



Neurology Clerkship Syllabus

Third Year Medical Students 2025-2026

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Introduction to Neurology Clerkship

The third year LSUHSC Neurology Clerkship is intended to give medical students the opportunity to explore the field of Neurology in a broad manner with exposure to both inpatient and outpatient Neurology as well as to both general Neurology and the broad range of subspecialties that have developed in the field. The clerkship is a 3-week rotation during which each student will be assigned to a main rotation site with opportunities to rotate through other supplemental clinical environments. It is intended that students completing the clerkship will have gained comfort performing the neurologic exam and taking a neurologic history. With these enhanced skills, students will be able to analyze and interpret their findings allowing for improved localization and the ability to recognize neurologic emergencies.

Our faculty and residents are eager to work with medical students to share their love of this interesting and rapidly evolving field of medicine. We encourage students to be active and engaged with their team during this rotation and to share feedback so that we can continuously improve and enhance the student experience while rotating with the department of Neurology.

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NOTE: Email is the primary (though not exclusive) means of notification of changes in the schedule. Students are responsible for checking email daily.

Neurology Clerkship Core Objectives

Clerkship Goals:

The third year LSUHSC Neurology Clerkship is intended to give medical students the opportunity to explore the field of Neurology in a broad manner with exposure to both inpatient and outpatient Neurology as well as to both general Neurology and the broad range of subspecialties that have developed in the field. The clerkship is a 3-week rotation during which each student will be assigned to a main rotation site with opportunities to rotate through other supplemental clinical environments. It is intended that students completing the clerkship will have gained comfort performing the neurologic exam and taking a neurologic history. With these enhanced skills, students will be able to analyze and interpret their findings, allowing for improved localization and the ability to recognize neurologic emergencies.

Our faculty and residents are eager to work with medical students to share their love of this interesting and rapidly evolving field of medicine. We encourage students to be active and engaged with their team during this rotation and to share feedback so that we can continuously improve and enhance the student experience while rotating with the department of Neurology.

The following objectives related to professional behavior are identical across all clerkships and are derived from the educational program objectives in the domain of Professional Behavior.

Clerkship Objectives:

Patient Care (PC)

- Students must demonstrate the ability to gather accurate information from patients via pertinent neurological history taking. (EPOs PC 1, KP 3)
 - o To obtain history-taking skills that contain enough information to begin the process of neurological localization
 - o To obtain history-taking skills that contain enough information to gain an understanding of the chronology and severity of the disease process
 - o To obtain history taking skills that contain information concerning psychosocial functioning of the patient as it pertains to his/her illness
 - o To accurately note medication dosages and any drug allergies.

Assessment: Competence in history taking will be documented on each student's History Taking Skills Basic Competency Form for Adult Neurology or Child Neurology. Additionally, students are evaluated for their neurological history taking skills on their Neurology Clerkship Evaluation.

• Students must demonstrate their ability to perform a competent neurological examination on their patients. (EPO PC 2)

- o A neurological examination that contains components from all 6 sub-sets of the neurological exam (mental status, cranial nerves, motor, sensory, coordination, and gait)
- o Students must be able to correctly interpret normal and abnormal findings on the neurological examination to aid in localization of the disease process.
- o Students must demonstrate through their neurological examination the severity of any deficits identified
- o The neurological examination process must show respect for the patient's privacy and dignity

Assessment: Competence in performing a neurological examination will be documented on each student's Neurological Examination Skills Basic Competency Form for Adult Neurology or Child Neurology. Additionally, students are evaluated for their competence in performing neurological examinations on their Neurology Clerkship Evaluation.

• Following history taking and physical examination of patients, students must be able to create an adequate problem list to generate a reasonable differential diagnosis. Students must be able to incorporate neurological localization into their differential diagnosis. (EPO PC 4)

Assessment: Competence will be documented by the student's performance on the SHELF examination. Additionally, notation of the student's medical knowledge in daily clinical activities will be reflected on their Neurology Clerkship Evaluation.

Students must be able to demonstrate competence in developing a treatment plan or intervention for their patients; including, delineation of treatment goals, a risk/benefit assessment, as well as monitoring for treatment effect and any adverse effects. (EPOs PC 3, PC 5, KP 1, KP 2, SBP 1)

Assessment: Competence will be documented by notation of the student's patient care skills in daily clinical activities and on their Neurology Clerkship Evaluation.

• Student-generated treatment plans should provide effective patient care with respect to the patient's psychosocial level of functioning as well as to the patient's cultural beliefs. (EPOs PC 4, PC 5, KP 3)

Assessment: Competence will be documented by notation of the student's patient care skills in daily clinical activities and on their Neurology Clerkship Evaluation.

Knowledge for Practice (KP)

- Students must demonstrate knowledge of the basic disease processes encountered in Neurology. Understanding basic disease processes should include at least some understanding of the pathophysiology, pathology, and anatomy of the disorder. These disorders include but are not limited to the following: (EPOs KP 1, KP 2, PC 6)
 - o Neurodegenerative Disorders
 - o Neurological Emergencies
 - o Stroke
 - o Demyelinating Disorders
 - o Disorders of the Peripheral Nerves and Muscles
 - o Altered mental Status
 - o Epilepsy
 - o Headache and Pain Syndromes
 - o Basic Neuroradiology and Neuroanatomy

Assessment: Competence will be documented by the student's performance on the SHELF examination. Student participation during didactic lectures with regards to neurological case problem solving, their Neurology review lecture as well as with their neuroradiology lecture is actively encouraged. Students will also actively participate in the Student's Professor's Rounds. Additionally, notation of the student's medical knowledge in daily clinical activities will be reflected on their Neurology Clerkship Evaluation.

- During the Neurology clerkship, students will understand and apply principles of biomedical ethics to patient care and research practices, including core ethical principles and professional values. (EPO KP 4)
- Students will understand and apply principles of epidemiological and statistical sciences to identify health problems and risk factors and utilize strategies for disease prevention for patients and populations. (EPO KP 5)

Systems - Based Practice (SBP)

- Students must demonstrate adequate knowledge of healthcare systems and the way these systems affect delivery of health care to their patients. (EPOs SBP 1, SBP 2, SBP 3, SBP 4)
 - o Advocacy for safe patient care and the efficient use of resources
 - o Apply knowledge of social and structural drivers of health to reduce disparities
 - o Identify causes of patient safety and quality issues
 - o Effective incorporation of the services of non-physician care providers

Assessment: Competence will be documented by notation of the student's grasp of healthcare systems and of efficiency and cost effectiveness within their Neurology Clerkship Evaluation.

Practice - Based Learning and Improvement (PBLI)

• Students will demonstrate use of evidence from practice guidelines and scientific studies to develop patient care plans. (EPOs PBLI 1, PBLI 2)

Assessment: Competence will be documented by notation within the Practice Based Learning and Improvement section of their Neurology Clerkship Evaluation.

- Students must demonstrate initiative and self-directed learning skills during the Neurology clerkship through the following skills: (EPO PBLI 2)
 - o Demonstrating an eagerness to learn
 - o Identifying their own questions
 - o Independent reading of literature pertaining to their patients' problems
 - o Sharing information obtained from the literature with the treating team
- Each student seeks feedback and/or responds well to constructive criticism in order to improve their clinical performance. (EPO PBLI 3)

Assessment: Competence will be documented by notation of the student's initiative and self-directed learning skills as part of their Neurology Clerkship Evaluation.

Interpersonal Communication Skills (ICS)

- Students must demonstrate the ability to effectively communicate with patients and their families: (EPOs ICS 1, ICS 2, ICS 3)
 - o Accurately and effectively communicate treatment plans, diagnostic study results, and other medical information to their patients and their families
 - o Counsel patients using a patient centered approach

Assessment: Competence will be documented by notation of the student's interpersonal and communication skills as part of each student's Neurology Clerkship.

- During the Neurology clerkship, students must demonstrate good communication skills with other students, residents, attending physicians, as well as with other non-physician staff members. (EPOs ICS 4, ICS 5, ICS 7, PB 3)
- Students are expected to maintain clear, complete, accurate, timely, and legible written records. (EPOs ICS 4)

- Students are able to clearly and accurately present patient findings to other treating team members. (EPOs ICS 5, ICS 7)
- Students incorporate expertise and advice from multi-disciplinary team members. (EPO ICS 8)

Assessment: Competence will be documented by notation of the student's communication skills within their Neurology Clerkship Evaluation.

Professional Behavior (PB)

- Display honesty, integrity, and accountability in all assessments and written assignments. (EPO PB 1)
- Adhere to attendance and other professional requirements and complete assignments and tasks in a timely manner, in both classroom and clinical settings. (EPO PB 2)
- Demonstrate sensitivity and respect for patients, families, peers, teachers, administrative staff, and healthcare team members across diverse populations in all situations. (EPO PB 3)
- Maintain patient privacy and confidentiality. (EPO PB 4)
- Consistently advocate in the best interest of one's patients, including fair access to care. (EPO PB 5)
- Recognize and address personal well-being needs that may impact professional performance. (EPO PB 6)

Assessment: Completion of these requirements will be documented by their final grade on the Neurology Clerkship Evaluation, which evaluates each student's clinical skills as well as their tendencies for self-directed learning.

Click <u>here</u> for the LSU School of Medicine Educational Program Objectives

Optional Readings

Neurology Optional Reading Table of Contents

Parts 1-6 readings can be found on Moodle

Syllabus Part 1

Neuroanatomy (pages 1-29)

The Neurological Examination (pages 31-74)

Syllabus Part 2

Diagnostic Procedures (pages 1-11)

Status Epilepticus (pages 13-20)

Coma and Raised ICP (pages 21-31)

Cerebral Vascular Accidents (pages 33-39)

Subarachnoid Hemorrhage (pages 41-47)

Head Trauma (pages 49-53)

Treatment of Hypertension (pages 55-71)

Syllabus Part 3

CSF Hemodynamics (pages 1-5)

Evaluation and Treatment of Headaches (pages 7-16)

Evaluation of the Dizzy Patient (pages 17-28)

Evaluation of Neck and Low Back Pain (pages 29-36)

Neuropathic Pain (pages 37-43)

Multiple Sclerosis (pages 45-51)

Aging, Dementia, and Delerium (pages 53-62)

Movement Disorders (pages 63-69)

Syllabus Part 4

Infections of the Central Nervous System (pages 1-14)

Epilepsy and Anticonvulsants (pages 15-43)

Sleep Disorders (pages 45-51)

Somatoform Disorders (pages 53-58)

Neuro-Oncology (pages 59-68)

Syllabus Part 5

Overview of Weakness (pages 1-24)

Histopathology of Skeletal Muscle (pages 25-33)

Nerve Conduction Velocities and EMG (pages 35-49)

Motor Neuron Diseases (pages 51-57)

Peripheral Neuropathies (pages 59-70)

Disorders of the Neuromuscular Junction (pages 71-89)

Syllabus Part 6

Muscular Dystrophies (pages 1-9)

Inflammatory Myopathies (pages 11-27)

Grading

Each student will receive a Final Grade for their Neurology Clerkship based on a combination of their Clinical Grade (Evaluation & TBL) and their Written Examination Grade.

Final Grade Combination Breakdown:

SHELF: 50%

TBL (quizzes): 20%

Evaluation: 30%

The SHELF Exam is 50% of your final grade. The SHELF scores are usually received back in the Clerkship Office about 1-2 business days after the examination date. Students will be notified of their results on the exam. You must pass the exam to pass the course. Students who fail the NBME will be scheduled to repeat the exam. If a passing grade is obtained on the repeat examination, the student will be given a grade of PASS for the Neurology clerkship, but if the student is unable to pass the repeat exam, the student will fail the course. (LSU School of Medicine Policy).

SHELF Scores Scale:

Honors 100 - 89

High Pass 88 - 81

Pass 80 - 64

Fail 63 and below

NOTICE FROM STUDENT AFFAIRS – If a student misses a scheduled exam during the school year, that student will not be able to take the exam until they complete the entire year. The student can take the exam on the makeup dates that will be scheduled later by the Student Affairs Office.

Quizzes:

- Reading assignment for each Thursday will be the upcoming lecture PowerPoint as well as any additional assigned reading (on Moodle)
- You will be given a short quiz at the beginning of each lecture, to be completed in a group of 3-4 students
- If you are absent on a quiz day, you will receive a zero for that quiz
 - Makeup assignments are available for those points if you contact the clerkship directors and coordinator

Quizzes will count as 20% of your overall grade. We calculate the percentage based on your quiz grade average

Honors 90%

High Pass 71-90%

Pass 50-70%

Fail >50%

Evaluations:

Evaluations are based on the following 6 competencies:

- Medical Knowledge
- Patient Care
- Interpersonal Relationships and Communication
- Practice-Based Learning and Improvement
- Systems based Practice
- Professional Behavior

Each item will be given a pass or fail to show that they meet the basic expectation for their level of training; then the student will receive an overall Fail-Pass-High Pass or Honors on their evaluation.

Clinical evaluations must be completed by an attending; you may request that residents submit comments/feedback to the attending from whom you are requesting your final evaluation. You can

request evaluations from residents in New Innovations, but these cannot be considered as a course evaluation.

Evaluations will count as 30% of your overall grade.

Failing Grades can result if:

- a student who failed the initial NBME is unable to obtain a passing score on a retake of the NBME
- a student receives an unacceptable or failing grade on an evaluation by the clinical instructor
- a student fails to show professional and/or personal qualities to be expected at his/her level of training
- student engages in unprofessional behavior that cannot be rectified per the Clerkship Director's discretion.
- a student with more than two unexcused absences from any required activity, e.g. a lecture/TBL, morning or afternoon rounds, clinic session, etc. The student will receive a letter grade drop in the final grade; this could result in failure of the rotation
- all required clerkship documents (Observed History, Observed Physical Exam, SOAP Note Feedback activity, Request for Faculty Evaluation) are not turned in by end of clerkship.

Final grades will take another 4-6 weeks after the SHELF to be completed and released to students

Required Clinical Skills Activities

In addition to the clerkship's graded elements, students must complete and log in New Innovations the exercises below to be awarded a Neurology Clerkship grade. Students who fail to complete or to log these required elements will first receive an **Incomplete** for their grade in the clerkship. If the missing elements are not submitted in the timeframe agreed upon between the student and clerkship director, a failing grade will be given in the course.

Observed Neurologic History

Each student must complete taking a neurological history with observation by a faculty member or Adult Neurology Resident (PGY 3 or 4) or Child Neurology Resident (PGY 4 or 5) to assess competency with this skill. The activity should be logged into New Innovations by the student. The observer will confirm the student's competency in the log.

Observed Neurologic Exam

Each student must complete taking a neurological history with observation by a faculty member or Adult Neurology Resident (PGY3 or 4) or Child Neurology Resident (PGY 4 or 5) to assess competency with this skill. The activity should be logged into New Innovations by the student. The observer will confirm the student's competency in the log.

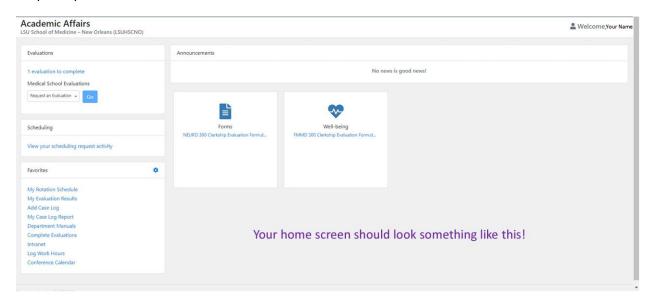
SOAP Note Feedback Exercise (x2)

Each student must complete a SOAP note feedback exercise with a Neurology **attending** (residents are not able to complete this exercise). Students should compose a complete soap note (with no revisions from residents) and submit to the attending for feedback. Students should revise the note based on attending feedback and re-review the note with the attending. The note itself does not have to be submitted to the clerkship staff, but the exercise should be logged into New Innovations. This exercise should be completed in its entirety twice during the clerkship and each instance should be logged in New Innovations.

***Should a student log one of these required elements and the indicated resident or faculty member denies that the activity was actually completed by this student, a PEF will be filed with the Dean's Office.

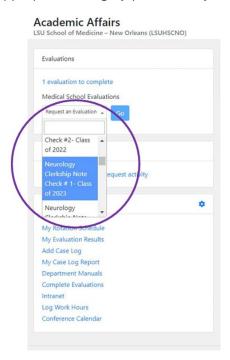
Logging Activities into New Innovations

Step 1: Open New Innovations

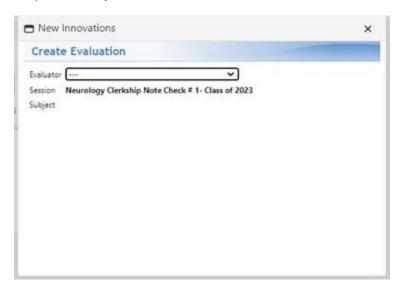


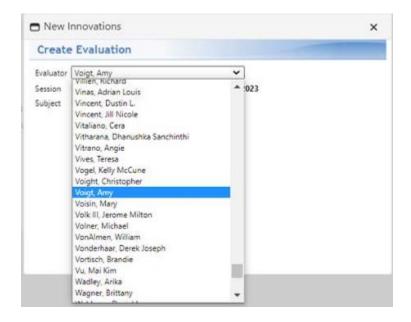
Step 2: Open the drop-down menu

From the drop down select the appropriate category (make sure you select your graduating class)



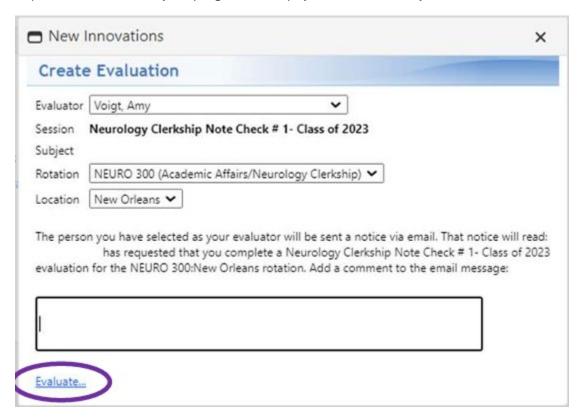
Step 3: Select your evaluator





Step 4: Submit your evaluation request

*Make sure the information is correct and click "Evaluate." This will send an email to your evaluator to provide feedback on your progress note, physical exam/history, or final evaluation



Addresses of Rotation Sites

Manning Family Children's Hospital

200 Henry Clay Ave, New Orleans, LA 70118

Neurology Faculty Offices at MFCH:

210 State St (5th floor), New Orleans, LA 70118

Campus Multispecialty Clinic (Gravier Clinic)

(MDA & ALS Clinics here as well)

2025 Gravier St (5th floor), New Orleans, LA 70112

UMC

Tower 1- 2nd floor by elevators

2000 Canal St, New Orleans, LA 70112

UMC Resident Clinic (Mondays)

Ambulatory Clinic Building- 2nd Floor (usually workstation 2B)

2000 Tulane Ave, New Orleans, LA 70112

UMC Stroke Clinic

Ambulatory Clinic Building- 2nd Floor (usually in workroom all the way to the right by front nurses' station)

2000 Tulane Ave, New Orleans, LA 70112

VA

Main Hospital- J Elevators to 7th floor, go to back nursing station

2400 Canal St, New Orleans, LA 70112

Lecture Schedule

Orientation will be on the first Monday of your rotation (subject to change if it's a holiday). You'll receive a meeting link with the time and location ahead of time. We usually meet in the CALS Building, 6th Floor, Room 6133.

Lectures are on Thursdays. The first and second Thursday are usually at 12:30pm, but subject to change. You'll receive a meeting link weekly with the exam time and location of where we will be meeting. The third Thursday lecture is typically in the morning, but subject to change.

*We have lecture the Thursday before your SHELF. Unfortunately, because it is a short rotation, we do have to have lecture that day, but you have the rest of the day off after to study.

First Thursday Lecture Schedule-

- Quiz on Neuroradiology PowerPoint (on Moodle)
- Quiz Review
- Aquifer Neurology Case 12
- Review of Neuroradiology PowerPoint

Second Thursday Lecture Schedule-

- Quiz on Neuro Review A PowerPoint (on Moodle)
- Quiz Review
- Review of Neuro Review A PowerPoint
- Student Professor Rounds

Third Thursday Lecture Schedule-

- Quiz on Neuro Review B PowerPoint (on Moodle)
- Quiz Review
- Review of Neuro Review B PowerPoint

The last Friday of your Clerkship is your SHELF exam (subject to change if it's a holiday). You will be notified of the time, and it will be in the CALS Building, 4th floor (for New Orleans students).

Attendance

Curriculum Policy: Absences from Clinical Rotations

(Revised and approved by the Clerkship Director Committee June 2023; Approved by the Curriculum Steering Committee June 2023)

A student's responsibilities in clinical rotations include caring for patients on teams and therefore take precedence over other activities. However, we understand that situations may arise when a student will need to request a brief absence from daily responsibilities on a required clerkship or other clinical rotation. The guidelines listed below give insight as to what might be considered an acceptable request, and they include visiting students on senior rotations.

Note that these are institutional guidelines and some of the clerkships and departments may have more specific policies. Details about absences in individual rotations, such as notifying the clerkship/rotation director, and policies on make-up work, will be outlined in clerkship and rotation orientations.

All requests for leave must be presented to the clerkship directors and coordinator; it is the student's responsibility to make certain that they are approved. Directors of shorter clerkships/rotations will use their discretion in approving absences for non-emergencies in these rotations.

Sufficient remediation for absences will be established at the clerkship director's discretion. Remediation may involve additional call nights, additional weekend responsibilities, clinical work on days normally set aside for NBME preparation, or make-up assignments for missed didactics. A clerkship director may require remediation of some work for absences of less than two days if they deem that learning opportunities are significantly affected by the absence.

Over the course of the clerkship/rotation, any leave totaling more than two days (for a single absence or for repeated absences, regardless of the reason) will require remediation prior to completion of the clerkship/rotation.

Requested absence days are included in the "one day in seven free of clinical work and required education averaged over the duration of the rotation," as outlined in the student work hour policy.

Adherence to these policy guidelines is considered a matter of professionalism, therefore excessive absences or nonemergent absences may be reflected in the evaluation of the student's work habits or professionalism.

STUDENT RESPONSIBLITIES ON HOLIDAYS:

Unless otherwise stated, students will be free from clinical duties on the days below.

- July 4th
- Labor Day (off Monday)
- Martin Luther King, Jr. (off Monday)
- Mardi Gras (off Monday and Tuesday)
- Easter (off Friday, Saturday, Sunday)
- Thanksgiving (off Thursday, Friday, Saturday, Sunday)
- Christmas (off 2 weeks around holidays -- off Christmas Day & New Year's Day only if doing senior rotation in block 7)
- Memorial Day (off Monday)

An **excused absence** is defined as presenting an acceptable reason, in advance of the absence, only by the involved student, to the office of the clerkship coordinator/director.

An **unexcused absence** is defined as not being at your assigned location, i.e. clinical duties, didactics, grand rounds, etc., without prior approval.

- An email MUST be submitted to the coordinator and any attendings and residents you work with; otherwise, absence will be considered unexcused. NOTIFYING A FELLOW CLASSMATE IS NOT AN ACCEPTABLE EXPLANATION.
- Students are required to be present for ALL clinical assignments (defined as any required part of the course which includes Grand Rounds, and all scheduled lectures)
- Attendance is required and monitored
- Tardiness for clinical duties, lectures will be taken into account
- Assignments being turned in late
- It is the student's responsibility to make sure he/she has signed the attendance sheet

 Students can sign in only for themselves. It is unacceptable for any reason to sign in for a fellow student

1. Emergent Absence (such as illness or funeral):

Students should notify the clerkship director and coordinator as soon as possible. If possible, the student should also notify their team (residents, interns, and attending). Leave of over two days will require remediation before completing the clerkship. Clerkship/rotation directors may require a note from the treating provider for absence due to illness. Make-up work may be assigned if the absence involves required didactics.

2. Non-emergent Absence (such as weddings, presentations at national conferences, or school business):

Students must request these absences from the clerkship director and coordinator via e-mail before the clerkship starts. The student should also notify their team (residents, interns, and attending) as soon as possible. Leave of over two days will require remediation before completing the clerkship. Make-up work may be assigned if the absence involves required didactics.

3. Circumstances not stated in the above categories:

Students must request absences for other extenuating circumstances from the clerkship director and coordinator via e-mail as soon as possible (before the start of the clerkship/rotation if possible), and approval is at the discretion of the clerkship/rotation director. As above, the student must notify their team and make up any work assigned by the clerkship/rotation director if the absence is approved.

Student Policies

Professional Conduct and Mistreatment Policies

http://www.medschool.lsuhsc.edu/student_affairs/conduct.aspx

Curriculum Policy: Student Work Hours on Clinical Rotations

(Revised and approved by the Clerkship Director Committee June 2023; Approved by the Curriculum Steering Committee June 2023)

Students on required clinical rotations should not spend more than 80 hours per week (on average over the duration of the clerkship) in clinical and didactic learning activities. Students who are assigned to overnight call in the hospital should not have patient care responsibilities after 1:00 PM on the following day. However, students are expected to attend mandatory didactic activities even after overnight call. In-house call must occur no more frequently than every third night, averaged over the rotation. Students must have a minimum of one day in seven free of clinical work and required education averaged over the duration of the rotation. Weekends, school holidays, and absences are included in this "one day in seven" guideline.

If a student has concerns that their duty hours have been exceeded, they should contact the clerkship director as soon as possible. If students are not comfortable contacting the clerkship director, they should contact the Director of the Clinical Sciences Curriculum, the Assistant Dean for Undergraduate Medical Education, the Director of Student Affairs, the Associate Dean for Student Affairs, or one of the Assistant Deans for Student Affairs.

Physicianship & Medical Professionalism

The following are LSUHSC Institutional Program Objectives related to the competency domain of professional behavior:

- Students must maintain integrity and personal responsibility:
 - Students must be honest and trustworthy when writing reports and completing or signing forms or other documents.
 - Students must treat patients even though their medical conditions may put the students at risk, and they must take appropriate steps to minimize risk or seek treatment in the event that patient poses a risk to their safety.
 - Students must act with honesty and integrity to ensure that their conduct justifies the trust the patients place in them and the profession.
 - o Students must not pursue improper relationships with patients.
 - Students must refrain from expressing personal beliefs in ways that are likely to exploit patients' vulnerability.
 - Students must adhere to the codes, laws, and regulations of practice relevant to their work.
- Students must demonstrate an understanding of their responsibilities to others (patients, colleagues, the profession, and society):
 - o Students must respect their patient's right to seek another opinion.
 - o Students must understand and support their patient's emotional state.
 - Students must treat their colleagues fairly and with respect.
 - Students must not provide medical services if their performance is affected by alcohol or other substances.
 - Students must act in their patient's best interest when making referrals and providing care.
 - Students must maintain honesty when assessing the performance of any colleagues.
 - Students must take appropriate steps without delay if concerns arise that a colleague displays unprofessional behavior.
 - Students must do their best to ensure fair access to healthcare services for all patients.
 - Students must provide medical care in the best interest of the patient that is not compromised by collaboration with industry or any outside influence.
 - When engaged in research, students must comply with established standards and protect the interests of research subjects as a priority.

- Students must understand their own limits and ensure their own competence:
 - Students must take personal responsibility for maintaining up-to-date knowledge of basic science and clinical medicine.
 - o Students must be aware of the boundaries of their knowledge and skills.
 - o Students must always state their qualifications, skills, and experience truthfully.

Behavioral Statements

- I. Accessibility Statement: LSUHSC-New Orleans is committed to creating an inclusive and accessible environment according to the ADA, ADAA, and Section 504 of the Rehabilitation Act of 1973. Students in need of classroom accommodations should contact the Office of Disability Services (ODS) at ods@lsuhsc.edu. Please keep in mind that accommodations take effect when an accommodation letter has been generated; they are not retroactive. New accommodation letters need to be requested every academic term in which you are enrolled. More information can be found on the ODS website.
- ii. Antidiscrimination Statement: LSUHSC-New Orleans welcomes and respects individuals from all backgrounds and viewpoints. All faculty and students should be treated with dignity and empathy. Discrimination and harassment of any kind will not be tolerated.
- iii. Names: All students should be treated with professional consideration and respect. While our university data system requires the use of legal names and gender markers on official documents, students are welcome to inform instructors of the preferred name that they use. In some instances, preferred names may be modified on ID badges as well. Students who have questions concerning this policy are encouraged to contact the <u>university</u> registrar.
- iv. *Title IX Statement*: LSUHSC-NO promotes integrity, civility, and mutual respect in an environment free from harassment and discrimination based on sex, gender, sexual orientation, gender identity, sexual misconduct, and power-based violence. As your course director and/or instructor, I am mandated to report to the <u>Title IX Coordinator</u> any incident of Title IX or power-based violence told directly to me. Exceptions to this required reporting include disclosures that are shared in the course of academic work such as a class discussion, group work, etc. Confidential resources that do not have the reporting requirement are available through CAP and the Ombuds.

All gender restrooms can be found in several locations on campus.

LSUHSC-NO does not discriminate against anyone with pregnancy or parenting status. Reasonable accommodations are available to anyone who requests them. <u>Lactation spaces</u> are available across campus as well.

The link on the Student Health page, under the Exposure Protocol Policy tab:

https://www.lsuhsc.edu/orgs/studenthealth/needlestickinjury.aspx

School of Medicine Student Affairs learning environment form, linked here: https://www.surveymonkey.com/r/KP5ZJNW

LSU CARES reporting form (for LSUHSC), linked here:

https://www.lsuhsc.edu/administration/academic/lsuhsc-cares/