

# T.H. Chan School of Medicine: GUIDE TO THIRD YEAR

## *For Students, by Students*

**DISCLAIMER:** Information in this guide is compiled by students, with review by T.H. Chan School of Medicine Faculty, Clerkship Directors, and the Office of Student Affairs. This guide is provided to help you navigate third year, from helping you to choose how to rank your sites (location swapping phase during Student Affairs enrollment process—not guaranteed), to give you an idea of what to expect as a student on that service, and to give you a rough idea of your schedule, so that you may more easily plan evening and weekend activities.

**This guide is *not* meant to replace guidelines or information that you have received or will receive directly from the Clerkship Directors and Administrators.**

For example, specific hours, logistics of the service, structure of the service, and other information listed in here may change at any time before you begin your clerkship. As such, you should always check with your administrators and preceptors about clerkship requirements, policies and procedures.

Information regarding grading methodologies, grade distribution, etc. will be provided at the beginning of each clerkship by the Clerkship Directors.

In addition, the **Student Handbook has specific policies regarding grading, and academic advancement and promotion**, which supersedes related information shared by individuals either in this document, in other informal documents, or through word of mouth.

Visit <https://www.umassmed.edu/studentaffairs/studentresources/parking/> for parking information at sites.

Visit <https://www.umassmed.edu/studentaffairs/studentresources/on-call-center/> for information regarding ‘hoteling’ space and amenities for medical students and residents when scheduled for **overnight call** on University campus.

# ADVICE FROM STUDENTS: WHAT I WISH I HAD KNOWN BEFORE STARTING 3<sup>RD</sup> YEAR...

- ***Do NOT split hairs over scheduling!*** People still choose the field of the rotation they had their first block or their last block. Interests change constantly, and many students find that their actual experience on a rotation differs greatly from their prior impressions. With that being said, if you are strongly considering a specialty, it may be beneficial to try and do that rotation in the beginning/middle of third year to see if it is a good fit for you (grid swapping phase during Student Affairs enrollment process—not guaranteed).
- ***Be open to every experience!*** You may be certain that you will hate a certain specialty, and you may be right. But every experience has something to offer, and they are “core” rotations for a reason: this foundation will be important no matter what specialty you ultimately choose. Use this opportunity to engage in new experiences (possibly for the last time!) and to learn about the practice of medicine from different perspectives. For example, if you are interested in surgical specialties, try to seek out procedural experiences on every rotation (e.g., placing lines on Medicine, ECT on Psychiatry). As another example, if you are interested in non-surgical specialties, use your surgical rotations to learn about pre-operative/post-operative medical management, management of urgent/emergent conditions, etc.

***Do NOT feel the need to buy all required books, but please consider the recommendations of the clerkship directors and discuss your options with them, the CAA, your Peer Mentors, and your peers.*** Everyone is different; some students like books, some rely on Qbanks, others learn more from clinical experience. Share and borrow books – you and your friends will be on different rotations at different times. Many clinicians will use UpToDate, an excellent resource to quickly look up specific disease processes and structure management plans at the point of care. However, you may want to consider other resources that present clinical information in bulleted format (e.g., DynaMed, MedBullets for Step 2, AMBOSS). Avoid resource overload – again, consult with clerkship directors, the CAA, or your Peer Mentors if you are having trouble selecting an appropriate resource.

***Start UWorld early.*** UWorld is essential for succeeding on rotations and the shelf exams. Try to spread out the questions throughout the rotation. There are hundreds of questions per block, and leaving them to the last week of a block can be stressful.

- ***Be nice and professional to everyone.*** Embrace being the least experienced member on the team and use this opportunity to engage with and learn from other members of the care team. If you treat everyone with respect (patients, PCAs, nurses, social workers, physical therapists, etc.), you will find that doors open more easily for you. Treat others with respect and expect to be treated with respect. Be a part of and help cultivate a supportive learning environment!
- ***You are there to learn, and the best learning happens when you are truly engaged.*** Sometimes this means doing some of the “grunt work” associated with following a patient that doesn’t feel like medicine - finding new PCPs, making follow up appointments, requesting records. But this is still an important part of your future job, and it’s important to learn what goes into comprehensive patient care. As a bonus, relieving your team of some of this work will open up time for teaching later on!
- At the same time, ***don’t take yourself too seriously.*** It’s best when you are engaged and feel autonomous, but recognize that at the end of the day, the work associated with patient care needs to get done. Know your role.
- ***Rely on and support your classmates, both in terms of logistics and emotional support.*** Check in with students who had the rotation/site before you – they can give you the latest codes for the supply room, etc., and other tips to make your life a little easier. Further, you will be working with people in your class with whom you may not have spent much time before. Your classmates are an amazing

knowledge resource, and you are all on the same team! Your preceptors will notice when you are trying to undermine or outshine your peers. It's not a good look.

- ***Don't march to the beat of a negative drum.*** Just because someone didn't have a good experience doesn't necessarily mean you will also. Create your own experience!
- ***Know how to recognize report mistreatment, whether it happens to you or to someone else.*** Stress and fatigue can lead to inappropriate treatment or mistreatment. Even though it is not intentional in most cases, reporting is essential to increase awareness and promote a culture of continuous improvement. Know where to report this ("Report Mistreatment" button on [Student Affairs website](#)), and remember that there are multiple systems in place to preserve confidentiality of reports and prevent retaliation.
- ***Don't be afraid to ask for help.*** You are not expected to know everything nor are you expected to just magically know all the ins and outs of navigating third year! The residents and faculty are there to help you learn, and it is okay to ask them about things you don't know. Remember that you also have many resources through UMass (e.g., LC Mentors, Peer Mentors, CAA, SCS, SHS, OSA), regardless of where your rotation is. Always feel free to reach out to your peer mentors about concerns or questions! They are excellent resources with recent experience battling through what can be a challenging year. If they didn't experience something themselves, they certainly can point you in the direction of someone who can help answer your questions!
- ***Have FUN!*** This is a time for learning, meeting people from all walks of life, and getting acquainted with the complexity of the communities across the state. 3<sup>rd</sup> year is what it's all been building up to. Some days you won't feel like studying after a long day, and that is fine. Take care of you! It's ok to feel lost at times: this is normal, and things will get easier. Promise :)

# INTEGRATED UNITS

## THE EXPLORATION PHASE IS DIVIDED INTO 5 INTEGRATED UNITS:

- Pediatrics and OBGYN
- Psychiatry and Neurology
- Surgery
- Internal Medicine
- Family Medicine, Radiology and Pathways

During these 10-week integrated units you will spend time on inpatient services and ambulatory clinics. There may be shared cases, didactics and other experiences over the course of the integrated unit that span the content of both related specialties. Testing is done at the conclusion of each clerkship.

### Pediatrics and OBGYN Integrated Unit

- PEDIATRICS – 5 weeks
  - 4 weeks of inpatient pediatrics
  - 1 week of ambulatory pediatrics
  - Exams: OSCE, NBME at the end of the 5 weeks
- OBSTETRICS and GYNECOLOGY – 5 weeks
  - 4 weeks inpatient and 1 week ambulatory (or similar average time breakdown at community sites)
  - Exams: Oral exam, OSCE, and shelf at the end of the 5 weeks

### Surgery Integrated Unit

- SURGERY - 8 weeks
  - General Surgery – 4 weeks
  - Surgical Subspecialties – 4 weeks total, 2 weeks each of two different subspecialties
  - Ambulatory time is spent once per week in related clinic
  - Exams: Oral exam, OSCE, and shelf at the end of 8-week block
- FLEXIBLE PROFESSIONAL EXPERIENCES (2 weeks)
  - These are student-selective third year electives intended to expose the learner to experiences that you may not see on your core clerkships. You will have space for 3 FPEs during the course of the year but are only required to take 2. The third week may be used as a “What I Need” (WIN) week.

### Internal Medicine Integrated Unit

- INTERNAL MEDICINE – 9 weeks
  - University wards (UWards) – 4 weeks
  - Community medicine – 3 weeks
  - Ambulatory medicine 1 week
  - Post acute care 1 week
  - Exams: OSCE, NBME at the end of the 9 weeks
- FLEXIBLE PROFESSIONAL EXPERIENCES (1 week)
  - These are student-selective third year electives intended to expose the learner to experiences that you may not see on your core clerkships. You will have space for 3 FPEs during the course of the year but are only required to take 2. The third week may be used as a “What I Need” (WIN) week.

### Family Medicine, Radiology and Pathways Integrated Unit

- FAMILY MEDICINE – 5 weeks
  - 4 weeks of primary care
  - 1 selective week of family medicine consisting of 2 days of didactics and hands on skills, and 2 days of subspecialty care with student ranking their choices

- Exams: OSCE, NBME at the end of the 5 weeks
- RADIOLOGY CLERKSHIP
  - 1 week of radiology didactics and clinical training
  - Written exam at the end of the week
- PATHWAYS
  - 4 weeks devoted to Pathways projects

#### **Psychiatry Neurology Integrated Unit**

- PSYCHIATRY – 5 weeks
  - 4 weeks of inpatient or consultation-liaison psychiatry
  - 1 week of ambulatory psychiatry
  - Exams: OSCE, NBME at the end of the 5 weeks
- NEUROLOGY
  - Formative physical exam simulation (iCELs)
  - 4 weeks inpatient
  - 1 week ambulatory neurology
  - Exams: Internal Cases, OSCE, NBME at end of the 5 weeks

# PEDIATRICS

- **OVERVIEW**
  - **Experiences:** Time is divided between primary care, inpatient service, newborn nursery and emergency shifts.
  - **Didactics:** Daily education opportunities while on inpatient.
- **RECOMMENDED RESOURCES**
  - Aquifer Cases
  - Resources on Canvas
  - Lecture material from case-based sessions
  - Anki decks made from Aquifer cases (search on AnkiWeb)
  - UWorld
- **AVAILABLE INPATIENT SITES**
  - **UMass Memorial Medical Center - University Campus**
    - **Logistics:** 2-3 medical students/team with 2-3 residents (1-2 interns and one senior resident).
      - **Daily Schedule:** 615a-5p daily. Arrive to pre-round, usually do not see patients prior to rounds. Morning report 8-9, then rounds with attendings. Afternoon is spent following up on plans, calling consults, and doing admissions. Usually dismissed after 5p when no longer accepting new admissions.
      - **Call:** One weekend day (7a-5p) if not assigned to night float shift.
      - **Services:** Assigned to either yellow team (general pediatrics), blue team (pulmonary + general), or red team (hematology/oncology + general).
      - Students will do one week of nights, either twilight shift or night float shift.
      - **Twilight shift:** (4p-11p) Provide a great opportunity to do more admissions since they often take place later in the workday and into the evening. Help manage the patients on the floor.
      - **Night float shifts:** (11p-10a) Students work one on one with our inpatient night float team to care for the entire pediatric floor. There are a lot of admissions at night and this shift is structured to allow students to present admissions on morning rounds and participate in teaching related to their patient.
      - **Other:** Additional experiences include time in the ED, Newborn Nursery, Urgent Care clinic, selected subspecialties.
    - **Work Environment:** Work closely with residents and attendings. Everyone is very invested in teaching, and they are very accustomed to having students and involving them closely in patient care.
    - **Overall:** Students love this site, and it is great for both students interested in Pediatrics and those who are not. The days are long, there is plenty of work for students, and it is great for preparing you for the shelf exam.
    - **Outpatient:** Students are assigned to one week at a local site within the UMass driving guidelines.
  - **Baystate Medical Center**
    - **Logistics:** 1-2 students per team with 2-3 residents.
      - **Daily Schedule:** 6a-6p. Arrive to get sign out from the night team then pre-round with your residents. Present on rounds with the attending. Students write the actual admission/progress notes and are very involved with patient care. Students stay until 5p sign out to hand their patients over to the night team.
      - **Call:** 1 weekend day
      - **Services:** Teaching team (traditional attending/senior/intern structure) or Manager (2 residents, PGY 2 or 3), Grid (admitting resident). Mix of general pediatrics and subspecialty patients on each team.
      - **Nights:** 10a-10p, some 3p-10p with the Grid team

- Other: Additional experiences include time in the ED, Newborn Nursery, Urgent Care clinic, selected subspecialties, NICU, PICU.
- Work Environment: Work closely with residents and hospitalists. Residents and attendings enjoy teaching and involve students in decision-making about their patients. Students are very important members of the team with a lot of responsibility. Dorm-style housing provided to non-PURCH students.
- Overall: It is a great place to do pediatrics. Great learning and a lot of autonomy. Great for those interested in Pediatrics and those who are not!
- Outpatient: Students are assigned to one week at local site within driving distance of Baystate Medical Center.

# OBSTETRICS & GYNECOLOGY

## • OVERVIEW

- **Experiences:** This rotation involves a variety of experiences. Regardless of site assignment, everyone will spend some time on labor & delivery, gynecologic surgery and inpatient care, and outpatient obstetrics and gynecology. Some sites also have gynecologic subspecialty experiences, like urogynecology, gynecologic oncology, maternal fetal medicine, pelvic floor therapy, breast clinic, etc.
- **Didactics:** Typically, two days of didactics throughout the clerkship where all students return to Memorial for teaching, in addition to any other didactics for the department or residents at your site.
- **Logistics:** Parking at all sites is paid for by the clerkship except for Memorial; students pay for parking at Memorial.
- **Outpatient week of the clerkship:** This week will be primarily spent in Worcester and surrounding towns/cities regardless of inpatient assignments which are described below.
- **Tips:** Personal laptop or iPads are useful for studying and accessing EMR.

## • RECOMMENDED RESOURCES

- APGO website (videos, case scenarios)
- ACOG Practice Bulletins (Blackboard has relevant)
- APGO UWise Modules
- USMLE question banks
- Didactic lecture material
- OB/GYN Handbook (found in Blackboard)
- Blackboard (a lot of the resources listed here can be found on BBL)
- Flame Rocks OBGYN lectures website: <https://www.flame.rocks/obgyn-lecs.html>

## • AVAILABLE SITES

### ○ UMass Memorial Medical Center - Memorial Campus

- Roughly half of your time is spent on labor & delivery and the other half is spent on gynecologic surgical services.
  - 2 weeks L&D: Students typically work either day shift (7a-3p) or evening shift (3p-11p)
  - 1 week GYN surgery: Hours run roughly 7a-6p. Your time will be with the GYN team primarily in the OR.
  - 1 week GYN subspecialty services: You will spend 1 week approximately with gynecology oncology, urogynecology or reproductive infertility services ambulatory and/or inpatient care.
  - 1 week of ambulatory clinic: May be isolated 1 week of ambulatory clinics or integrated as continuity clinic amidst the other weeks.
- Work Environment: This is the primary site for the UMass OB/GYN residency and its fellowships. You are working very closely with residents but also spend time with attendings in the ambulatory setting, OR and during deliveries.
- Overall: This is an excellent site if you are interested in OB/GYN as it will likely expose you to a wide variety of pathology and acuity. Particularly regarding L&D, students at this site typically report a higher patient volume compared to other sites. It is also an excellent site for those not interested in OB, as there is a broad range of experience, excellent faculty, and a great emphasis on teaching, as it is the home of the residency. You will work hard here, and there are definitely lighter/more flexible hours at other sites. There is parking available at a discounted rate through the memorial campus parking office.

### ○ St Vincent Hospital

- Inpatient: Time scheduled with the OR, L&D, midwife and the nursery is distributed between 2 UMass medical students and 3 MCPHS PA students throughout their four-week rotation.
  - L&D & GYN Surgery: Scheduled on each service on different days of the week.
- Outpatient: Students go to the outpatient clinic of Urogyn and the generalists MD.

- **Work Environment:** Almost 100% of the time is spent with attendings. One UMass resident rotates on the GYN surgery service at a time during which you will work with them.

- **Milford Hospital**

- **Inpatient:** Students decide their schedules amongst themselves with time distributed between L&D, gyn surgery, and clinic, usually 1 student in each setting for 1 week at a time.
- **Outpatient:** There may be some ambulatory clinic sessions scheduled to fill the week.
- **Work Environment:** There are many private attendings available, so the students get exposure to different styles of patient-physician interaction. UMass faculty will be operating there or providing MFM consult services so you may work with some faculty. No overnight calls.
- Might not be the ideal choice if you are considering OB, as the patient volume and acuity can be lower. However, the experience is very flexible, and you can distribute your time how you like, so you can make this a great experience whether you are interested in OB or not. Very flexible hours, so lots of time for studying.

- **Cape Cod Hospital**

- **Inpatient:** Hours 7a-5p with a handful of nights of home call.
  - **L&D:** Opportunity to be first assist on C-sections and vaginal deliveries.
  - **GYN Surgery:** There are no subspecialists at the hospital but because of the community setting, the attendings perform a variety of procedures themselves including minimally invasive and urogynecologic surgeries. They also operate with a gyn oncologist twice a month.
- **Outpatient:** May be included depending on inpatient schedule. Typically 8:30a-4:30p.
- **Work Environment:** No residents, only attendings. Excellent teaching with many patient opportunities and ability to participate in surgery and vaginal deliveries. Housing provided across the street from the hospital. The schedule is flexible to allow for the best learning opportunities.
- **Overall:** Students feel they get a lot of hands-on experience and excellent teaching.

- **Baystate Medical Center**

- **Inpatient:** 3 different experiences divided amongst the 4 weeks
  - **L&D:** 1 week days, 1 week nights. Hours 7a-7p, 6p-8a.
  - **GYN Surgery:** Hours 6a-7p
  - **GYN Onc:** Hours 6a-7p
- **Outpatient:** 1 week mixed clinic (general OB/GYN, urogynecology, GYN Onc). Hours 8a-5p.
- **Work Environment:** Primarily work with residents and midwives on inpatient. Typically only student on team, though PA students also rotate here. Clinics with attendings or residents. Weekly didactics. Dorm-style housing provided to non-PURCH students.
- This site also houses the Baystate OB/GYN residency program so it has a similar feel to Memorial. Overall, students had an excellent experience at this site. This is a busy site comparable to Memorial, with similar patient volume and diversity of pathology and acuity. There is significant emphasis on teaching, and both residents and attendings are highly engaged in providing educational experiences, with many opportunities for students to be involved in deliveries, surgeries, and clinic visits. Students may also spend time in WETU (Women's Evaluation and Treatment Unit), a unit in the hospital that sees emergent OB/GYN cases.

- **Lahey Clinic**

- **The rotation is split into two sites:**
  - **OB -Beverly Hospital:** At Beverly, students will either be on L&D or in a variety of clinics - MFM US, Lynn Women's Health, Essex County OB GYN
  - **GYN – Lahey Hospital:** At Lahey, students will rotate thru the OR and the clinics at either Burlington or Peabody campuses.
- **Outpatient:** Ambulatory sessions will be sprinkled throughout the rotation.

# GENERAL SURGERY

## • OVERVIEW

- **Experiences:** Typically, part of a primary inpatient surgery team. Lots of time spent in OR, doing consults, and pre- and post-op surgical care on the floor. Limited outpatient clinic time.
- **Tips:**
  - Students are often intimidated by this rotation, especially those who are “certain” they will not like surgery. The hours can be long, but for the most part, the attendings and residents are very nice regardless of the site. Most students (including those with no interest in surgery) tend to have positive experiences and learn a lot. Keep an open mind!
  - The key to success in the OR, especially in the first few days, is being helpful without being disruptive or “in the way”. For example, when you figure out what size gloves you wear, ask the nurse if they would like you to get the gloves for them. Most importantly, DO NOT touch the blue sterile table and maintain sterile technique when you are scrubbed in, with your hands above your waist (you can cross your hands or fingers if you like to rest your arms). Be mindful of your surroundings and look before taking any steps backwards. For example, if in a room for a robotic-assisted surgery, the arms of the robot are also sterile and can easily be backed into if you are not careful. Also, if you are on the taller side, be mindful of your head hitting the handles of the lights, as those are also sterile.
  - If you do break the sterile field (Everyone does at some point!), it is ALWAYS better to mention it to the team as they can help navigate the next steps. Sometimes it is as simple as having to wear an extra sleeve, or change a light cover.
  - Get comfortable shoes, keep snacks in your pockets, and make sure to eat breakfast! Use the bathroom and take breaks whenever you get them.
  - The key to success on rounds (beyond just being prepared and knowing your patients) is to be prepared with wound care supplies and be willing to help. Once you get a good sense of what is needed within the first day or so, keep your white coat well-stocked!
  - Read up on your cases before you go to the OR! Understand what is being done so that your time there is well spent. Review the specific anatomy before the case.

## • RECOMMENDED RESOURCES

- Surgical Recall - excellent for prepping for cases, maybe a must have for the rotation. This is a small book and one worth keeping in your pocket during the rotation. It highlights all of the standard questions your attending may ask you during a case.
- De Virgilio Surgery – A Case Based Clinical Review
- Peter Lawrence Textbooks – Essentials of General Surgery and Surgical Specialties
- Dr. Pestana’s Surgery Notes – great for shelf and OSCE studying, fits in your pocket
- Pestana’s Audio – covers similar topics as the book, good if you are spending a lot of time in the car
- Aquifer WISE-MD
- OnlineMedEd videos
- QBank

## • AVAILABLE SITES

### ○ UMass Memorial Medical Center - University Campus

- **Logistics:** You are assigned to one of two teams: Acute Care Surgery (ACS) or the Haidak team. 2-4 medical students/team with 3-5 residents.
  - **Daily schedule:** 5a-6p, with a variable end time (sometimes considerably earlier and later). You will arrive at 5a to help with pre-rounding (gathering labs and vitals), round with your team, and be in the OR for the first cases, which start at 730a. You will spend most of the day in cases and may help your interns with floor work in between. You will go to the OR most days but may not always be scrubbed in depending on how many students and cases there are.
  - **Call:** You are expected to do two 12-hour calls over the 4 weeks of Gen Surg or a single 24-hour call (if the site has call rooms).

- **Services:**
  - ACS: Urgent and emergent surgeries, including appendectomies, cholecystectomies, small bowel resections, exploratory laparotomies, etc. You will get good practice doing consults and learning bread and butter surgical indications.
  - Haidak: Scheduled, often elective surgeries, so you get broader subspecialty exposure as well as some of the bread-and-butter cases.
- **Work Environment:** Work mostly with residents, limited face time with attendings. Attendings will rarely fill out evaluations. Wide variation in interest in teaching among residents and attendings, but there will usually be some teaching done on rounds and in the OR, time permitting.
- **Overall:** Highly recommended for both those interested in surgery and those who are not. At University, your hours are very full of interesting things, and you are on a busy team where you can be very helpful!
- **UMass Memorial Medical Center - Memorial Campus**
  - **Logistics:** You are assigned to one of 3 teams: Minimally Invasive Surgery (MIS), Colorectal, and Surgical Oncology (Surg/Onc). 2-4 medical students/team with 3-5 residents.
    - **Daily Schedule:** 5:30a-5p, end time can vary between 3-8p. Arrive at 5:30a to help with pre-rounding (gathering labs and vitals), round with your team, and be in the OR for the first cases which start at 730a. You will spend most of the day in cases and may help your interns with floor work in between. You will go to the OR most days but may not always be scrubbed in depending on how many students and cases there are.
    - **Call:** You are expected to do two 12-hour calls over the 4 weeks of Gen Surg or a single 24-hour call (if the site has call rooms).
    - **Services:**
      - MIS: Predominantly laparoscopic surgery with occasional opportunities to participate in open surgery. Focus on some bread-and-butter cases like cholecystectomies, appendectomies, and hernia repair. Another large focus is bariatric surgery. Lots of opportunities to work with the DaVinci robot, which is very cool, especially when you get to watch some surgeries through the 3D additional console.
      - Colorectal
      - Surg Onc
  - **Work Environment:** Work closely with residents. The patient load is slightly lighter here than when they are at University, so there is often more time for teaching. Attendings are more involved than at other sites. Good exposure to bread-and-butter cases.
  - **Overall:** Recommended for students interested in surgery as well as students not interested in surgery. Hours can be slightly better than University but usually very comparable.
- **St. Vincent Hospital**
  - **Logistics:** Work with surgery residents from UMass, St. Elizabeth Medical Center, and Beth Israel Deaconess Medical Center, Ross medical students and MCPHS PA students. Despite the large number of students, there is plenty of patient volume. Parking is expensive but partially reimbursed by the school. You can also buy a pass at the Mezcal parking garage down the street.
    - **Daily Schedule:** 4-5a to 6p. Help with pre-rounding and then spend most of the day in the OR.
    - **Call:** Typically expected to work two 12-hour calls over the 4 weeks of Gen Surg or a single 24-hour call (if the site has call rooms).
    - **Services:** This is a community site, so the services are combined and include general surgery, vascular surgery, orthopedic surgery, etc. You decide amongst the students and residents who will go to each case.

- Work Environment: Work with residents, Caribbean medical students, and PA students. Limited time with attendings. Residents are generally happy because this is their community month, so they have a lighter patient load than they typically do. Good teaching from both residents and attendings.
- Overall: Recommended as a good site for learning.

- **Cape Cod Hospital**

- Logistics: 5-6 UMass students and several other medical students or PA students from Saba (Caribbean medical school). Students decide amongst themselves how to cover surgical schedule and patient load, prioritizing certain attendings' cases depending on number of students. Very nice housing provided across the street from the hospital, highly desirable during summer and early fall months. Also great in the winter because you don't have to shovel your car (just walk across the street).
  - Daily Schedule: Typically, around 5a-5p. Round with and present patients to residents, then spend the rest of the day in the OR. Weekly lectures with clerkship site director, Dr. Brooks. These sessions are very interactive and help prepare you for shelf exam.
  - Call: Two 12-hour calls over the 4 weeks of Gen Surg or a single 24-hour call (if the site has call rooms).
  - Services: Community hospital with no divided services. Students decide amongst themselves which surgeries they are interested in. Typically, more bread and butter cases, as anything more complex will go to Boston.
- Work Environment: Work mostly with BU surgery residents on rounds and on the floor and a variety of attendings in the OR. Most attending interaction is with the course director.
- Overall: Considered to have excellent OR time and good patient volume, although volume is significantly lower in the winter months. Lower acuity cases and more bread and butter. Might be better for someone not seriously interested in surgery but is very flexible and thus can be a great experience. Greatest perk is the students divide the cases amongst themselves, so you can choose what is interesting to you!

- **Berkshire Medical Center**

- Logistics: 2 UMass students, 1 BU student, 1 UNE student. Housing in their private apartments near the hospital. Parking at Berkshire Medical Center is free. Variety of clinics and surgeries.
  - Daily Schedule: 530a-5p, end time can vary between 3-8p. Arrive at 530a to help with pre-rounding, round with your team, attend morning report, and be in the OR for the first cases which start at 730a. You will spend most of the day in cases and may help your interns with floor work in between. You will go to the OR and clinics most days depending on how many students and cases there are.
  - Call: Two 12-hour calls over the 4 weeks of Gen Surg or a single 24-hour call (if the site has call rooms).
  - Services: The services are combined and include general surgery, vascular, thoracic, surgical oncology, orthopedic surgery, neurosurgery, etc. The day before, you decide amongst the students and residents who will go to each case. You are also required to do clinic time at this site; however, this is student-initiated, so you are able to select your sub-specialty and preceptor.
- Work Environment: Work with residents and attendings. There will be teaching done on rounds and in the OR.
- Overall: Highly recommended for both those interested in surgery and those who are not. At BMC, your hours are very full with interesting things, and you are on a busy team where you can be very helpful! There is also a lot of flexibility so you can participate in multiple different surgeries during your time at BMC – this means that even while on general surgery, you have the opportunity to participate in subspecialty cases (such as ortho, plastics, etc.) because there aren't other students on subspecialty rotations in those ORs.

- **Milford Regional Medical Center**
  - Logistics: 2 UMass students.
    - Daily schedule: 6a-6p, with a variable end time (sometimes considerably earlier and later). You will arrive at 6a to help with pre-rounding (gathering labs and vitals), round with your team, and be in the OR for the first cases which start at 730a. You will spend most of the day in cases and may help your interns with floor work in between. You will go to the OR most days but may not always be scrubbed in depending on how many cases there are.
    - Call: Two 12-hour calls over the 4 weeks of Gen Surg or a single 24-hour call (if the site has call rooms).
  - Work Environment: Work with residents and attendings. There will be teaching done on rounds and in the OR.
  - Overall: Highly recommended for both those interested in surgery and those who are not. At Milford, your hours are very full of interesting things, and you are on a busy team where you can be very helpful!
- **Baystate Medical Center**
  - Logistics: PURCH Students from UMass.
    - Daily schedule: 5a-6p, with a variable end time (sometimes considerably earlier and later). You will arrive at 5a to help with pre-rounding (gathering labs and vitals), round with your team, and be in the OR for the first cases which start at 730a. You will spend most of the day in cases and may help your interns with floor work in between. You will go to the OR most days but may not always be scrubbed in depending on how many cases there are.
    - Call: Two 12-hour calls over the 4 weeks of Gen Surg or a single 24-hour call (if the site has call rooms).
  - Work Environment: Work with residents and attendings. There will be teaching done on rounds and in the OR. Dorm-style housing provided to non-PURCH students.
  - Overall: Highly recommended for both those interested in surgery and those who are not. At Baystate, your hours are very full of interesting things, and you are on a busy team where you can be very helpful!
- **Lahey Clinic**
  - Logistics: The preceptor/student ratio is approximately 4:1. Students rotate through General Surgery, Colorectal Surgery, Vascular Surgery, and Hepatobiliary Surgery.
    - Daily Schedule: Assignment will follow Orientation (Lahey will email you with exact time and place), students will report to the department. Before the rotation begins, students will be notified by email where and when to report.
    - Call: Two 12-hour calls over the 4 weeks of Gen Surg or a single 24-hour call (if the site has call rooms).
  - Work Environment: A broad and well-balanced exposure to surgical disease and treatment in a collegial atmosphere where motivated medical students will feel welcome.

# INTERNAL MEDICINE

## • OVERVIEW

- **Experiences:** 7 weeks of inpatient medicine divided into one 4-week block at University and one 3-week block at a community site (except PURCH and LEAD students, who spend all weeks at Regional Campus). Can work as part of a resident team and take care of a wide variety of sick adults. 1 week of ambulatory medicine and one week of post-acute care experience.
- The week-long post-acute care experience is typically a lighter, less demanding week. This is a good week to book any of your own doctor's appointments, car work, or other life requirements that you will struggle to find the time to complete at other times in this rotation.
- **Didactics:** 2 days of didactics with entire cohort, plus 2 hours each week in small group with LCL (Longitudinal Content Leaders) and 1 hour each week on Physical Diagnosis rounds with your assigned attending..

## • RECOMMENDED RESOURCES

- [UWorld](#) Qbank
- Step Up to Medicine
- OnlineMedEd videos
- Aquifer cases (link on Canvas) – DO THESE EARLY in the rotation, as these are so helpful for understanding the pathophysiology you will see and will walk you through the typical assessment and plan for bread-and-butter cases. Doing these cases early will set you up for great presentations and strong notes.

## • UMASS UNIVERSITY WARDS (UWARDS)

- **Logistics:** All non-PURCH students spend 4 weeks on UWards; this can be either at the University hospital or at the Pavilion campus. 1-3 medical students/team with 3 residents (typically 2 interns and one senior resident), unless assigned to an uncovered team.
  - **Daily Schedule:** 630a-5:30p. End time is variable 5p-8p – cannot accept new admissions after 5p at University and 3 pm at Pavilion, but if you get a late admission, you may be there until much later one day a week. Typically arrive to pre-round on patients, then round with residents and attendings. Afternoon is spent calling consults, following up on labs/studies, and doing new admissions. You are expected to attend morning report and noon conference every day. At University, morning report is at 7:30. However, if you are assigned to the Pavilion, this takes place at 11 am followed by noon conference.
  - **Call:** Typically, 1 full weekend day (7a-5p) once during the 4 weeks.
  - **Services:** Students spend either 2 or 4 weeks on general medicine services and have the option of 2 weeks on a subspecialty team (Cardiology, Heart Failure, Heme/Onc, GI/Liver, Pulm/Renal).
- **Work Environment:** Work most closely with residents but plenty of face time with attendings. Great teaching on rounds, though can be limited by patient load. Lots of great teaching – morning report every morning and noon conference in the afternoon, occasional extra lectures by attendings in the afternoon. You also have Physical Diagnosis rounds with an attending 1 day/week and LCL small group each week.
- Hours are long and demanding. Plan to do more of your studying during your community month but map out some time during your University rotation for reading and studying, or you will likely fall behind!
- General Tip: Be sure to ask your senior resident for helpful smart/dot phrases to help you with your progress notes, H&Ps, necessary discharge paperwork. Talk to your peer mentors as well about potentially helpful dot phrases!

## • COMMUNITY SITES

- **UMass Memorial Medical Center – Memorial Campus**
  - **Logistics:** 1-2 medical students/team with 1 resident and 1 intern
    - **Daily Schedule:** 7a-5p. End time is variable 5p-7p – cannot accept new admissions after 5p, but if you get a late admission, you may be there until much later. Typically arrive to pre-round on patients, then round with

residents and attendings. Afternoon is spent calling consults, following up on labs/studies, and doing new admissions. Here, morning report is typically held at 11 am, followed by noon conference.

- Call: Typically, 1 full weekend day (7a-5p) once during the 3 weeks.
- Services: All students are on general medicine teams.
- Work Environment: Work most closely with residents but plenty of face time with attendings. Excellent teaching and lower patient load than University. Daily morning report and noon conference, which are more interactive for students because there are fewer residents. Also have Physical Diagnosis rounds with an attending 1 day/week and weekly LCL sessions.
- Overall: Highly recommended as a community site with a wide variety of pathology and acuity, but lower patient load than University.

- **Baystate Medical Center**: Baystate Medical Center, located in Springfield, Massachusetts, is a 716-bed independent academic medical center and a teaching site of the UMass Chan Medical School. As the region's only Level 1 Trauma Center, it provides critical care services to a diverse patient population. The hospital includes Baystate Children's Hospital, the Wesson Women and Infants' Unit, and a comprehensive Heart and Vascular Center. Annually, Baystate Health manages over 1.8 million outpatient visits, more than 180,000 emergency visits, and performs over 37,000 surgeries. Its commitment to education is evident through the training of around 800 medical students, residents, and fellows each year, preparing future healthcare professionals to meet patients' needs for years to come. Baystate Medical Center stands out as an exceptional teaching hospital, offering medical students a dynamic and supportive environment to grow and excel.

Course Specifics:

- Logistics: 1-2 medical students/team with 1 resident and 2 intern
  - Daily Schedule: 7a-5p. End time is variable 5p-7p. Typically arrive to pre-round on patients, then round with residents and attendings. Afternoon is spent calling consults, following up on labs/studies, and doing new admissions on designated admission day for team.
  - Call: Typically, 1 full weekend day (7a-5p) once during the 3 weeks.
  - Services: Students may rotate on general medicine, cardiology, and geriatric inpatient units.
- Work Environment: Work most closely with residents but plenty of face time with attendings. Excellent teaching and same patient load than University. Also have Physical Diagnosis rounds 1 day/week. Weekly LCL sessions virtually with Worcester based LCL. Students may participate in educational sessions Tuesdays which include case based learning and simulations.

- **St. Vincent Hospital**
  - Logistics: 1 medical student/team with 2-3 residents.
    - Daily Schedule: 7a-4p. Typically arrive to pre-round on patients, then round with residents and attendings. Afternoon is spent calling consults, following up on labs/studies, and doing new admissions.
    - Call: Typically, 1 full weekend day (7a-5p) once during the 3 weeks.
    - Services: All students are on general medicine teams.
  - Work Environment: Work most closely with residents, interaction with attendings mostly during rounds. Most residents are International Medical Grads (IMGs), so they may have different expectations, both knowledge and workwise. More relaxed/laid back than Memorial, not as laid back as Milford. Daily noon conference, morning report 3x/week, ECG/clinical reasoning session 1x/week, professor rounds 1x/week.
  - Overall: Well-regarded as a community site, somewhat laid back but with good teaching.
- **Milford Hospital**
  - Logistics: 1-2 medical students/team with 2 residents.
    - Daily Schedule: 7a-5p, may end earlier if there are no admissions. **30-40 min commute from UMass**.

- Call: 1 full weekend day (7a-5p) once during the 3 weeks.
  - Services: All students are on general medicine teams.
- Work Environment: Work most closely with residents. Walk rounds/sit down rounds every other day with attendings. Excellent teaching and lower patient load than University. Daily morning report and noon conference, which are more interactive for students because there are fewer residents. Physical Diagnosis rounds with an attending 1 day/week. Smaller hospital allows for more interaction with consultants and ability to observe procedures if self-motivated. Given lower workload than University, this rotation is a time to consider completing required assignments such as the Geriatric Exercise. There is a great, affordable cafeteria for lunch, and also a student lounge with a mini fridge if you bring lunch.
- Overall: Highly recommended as a community site with a wide variety of pathology and acuity but lower patient load than University. Bread and butter medicine cases along with new diagnostic dilemmas with in-depth work ups.

- **Berkshire Medical Center**

- Logistics: 1 medical student/team with 2-3 residents.
    - Daily Schedule: 7a-5p, long call until 7p once a week. Typically arrive to pre-round on patients, then round with residents and attendings. Afternoon is spent calling consults, following up on labs/studies, and admitting new patients.
    - Call: Typically, 1 full weekend day (7a-5p) once during the 3 weeks.
    - Services: All students are on general medicine teams – although several teams also have some subspecialty emphasis.
  - Work Environment: Work most closely with residents but plenty of face time with attendings. Excellent teaching and lower patient load than University. Daily morning report and noon conference, which are more interactive for students because there are fewer residents. Also have Physical Diagnosis rounds with an attending 1 day/week. Condominium style housing provided.
  - Overall: Highly recommended as a community site with a wide variety of pathology and acuity but lower patient load than University.

- **Falmouth Hospital**

- Logistics: 1-2 medical student/team, NO RESIDENTS.
    - Daily Schedule: 7a-5p. Cannot accept new admissions after 4p. Typically arrive to pre-round on patients, then round with attending physicians and multidisciplinary team. Afternoon is spent reviewing charts, following up on labs/studies, and doing new admissions.
    - Call: Typically, 1 full weekend day (7a-5p) once during the 3 weeks.
    - Services: All students are on general medicine teams.
  - Work Environment: Excellent teaching opportunity exposing students to various attending physicians and some subspecialists, their individual styles and experience. A well-run community hospital with great quality indicators and high efficiency.

- **Charlton Memorial Hospital**

- Logistics: 1-2 medical students/team, NO RESIDENTS. Infrequently may share learning activities with NP or PA students.
    - Daily Schedule: 7a-5p or can also choose to work 8a-6p which aligns with attending schedule.
    - Call: 1 full weekend day (7a-5p) once during the 3 weeks.
    - Services: All students are on general medicine teams.
  - Work Environment: Excellent teaching opportunity exposing students to various attending physicians and some subspecialists, their individual styles and experience. A well-run community hospital with great quality indicators and high efficiency. Students work directly with attending who carries their own case load so self-directed learning is important. Charlton is known for cardiac care and so opportunities to see advanced cardiac care. Very few students so more opportunities to see and participate in specialty services, procedures, etc.

- **St. Luke's Hospital**

- **Logistics**: 1-2 medical students/team, NO RESIDENTS
  - **Daily Schedule**: 7a-5p
  - **Call**: 1 full weekend day (7a-5p) once during the 3 weeks.
  - **Services**: All students are on general medicine teams.
- **Work Environment**: Excellent teaching opportunity exposing students to various attending physicians and some subspecialists, their individual styles and experience.

- **AMBULATORY MEDICINE**
  - **Logistics**: Work with one preceptor as the only medical student. Wide variety of sites available.
    - **Daily Schedule**: 8:30a-5p (varies by site). No call or weekends.

# FAMILY MEDICINE

- **OVERVIEW**
  - **Experiences:** The Family Medicine Clerkship is a five-week outpatient clerkship. Most sites provide a full spectrum of patients including pediatric and adult patients as well as prenatal care. You will participate in evaluating patients and medical documentation. In addition, you will have 2 days of experience in other FM specialties including maternal child health, sports medicine, geriatrics, hospitalist, palliative care, etc.
  - **Logistics:** All sites are Monday afternoon - Friday approximately 8a-6p with some variations. No weekend or late call, although participation in the hospitalist or FMOB selective may include nights and/or weekend shifts.
  - **Didactics:** During your first four weeks of Family Medicine, Mondays will serve as a core curriculum day on campus where you will participate in an AM small group session to discuss and care for the virtual McQ/Bradley family. You will also have skill sessions in motivational interviewing, evidence-based medicine, procedures and sports medicine sessions spread through the clerkship.
- **RECOMMENDED RESOURCES**
  - Orientation and EBM ILMs and slide sets on Canvas
  - For NBME exam:
    - UWorld Question Bank
    - AAFP Board Review Questions
    - AnKing deck from Reddit  
([https://www.reddit.com/r/medicalschoolanki/comments/swjqzh/anking\\_overhaul\\_step\\_1step\\_2\\_version\\_11\\_update/](https://www.reddit.com/r/medicalschoolanki/comments/swjqzh/anking_overhaul_step_1step_2_version_11_update/))
- **AVAILABLE SITES – WHILE ASSIGNED SITES IN THE LOTTERY ARE LISTED AS UMASS-WORCESTER, THESE ARE THE AREAS OF AVAILABILITY:**
  - Worcester North – includes 2 residency sites – Barre Family Health Center and Fitchburg Family Practice
    - Other sites with usually 1-4 attendings are located in: Fitchburg, Holden, Lancaster, Leominster, Worcester, etc.
  - Worcester South – includes 2 residency sites- Hahnemann Family Health Center and Family Health Center of Worcester (a federally qualified health center)
    - University Family Medicine (the site of student health) includes about 10 different physicians to work with
    - Other sites with usually 1-4 attendings are located in: East Douglas, Marlborough, Northbridge, Northborough, etc.
  - Middlesex – includes 1 residency site (Greater Lawrence FHC) with Spanish speaking skills requirement and a private practice in North Chelmsford and Salem
  - Pioneer Valley – mostly reserved for PURCH students, but there is some limited availability in Amherst at University Health Services at UMass Amherst
  - Southeast – includes the Cape (Dennis, Mashpee & Wareham), North Dighton, Scituate
- PLEASE NOTE THE CLERKSHIP FILLS OUR 13 RESIDENCY AND UNIVERSITY FAMILY MEDICINE SPOTS FIRST IN WORCESTER, BARRE, AND FITCHBURG. OUR PRIVATE SITE PLACEMENTS ARE BASED ON PRECEPTOR AVAILABILITY.

# RADIOLOGY

## • OVERVIEW

- **Experiences:** The radiology clerkship aims to provide learners a foundation in radiology for subsequent clinical experiences. This one-week clerkship consists of didactics with large group discussions, independent review of radiology cases on PACS, group discussion of cases, and observation sessions in the reading rooms as well as in the CT and MRI suites.
- **Tips:**
  - Learners will be asked to present a case where imaging or image-guided procedure played an important role in the diagnosis, management, and/or treatment of the patient. Start looking for a case as soon as possible in clinical experiences leading up to the radiology clerkship.
  - Introduce yourselves to the radiology residents, fellows, and attendings during the observation sessions in the reading rooms. Likewise, introduce yourselves to the technologists and nurses during the CT and MRI observation sessions. Observing radiology staff fill out the student performance evaluation forms.
  - The orientation ILM includes maps of the radiology department, including locations of key reading rooms.
  - Students who are interested in radiology are encouraged to pursue additional radiology electives after the radiology clerkship.

## • RECOMMENDED RESOURCES

- "Learning Radiology" by William Herring
- Additional useful online resources: [www.radiopaedia.org](http://www.radiopaedia.org), [www.radiologyassistant.nl](http://www.radiologyassistant.nl)
- UMass Radiology Clerkship website: <https://sites.google.com/view/umass-radiology-clerkship-webs/home>

## • AVAILABLE SITES

### ○ UMass Memorial Medical Center - University Campus

- Logistics:
  - Daily Schedule: The day starts at 8a and ends at 5p. On the first day, please report to the Radiology Imaging Lab, which is the homebase of the clerkship. Learners will be provided individualized schedules prior to the start of the clerkship.
  - Call: No call.
  - Services: N/A
- Work Environment:
  - During the observation sessions in the reading room, learners will be asked to sit with either the radiology residents and fellows. When the radiology residents and fellows read out cases with the attendings, be sure to also observe these read out sessions, during which teaching commonly occurs.
  - During the case review sessions, be sure to review all the assigned radiology cases, and not just the radiology cases for which you write reports.
- Overall: The University Campus is the only site for the radiology clerkship for non-PURCH and non-Lahey medical students.

# PSYCHIATRY

- **OVERVIEW**
  - **Experiences:** Majority of time is spent in an acute-care setting (either inpatient psychiatry unit, consultation-liaison service, or combination thereof). Throughout the 5 weeks, students will be assigned to ambulatory experiences which may consist of didactic/educational activities, traditional outpatient clinics, partial hospital settings, emergency mental health or mobile crisis shifts, or observation of neuromodulation (including ECT and TMS). Ambulatory time will be either completed at your assigned site or in the Worcester area. No other call.
  - **Didactics:** Occur on orientation days and periodically throughout the rotation. Combination of larger group and smaller group settings. Additional independent learning modules to augment clinical experiences.
- **RECOMMENDED RESOURCES**
  - First Aid for the Psychiatry Clerkship
  - DSM-V (available through the Lamar Soutter Library)
  - QBank
- **AVAILABLE ACUTE-CARE BLOCK SITES**
  - **UMass Memorial Medical Center - University Campus: 8 East**
    - **Logistics:** 1-2 students/block. Student assigned to 1 primary attending. Residents variably involved.
      - **Daily Schedule:** 8a-5p, possibly ending earlier. See new and old patients in the morning. Students shadow and participate. More "work" done here than at other sites – PDIs, notes, etc.
    - **Work Environment:** Work closely with attendings and other members of interprofessional team. Wide variety of pathology, including acute psychosis, acute mania, depression etc. Significant medical co-morbidity.
    - **Overall:** Highly recommended. Reasonable hours and very interesting experiences. Students are generally assigned to 1 attending for the entire duration of the clerkship, making this an excellent opportunity for a letter of recommendation. Psychiatry residents have didactics on Thursdays, allowing the student more independence and the opportunity to function closer to intern-level if desired.
  - **UMass Memorial Medical Center - University Campus: Consult/Liaison**
    - **Logistics:** 3-4 students/block with residents and 1 attending.
      - **Daily Schedule:** 9a-5 or 6p. Pre-round, then round on patients with the team, then do consults in the afternoon.
    - **Work Environment:** Work closely with residents and attendings. Pathology includes more depression, addiction, suicidal ideation rather than acute psychosis, mania, etc.
    - **Overall:** This site provides a robust experience in the assessment of patients for psychiatric conditions. This site may be more appealing to someone going into medical or surgical specialties, as you are differentiating between psychiatric and medical issues. You may need to do some extra self-directed studying as you will not be exposed to some of the classic psychiatric diagnoses as you would at other sites.
  - **Berkshire Medical Center**
    - **Logistics:** 2-3 students/block. Time may be split between inpatient, consult service, and other settings (i.e., partial hospitalization setting)
      - **Daily Schedule:** 8a-5p.
    - **Work Environment:** Work closely with both residents and attendings. Attend resident didactics. Wide variety of diagnoses seen.
    - **Overall:** A very robust experience and one of the few sites where you get breadth of exposure to different clinical settings and patient populations (i.e., both adult and child and adolescent psychiatry). Highly recommended for someone interested in Psychiatry.

- **Cape Cod Hospital**
  - Logistics: 2 students/block. Time may be split between inpatient, consult service, emergency department, and possibly additional outpatient programming.
    - Daily Schedule: 8a-5p.
  - Work Environment: Work closely with attendings. Wide variety of diagnoses seen.
  - Overall, a very robust experience and one of the few sites where you get breadth of exposure to different clinical settings (i.e., inpatient, partial hospital, ED and consult service). Highly recommended for someone interested in Psychiatry.
- **Taunton State Hospital**
  - Logistics: 1 student/block.
  - Work Environment: Adult inpatient Unit. A student works with a UMASS attending. Less practice/patient interaction. A good deal of self-directed learning. Zoom for Psychiatry Clerkship didactic days. You can see more and do more if you initiate, including exposure to forensic psychiatry. Since there is less patient interaction, there is tons of time for teaching by the attendings.
- **Dr. J. Corrigan Mental Health Center**
  - Logistics: 1-2 students/block.
  - Work Environment: Work closely with attendings and some HSS residents. Zoom for Psychiatry Clerkship didactic days.
  - Overall: A very robust experience and one of the few sites where you get exposure to the continuum of psychiatric care including inpatient and outpatient settings. You will see a variety of patients with acute and chronic mental illness. Highly recommended for those interested in Psychiatry.
- **Worcester Recovery Center Hospital (WRCH), Adult Unit**
  - Logistics: 1 student/block.
    - Daily Schedule: 8a-4p. More limited patient interaction, as patients are long-term and only need to be seen once per week. Fewer new admissions.
  - Work Environment: Less practice/patient interaction. No residents. A good deal of self-directed learning. You can see more and do more if you initiate, including exposure to forensic psychiatry. Since there is less patient interaction, there is tons of time for teaching by the attendings.
- **Marlborough Hospital**
  - Logistics: 1-2 students/block
  - Work Environment: Work with attending +/- resident. Care for adults presenting with acute mental health and/or substance use conditions. Partial Hospital Program affiliated with this site. Strong emphasis on teaching.
- **Lahey Hospital**
  - Logistics: 2 students/block
  - Work Environment: Students are assigned to 2 weeks on the consultation-liaison service at the Burlington campus and 2 weeks at an affiliate psychiatric facility (BayRidge Hospital, Beverly Hospital, or Lawrence Crisis Stabilization Unit). Some affiliate sites afford unique learning experiences (BayRidge has a large population of substance use/dual diagnosis and psychosis patients and Beverly Hospital has ECT).
  - Other Notes: Housing is provided to students by the school for Worcester-based (ie, non-LEAD) students.
- **Baystate Medical Center**
  - Logistics: PURCH students + occasionally 1-2 Worcester students/block.
    - Daily Schedule: 8a-5p for inpatient Adult Psychiatric Treatment Unit (APTU). 8a-4p for Child Partial Hospitalization Program (CPHP), 8a-4p for consult service.
  - Work Environment:
    - In APTU, work closely with residents, attendings, and social workers. You also have the opportunity to shadow group occupational therapy sessions.

- In CPHP, work closely with residents and attendings. You will also be placed to observe the therapeutic milieu group setting for adolescent and pediatric patients; these sessions are led by counselors.

# NEUROLOGY

- **THEMATIC SECTIONS**
  - Brain, Mind, and Behavior
  - Neurology – 5 weeks
    - 4 weeks inpatient and 1 week outpatient experience in one block
    - Exams: OSCE, Case write-up, NBME, MHE questions
- **OVERVIEW**
  - **Experiences:** 4-week inpatient block and 1-week outpatient experience (some sites may offer a mixed 5-week experience)
  - **Didactics:** 3 full didactic days, plus 4 student-led morning reports
  - **Tips:** Practice the neurologic exam and know it well
- **RECOMMENDED RESOURCES**
  - Adams and Victor's principles of neurology
  - Blueprints neurology
  - Bradley's neurology in clinical practice
  - Case files neurology
  - Qbank
- **AVAILABLE SITES**
  - **UMass Memorial Medical Center**
    - Inpatient - University
      - **Logistics:** 2-3 medical students per team that comprises an attending, 2-3 residents, and other rotators.
        - **Daily Schedule:** Varies by service but usually 7a to 4-5p. The stroke team usually has longer hours. You will round with attendings and residents.
        - **Call:** None (please note that one rotation is an evening float rotation which is independent and not combined with the other services).
        - **Services:** Stroke team (fast-paced stroke management, encompassing acute intervention to secondary prevention), wards team (dedicated neurology service, usually managing individuals with neuroimmunology, neuromuscular, and epilepsy complications), consult team (neurology consult service, including emergency department and other department consultations such as ICU), and evening float (unlike the others, this starts at 4p and ends at 9-10p – you will with the evening float resident, seeing new patients; you will not staff the patients with the attending but with the resident). Neuro ICU service is offered intermittently and by request – requests may not be possible (1 week as a student in the neurological intensive care unit).
      - **Work Environment:** You will work closely with residents and attendings. You are expected to evaluate new patients, follow patients through their hospital stay, and write initial and progress notes – with supervision and guidance.
      - **Overall:** Fast-paced and busy site; highly recommended for those interested in a neurology career.
    - Inpatient - Pavilion
      - **Logistics:** 1-2 medical students per team that comprises an attending.
        - **Daily Schedule:** From 7a to noon time, you will be part of the acute stroke team (evaluating new code strokes). In the afternoon, you will head to the Pavilion and see the neurology consults with the

attending. You will be expected to see and present some of the Pavilion patients. You finish by 4-5p.

- Call: None
- Services: As noted, in the AM, you will be part of the stroke team at University. In the PM, you will be at the Pavilion assessing and following neurology consults.

- Inpatient – Memorial

- Logistics: 1 medical student per team that comprises an attending and a resident.
  - Daily Schedule: Start at 7a and finish at 4-5p. The attending joins the service in the afternoon. In the morning, you will see new consults and follow up on older consults with the resident (the resident will triage). You will then staff those consults with the attending in the afternoon.
  - Call: None
  - Services: Consult service at Memorial Hospital, evaluating patients admitted to all services. Urgent ED consults are staffed by a separate service (teleneurology), not the Memorial service.

- Outpatient – ACC, Belmont Street, NW cutoff, and Hahnemann

- Logistics: Working directly with attendings and sometimes with fellows and residents during the 1-week outpatient experience.
  - Daily Schedule: Usually 8a to 5p. Sometimes, you start at 9a, depending on didactics and/or clinic schedule.
  - Call: None.
  - Services: You will get a varied outpatient experience, including ambulatory clinics of different specialties and procedure clinics such as electromyography, electroencephalography, and botulinum toxin injection. The specialties include general neurology, neuroimmunology/multiple sclerosis, epilepsy, neuromuscular, movement disorders, neurorehabilitation, neurovascular/stroke, headache, neuro-oncology, and behavioral neurology.

- **St Vincent Hospital**

- Inpatient

- Logistics: You will rotate on the neurology consult service at St. Vincent's Hospital. Two students will form the team with the attending on-service.
  - Daily Schedule: Usually 8a to 4-5p.
  - Call: None.
  - Services: You will rotate on the consult service covering the emergency room and other inpatient consultations.
- Working Environment: Working directly with the attending, you will have a great opportunity to practice neurological examination and discuss the cases.
- Overall: You will get excellent exposure to many neurological manifestations. This site has lower acuity than UMass Memorial.

- Outpatient

- Logistics: You will be working directly with attendings. The outpatient sites include Community Neuroscience Services (CNS) and Reliant Medical Group. You will not have personal access to the medical records during these outpatient rotations, but the attending will provide information about the cases.
  - Daily schedule: 8a to 4-5p. Sometimes, you start at 9a, depending on didactics and/or clinic schedule.
  - Call: None.
  - Services: You will be exposed to a variety of services. In comparison to the UMass Memorial experience, you will get more

exposure to sleep and behavioral neurology patients. Reliant Medical Center follows a rapid-paced private practice model. CNS usually provides more time per patient visit.

- **Milford Hospital**

- Inpatient

- Logistics: You will rotate on the neurology consult service
  - Hospital: One student will form the team with the attending on-service.
  - Daily Schedule: Usually 8a to 4-5p.
  - Call: None.
  - Services: You will rotate on the consult service covering the emergency room and other inpatient consultations.
- Working Environment: Working directly with the attending, you will have a great opportunity to practice neurological examination and discuss the cases.
- Overall: You will get excellent exposure to many neurological manifestations. This site has lower acuity than UMass Memorial.

- Outpatient

- Logistics: You will be working directly with attendings. One student per rotation.
  - Daily schedule: 8a to 4-5p. Sometimes, you start at 9a, depending on didactics and/or clinic schedule.
  - Call: None.
  - Services: You will be exposed to various services with an exposure to a more typical outpatient neurology practice than seen at the University campus.

- **Lahey Clinic**

- Inpatient

- Logistics: You will rotate on the neurology consult, general, and stroke services. One student joins each of these teams, comprising an attending, a resident (from Tufts), and an APP.
  - Daily Schedule: Usually 7:30a to 4-5p.
  - Call: None.
  - Services: General (neurology admission service, focusing on epilepsy and autoimmune diseases), Consult (consultation services), and Stroke (management of patients with stroke symptoms, including acute stroke care).
- Working Environment: You will work in a team of attending and Tufts neurology residents.
- Overall: A busy site with varied exposure. The residents will be Tufts affiliated rather than UMass.

- Outpatient

- Logistics: You will work directly with attendings in most clinics.
  - Daily schedule: 8a to 4-5p. Sometimes, you start at 9a, depending on didactics and/or clinic schedule.
  - Call: None.
  - Services: You will be exposed to various services and neurological specialties. Exposure to hospital-affiliated practice model.

- **Baystate**

- Inpatient

- Logistics: You will rotate on the neurology consult service. 4-5 students (mixed University and PUCRH) will form the team, with the attending on-service and residents rotating from emergency medicine or medicine.
  - Daily Schedule: Usually 8a to 3-4p.

- Call: None.
- Services: You will rotate on the consult service covering the emergency room and other inpatient consultations. There are generally 3-6 patients on the service, in addition to the stroke service, which NPs/PAs also staff.
- Working Environment: Working directly with the attending, you will have a great opportunity to practice neurological examination and discuss the cases.
- Overall: You will get a good exposure to many neurological manifestations. This site has lower acuity than UMass Memorial.
- Outpatient
  - Logistics: You will be working directly with attendings. 2-3 (mixed University and PURCH) students per rotation.
  - Daily schedule: 8a to 4-5p. Sometimes, you start at 9a, depending on didactics and/or clinic schedule.
  - Call: None.

# OVERALL COMPARISON OF CLERKSHIP SITES

Pediatrics Clerkship	Housing Provided	Parking Provided	Meals Provided	Overnight Call	Weekends
University				night shifts (11p-10a)	1 weekend day (if not doing NF)
Baystate	Yes (except PURCH)	Yes		1 late weeknight (10p)	1 weekend day

OB/GYN	Housing Provided	Parking Provided	Meals Provided	Overnight Call	Weekends
Memorial				None, 3-11 pm shift is late shift for L&D	Variable
St. Vincent				4 overnight calls	1 L&D
Milford		Yes		4 overnight calls	1 L&D
Cape Cod	Yes	Yes		4 overnight calls	1 L&D
Baystate	Yes (except PURCH)	Yes		1 week of nights	1 L&D
Lahey	Yes (except LEAD)	Yes			

Surgery Clerkship	Housing Provided	Parking Provided	Meals Provided	Overnight Call	Weekends
University				Two – 12 hour calls or a single 24 hour call (if site has call room)	1 weekend day, 1 weekend overnight
Memorial				Two – 12 hour calls or a single 24 hour call (if site has call room)	1 weekend day/wk
St. Vincent				Two – 12 hour calls or a single 24 hour call (if site has call room)	1 weekend day/wk
Cape Cod	Yes	Yes		Two – 12 hour calls or a single 24 hour call (if site has call room)	
Berkshire	Yes	Yes		Two – 12 hour calls or a single 24 hour call (if site has call room)	
Baystate	Yes (except PURCH)	Yes		Two – 12 hour calls or a single 24 hour call (if site has call room)	
Lahey	Yes (except LEAD)	Yes		Two – 12 hour calls or a single 24 hour call (if site has call room)	TBD: Fri & Sat - overnight Sun - day call

Medicine Clerkship	Housing Provided	Parking Provided	Meals Provided	Overnight Call	Weekends
University					1 full weekend day during block
Memorial					1 full weekend day during block
Baystate	Yes (except PURCH)	Yes			1 full weekend day during block
St. Vincent					1 full weekend day during block
Milford		Yes			1 full weekend day during block
Berkshire	Yes	Yes			1 full weekend day during block
Falmouth	Yes	Yes	Discounts		1 full weekend day during block
Charlton	Yes	Yes			1 full weekend day during block
St. Luke's	Yes				1 full weekend day during block
Lahey	Yes	Yes			1 full weekend day during block

Family Medicine Clerkship	Housing Provided	Parking Provided	Meals Provided	Overnight Call	Weekends
Worcester North		Yes			
Worcester South		Yes			
Middlesex		Yes			
Pioneer Valley	X*	Yes			
Southeast	Yes (at Cape)	Yes			

\*Pioneer Valley – housing provided for sites > 60 miles from UMass Chan Campus.

Radiology Clerkship	Housing Provided	Parking Provided	Meals Provided	Overnight Call	Weekends
University					

Psychiatry Clerkship	Housing Provided	Parking Provided	Meals Provided	Overnight Call	Weekends
University 8 East					
University C/L					
WRCH – Adult		Yes			
Berkshire	Yes	Yes			
Cape Cod Hospital	Yes	Yes			
Taunton State Hospital	Yes	Yes			
Dr. J. Corrigan Mental Health Center	Yes	Yes			
Marlborough Hospital		Yes			
Lahey	Yes (except LEAD)	Yes			
Baystate	Yes (except PURCH)	Yes			

Neurology Clerkship	Housing Provided	Parking Provided	Meals Provided	Overnight Call	Weekends
University					
St. Vincent					
Milford		Yes			
Lahey	Yes (except LEAD)	Yes			
Baystate	Yes (except PURCH)	Yes			

# **FLEXIBLE PROFESSIONAL EXPERIENCES**

## **What is the FPE Course?**

This is a *required* student-driven course, which complements the core clinical experiences. Students choose from a diverse offering of pre-designed electives or design their own week-long experience(s).

The flexible *professional* experiences are specifically designed to

- allow for career exploration and or development, and planning for senior study
- allow exposure to evolving and cutting-edge branches of medicine provide an opportunity to work with recognized experts in different fields of medicine and allied sciences
- provide exposure to novel concepts or systems of care not normally available within the core clinical experience
- allow for student designed innovative experiences within the guidelines for this elective

## **When are the FPE weeks scheduled?**

Students' FE weeks are assigned according to their Explorations block assignments, specifically aligned with the family medicine ambulatory care blocks. The FE schedule is only as "flexible" as the student's Integrated Unit (block) schedule can be; that is, if a student changes/swaps their clerkship rotations, the FE term(s) "travels" with the rotation.

## **What qualifies as an FPE?**

Broadly, any topic related to medicine qualifies for the FCE. The various possibilities include:

- introduction to a medical specialty not offered as a core clinical experience
- activity designed to help with career planning
- development of skills pertinent to the practice of medicine outside of the core clinical experiences, e.g., Allied health professionals, complementary and alternate medicine and community health service projects related to the medical field
- international experiences related to healthcare
- physician as a patient and community advocate teaching related to medicine and public health
- humanities as it pertains to medicine hospital administration; medical leadership
- activities enhancing clinical skills
- remediation of mandatory core clinical experiences (only with special approval)
- *note:* Research does *not* qualify as an FPE activity

## **Can I design my own experience?**

Absolutely! Navigate to the online *Student Proposal Form* on the [FPE Course website](#) to submit your proposed experience. The proposal must contain information to support the criteria listed below and must be submitted at least one month *in advance* of the planned week.

- The experience should be related to an aspect of medicine, healthcare, medical education, community service, or healthcare administration, as it applies to the individual or the community.
- The experience must have *at least one clearly stated objective*.
- The experience must be *supervised by a qualified sponsor*.
- The experience *cannot be used to continue with a core clinical experience* or contribute to the student's evaluation of the core clinical experience - i.e., the faculty evaluating a student for the CCE should be different from the FCE sponsor.
- One FPE *requires a total of 45 hour time commitment* by the student in the one-week period (combined face-to-face and 'homework/study/reading' activities)

## **How and when do I pick my FPEs?**

Flexible Professional Experiences descriptions and availability can be viewed via [the FPE Online Catalog](#). FPEs are scheduled by the student via the PeopleSoft (PSCS) Portal self-enrollment process. PSCS will

offer you only those pre-designed experiences that are available during the times that you are available. The enrollment period opens on January 1; changes can be made per the [Add/Drop schedule](#) found on the FPE course website.

Student/self-designed experience [proposals may be submitted](#) *ad hoc* to be approved by the FPE leadership team.

**Where do I find the answers to other questions I may have?**

We maintain a [comprehensive course website](#) that we hope has all the information you need to successfully complete the course. You may also email the FPE Course Team with any questions and or concerns via [FPE@umassmed.edu](mailto:FPE@umassmed.edu).

# A QUICK NOTE ABOUT WBA'S AND SPE'S:

**Work-Based Assessments (WBAs)** are feedback forms completed by an attending or resident that **do not** count toward your clerkship grade. They provide formative feedback on specific clinical skills and are usually required twice per rotation. For example, in OB/GYN you submit one WBA at the end of ambulatory week and another at the end of inpatient week, each tied to a designated skill that they will specify (e.g. "procedural skills" or "motivational interviewing"). WBAs are typically sent to a preceptor who directly observed you performing the skill, and they are scored on a 0–3.5 scale with space for comments and feedback. These are helpful for refining skills without the pressure of this being a graded evaluation. This can be useful mid-week for example to identify areas you can continue to improve on before asking for a formal, graded evaluation (SPE).

**Standardized Performance Evaluations (SPEs)** are official evaluations from attendings or residents that **do** count toward your overall clerkship grade that are also scored on a 0–3.5 scale. The required number of SPEs for each rotation is shared at the start of the clerkship. Typically, you will select evaluators who worked with you for at least three days and observed you perform multiple clinical skills. SPEs are one of four graded components in a clerkship, with most rotations requiring >95% overall average to achieve High Honors in that specific category.

**Sending SPEs and WBAs:** Both are submitted through OASIS by selecting your rotation and assigning a provider to evaluate you, just as you may have done for Hospital Sessions in the past. Detailed step-by-step instructions will be shared at the start of your clerkships. If you encounter issues, such as site-specific limitations (e.g., no residents at your location) or missing provider names, contact your specific clerkship administrators for assistance.