STATEMENT 3.2.28 – STATEMENT ON TRACKING CLINICAL ENCOUNTERS
Undergraduate Medical Education

Approved by: Clerkship & Electives Committee
Date of original approval: August, 2013
Date of last review: August, 2014
Date of next scheduled review: Annually

I. PURPOSE

During Clerkship, students are required to experience specific encounters, obtain specific skills and track them in a log.

II. DEFINITIONS:

CEC Clerkship & Electives Committee

III. STATEMENT

1. Throughout clerkship, the clinical clerk will be working to complete two sets of clinical requirements:
   i. Rotation-Specific Learning Objectives are provided for each clinical rotation. These are outlined in detail in OWL under “MEDICINE 5475 001 – Clerkship Rotations” and are also available from the rotation directors.
   ii. Required Clinical Encounters may be met at any time during the clerkship year. Many encounters can be satisfied in numerous rotations. Completion of clerkship entails the completion of all the required clinical encounters. The “Minimum Required Clinical Encounters” and the possible rotations in which they can be satisfied are posted on the Year 3 webpage.

2. The following outlines the procedure in place for tracking the Required Clinical Encounters:
   a. After the clerk has completed an encounter he/she will log the encounter in the Yellow Book. Logging includes:
      i. The patient’s age
      ii. Rotation the encounter occurred
      iii. Date seen
      iv. Supervisor’s name (signature not required)
   b. The log book will be reviewed by the Rotation Director, or delegate, at the mid-rotation feedback session and at the exit interview at the end of the rotation.
   c. The Rotation Director, or delegate, will sign off on the encounters achieved during that time period in the appropriate section on the last page of the Yellow Book.
   d. If there are any concerns with the validity of the logging, the Rotation Director, or delegate, may choose to review the log book with faculty in order to authenticate the data.
   e. The clerk will be responsible for logging their encounters via One45 on a weekly basis.
   f. Random audits of the Yellow Books may be carried out at the discretion of the Chair, CEC to ensure validity of the tracking procedure.
requirement will be required to do so during the first electives block of Year 4 which will delay the start of electives.

4. Why Track?
In addition to ensuring that all clerks received a varied, rich experience,

- The accrediting bodies require the medical school to centrally track the students’ clinical encounters on a regular basis. This is accomplished by the use of the Procedure Log in One45. Reports for each student are generated by the UME office and sent to the Rotation Directors every six weeks.

- The accrediting bodies also require the medical school to verify the students’ clinical encounters. Unfortunately this is not currently possible with the online system. For this purpose, we have developed the yellow tracking booklet. **NOTE: Tracking books will be handed in to the UME office during the last week of clerkship (before August 21, 2015).**

5. An information session on Tracking Clinical Encounters will be held for the clerks during the Introduction to Clerkship Week in September.

Access the Procedures Log by accessing your One45 profile, click on FORMS, then LOGS, then VIEW Clinical Logs.

6. Most of the required Clinical Encounters are self-explanatory. A few likely require some further clarification:

- **Approach to Gender Health** includes issues such as, but not limited to:
  - Routine pap smears
  - Routine breast examination
  - Routine prostate examination
  - Practice of “safe sex”
    - The clerk will identify patients in which gender health issues make up part of the patient’s problem list.
    - The clerk will discuss the issue with the patient and reach common ground with respect to a management plan.

- **Preventative Strategies** includes issues such as, but not limited to:
  - Routine immunizations
  - Bone health and prevention of osteoporosis
  - Promotion of a healthy active lifestyle
    - The clerk will identify patients and situations where discussion of preventative strategies is appropriate.
    - The clerk will discuss the issue with the patient and reach common ground with respect to a management plan.

- **Communication with Families and Team.** The clerk will perform, under the direct supervision of a resident or staff, activities demonstrating their abilities as communicators. These activities include, but are not limited to:
  - Communicate and explain the results of an investigation
  - Communicate a management plan to a patient
  - Communicate discharge plans and appropriate follow-up to a patient
  - Communicate care plan to members of the allied health care team (nurse, social worker, PT, OT, etc)
  - Communicate the needs for a medical or surgical consultation to the appropriate service.
Summary of Patient Assessment. The clerk will provide a summary of a patient to the supervising resident or staff. The clerk will highlight the key patient care issues, both acute and chronic, and the management plan. Summary of the patient may be done, but is not limited to, each of the following settings:

- Initial patient assessment (includes acute care setting or on admission to in-patient service)
- As part of sign-over of patient care
- As a dictation from a clinic or in-patient encounter.