Where were these information resources accessed (i.e., your Physician Mentor’s office, at home, library, etc).

6. Outline the features that interest you most and least about the primary care discipline (i.e., I.M., FM, Pediatrics) to which you were assigned for your IGC rotation. (Note: During the Winter 2001 Semester, you may leave this blank if the preceptor is the same as during the Fall 2000 Semester.)

A. Assigned Primary Care Discipline (please circle one): Internal Medicine Family Medicine Pediatrics

B. Factors that interest you most:

C. Factors that interest you least:
COM²SERVE ASSIGNMENT (Fall 2000/Winter 2001)

Student Name: ____________________________________________

Name of Com²Serve Assignment/Organization: ____________________________

Date: ____________________________________________

Instructions: Please complete one assignment page for each of your Com²Serve rotations. This will be submitted within one week subsequent of the Com²Serve assignment. Responses must be clearly thought out and well articulated using complete sentences.

1. Approximately how many patients did you see (or # of cases)? ____________________

2. Describe how you helped serve the community with this assignment?
   ___________________________________________________________
   ___________________________________________________________
   ___________________________________________________________

3. What did you personally gain/learn from this assignment?
   ___________________________________________________________
   ___________________________________________________________
   ___________________________________________________________

4. Describe why you feel this is, or is not, a worthwhile IGC experience?
   ___________________________________________________________
   ___________________________________________________________
   ___________________________________________________________

Com²Serve Preceptor's Name (Print) ____________________________

Title: ______________________________________________________

Preceptor's Signature: _______________________________________

Phone # ___________________________________________________
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   _______________________________________________________________

   _______________________________________________________________

   _______________________________________________________________

Com²Serve Preceptor's Name (Print) ___________________________________________

Title: _______________________________________________________________

Preceptor's Signature: ________________________________________________

Phone # ___________________________________________________________
Instructions: Please complete one assignment page for each of your managed care rotations and attach to the managed care attendance log. This will be submitted at the IGC Wrap-Up Session. Responses must be clearly thought out and well articulated using complete sentences.

A. What are the three most valuable things that you learned today? (be specific)
   1. 
   2. 
   3. 

B. Please describe how this experience might impact your practice as a physician:

C. Other Comments (Optional):
MANAGED CARE ASSIGNMENT (Fall 2000/Winter 2001)

Student Name: ____________________________

Managed Care Organization: ____________________________

Department Name: ____________________________

Date: ____________________________

Instructions: Please complete one assignment page for each of your managed care rotations and attach to the managed care attendance log. This will be submitted at the IGC Wrap-Up Session. Responses must be clearly thought out and well articulated using complete sentences.

A. What are the three most valuable things that you learned today? (be specific)

1. ____________________________

2. ____________________________

3. ____________________________

B. Please describe how this experience might impact your practice as a physician:

__________________________

__________________________

__________________________

C. Other Comments (Optional):

__________________________

__________________________
Student Name: ______________________________

Managed Care Organization: __________________________

Department Name: ________________________________

Date: ________________________________

Instructions: Please complete one assignment page for each of your managed care rotations and attach to the managed care attendance log. This will be submitted at the IGC Wrap-Up Session. Responses must be clearly thought out and well articulated using complete sentences.

A. What are the three most valuable things that you learned today? (be specific)

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   ____________________________________________
   ____________________________________________

2. ____________________________________________
   ____________________________________________
   ____________________________________________

3. ____________________________________________
   ____________________________________________
   ____________________________________________

B. Please describe how this experience might impact your practice as a physician:

   ____________________________________________
   ____________________________________________
   ____________________________________________
   ____________________________________________

C. Other Comments (Optional):

   ____________________________________________
   ____________________________________________
   ____________________________________________
Student Name: [First] [Last]  
Date [M1] [M2]

Since our students are only in their first or second year, their ability to diagnose and manage patients should not be evaluated. We would like, however, to have your opinion on individual students' attitudes, demeanor, dependability and progress. Please fill in one rating for each item listed.

Grading Criteria for Student Assessment Form (Note-This is only one part of the student's overall grading criteria): To "Pass with Honors", the student must receive "satisfactory" ratings in both questions (i.e. #1 and #2) of Section A, and an "exceptional" rating in Section C. The student must also receive 6 or more "exceptional" ratings without any "below average" or "unsatisfactory" ratings in the other three questions of Section B. To "Pass", the student must receive no more than one "unsatisfactory" rating, but a student cannot pass if the "unsatisfactory" rating is in "attendance & punctuality". Any unsatisfactory rating will necessitate a follow-up by the applicable department chair.

Section A
1. Attendance and punctuality  [Satisfactory] [Unsatisfactory]
2. Professional appearance  [Satisfactory] [Unsatisfactory]

Section B
1. Conduct (exhibits professional demeanor, attitude & behavior)  [Exceptional] [Above Average] [Average] [Below Average] [Unsatisfactory]
2. Patient rapport (communication skills & attitude)  [Exceptional] [Above Average] [Average] [Below Average] [Unsatisfactory]
3. Medical team rapport (cooperates with other health professionals and office staff)  [Exceptional] [Above Average] [Average] [Below Average] [Unsatisfactory]
4. Dependability  [Exceptional] [Above Average] [Average] [Below Average] [Unsatisfactory]
5. Enthusiasm (seems to enjoy and show interest in learning)  [Exceptional] [Above Average] [Average] [Below Average] [Unsatisfactory]
6. Inquisitiveness (asks questions when appropriate)  [Exceptional] [Above Average] [Average] [Below Average] [Unsatisfactory]
7. Ability to be a self-directed learner (e.g. motivated to look up medical information)  [Exceptional] [Above Average] [Average] [Below Average] [Unsatisfactory]
8. Medical knowledge (applies basic & clinical science according to the student's level of medical education)  [Exceptional] [Above Average] [Average] [Below Average] [Unsatisfactory]
9. Progress through rotation (shows consistent effort & growth)  [Exceptional] [Above Average] [Average] [Below Average] [Unsatisfactory]

Section C
1. Your overall rating of this student is:  [Satisfactory] [Unsatisfactory]

Section D
1. Please provide a summary statement to justify your ratings above.

[Signature of Physician Mentor]

Any additional comments may be written on the back. A written explanation must accompany any unsatisfactory ratings. Thank you.

Physician Name (Please Print)
First [First] [Last]  Phone

Please return this form to the IGC Office, Nova Southeastern University College of Osteopathic Medicine, 3200 South University Drive, Ft. Lauderdale, FL 33328 (Room 1441). You may also fax this form to (954)262-4773. For questions, please call (954)262-1441.
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**Continued on Back...**
IGC Physician Mentor Program Evaluation Form

20. If a student friend who had not yet gone through the IGC Physician Mentor Program asked you about your experience, what would you tell this person?

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21. Additional Comments:

____________________________________________________________________
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NSU College of Osteopathic Medicine
2000/2001 IGC Student Scheduling Form
Switching Physician Mentors

Instructions: The purpose of this form is to help schedule you in your upcoming IGC rotation. Using black ink only, completely fill in the appropriate bubbles without using X's or check marks. When writing in boxes, please print only 1 character per box.

First Name

Last Name

Address:

Home Phone #: ____________________ 

Please check if your address or phone number has changed. 

Location of your residence - Dade: 
- South
- Central
- North

Palm Beach: 
- South
- Central
- North

South

Central

North

Broward

Between Griffin Rd. & the Dade Boundary

Between Griffin Rd. & Oakland Park Blvd.

Between Oakland Park Blvd. & Palm Beach Boundary

East of the turnpike

West of the turnpike

Current Physician Mentor Name: ____________________ 

Current Specialty: 
- Family Medicine
- Internal Medicine
- Pediatrics

Location of current mentor: City or Town Name: ____________________ 

Average driving distance from current physician mentor's office to your home:
- Under 15 minutes
- Between 15 and 30 minutes
- Between 30 and 45 minutes
- Over 45 minutes

Stay with this physician if possible? 
- Yes
- No

Specialty desired for upcoming rotation: (This specialty must be different from your current specialty.)
- Family Medicine
- Internal Medicine
- Pediatrics

Preferred Location: 
- Dade: 
  - South
  - Central
  - North

- Palm Beach: 
  - South
  - Central
  - North

- Broward: 
  - East of Turnpike: 
    - South
    - Central
    - North
  - West of Turnpike: 
    - South
    - Central
    - North

Comments: ____________________________ 

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