

Clinical Longitudinal Elective:

The student will participate as an active member of the designated inpatient and/or outpatient service, participating in appropriate clinical cases at YNH and/or the VA. The preceptor and student will submit specialty specific learning objectives to Dr. Lauren Cohn. The student will attend regularly scheduled specialty conferences (to be determined by the student and his/her clinic preceptor). Assignment may be made weekly, twice monthly, or monthly as determined by the student’s laboratory responsibilities and in association with the clinic preceptor.

Director: Lauren Cohn, MD

Director’s Email: lauren.cohn@yale.edu

Length of Rotation: This is the equivalent of a 2-week fulltime elective, therefore should be at least 12 half-day ambulatory sessions (or 8 OR sessions) and 12 hours of didactics. The specific rotation dates will be determined by the Elective Director).

Scheduling Restriction: None

Student’s Class Level: (Yale MD-PhD Students Only)

The student must have completed: 6 months of clerkships.

Prerequisite: A completed proposal (below) with specific specialty learning objectives must be signed by student and preceptor and submitted to the Elective Director.

Grading Scale: Pass/Fail

Longitudinal Elective PROPOSAL

Plan for elective:

Time Period : _____ (month-month, year)

Frequency of sessions: _____ (times per month/week)

Type and number of sessions: _____ (ambulatory 1/2 day blocks, OR sessions didactics)

Learning Objectives (general):

1. History skills: Gather the important information that is needed for the clinical history and complete a history in the medical record for patients with _____ diseases.
2. Physical examination skills: Complete a pertinent physical examination. The student should demonstrate the ability to perform physical examination of _____ patients while being observed by at least one attending or fellow.
3. Knowledge/diagnostic and treatment skills: Know about common conditions seen in _____ patients.
4. Attitude: Demonstrate professional responsibility in working as a team member with other members of the care team, patients and families.
5. Career/context: Know the training/career pathway for _____ (specialty).

I _____ will complete the longitudinal _____ (Specialty) elective on a (choose one) weekly, twice monthly, or monthly basis with Dr. _____, who has agreed to be my preceptor and/or oversee my clinical endeavors and complete my evaluation in MedHub. I and Dr. _____ attest that we have discussed a didactic plan that includes my attendance at _____ regularly scheduled conferences over the duration of this longitudinal experience.

MD/PhD candidate	date	Elective Preceptor	date

Name (printed)	Name (printed)

