UNDERGRADUATE MEDICAL EDUCATION (UME)
Medical Doctor Program (MD)

COURSE OUTLINE

<table>
<thead>
<tr>
<th>Course Number:</th>
<th>Part 1 MDCN 480 (June 2019) + Part 2 MDCN 485 (January 2020)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Course Name:</td>
<td>Integrative</td>
</tr>
</tbody>
</table>
| Schedules and classroom locations: | For pre-clerkship:  
Year 1 & 2 timetable is here  
http://www.ucalgary.ca/mdprogram/current-students/pre-clerkship-years-1-2/timetables  
Detailed scheduled is located online in OSLER |

<table>
<thead>
<tr>
<th>Name</th>
<th>Email</th>
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</thead>
<tbody>
<tr>
<td>Course Chair:</td>
<td>Patrick Lee <a href="mailto:pflee@ucalgary.ca">pflee@ucalgary.ca</a></td>
</tr>
<tr>
<td>UME Program Coordinator:</td>
<td>Kelsey O’Donnell <a href="mailto:integr@ucalgary.ca">integr@ucalgary.ca</a></td>
</tr>
<tr>
<td>Student Course Rep:</td>
<td>Paige Shelmey <a href="mailto:paige.shelemey@ucalgary.ca">paige.shelemey@ucalgary.ca</a></td>
</tr>
<tr>
<td>Student Exam Rep:</td>
<td>Fiona Burns <a href="mailto:fiona.burns@ucalgary.ca">fiona.burns@ucalgary.ca</a></td>
</tr>
</tbody>
</table>

Course Description
Please refer to the University Calendar:
http://www.ucalgary.ca/pubs/calendar/current/medicine.html#8554

Introduction
Welcome to the Integrative Course!

The main purpose of the course is to provide an opportunity for you to integrate the knowledge and skills you have acquired during your first two years of medical training. I hope you will also use the opportunity to develop clinical reasoning skills.

The Integrative Course consists of a series of standardized patient cases designed to reflect actual patient-physician interactions. You will interact with the standardized patients and discuss the cases in small group sessions facilitated by a preceptor. In addition to reinforcing your prior knowledge in a clinical setting, the standardized patient problems will give you an opportunity to:

- Apply problem solving in the more realistic context of interaction with a standardized patient
- Reinforce clinical skills presented in your Medical Skills Course
- Integrate your clinical skills with medical knowledge acquired in the Clinical Presentation Curriculum
• Develop counseling and communication skills not presented elsewhere in the curriculum
• Explore information resources applicable to clinical problems, including the application of evidence-based medicine to the clinical problems
• Practice case presentations to your preceptor

The small group process is of paramount importance. **Attendance at all Integrative sessions is mandatory. A student who misses a session must notify UME and Integrative coordinator as per UME policy.** You will be assigned to new small groups for the course. If you are allocated to a preceptor about whom you have specific concerns (for example they have given you a failing grade in a prior encounter, or have been involved in your remediation in the past) please **let the Course Chair know immediately on receiving your group allocations.** If the small group sessions do not meet your expectations, please discuss this with your preceptor, or if that is not possible or successful, discuss your concerns with the course chair directly.

The following pages outline the expectations of the course and provide information regarding course logistics. Each case has specific “key features and objectives” that should be covered by the end of the case. These are listed in the preceptor’s manual, and you may wish to review them at the completion of the case.

Your feedback is essential to the ongoing success of the course. Each year, changes are made to cases based on group experiences. Please ensure you complete your course evaluation form so we can continue to improve the course. In addition, many preceptors specifically ask for student feedback regarding their contribution to the course.

Several individuals are available for consultation throughout the course:

If you have any questions regarding the course, please do not hesitate to contact me directly at pflee@ucalgary.ca. I will also be around the Medical Skills Centre for the majority of the Integrative Course.

Please note that administrative logistics are managed by our Program Coordinator, Kelsey O’Donnell (403-2107539) at integr@ucalgary.ca.

Standardized Patients are organized by the Medical Skills Center.

Enjoy the course!

Dr. Patrick Lee MD CCFP FCFP  
Clinical Associate Professor, Department of Family Medicine 
Integrative Course Chair/Medskils sub-unit Co-chair, Undergraduate Medical Education  
Master Teacher, Cumming School of Medicine  
SOOs Coordinator, University of Calgary
SCHEDULE & SUMMARY OF SMALL GROUP PROCESS

Each group will complete 2 cases during the first week of Integrative (IG) starting June 24-28, 2019 and 2 cases during the second week of IG starting January 6-10, 2020.

<table>
<thead>
<tr>
<th>WEEK 1</th>
<th>Mon June 24/19</th>
<th>Tue June 25/19</th>
<th>Wed June 26/19</th>
<th>Thurs June 27/19</th>
<th>Fri June 28/19</th>
</tr>
</thead>
<tbody>
<tr>
<td>8:30-10:10</td>
<td>Stream B Case 1 – Pt1</td>
<td>Stream D Case 1 – Pt1</td>
<td>Stream B Case 2 – Pt2</td>
<td>Stream D Case 2 – Pt2</td>
<td></td>
</tr>
<tr>
<td>10:20-12:00</td>
<td>Stream B Case 2 – Pt1</td>
<td>Stream D Case 2 – Pt1</td>
<td>Stream B Case 2 – Pt2</td>
<td>Stream D Case 2 – Pt2</td>
<td></td>
</tr>
<tr>
<td>12:00-12:30</td>
<td>Formative Feedback</td>
<td>Formative Feedback</td>
<td>Summative Evaluation</td>
<td>Summative Evaluation</td>
<td></td>
</tr>
</tbody>
</table>

Lunch

| 1:30-3:10 | Stream A Case 1 – Pt1 | Stream C Case 1 – Pt1 | Stream A Case 1 – Pt2 | Stream C Case 2 – Pt2 |
| 3:20-5:00 | Stream A Case 2 – Pt1 | Stream C Case 2 – Pt1 | Stream A Case 2 – Pt2 | Stream C Case 2 – Pt2 |
| 5:00-5:30 | Formative Feedback | Formative Feedback | Summative Evaluation | Summative Evaluation |

<table>
<thead>
<tr>
<th>WEEK 2</th>
<th>Mon Jan 6/20</th>
<th>Tues Jan 7/20</th>
<th>Wed Jan 8/20</th>
<th>Thurs Jan 9/20</th>
<th>Fri Jan 10/20</th>
</tr>
</thead>
<tbody>
<tr>
<td>8:30-10:10</td>
<td>Stream D Case 3 – Pt1</td>
<td>Stream B Case 3 – Pt1</td>
<td>Stream D Case 3 – Pt2</td>
<td>Stream B Case 3 – Pt2</td>
<td>AHS Orientation entire class 9:00-12:30</td>
</tr>
<tr>
<td>10:20-12:00</td>
<td>Stream D Case 4 – Pt1</td>
<td>Stream B Case 4 – Pt1</td>
<td>Stream D Case 4 – Pt2</td>
<td>Stream B Case 4 – Pt2</td>
<td></td>
</tr>
<tr>
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Lunch

| 1:30-3:10 | Stream A Case 3 – Pt1 | Stream C Case 3 – Pt1 | Stream A Case – Pt2 | Stream C Case – Pt2 |
| 3:20-5:00 | Stream A Case 4 – Pt1 | Stream C Case 4 – Pt1 | Stream A Case – Pt2 | Stream C Case 4 – Pt2 |
| 5:00-5:30 | Formative Feedback | Formative Feedback | Summative Evaluation | Summative Evaluation |

Students are divided into 4 streams A, B, C and D.

Morning sessions run from 8:30am-12:30pm & afternoon sessions run from 1:30pm-5:30pm

<table>
<thead>
<tr>
<th>Part 1 (June)</th>
<th>Part 2 (January)</th>
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</thead>
<tbody>
<tr>
<td>Stream A</td>
<td>Monday and Wednesday PM</td>
</tr>
<tr>
<td>Stream B</td>
<td>Tuesday and Thursday AM</td>
</tr>
<tr>
<td>Stream C</td>
<td>Tuesday and Thursday PM</td>
</tr>
<tr>
<td>Stream D</td>
<td>Wednesday and Friday AM</td>
</tr>
</tbody>
</table>
Each half day session schedule is as follows:
1. Case 1 clinical encounter 100 minute interval
2. A ten minute break
3. Case 2 clinical encounter 100 minute interval
4. 30 minute formative feedback of summative evaluation

Each case will have 2 components:
   a) Clinical encounter 1 (100 minutes in length)
   b) Clinical encounter 2 (100 minutes in length)

The clinical encounters should be divided roughly into four parts. This sequence may vary somewhat depending on your group’s particular learning needs and the nature of the case.

1. Initial interview (history-taking and physical examination)
2. Preliminary counseling (explanation of preliminary findings, lab tests, other diagnostic procedures, etc.)
3. Definitive counseling (discussion of findings, diagnosis, treatment alternatives, giving support, etc.)
4. Follow-up visit.

Clinical Encounter 1 - Initial interview
This will normally be carried out by a single student observed by the rest of the group. Other group members will usually be responsible for providing peer feedback. A more acute case may require 2 students or the whole group to be in the room with the SP, or for the initial interview and physical examination to be combined.

After the initial interview most groups like to have a brief discussion of the differential diagnosis before proceeding to a focused relevant clinical examination.

Clinical Encounter 1 - Physical examination
Some patients will simulate or have physical findings that fit the case, some will not. Your group should examine the standardized patient as appropriate for the case. You will not be expected to perform intimate examinations (breast examination, pelvic examination, rectal examination). Your preceptor must be in the same examination room as the student, thus most preceptors prefer the entire student group be present in the examination room. In the absence of specific physical findings (most of the standardized patients will have normal examinations) your group will be provided with the relevant examination findings by your preceptor. Following the physical examination you will need to consider the diagnosis and negotiate the next steps including investigations with the patient.

Clinical Encounter 2-Follow-up
The second encounter with each patient will occur 2 days later in real time, but in scripted time may represent a continuation of the same day or be weeks later, dependent upon the case.

Clinical encounter 2 will usually with the students receiving the results of the investigations/tests ordered from the preceptor. Then one student will see the standardized patient providing definitive counseling to the patient, such as discussion of investigation findings, diagnosis, treatment alternatives, giving support, etc. Your preceptor will also review evidence-based clinical reasoning skills and applications.
Attendance and Evaluation

Students are expected to be present and sign in at all small group sessions.

If you are absent for a session due to:

1. Excused absence from UME (e.g. presenting at a medical conference)
2. Acute illness/wellness issue
3. Unforeseen weather related issue
4. Other valid reasons

Your summative evaluation for Integrative will be listed as “Incomplete” and you will need to attend a makeup session with the Course Chair. Once a makeup session has been completed with the Course Chair with a satisfactory performance your final grade will be changed to Satisfactory for Integrative.

If the absent session for Integrative happens during the week of June 24-28, 2019, you may complete the makeup session either during your pre-clerkship elective or during IST in Course 5.

If the absent session happens during the week of January 6-10, 2020, you may complete the makeup session during your clerkship elective.

THE CASES AND ACTORS

The patient problems represent a reasonably complex set of medical problems that you and your group are expected to solve as a GENERALIST (as per UME mandate), from presenting complaint through to diagnosis and plan of management.

For the week of June 24-28, 2019:

Cliff/Clarissa Harrison: A 65-year-old presents to the Emergency Room with acute abdominal pain that woke him/her from sleep this morning.

Kevin/Kirsten Scott: A 38 year old with type 1 diabetes presents to the Foothills Family Medicine Teaching Clinic requesting refills of diabetic supplies and complaining about fatigue.

For the week of Jan 6-10, 2020:

Alexander Androvych: A 58 year old male presenting to Emergency Room with chest pain.

Jeffrey/Justine Taylor: A 28 year old man, involved as a pedestrian who was struck crossing the street by a vehicle travelling at 60 km/h, is assessed in the Emergency Room in rural Alberta.

RUNNING THE CLINICAL ENCOUNTERS

The Interview

Each patient problem begins with a presenting situation and complaint(s). Their medical history and presentation approximate a real case, and actors (SPs) have been trained in this role. Patients will provide you with their medical history, on request, and be the subject of the relevant physical examination. By taking the history, doing physical examination manoeuvres, and requesting lab tests, you are expected to arrive eventually at a diagnosis and plan of management. As with a real patient, you only get the information you have requested or sought.
You should also utilize the patients to refine your communication skills: i.e., how you ask questions; how you explain physical examination manoeuvres; why you are ordering the lab tests (the risks involved and the information benefits to be obtained); how you explain your plan of management; and what the prognosis entails. In fact, each case should challenge your counselling skills in clinically difficult scenarios.

You will be very familiar with this format after your time in the Communication Skills Longitudinal Course. A member of the group is assigned the “physician” role, asking the questions, etc. and another person assigned the task of “group recorder”. The recorder should ensure three active lists are maintained:

i. A problem list.

ii. A record of relevant data acquired.

iii. A list of learning issues or knowledge gaps uncovered.

One student at a time interacts with the patient. Remaining group members and preceptor observe, make notes, formulate hypotheses, identify and discuss errors and strengths of interview, etc. Interviewer may stop the interview to ask for assistance at any time. To reduce confusion for the patient, the interviewer can halt the interview by forming a T with the hand and saying “Time out”. Get the advice you seek.

**The Physical Examination**

*The patient will use the exam room for changing; please knock before entering.*

Do all appropriate physical examinations relevant to the patient case except invasive procedures (rectal, pelvic, breasts). The preceptor must be in the same room as the student for the physical examination.

Some patients will simulate or have physical findings that fit the case, some will not. Your preceptor will have a written description of the appropriate physical findings for the specific case. You should examine the standardized patient as appropriate for the case. In the absence of specific physical findings (most of the standardized patients will have normal examinations), your preceptor can then provide the group with the relevant examination findings from his/her manual.

Your group may also wish to take the opportunity to practice specific physical examination manoeuvres or to develop a strategy for a general examination.

**Investigations**

Laboratory investigations appropriate to the cases may be requested from the preceptor. Your preceptor also has diagnostic imaging results on Osler or their laptop. For some cases, the investigations available are quite extensive, but do not assume that you must request all of them. The case authors are asked to include any information that a student might request in working through the case.

To request investigations; please complete a laboratory requisition (available from the Medical Skills Centre). You will then be provided with results for the tests requested. These are also provided in your preceptor manual.
A Fee Schedule may be found in the Appendices of this core document.

Most radiologic investigations are available for viewing on Osler or your preceptor laptop. Once ordered, your preceptor will load the appropriate image on the computer for you to review. Radiologic interpretations for these images are also available in the same manner.

**The Feedback**

Give and get feedback on the interview from group members and preceptor. Groups may wish to also seek feedback from the patient at the end of the case or following each interaction if needed.

The student completing the patient interaction should reflect on his/her performance first then the preceptor and other group members should contribute.

Examples of questions to ask could be:

- “What was going on in your mind at that point?”
- “Why did you ask that question (make that comment, do that item of examination)’?”
- “What was the patient’s problem as you saw it just then?”
- “What hypotheses did you have in mind at this point?”
- “What physical examinations were you planning just then?”
- “What did you expect to find?”

Each standardized patient is willing to give feedback to you and the group on how well you performed if needed.

### Learning Objectives

The primary goals of the Integrative course are to provide you with the opportunity to combine your basic and medical knowledge with your clinical and communication skills to effectively assess and counsel patients with a variety of medical, psychological and social concerns.

By the end of the Integrative course, the students will demonstrate appropriate clinical skills that will enable them to:

1. **Interact effectively with patients to diagnose, treat and prevent illness.**
   - Obtain a clinical history from a wide variety of patients, and elicit clinical signs through the conduct of physical examination.
   - Plan and substantiate a program of investigations appropriate to the clinical problem presented by the patient, with due regard for patient comfort, safety and economic factors.
   - Discuss the significance and limitations of the findings of standard laboratory and radiological investigations.
   - Plan a course of treatment and discuss possible complications and costs both monetary and human.
   - Apply a logical and probabilistic approach to clinical problems, including application of schemes when relevant, and display a tolerance for ambiguous situations by coping with
uncertainty in the clinical context.

- Discuss the impact of illness upon families, and consider environmental/social/cultural factors in the prevention and treatment of illness.

- Apply an awareness that major changes in individual and community health are likely to depend as much or more on change in the behaviour of people as on the manipulation of the physical environment.

2. **Apply principles of evidence-based medicine to the solution of a clinical problem.**

- Locate biomedical information required for the understanding and management of medical problems through the use of available educational resources.

- Assess the veracity of conclusions based on reported data, including the interpretation of statistical treatment employed for the analysis of such data.

- Communicate the complexity of the medical literature to a patient in a way that is both understandable and applicable to the individual.

3. **Communicate effectively and in a professional manner with patients and their families.**

- Manifest those personal characteristics essential for the practice of excellent medicine including:
  - an awareness of one’s own assets, limitations and responsiveness;
  - responsibility, thoroughness, reliability and confidentiality;
  - Sensitivity to the needs of others and concern for other persons.

- Consistently display a deep regard for others, thereby showing that caring and comforting are held to be amongst the appropriate tasks for a medical practitioner.

- Approach all patients by reflecting an understanding that the person who is ill is more important than the illness from which they suffer.

- Demonstrate the impact of a good doctor/patient relationship on the provision of medical care.

- Show:
  - an enlightened involvement with patients, free from undue interference with communication created by the excessive use of psychological defence mechanisms, thus avoiding the demonstration of aloof and unfeeling detachment, undue aggression and other unhelpful behaviours;
  - a recognition of those patients who display dependency or hostility to an extent which affects patient management and patient cooperation, and interact
appropriately with them;

- an awareness of how one’s own personality affects interactions with patients and how anxieties and prejudices may alter patient attitudes and behaviour; and
- a capacity to accord with ethical principles which restrain practitioners from taking advantage of patients.

- Discuss ethical considerations for specific medical situations such as obtaining informed consent, advanced directives, confidentiality, etc.
- Interact with patients in such a way to increase the probability of accurate diagnosis, patient satisfaction and compliance, and the patient’s accurate recall of supplied information, and to decrease the anxiety associated with potentially life-threatening medical interventions.

4. **Evaluate one’s own performance, manage one’s own learning and contribute to the education of others.**

- Monitor one’s own progress in the acquisition of information and skills.
- Contribute to the learning activities of one’s peers.
- Use learning strategies that will support effective life-long learning.

5. **Apply principles of the practice of medicine in a community.**

- Evaluate health care needs of individuals, and evaluate the efficacy of health care delivery to them.
- Apply an understanding of the impact of illness upon families, and the importance of family factors in prevention, treatment and rehabilitation.
- Apply positive, consistent and informed behaviour towards promotion and maintenance of health, as well as the prevention of illness at both individual and population levels.
- Establish an effective cooperative relationship with other health/welfare professionals.

6. **Evaluate and manage one’s professional behaviour.**

- Appreciate the importance of self-care in oneself and ones colleagues.
- Recognize when a physician’s ability to self-heal should be supplemented.
- List resources available to the physician in need of assistance.
- Differentiate between healthy and non-healthy doctor-patient relationships with respect to the issues of power, intimacy and trust.
- Display the ability to deal with boundary issues in an effective professional manner.
- Construct an approach to address ethically challenging situations.

To assist you in achieving the objectives of this course, you have been assigned to small groups and to a preceptor who will be with you for the duration of the course. The preceptors are skilled in developing your problem-solving skills. **However, their role is to be a guide only, to bring you back on track if you get too far afield. They are not expected to be fountains of knowledge.** The responsibility for discovering new knowledge and understanding its credibility and applicability is yours!

### Evaluation and Course Requirements

<table>
<thead>
<tr>
<th>1. <strong>STUDENT EVALUATION BY PRECEPTOR</strong></th>
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<tbody>
<tr>
<td>There is no written exam for this course. Your preceptor will give you a verbal formative feedback during the end of the first clinical encounter and will submit a written summative evaluation of your clinical skills and group interaction at the end of the second clinical encounter. There will be a summative evaluation at the end of June 28, 2019 and a second summative evaluation at the end of Jan 10, 2020. Attendance at all sessions is required for a satisfactory evaluation in this course. <strong>The evaluation is considered certifying.</strong></td>
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<table>
<thead>
<tr>
<th>2. <strong>STUDENT REMEDIATION AND RE-EVALUATION POLICY</strong></th>
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<tbody>
<tr>
<td>A student who is deemed unsatisfactory in the Integrative Course will have to complete a further 2 week block of remediation and re-evaluation.</td>
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</tbody>
</table>

The student will be required to use one of their 2-week blocks of clerkship elective time to complete this work, and their conditional promotion to clerkship will be contingent upon successful completion of this Integrative Course remediation and re-evaluation. This remediation should be completed before the commencement of the mandatory clerkship rotation, and will usually completed during the first 2 weeks of clerkship electives; however this ultimately will be dependent upon the location and nature of the student’s electives, and the availability of preceptors. The student will be evaluated by two or more preceptors not involved in the initial assessment of the student during the integrative course, and not involved in prior remediation of the student. The student will inform the Course Chair immediately if there are other perceived reasons for preceptor bias against the student.

Over the 2 weeks, the student will work through cases similar in structure and content to those in the Integrative Course. The student will be provided with formative feedback at the midpoint of the 2 week remediation, and then receive the final summative evaluation from the preceptors in the final week.

The two weeks used in the remediation and re-evaluation process will be made up at the end of clerkship.

<table>
<thead>
<tr>
<th>3. <strong>STUDENT FEEDBACK SURVEY</strong></th>
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<tbody>
<tr>
<td>A “Student Feedback Survey” will be on OSLER. Feedback from the students is essential. This feedback is requested so that we can modify the course and the cases for upcoming years and to provide feedback to your preceptors regarding their teaching skills. <strong>Please make the time to fill in this survey.</strong></td>
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</table>
Grading
The University of Calgary Medical Doctor Program is a Pass/Fail program. The grading system that will appear on a student’s legal transcript is as follows:

<table>
<thead>
<tr>
<th>Grade</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>CR</td>
<td>Completed Requirements</td>
</tr>
<tr>
<td>RM</td>
<td>Remedial Work Required</td>
</tr>
<tr>
<td>F</td>
<td>Fail</td>
</tr>
<tr>
<td>I</td>
<td>Incomplete</td>
</tr>
<tr>
<td>W</td>
<td>Withdrawal</td>
</tr>
<tr>
<td>MT</td>
<td>Multi-Term (Used for Part A Courses that fall under 2 different terms in the calendar year.)</td>
</tr>
</tbody>
</table>

Timeliness
In general, dates listed in Core Documents are intended to act as guidelines for assisting students to complete their learning activities and assignments in a timely fashion. Students encountering difficulties completing assignments due to health or other serious factors must contact the Course Chair to arrange a deferral of term work. A Physician/Counsellor Statement to confirm an absence for health reasons may be required.

Professional Conduct
As members of the University community, students and staff are expected to demonstrate conduct that is consistent with the University of Calgary Calendar. The specific expectations cited in the Calendar include:

- respect for the dignity of all persons
- fair and equitable treatment of individuals in our diverse community
- personal integrity and trustworthiness
- respect for academic freedom, and
- respect for personal and University (or Host Institution) property.

Students and staff are expected to model behaviour in class that is consistent with our professional values and ethics. Students and staff are also expected to demonstrate professional behaviour in class that promotes and maintains a positive and productive learning environment. All students and staff are also expected to respect, appreciate, and encourage expression of diverse world views and perspectives. All members of the University community are expected to offer their fellow community members unconditional respect and constructive feedback. While critical thought, and debate, is valued in response to concepts and opinions shared in class, feedback must at all times be focused on the ideas or opinions shared and not on the person who has stated them.

Where a breach of an above mentioned expectation occurs in class, the incident should be reported immediately to the Associate Dean or his/her designate. As stated in the University Calendar, students who seriously breach these guidelines may be subject to a range of penalties ranging from receiving a failing grade in an assignment to expulsion from the University.

University of Calgary Medical School – Student Code of Conduct
http://www.ucalgary.ca/mdprogram/current-students/student-code-conduct
### One45 Overview

The MD Program utilizes the One45 Software Program for assessment purposes for all evaluations in Year 1, 2 and 3. Students are able to view completed evaluations online through this software program. Evaluations and assessment data is collected at regular intervals.

It is the student’s responsibility to distribute their evaluations to preceptors during any given course and to follow up with preceptors if evaluations have not been completed by the deadline given out by the Undergraduate Medical Education Office.

In addition to assessments and evaluations, One45 is also utilized to evaluate your preceptors and to gather information from students on their learning experiences.

All students are provided training at the beginning of their program in Year 1. This would include a personal log in access code and password.

One45 is used throughout your training in the MD Program (Undergrad) as well as Residency (PGME).

**Website Link to Access One45:** [https://calgary.one45.com/](https://calgary.one45.com/)

**Problems Accessing One45:** Please contact the Academic Technologies at osler@ucalgary.ca

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### Course Evaluation/Feedback

Student feedback will be sought at the end of each learning session as well as at the end of each course through the electronic UME evaluation tool.

At the end of each learning activity (ie. Lecture, small group, orientations, etc.), students will be asked to complete online evaluation forms to provide feedback to instructors regarding the effectiveness of their teaching and achievement of the learning objectives. An overall course evaluation will be completed following course completion.

Students are welcome to discuss the process and content of the course at any time with the Course Chairs or Preceptors.

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### UME Policies, Guidelines, Forms & TORs


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### Appeals


If the student appeals to the Student Evaluation Committee and disagrees with the decision, the student may further appeal to the Cumming School of Medicine Medical Student Appeals Committee (MSAC). ([http://ucalgary.ca/mdprogram/about-us/ume-policies-guidelines-forms-terms-reference](http://ucalgary.ca/mdprogram/about-us/ume-policies-guidelines-forms-terms-reference))
### Academic Accommodation

Students needing an accommodation because of a disability or medical condition should contact Student Accessibility Services in accordance with the Procedure for Accommodations for Students with Disabilities available at [https://www.ucalgary.ca/policies/files/policies/procedure-for-accommodations-for-students-with-disabilities_0.pdf](https://www.ucalgary.ca/policies/files/policies/procedure-for-accommodations-for-students-with-disabilities_0.pdf).

Student Accessibility Services, please contact their office at (403) 220-8237, address: MacEwan Student Centre room 452 or email: access@ucalgary.ca. Students who have not registered with the Student Accessibility Services are not eligible for formal academic accommodation.

### Accommodations on Protected Grounds Other Than Disability

Students who require an accommodation in relation to their coursework or to fulfil requirements for a graduate degree, based on a protected ground other than disability, should communicate this need, preferably in writing, to the appropriate Assistant or Associate Dean.

Students who require an accommodation unrelated to their coursework, based on a protected ground other than disability, should communicate this need, preferably in writing, to the Vice-Provost (Student Experience).

For additional information on support services and accommodations for students with disabilities, visit [www.ucalgary.ca/access/](http://www.ucalgary.ca/access/).

### Academic Integrity

The University of Calgary is committed to the highest standards of academic integrity and honesty. Students are expected to be familiar with these standards regarding academic honesty and to uphold the policies of the University in this respect.

It is expected that all work submitted in assignments should be the student’s own work, written expressly by the student for this particular course. Students are referred to the section on plagiarism in the University Calendar ([http://www.ucalgary.ca/pubs/calendar/current/k-5.html](http://www.ucalgary.ca/pubs/calendar/current/k-5.html)) and are reminded that plagiarism is an extremely serious academic offence.

### Student Misconduct

A single offence of cheating, plagiarism, or other academic misconduct, on term work, tests, or final examinations, etc., may lead to disciplinary probation or a student's suspension or expulsion from the faculty by the Dean, if it is determined that the offence warrants such action. A student is defined as any person registered at the University for credit or non-credit courses.

### Freedom of Information and Protection of Privacy

The Freedom of Information and Protection of Privacy (FOIP) Act indicates that assignments given by you to your course instructor will remain confidential unless otherwise stated before submission. The assignment cannot be returned to anyone else without your express permission. Similarly, any information about yourself that you share with your course instructor will not be given to anyone else without your permission.
Emergency Evacuations and Assembly Points

Assembly points for emergencies have been identified across campus. The primary assembly point for the Health Sciences Centre (HSC) building is HRIC - Atrium. For more information, see the University of Calgary’s Emergency Management website: [http://www.ucalgary.ca/emergencyplan/assemblypoints](http://www.ucalgary.ca/emergencyplan/assemblypoints)


In the case of an emergency during exam, immediately stop writing the examination and follow the direction of the invigilator and go to the nearest exit. Students should not gather personal belongings.

Internet and electronic device information and responsible use:

Students are welcome to use laptops and other electronic note-taking devices in this course unless otherwise stated. Please be considerate of others when using these devices.

Supports for student learning, success, and safety

Student Advising and Wellness (SAW): [http://www.ucalgary.ca/mdprogram/current-students/student-advising-wellness](http://www.ucalgary.ca/mdprogram/current-students/student-advising-wellness)
AMA Physician and Family Support Program: [https://www.albertadoctors.org/services/physicians/pfsp](https://www.albertadoctors.org/services/physicians/pfsp)
Student Union Wellness Centre: [https://www.ucalgary.ca/wellnesscentre/](https://www.ucalgary.ca/wellnesscentre/)
Safewalk: [http://www.ucalgary.ca/security/safewalk](http://www.ucalgary.ca/security/safewalk)
Campus security - call (403) 220-5333
Student Success Centre: [https://www.ucalgary.ca/ssc/](https://www.ucalgary.ca/ssc/)
Library Resources: [http://library.ucalgary.ca/](http://library.ucalgary.ca/)

Student Union ([https://www.su.ucalgary.ca/about/who-we-are/elected-officials/](https://www.su.ucalgary.ca/about/who-we-are/elected-officials/)) or Graduate Student’s Association ([https://gsa.ucalgary.ca/about-the-gsa/gsa-executive-board/](https://gsa.ucalgary.ca/about-the-gsa/gsa-executive-board/)) representative contact information
Student Ombudsman: [http://www.ucalgary.ca/ombuds/role](http://www.ucalgary.ca/ombuds/role)

Copyright

All students are required to read the University of Calgary policy on Acceptable Use of Material Protected by Copyright ([www.ucalgary.ca/policies/files/policies/acceptable-use-of-material-protected-by-copyright.pdf](http://www.ucalgary.ca/policies/files/policies/acceptable-use-of-material-protected-by-copyright.pdf)) and requirements of the copyright act ([https://laws-lois.justice.gc.ca/eng/acts/C-42/index.html](https://laws-lois.justice.gc.ca/eng/acts/C-42/index.html)) to ensure they are aware of the consequences of unauthorised sharing of course materials (including instructor notes, electronic versions of textbooks etc.). Students who use material protected by copyright in violation of this policy may be disciplined under the Non-Academic Misconduct Policy.

Wellness and mental health resources

The University of Calgary recognizes the pivotal role that student mental health plays in physical health, social connectedness and academic success, and aspires to create a caring and supportive campus community where individuals can freely talk about mental health and receive supports when needed. We encourage you to explore the excellent mental health resources available throughout the university community, such as counselling, self-help resources, peer support or skills-building available through the SU Wellness Centre (Room 370, MacEwan Student Centre, [https://www.ucalgary.ca/wellnesscentre/services/mental-health-services](https://www.ucalgary.ca/wellnesscentre/services/mental-health-services)) and the Campus Mental Health Strategy website ([http://www.ucalgary.ca/mentalhealth](http://www.ucalgary.ca/mentalhealth)).

Research ethics
If a student is interested in undertaking an assignment that will involve collecting information from members of the public, he or she should speak with the Assistant Dean, Research (UME) and consult the CHREB ethics website (https://ucalgary.ca/research/researchers/ethics-compliance/chreb) before beginning the assignment.