Not surprisingly, with the clerkship schedules going out, there have been a lot of questions. Rather than replying to all of them individually, I’ll address some of the FAQs.

**Individual Questions about Schedules**
I know from emails to me and a much larger number to Sibyl that not everyone is perfectly happy with their schedules. Message received. Sibyl is working her way through these questions. She is aware of the ones that have come to me directly. She will communicate with each of you and will try to find options for you, however, it may not be possible to put things together exactly as you want, largely due to the need to wit things together for all students and our capacity limitations.

**Electives**
Yuan has sent an email earlier today with a reminder about the electives catalogue and how to arrange local electives.

There are some disciplines that are still figuring out what their elective capacity will be over the coming months — obviously its a moving target as to how busy things will be for some clinical areas. Once they get the site/selective schedules (as noted above, Sibyl is starting work on these now) they will have a better idea of how many elective students they can accommodate.

Our hope was to get back to the full fourteen weeks of electives planned at the start of the clerkship year. We were able to fit in electives in the revised schedule to get up to 13 weeks (counting the one week elective that you completed right before the shut down). Putting in another one week elective would create havoc in a schedule largely built on four week chunks. It would mean students having staggered start times on many rotations which the clerkships would have difficulty managing, as it would mean repeating orientations and other educational events that they won’t have the ability to do.

The one-week elective that was produced when clerkship paused in March will still be included on the MSPR. In addition, we won’t count it towards the eight-week electives cap (i.e. there is a nine-week elective cap for the discipline you were in on March 13).

**Sites/Selectives**
Sibyl is also working on getting these set up. The starting point is keeping what students had previously, however, there are a significant number that will change. This is simply because there are some sites that have fewer spots available for learners and some specialties that aren’t taking clerks. Not much we can do about either of those realities.

**MSPR Cutoff**
Sorry — I thought we had mentioned this! Any rotations that are completed by December 11 will be included on the MSPR.

**PPE/IP and C**
Amazing work getting signed up so quickly for the June 2 and 12 sessions! Really appreciate that, as it makes planning much easier. If any students do need to be moved around in order to have relatively similar numbers, Shannon Leskosky will email them with updates. Sibyl and I have a list of a small number of students with circumstances that have prevented their sign up. Specifically for those students who can’t attend due to their move to a UCLIC site — Nicolle will be in touch by email. Even if you aren’t in one of the local session on June 2 or 12, please do complete the online module that was linked in my PPE Sign Up email. Also, thanks again for your kind patience with the technical glitch on the signup genius. I did find it hard to believe that the sign up was full in five minutes! Appreciate those who let me know about the problem.

You will have also likely seen the messaging from the provincial government that non AHS facilities will have to start paying for PPE. That includes physician offices outside of the hospitals. While the AMA has outlined a plan to try and fight this, we’ve started looking at how we will ensure that this doesn’t limit you doing clinical work in affected practices. Dr. Naugler and Karen (UME finance manager) are working on this and we’ve had preliminary discussions with the Family Med Clerkship as its Family Medicine that is going to be affected by this disproportionally.

I am currently drafting a document that will define the kinds of patients that clerks will be able to be involved with when doing clinical work. I am going to solicit input from the clerkships to refine that document. Once we have a final version, it will be circulated to all of you as well as to all preceptors via the clerkship leaders.

**EM/Anesthesia Block**

Just a reminder that you will do five weekdays of Anesthesia and seven shifts in EM during this two-week period. You will therefore be scheduled on one or both weekends in EM. Both exams will be done on the same day at the end of the block in order to make the schedule work in this combined rotation.

I think that’s all at this point. I’m sorry, but I don’t have any available time for another online Q and A, however, we will have a combined SAW/UME evening session in mid June (details are being worked on while I type this). I will see some of you on June 2 (I’ll wander by the atrium — looking forward to actually seeing some students in person!).

Have a great weekend. We’ll get there.

KB
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