Application procedures for MDU 4004 Physician Shadowing

Email questions to: mel4012@psychiatry.ufl.edu

Introduction:

Building on coursework from MDU 4003: Introduction to the Medical Professions, MDU 4004: Physician Shadowing allows students to shadow a doctor in various fields of medicine. In addition to online didactics related to patient privacy, professionalism, and compassion, students will gain hands-on experience by shadowing a practicing physician at UF Health. This class is a great CV builder and provides undergraduate students a unique opportunity to observe patient care.

Enrollment in MDU4004 is closely controlled by the College of Medicine in an effort to protect the patients of UF Health. Selection of students is based on academic and professional performance in MDU4003 and also the information contained in this application. The number of students we can enroll is limited by the number of physicians available to be shadowed for any given term.

Approximately the top 50% of the students who take MDU4003 will have a chance to take MDU4004. Selection criteria include:

-        Must have completed at least thirty credit hours earned while at UF. Transfer students with 30 credit hours may apply after taking MDU4003 and must include their transcript from their previous institution with their application. High school dual enrollment students are not included in this exception.

-        Minimum GPA of 3.3

-        A grade of "A" or "A-" in MDU4003

Special note on transportation- Some of the clinics are located outside of Shands hospital and require students to have a personal means of transportation to travel to the location.

Special note on professionalism- Shadowing a doctor as an undergraduate is a rare opportunity and will provide you with a great opportunity to learn more about different specialties of medicine. With this opportunity comes responsibility. You represent not only yourself, but also MDU4004 and the University of Florida. You are expected to uphold a high standard of professionalism in order to ensure this opportunity remains for future students. A portion of your grade will be based on how your doctor judges your professionalism.

Special note on privacy- Shadowing a physician means you may be getting your first exposure to patient contact. Please make sure you pay close attention to the required HIPAA trainings (see below). You should try to minimize your exposure to personal health information while shadowing. You should never try to learn about other patients you are not directly interacting with. You should always be with your assigned provider. If they need to attend to something, please make sure you find a place to wait away from patient data (e.g., in a conference room). **NEVER** speak of the patients you work with to anyone outside the direct care of that patient, no matter how interesting the case. You should never discuss cases with your assigned provider in hallways or other public areas in the hospital (i.e., wait until you are in a private location). Always ask your physician about how they approach patient privacy and continue this discussion throughout the semester.

Application Instructions:

You will need to compile all of the following information and send it in one finalized packet to our physical mailing address. Please use a mailing envelope large enough so that you do not have to fold the papers. Do not enclose staples or paperclips so that we may easily shred your personal information after the semester. Please keep at least two copies of ALL application documentation for yourself in addition to the application materials you send in. Your physician may ask you to provide a copy of certain parts of your application. Mail all application materials to:

<div align="center">

MDU4004: Physician Shadowing
PO BOX 100183
University of Florida
Gainesville, FL 32610-0183

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Deadline for Application Postmark: **August 4, 2017** (if mailed via U.S. mail by this date, application will be accepted – no need to overnight/express ship)

Decisions:

Decisions Announced: By beginning of drop/add week for Fall, 2017. It is recommended you have a "plan B" class you are registered for or will register for in case you are not accepted into MDU 4004.

Only completed applications postmarked by the deadline will be considered. Your application will be inspected to make certain all required materials are present. Applications will then be reviewed in detail and will receive a priority score. For a given term, the number of available slots will be determined and offers will be made to the highest priority scores. MDU4004 is offered each Fall, Spring, and Summer C. All decisions will be announced via email to UFL email address only.

If you are not accepted to MDU4004 for the term in which you apply, you are welcome to submit a new application for subsequent semesters. We recommend that you consider the Summer C term as we traditionally receive fewer applications then. If you are applying for MDU4004 again after having been turned down previously, please indicate in your application when you applied before and we will take this into consideration.

What to submit:

Please adhere to these submission requirements strictly.

1)   Personal Information Page (please use the letter format "a, b, c…i" as we have here)

a.   Full Name
b.   UFID #
c.   UF email (non-UF email is NOT acceptable)
d.   Previous MDU4004 application semesters (If none, write NA. If applicable, for example if you previously applied for the MDU4004 section for Spring 2016 during the Fall of 2015, write Spring 2016)
e.   Projected graduation semester
f.   Local and Permanent Phone #
g.   Local and Permanent Mailing Address
h.   References: Please provide the name, email and/or phone # of three adult references unrelated to you who could tell us about your professional potential. Be sure to indicate your relationship with the person.

i.   Please rank the following Departments by order of shadowing preference accordingly (#1 would be your first choice, #2 your second choice, and so on. Please list from 1 on consecutively so that your choices are in descending order, in other words, do not leave them in alphabetical order). Be sure to rank ALL departments listed.

- Anesthesiology
- Cardiology
- ENT - Ear Nose & Throat
- ER - Emergency Medicine*
- Family Medicine
- Gastroenterology
- Hematology/ Oncology
- Infectious Disease
- Neurology
- OBGYN - Obstetrics & Gynecology
- Ophthalmology
- Orthopedics/Orthopedic Surgery/Sports Medicine
- Pediatrics
- Psychiatry
- Pulmonology
- Radiology
- Rheumatology
- Surgery**

*Emergency Room: Be aware that ER doctors have many shifts on nights and weekends. These are often great times for students who are interested because they happen to be the most exciting times to shadow in the ER. Just make sure that this would be possible for your schedule.

**There are special requirements in order to request surgery described below. If you do not meet these criteria and still apply to surgery, you will be paired with another specialty.

a) Students applying for surgery must find a 4 hour block of time that starts no later than 4pm on any day of the week.

b). You cannot request a specific surgeon but instead will be matched with whatever team has the best training opportunity based on the schedule the student (you) provides.

2)   Transcript of UF Coursework and Grades with GPA and MDU courses

a.   An unofficial print-out from https://student.ufl.edu/ is acceptable (minimum GPA of 3.3 is required).

b.   Please highlight evidence that you took MDU4003 and the grade you received (a grade of "A" is required). Also highlight your overall GPA.

c.   If you are currently enrolled in MDU4003, please wait until your grades have been averaged through Lesson 10 before submitting your application. Also, please include a printout of your MDU4003 grades through Lesson 10 along with your application (your overall raw average through lesson 10 must be 90 or higher).

3) HIPAA and Confidentiality Statements (please also keep a copy for yourself and your physician = 2 extra copies)

a.   Note: These must be current for the entire semester - this means that the date on these documents **must be dated in December, 2016, at the earliest.**

b.   Please visit the UF Privacy Office website at http://privacy.health.ufl.edu/

   i.   Complete "Level 1: HIPAA & Privacy - General Awareness Training" and include a printout of your completion certificate. To find this training,

      1.   Go to http://mytraining.hr.ufl.edu/ and click "University of Florida"
      2.   Log in using your GatorLink account and password
      3.   Type "UF_PRV800_OLT" in the search box in the upper left hand corner
      4.   Click green "Start" button.
      5.   Print your diploma at the end. You can print your diploma at any time by returning to your training transcript and clicking the diploma icon to the left of your training.

   ii.   Complete "Confidentiality Statement: For Annual Renewal and New Workforce Members" and include a printout of your completion certificate (select UF College of Medicine-Gainesville). Make sure your signature is viewable on the print-out. Find it here:

   http://privacy.ufl.edu/uf-health-privacy/confidentiality-statement/registration/

   For technical assistance with training, please contact:
   UF Training & Organizational Development
   Phone: (352) 392-4626
   Email: training@ufl.edu

4) Immunization Records (please also keep a copy for yourself and your physician = 2 extra copies)

a.   Please include a copy of the following 4 immunization records:

   i.   MMR (measles, mumps, rubella with appropriate boosters)

   ii.   Current PPD/Tuberculosis Test (within the last 8 months)- copy of test results with date taken and read

      1.   VERY IMPORTANT – Students historically leave this out of their application. Call UF student health to schedule a PPD skin test – it takes at least two days to get the result. The date must be within the past 8 months to be current AND MUST STATE NEGATIVE

      2.   IMPORTANT – If you have a positive reading on your PPD skin test, you will need to get a chest x-ray and submit the radiologist's report.

   iii.   Varicella (Chicken Pox)- date and year of infection or immunization

      1.   IMPORTANT - You need to provide documentation of the date/year of chicken pox infection OR date of varicella vaccine OR documentation showing positive titer. If you had the chicken pox, most pediatricians indicate that on your immunization forms, however, if it is not then just state the year you had the disease.

    iv. You will be required to mail in a flu shot midway through the semester (don't worry about it for this application, but it should be on your radar). Shadowing privileges will be removed if no

vaccination documentation is received by a date specified during the semester (usually end of October or early November).

5) **Essay and resume** (approximately one page each, single-spaced):

a.   Please include a **statement about why you are seeking out a career in healthcare.**

b.   Please include a **resume** detailing your previous experiences working in a clinic, shadowing a physician, volunteering, doing research, and any other form of employment demonstrating responsibility.

Important Tips for Applying to MDU4004

Failure to complete the application fully and properly will delay your application consideration. The following are common problems that delay an applicant's acceptance.

1.   All decisions will be announced via email to UFL email address only. MAKE SURE YOU TYPE YOUR EMAIL AND UF ID CORRECTLY.

2.   Keep TWO EXTRA personal COPIES of all parts of your application, particularly HIPAA, Confidentiality Statement, and Immunizations (PPD completed within the last 8 months). This is important as your documentation may additionally need to be submitted to certain departments when you shadow.

3.   HIPPA and Confidentiality Statement must be SIGNED and dated IN DECEMBER, 2016 AT THE EARLIEST.

4.   You must include a copy of the following 4 immunization records:

i.   MMR (measles, mumps, rubella) copy of immunization record with date and year of inoculation

ii.   Current PPD/Tuberculosis Test (WITHIN THE LAST 8 MONTHS)- copy of test results with date taken and read

1.   IMPORTANT – Students historically leave this out of their application. Call UF student health to schedule a PPD skin test. The date must be within the past 8 months AND MUST STATE A NEGATIVE READING.

2.   IMPORTANT – If you have a positive reading on your PPD skin test, you will need to get a chest x-ray and submit the radiologist's report.

iii. Varicella (Chicken Pox) - year of infection or immunization or positive titer

IMPORTANT - You need to provide documentation of the date/year of chicken pox infection OR date of varicella vaccine OR documentation showing positive titer. If you had the disease and your physician does not have documentation, write the year you had the disease.

iv. Flu Vaccination (most recent flu vaccine only)-official copy of vaccination. Submitting a picture of your sticker does not qualify.