The Council has proposed the following revisions for Standard 4, Clinical Resources (additions <u>underscored</u>, deletions struck):

Standard 4, Clinical Resources

Normal and diseased animals of various domestic and exotic species must be available for instructional purposes, either as clinical patients or provided by the institution. While precise numbers are not specified, in-hospital patients and outpatients including field service/ambulatory and herd health/production medicine programs are required to provide the necessary quantity and quality of clinical instruction. The program must be able to demonstrate, using its assessment of clinical competency outcomes data, that the clinical resources are sufficient to achieve the stated educational goals and mission.

It is essential that a diverse and sufficient number of surgical and medical patients be available during an on-campus clinical activity for students' clinical educational experience. Experience can include exposure to clinical education at off-campus sites, provided the college reviews <u>and regularly monitors</u> these clinical experiences and educational outcomes. Further, such clinical experiences should occur in a setting that provides access to subject matter experts, reference resources, modern and complete clinical laboratories, advanced diagnostic instrumentation and ready confirmation (including necropsy). Such examples could include a contractual arrangement with nearby practitioners who serve as adjunct faculty members and off-campus field practice centers. The teaching hospital(s) shall provide nursing care and instruction in nursing procedures. A supervised field service and/or ambulatory program must be maintained in which students are offered multiple opportunities to obtain clinical experience under field conditions. Under all situations students must be active participants in the workup of the patient, including physical diagnosis and diagnostic problem oriented decision making.

Medical records must be comprehensive and maintained in an effective retrieval system to efficiently support the teaching, research, and service programs of the college. <u>Students should be trained in the use of an electronic medical record system.</u>

Proposed Change(s) to Self-Study Requirements (additions <u>underscored</u>, deletions struck)

- **12.4.1.**Complete Tables A, B, and C for the past five years and analyze trends for each species (category). Include only those patients, farm calls, and animals examined that have direct student involvement.
- **12.4.2.**Describe and analyze the adequacy of normal and clinically diseased animals (hospitalized, outpatient, field service/ambulatory and production medicine) <u>used by students in the course of their</u> <u>learning experience.and how they are used for the DVM teaching program.</u>
- **12.4.3.** Describe unique clinical educational resources or programs that enhance the educational mission.
- **12.4.4.** If off-campus clinical instruction sites are used regularly by multiple students, complete Table D and describe the planning, supervision, and monitoring of students; and contracting arrangements for non-institutional based faculty.
- **12.4.5.**Describe the involvement and responsibilities of professional students in the healthcare management of patients (and clients) in clinical programs of the college.
- **12.4.6.** Describe how subject-matter experts and clinical resources are integrated into clinical instruction.
- **12.4.7.** Describe the adequacy of the medical records system used for the hospital(s), including field service and/or ambulatory and population medicine. Records must be comprehensive and maintained in an effective retrieval system to efficiently support the teaching, research, and service programs of the college.

12.4.8. Describe how the college has responded to increasing/decreasing clinical resources.

12.4.9. Describe the means used to maximize the teaching value of each case across the curriculum.

Rationale for Proposed Change

In distributed model, there is need to identify and establish private practice cooperators but also to monitor them regularly. Focus on the need to enumerate calls, animals, and experiences with student involvement. Particularly important with distributed systems.

Use of medical records should be addressed. While a given facility may not be required to maintain their records electronically, students should be exposed to electronic medical records during their training. When a school has been cited for this as a deficit, it has traditionally been described under standard 4, not under standard 9 (Curriculum).