

Clinical Rotation Scheduling Guidelines

Core rotations are scheduled in accordance with the following guidelines:

1. Students entering into the clinical portion of the curriculum are required to have an 8-week block scheduled in January, unless the student is remediating an exam.
2. Other than vacations and holidays as outlined on the academic calendar, the only guaranteed time off during clinical rotations is protected time for USMLE Step 1 studying (January and February of the MS3 year).
3. All core rotations must be taken in the first 12 months of the clinical year in the sequence outlined on the assigned option, unless the student is remediating an exam or off cycle due to a leave of absence / dual degree.
4. Students pursuing dual degrees or Medical Research Pathway (MRP) are not guaranteed a rotation sequence and are not required to complete certain rotations prior to leaving the School of Medicine.
 - a. Dual degree and MRP students are required to complete all attempted coursework on the academic record prior to leaving to pursue the dual degree or MRP OR have a plan for remediation established with the Office of Student Affairs (e.g.: There cannot be a Fail, Deferred or Incomplete grade.)
5. Family and Community Medicine must be taken in the first 18 months of the clinical years; this is a state law.
6. Students are encouraged to utilize the 4-week elective block for clinical rotations (e.g. selectives or electives) to allow for more flexibility to complete other requirements later in the curriculum.
7. Surgical Subspecialties (Group A Selectives) must be taken prior to graduation. Group A Selective options are outlined on the [graduation requirements](#).
 - a. Once prompted by the Office of the Registrar, students who are interested in taking Group A Selectives during an open period within the first year of their clinical rotations (e.g. 4-week elective block) can express their interest via an online survey.
8. The mandatory Emergency Medicine rotation must be taken prior to graduation.
 - a. The prerequisite for Emergency Medicine is successful completion of both Medicine and Surgery core clerkships.
9. One Sub-Internship is required and the prerequisite is successful completion of the corresponding core. If the grade is deferred or incomplete in the core associated with the Sub-Internship, the student will not be able to proceed to the Sub-Internship. See [course descriptions](#) for options for the Sub-Internship.
10. The Sub-Internship must be successfully completed before March of the 4th year.
11. MS4s are prohibited from taking rotations past month 4A ([see scheduling grid](#)).

Elective/Intersession Rotations are scheduled in accordance with the following guidelines:

1. Following the Surgery clerkship is a two-week mandatory educational experience (Service Learning / Narrative Medicine / Wellness experience, directed by Student Affairs).
2. Following the Pediatrics and OBGYN clerkships, there will be a 2-week 'intersession' block. It is recommended that students schedule a clinical elective during these blocks.

3. Be advised, NBME exams for the 6-week clerkships (Surgery, Pediatrics and OBGYN) will occur during the following 2-week block / intersession so students should stay in residence.
 - a. If a student chooses not to schedule an elective during the intersession, please note that NBME exams will *not* be deferred or rescheduled.

Guidelines on Rescheduling Mandatory Clinical Courses:

1. Once the clinical schedule is set, any core or required rotations can NOT be changed except for extenuating circumstances. Extenuating circumstances are unexpected occurrences and include but are not limited to circumstances such as illness or death in one's immediate family or specialty specific requirements. Should a student believe he/she meets one of these criteria; he/she must submit an online scheduling petition request to the Scheduling Petition Committee. The link to the petition form is:
<https://www.surveymonkey.com/r/schedchangerequestform>
2. Students are prohibited from contacting clinical course directors to request enrollment changes. Individual course directors cannot negotiate and approve clerkship schedule changes.
3. Students will remain in the originally scheduled course until they have received a confirmation of the approved change from the Scheduling Petition Committee or the Office of the Registrar.
 - a. Students pursuing dual degrees or research will receive a full schedule during scheduling and future rotations will be removed after the official notice of leave is received from the Office of Student Affairs.

Guidelines for Rescheduling Electives:

1. All add/drop requests must adhere to the [add/drop guidelines](#) posted in the student handbook.
2. Any change requests outside of the add/drop guidelines will be considered only if extenuating circumstances exist. Extenuating circumstances are unexpected occurrences and include but are not limited to circumstances such as illness or a family emergency or specialty specific requirements.

Guidelines on Remediating Mandatory Clinical Courses:

The following guidelines have been developed to assist students in the event it becomes necessary to reschedule rotations in order to remediate due to a deficient grade or leave of absence:

1. Students must seek counsel from the Office of Student Affairs to ensure the remediation plan is viable.
2. Once the plan is determined, the Office of the Registrar will determine if availability exists in the course to accommodate the remediation.
3. Remediation may not be attempted at any time that a student is scheduled for another course. Students cannot enroll for two courses simultaneously (e.g.: remediate a clerkship during a scheduled elective course).
4. Depending on the duration, students who take a leave of absence will re-enter the curriculum based on course availability and will likely have a new rotation schedule. In addition, depending on the length of the leave of absence, students may re-enter with different graduation requirements.