SAN JUAN BAUTISTA
SCHOOL OF MEDICINE
1978

Required Clinical Experiences Policy

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Policy Title:	Required Clinical Experiences Policy
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Accreditation Agency:	LCME
Element:	6.2 Required Clinical Experiences
Policy Oversight:	Associate Dean of Clinical Sciences & Clerkship Directors

LCME Element 6.2: Required Clinical Experiences

"The faculty of a medical school define the types of patients and clinical conditions that medical students are required to encounter, the skills to be performed by medical students, the appropriate clinical settings for these experiences, and the expected levels of medical student responsibility".

Policy Statement

In accordance with LCME Element 6.2, the medical school must define the specific clinical conditions and skills that all medical students must experience as part of the curriculum. The medical school must also specify the clinical settings in which these Required Clinical Experiences (RCEs) must occur.

Minimum Level of Responsibility. For each Required Clinical Experience (RCE), the medical school must:

- Identify a single minimum level of student responsibility.
- Clearly define that level of responsibility as either:
  - **Observer** – The student witnesses the clinical encounter but does not actively participate in patient care.
  - **Participant** – The student actively participates in the clinical encounter, contributing to patient care under supervision.

Purpose

The purpose of this policy is to ensure that:

- All medical students are exposed to defined core clinical conditions and skills.
- Students participate at a clearly established minimum level of responsibility.
- Students are appropriately assessed on their clinical experiences.

- Clinical education is standardized and consistent across training sites.

Definitions:

Alternative Method: In instances where students may not encounter a patient with the RCE during a rotation, an alternative method may be used to satisfy the requirement. These methods may include simulation or a directed patient encounter and other acceptable alternative methods that are designated for each RCE.

As specified by the Curriculum Committee, the core clinical diagnosis and conditions essential for achievement in the medical education program.

Directed Patient Encounter: With assistance from faculty or resident physicians, students will identify patients with the specific condition or diagnosis they must encounter, intentionally involving the student in the patient's care in order to facilitate learning.

Observe: The student is present for the history and physical examination or procedure and is attentively studying the patient encounter to learn from the observation. Students do not contribute to notes, diagnostic and/or treatment plans, or continuity of care of the patient but subsequently discusses the interaction with the faculty or resident physician.

Participate: The student actively demonstrates the skills required in the encounter. Participates in patient rounds; interviews patients, obtains consent, and completes essential components of the history and physical examination. Students will write notes; contribute to a diagnostic and/or treatment plan for the patient, and are responsible for following the patient for the course of treatment. Students physically participate in procedures on the patient under direct supervision and is responsible for interpreting data.

Responsibilities and Procedures

Students:

1. Students are responsible for logging into the completion of all RCE in the *Medtrics* platform
2. RCE for the clerkship should be logged as they are completed and must be logged prior to the completion of the rotation for a final grade to be issued.
3. Students are responsible for seeking assistance from Clerkship Directors and/or Resident teachers in identifying patients with specific conditions/diagnoses that the student must experience as part of the RCE if they are experiencing difficulty fulfilling the requirements for the specific clerkship.
4. Falsifying the RCE log is a violation of the student honor code.

A grade of "Incomplete" should be assigned to the student until they have successfully completed and logged any missing Required Clinical Experiences for the Clerkship.

Clerkship Directors:

1. Clerkship Directors are responsible for communicating the list of Required Clinical Experiences that must be completed and logged to students within their specific clerkship.
2. Clerkship Directors must include this list within the clerkship syllabus.
3. Clerkship Directors and Clerkship Administrators will distribute the list of required clinical experiences to all faculty and residents involved in teaching.
4. Clerkship Directors and Clerkship Administrators are responsible for ensuring students have completed and logged all RCE prior to the end of the clerkship and should not issue a final grade for students until they have confirmed all Required Clinical Experiences for the rotation have been logged.

The Clinical Science Sub-committee, in coordination with the Clerkship Directors, is responsible for the development, review, and revision of the list of Required Clinical Experiences. This includes the selection of clinical conditions and skills/procedures students must encounter within each clerkship.

The Curriculum Committee has final authority over the list and must approve any requests for revisions before changes are implemented. It will also centrally monitor student progress toward completion of the RCE at the end of each clerkship.

Oversight

The Associate Dean of Clinical Sciences is responsible for ensuring Clerkship Directors comply with established procedures for reporting and monitoring student completion of RCE.

The RCE list includes the following:

- Clinical Condition
- Clinical Skill/ Procedure
- Location of Experience: Inpatient or Outpatient
- Level of Involvement: Observe or Participate
- Alternative Experience if allowed

The Curriculum Committee will review the list of RCE's submitted by the Associate Dean of Clinical Sciences and Clerkship Directors for any potential revisions on a yearly basis prior to the start of the new clerkship year, to ensure the clinical conditions and skills/procedures listed remain clinically relevant and reflect emerging trends.

Appendices

None

History

None

Approval

Approved by: _____

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Approved on: 2/17/2026
Date