

Georgetown University
School of Medicine



Program Summary

*Guided by the University's
Jesuit tradition of cura personalis, of
caring for the whole person,
Georgetown University School of
Medicine will educate, in an integrated
way, knowledgeable, skillful, ethical, and
compassionate physicians and
biomedical scientists, dedicated to the
care of others and the health needs of
our society.*

*The Mission of
Georgetown University
School of Medicine*

Georgetown University
School of Medicine



Program Summary

The General Objectives of a Georgetown Education in Medicine

Georgetown seeks to provide its students with a general professional education in medicine that integrates the scientific, clinical, and humanistic disciplines and lays the groundwork for the intellectual and ethical formation of physician-healers, committed to the clinically competent care of, and the well being of their patients. Before embarking on residency, the Georgetown-educated and trained physician will give evidence of clinical competency by demonstrating:

Knowledge-related Competencies

- a knowledge of biomedical science and the ability to acquire, manage, integrate, and apply this knowledge to the care of patients
- the ability to evaluate critically new knowledge and to determine its relevance to the clinical problems and challenges presented by the individual patient
- an understanding of the psychological, socioeconomic, cultural, and spiritual dimensions of human health and illness
- an understanding of current and proposed strategies for the organization, financing and delivery of health care
- an understanding and knowledge of oneself, including the scope and limits of one's knowledge, skills, and values

Skill-related Competencies

- the ability to take a comprehensive history and to perform a comprehensive physical examination
- the ability to perform basic clinical procedures
- the ability to solve and reason through clinical problems, from developing a differential diagnosis to formulating an appropriate plan of care
- the ability to interpret, assess, integrate, and apply data and information from diagnostic tests in the process of clinical problem solving, reasoning, and decision making
- the ability to implement and manage the plan of care in an appropriate and professional fashion with sensitivity to patient diversity and values
- the ability to communicate and collaborate effectively with patients and colleagues
- the ability to learn independently with a critical awareness of the scope and limits of one's knowledge, skills, and values

Values And Attitudes-related Competencies

- an understanding of the ethical dimensions of the physician-patient relationship and of the ethical dilemmas encountered in health care, at the bedside as well as in the formulation of health care policy
- an understanding of the obligations – to patients, the profession, and society — inherent in the practice of medicine
- the clinical virtues of fidelity to trust, respect for others, excellence, duty, honor and integrity, humility and accountability, and compassion
- altruism through a commitment to service, especially service to the disadvantaged
- an awareness of the importance of maintaining one's own well-being and of balancing the demands of professional and personal life

INTRODUCTION

With 125 schools of medicine, each unlike any other, the American system for medical education is among the world's largest and best. Faced with such a wide range of diverse options, the aspiring medical student and physician could well ask: What are the defining differences of Georgetown University School of Medicine? If I choose to attend will I be able to achieve my personal and professional goals here?

Georgetown's location in the nation's capital—an international crossroads, home of the renowned National Institutes of Health, and one of the world's most culturally exciting cities—certainly makes it unique. More distinguishing, however, is its philosophy. The School of Medicine is heir to the long and rich Catholic and Jesuit tradition of caring for the sick. From its inception it has been committed to the pursuit of knowledge in service of the community. **The Georgetown medical experience is centered in “cura personalis”— care for the whole person: a commitment to the psychological, spiritual and social as well as physical well being of the person.** This philosophy finds expression in research and in scholarship, as well as in the dialogue of science and service, faith and technology.

It also animates basic science and clinical education. Today Georgetown's tradition of excellence in clinical education is perpetuated, not only through the diversity of the patient populations that Georgetown medical students encounter but also through their early exposure to clinical care. Georgetown's curriculum includes departmentalized instruction in the basic sciences, early introduction to clinical (particularly ambulatory) care, a wide range of electives, and time for independent study. Different teaching styles enrich the curriculum's objectives. Such teaching methods as problem-based learning, small group instruction, and one-on-one's challenge students to learn core biomedical science knowledge in the context of clinical problems drawn from the bedside and the clinic. In addition, Georgetown has developed and implemented a comprehensive, innovative program that incorporates complementary and alternative medicine into

the four-year curriculum. Our future physicians will have an enhanced understanding of CAM, the ability to communicate effectively about CAM practices with future patients, and the opportunity for personal growth in self-awareness and self-care. The School's programs for biomedical research not only enrich the whole educational environment but also provide medical students with the opportunity to investigate as well as to learn.

Georgetown's concern for the spiritual and ethical dimensions of medical practice contributes to its distinctiveness. That concern is exemplified in the first year course “Religious Traditions in Health Care” and in the school's four-part longitudinal curriculum in clinical ethics. Bringing together nursing and medical students, the curriculum not only addresses the major ethical dilemmas encountered in clinical practice but also aims to promote the reflective exercise of moral agency by students and their acquisition of moral reasoning skills.

Finally, the uniqueness of Georgetown's School of Medicine resides in the tangible sense of the philosophy played out in the basic science and the clinical experience creating a community of scholars and healers who are challenged to achieve their personal potential, committed to serving the community, and free to become the physician they wish to be. This unique community contributes to the care of the sick and the progress of medicine. Challenge, choice and community are Georgetown's defining differences.

CURRICULUM

The undergraduate medical curriculum at Georgetown is the dynamic product of a continuous effort by faculty and students to evaluate and improve what our future physicians learn and how they learn it. The curriculum for the first two years emphasizes normal and altered human structure with a series of clinical experiences and elective courses reinforcing this basic information. Moreover, the first two years provide students with a comparatively early introduction to the patient, as well as to the spiritual and ethical dimensions of medicine. The third year provides a comprehensive introduction to the care of patients through clinical clerkships in the

major medical specialties. The fourth year provides a wide range of experiences giving each student substantial responsibility for the management of patient care and for the continuation of his/her personal growth through elective studies and research.

FIRST AND SECOND YEARS

The curriculum for the first two years of medical school has several distinguishing characteristics.

- Only two major science courses are taught at any one period of the first year to encourage a smooth transition to the study of medicine. Moreover, students are offered an intensive introduction to mind/body relationships.
- Complementary and Alternative Medicine knowledge is integrated into the basic science courses, the bridge courses (Intro to Health Care, Religious Traditions in Health Care, and Selectives) and in the Clinical Clerkships (Medicine, Family Medicine, Pediatrics, Psychiatry, OB-GYN, and Surgery). Students can participate in a Mind-Body Medicine Skills Group to increase self-awareness, self-care, and stress management.
- Courses such as “Patients, Physicians, and Behavior,” “Ambulatory Care,” “Physical Diagnosis,” and “Lab Medicine/Problem Solving,” collectively represent an introduction to patient care and diagnostic/therapeutic reasoning in the clinical setting.
- Patient Oriented Problem Solving (POPS) modules are designed to convey fundamental, basic biomedical knowledge in the context of clinical problems. Additional small group learning experiences (group size varies from 5-20 with a faculty member who may be a basic scientist or an attending) occur in “Patients, Physicians, and Behavior”, “Introduction to Health Care”, “Microscopic Anatomy”, “Biochemistry”, “Physiology”,
- Service Based Teams are one of two selectives in the “Introduction to Health Care” course offered by faculty in the Department of Family Medicine to first year

students. Students may choose community-based, school-based, or clinical based programs in which they assist community agencies in health education and outreach programs.

- A course in Religious Traditions in Health Care, which uses clinical cases to illustrate ways in which patients and healers in different faith traditions confront the problems of illness, wellness, dying and death.
- Parts One and Two of a four-part, longitudinal curriculum in clinical ethics. The first part emphasizes the nature of medical morality and various dimensions of professionalism. The second year focuses on the theme of moral agency and on the principal ethical dilemmas encountered in the practice of medicine (e.g. problems concerning privacy and confidentiality, informed consent and refusal of treatment, withholding and withdrawing therapy, etc)
- Acquisition of basic clinical skills such as phlebotomy, competency in performing male and female genital exams done on “models”, and CPR certification.
- Must Pass the USMLE, Part 1.

Departmental courses provide the student with the scientific knowledge basic to the practice of contemporary medicine. The underlying logic of the curriculum leads the student from the initial study of the basic anatomic and chemical characteristics of the normal body, through a survey of the physiologic mechanisms that regulate the function of the normal body, to the study of the changes that are produced by diseases, drugs and other agents. The information is presented through lectures, demonstrations, dissection laboratory, web based instruction, small group learning experiences and one on one encounters with an attending. In addition, students in the first year are introduced to the care of patients via a course emphasizing the skill of history-taking entitled “Patients, Physicians and Behavior” and a course in ambulatory care where the student is assigned at random to a private physician’s office and works one morning or afternoon a week with the physician. Students are also introduced to the broader demographic and policy dimensions of the American health care

Explore professionalism and the physician-patient relationship in *Clinical Ethics, Pt. 1*, *Religious Traditions in Health Care, Introduction to the Patient*, and *Ambulatory Care, Pt. 1*. Hone your skills for independent learning, teamwork, and critical thinking. Cultivate respect for diversity, along with the clinical virtues of altruism, compassion, excellence, fidelity to trust, honesty & courage.

ORIENTATION

White Coat Ceremony and Hippocratic Oath

Patient, Physician, Behavior

Ambulatory Care, Part One

Keirsey Temperament Sorter

FIRST YEAR

Clinical Ethics, Part One

Religious Traditions in Health Care

Introduction to Health Care

Know Thyself: Use the Keirsey Temperament Sorter and other tools to understand & assess aspects of yourself that are relevant to eventual specialty choice (see the MedCareers page at www.aamc.org). Learn about residencies in *Introduction to Health Care* and about clinical practice in *Ambulatory Care, Pt. 1*. Meet with your preclinical advisor.

Continue to explore the patient-physician relationship in *Ambulatory Care, Pt. 2*, and *Physical Diagnosis*.

In *Clinical Ethics, Pt. 2*, acquire a working knowledge of the ethical problems encountered in clinical practice, along with theoretical and methodical ways of resolving those problems.

Ambulatory Care, Part Two

Clinical Ethics, Part Two

SECOND YEAR

Specialty Nights

Faculty Advisors

Attend specialty nights. Continue to gather insights into clinical practice in *Ambulatory Care, Pt. 2*.

THE BUSINESS OF THIRD YEAR IS THIRD YEAR: begin to develop and display a mastery of the cognitive and non-cognitive dimensions of caring for patients. Aim for excellence – in clinical performance, fund of knowledge, histories and physicals, interest & industry, behavior and interpersonal relationships, and professional demeanor. Demonstrate an understanding of the ethical dimensions of relationships with patients. Hone your teamwork skills.

“The business of the third year is third year”

THIRD YEAR

Glaxo Workshops

Cognitive and Non-Cognitive Dimensions of Clinical Practice

Revisit the Keirseley Temperament Sorter. Attend Glaxo workshops, specialty nights, and departmental meetings. Keep an open mind about specialty choice as you proceed through your clerkships. Toward the year’s end, read the *Guide to the Fourth Year*, plan your schedule, and meet with your clinical advising dean.

Continue to lay the foundations of your own professionalism. At graduation, re-take the Hippocratic Oath and, while looking forward to the start of your residency, look back on the path that you embarked upon nearly four years ago – with the same solemn, public promise that you repeat at its end.

GRADUATION

FOURTH YEAR

MATCH DAY

NRMP ERAS

Residency Resources Class

Attend a residency resources class. Complete National Residency Matching Program (NRMP) student agreement. Enter the Electronic Residency Application Service (ERAS). Seek advice (and recommendations) from faculty in your chosen specialty. Early in the fourth year, meet with your clinical advising dean. November 1st: dean’s letters are mailed. Interview with selected programs. On Match Day in March, learn about the next destination on your path.

system and the role of spirituality in the experience of health and illness as well as in the patient-physician relationship.

Each year 1st year medical students in service-based teams assist community agencies in the District of Columbia with health education and outreach projects. Faculty team leaders guide the community-based activities and relate the experiences to concepts presented in IHC. Students may work in diverse environments including, but not limited to, with women residents of shelters for survivors of domestic violence, with children ages 5-12 in a church's after-school program providing instruction in health education and promotion, with high school scholars educating them on mental health issues, prevention of STDs, violence and domestic abuse, and in a non-profit health care agency dedicated to serving homeless and medically underinsured or uninsured.

The focus of the second year is the study of disease processes, especially those caused by microbes; the body's own immunological defenses against microbes and other pathological agents; and the principles governing the action of pharmacological agents, their major uses and their consequences. In addition, students continue their introduction to clinical practice through ambulatory care experiences and through a course in physical diagnosis. Clinical ethics focuses on an analysis of "classical cases" illustrative of the application of key theories and principles. Finally, in the last quarter, students take an interdepartmental course called "Lab Medicine/Clinical Problem Solving", which also serves to continue the introduction to patient care and provide a bridge between the basic science emphasis of the preclinical curriculum and the clinical emphasis of the third and fourth years. Students will be trained in drawing blood, putting in IV's, performing genito-urinary exams, and certified in basic life support.

THIRD AND FOURTH YEARS

The defining characteristics of the Third and Fourth Year are:

- The student receives intensive instruction in the acquisition and interpretation of patient-based data and

begins to share responsibility for patient care. The student is assigned specific patients and is expected to perform histories and physicals, writes in orders and meds, which the resident/attending reviews and cosigns.

- The student has on-call requirements consistent with the clerkship's constraints. It is a 24-hour call experience with supervised responsibility for the patient.
- The student can declare preferences for where, when and in what order s/he takes a clerkship. The selection is determined by lottery, unless a student uses his/her one allotted preference "star," whereupon s/he automatically gets first choice.
- 4 week Acting Internships in Medicine, Surgery and a specialty of choice with decision making and teaching responsibilities.
- The student must pass the USMLE, part 2, both the written exam and the clinical assessment exam to graduate.

The third year contains 48 weeks divided into four blocks, each being 12 weeks in duration. During this year, the student serves clinical clerkships in the major specialties as follows: Medicine, 12 weeks; Surgical Specialties, 6 weeks; General Surgery, 6 weeks; Family Medicine, 4 weeks; Neurology, 4 weeks; Psychiatry, 4 weeks; Pediatrics, 6 weeks; Obstetrics/Gynecology, 6 weeks. Clinical departments at the Medical Center and its affiliates conduct these clerkships

At the end of the third year, students undergo a standardized-patient based clinical skills assessment that focuses on evaluating their acquisition of history taking and physical examination skills as well as interpersonal communication. During the 2004-2005 academic year, this assessment will be conducted for the first time in Georgetown's new Integrated Learning Center, which also provides facilities for small group-based teaching and learning and clinical skills

The fourth year contains 44 weeks of instructional time and provides the student with substantial, but supervised responsibility in the clinical management of patients. Patient experience is gained during 3 four week rotations

on the Medical, Surgical and specialty services as an Acting Intern; 4 weeks on Primary/Ambulatory Care; 4 weeks on an ER rotation (including ACLS certification). The fourth year also provides programs designed to meet the individual needs and desires of each student. Georgetown offers a large number of approved electives, and offers the student freedom in choosing the service and hospital in which he/she must spend time completing the required clerkships and the 16 weeks devoted to the elective programs, including several weeks dedicated to residency interviews. Continuing the theme of integrating basic and clinical sciences, the fourth year curriculum includes a week of clinical pharmacology, providing the student with an opportunity to review pharmacology, exposing the student to teaching principles, and reinforcing decision making skills through case evaluations.

INTERNATIONAL ROTATIONS

To complete requirements for graduation, a student must complete 16 weeks of elective time; many students choose to fulfill this requirement by taking electives abroad through Georgetown's International Programs. Available between the summer of the First and Second year and in the Fourth year, these programs provide participants with experience in medical care-delivery in a developing-nation setting.

For fourth year students fluent in Spanish, several international electives are available. For example, the Division of Community Health of the Fundacion Santa Fe d Bogota offers a six-week elective in Community and Family Medicine, and an eight-week elective in Health Education in the Dominican Republic is offered in cooperation with the Creighton School of Medicine. Students have served communities in Latin America, Africa, Europe, Asia and Oceania.

MD/PhD. AND OTHER COMBINED DEGREE PROGRAMS

MD/PhD

A program of study leading to the joint award of the MD and a doctorate in basic medical science (MD/PhD) is available in the Departments of Cell Biology, Biochemistry and Molecular Biology, Microbiology and Immunol-

ogy, Pharmacology, or Physiology and Biophysics. Interdisciplinary doctoral training opportunities for MD/PhD. students are available through the Neuroscience program and the tumor biology program. The MD/PhD. program includes a core curriculum and a course of study individually designed to meet the needs and desires of the student and requirements of the sponsoring department.

Typically, an entering student completes the first two years of the medical school curriculum before commencing the PhD portion of the program and completes the last two years of medical school curriculum, after finishing thesis research. Some graduate studies are completed as required courses or electives during the medical school portion of the program.

The MD/PhD. program is designed as a seven-year program. Students with previous research experience may be able to complete the requirements in six years. The MD/PhD program also is available with a concentration in Bioethics through the Philosophy Department. A one-year Master's degree program in Bioethics also may be combined with the MD degree program. Please note the applicants to the combined-degree program in Bioethics are required to take the Graduate Record Exam (GRE) in addition to the MCAT.

There are a limited number of positions available each year that provide full tuition and stipend funding throughout the seven-year combined degree program. These funded positions are awarded to the most outstanding applicants on a competitive basis.

To be considered for the program, MD/PhD. applicants must first apply to the School of Medicine. An application to the School of Medicine can be obtained from the American Medical College Application Service in Washington, D.C. A separate application must also be submitted to the MD/PhD. program. The MD/PhD. Oversight Committee will review applicants completing applications to both the School of Medicine and the combined-degree program. Applicants not accepted to the combined-degree program will remain under consideration for acceptance to the School of Medicine.

Deadline for submission of both the School of Medicine

and the MD/PhD. program applications and for receipt of all supporting credentials is December 1 of the year preceding matriculation. Applicants to the MD//PhD. program who are unable to complete their application by December 1 may petition the MD/PhD. Admissions and Mentorship Committee for special consideration; these requests must be received in writing by December 15 (see address below). Admission to the MD/Ph.D.and award of the Physician Scientist Fellowships are conducted on a rolling basis, so it is to the applicant's advantage to complete all application procedures as early as possible. Students enrolled in MD or Ph.D. programs at Georgetown may apply with advanced standing to the combined MD/PhD program.

A five-year research track has been established at the Georgetown University School of Medicine. The research track offers research-oriented medical students the opportunity to complete an intensive 12month research period between the second and third year of the standard medical school curriculum. During this period, students do not pay tuition and are provided with stipend support. Research track students begin research rotations the summer prior to matriculation and after the first year. These rotations are viewed as an important component of the program and are designed to provide a foundation for the primary research period. Supplementary course work is offered to enhance the research experience and will include biostatistics, experiment design, bioethics, animal care and use, and environmental health and safety issues in the laboratory. Students successfully completing this program with graduate from the School of Medicine with Honors in Research.

Requests for the MD/PhD. and research track program applications and additional information about the programs should be addressed to:

W. Taylor Johnson
Director, Biomedical Graduate Education
Georgetown University School of Medicine
Box 571411
Washington, DC 20057-1411

MD/MBA

Students with strong interests in health care management are encouraged to make application to the full-time, five-year program leading to a dual MD/MBA degree. Students must apply separately to both programs. Tuition is set at the MD program rate. Information can be obtained at the University web page www.georgetown.edu

MD/MALS

The School of Medicine in concert with the School for Summer and Continuing Education offers a course of study leading to an MD/MALS. The Liberal Studies degree program offers broadly based courses in the humanities and social sciences. Information is available at www.georgetown.edu/ssce/ls.

NONDISCRIMINATION POLICY

Georgetown University admits qualified students of any age, sex, race, disability, religion, color, nation, and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of age, sex, sexual orientation, race, religion, color, national or ethnic origin, marital status, family responsibility, matriculation, place of residence, personal appearance, veteran status, or irrelevant physical or mental disability in administration of its educational or admission policies, scholarship, or loan programs, and athletic or other programs administered by the School.

Georgetown University is an Affirmative Action/Equal Opportunity Employer and is authorized under federal law to enroll nonimmigrant alien students. The University is committed to the maintenance of affirmative action programs that will ensure the continuation of equality of opportunity. Sexual harassment is an act of discrimination and, as such, will not be tolerated. Inquiries regarding this matter may be addressed to the Special Assistant to the President for Affirmative Action Programs, Georgetown University, Washington, DC 20057.

POINTS OF CONTACT

Office of Admissions

| | |
|---|---|
| Application Status | 202-687-1274 (<i>Decisions announced by official mail only</i>) 202-687-3079 (fax) medicaladmissions@georgetown.edu |
| Mrs. Donna Sullivan Admissions Counselor | 202-687-1731 202-687-3079 (fax) sullivad@georgetown.edu |
| Mr. Eugene T. Ford Director of Admissions | 202-687-1733 202-687-3079 (fax) fordet@georgetown.edu |
| Dr. Russell T. Wall III, MD Associate Dean of Admissions Chair, Committee on Admissions | Office of Admissions Georgetown University School of Medicine Box 571421, Washington, DC 20057-1421 |

Office of Student Financial Planning

| | |
|----------------------------|--|
| Financial Aid Applications | Office of Student Financial Planning Georgetown University School of Medicine Box 571424 Washington, DC 20057-1424 202-687-1693 202-687-2201(fax) |
|----------------------------|--|

Dual Degree Programs

| | |
|---------|--|
| MD/PHD | Mr. W. Taylor Johnson Director, Graduate Biomedical Education 202-687-1379 202-687-2585 johnsonw@georgetown.edu |
| MD/MBA | 202-687-4200 (Inquiries) www.georgetown.edu/grad/catalogue/badm.html |
| MD/MALS | Phyllis O'Callaghan, Ph.D. Associate Dean, School for Summer & Continuing Education 202-687-5746 ocallagp@georgetown.edu |

Georgetown University School of Medicine

Academic Year 2004-2005

FIRST YEAR

| 8 weeks | 1 week | 4 weeks | 4 weeks | 1 week | 2 weeks | 4 weeks | 8 weeks | 1 week | 3 weeks | 7 weeks | 1 week | | | | | | |
|-------------------------------------|-----------------------|---------------|-------------------|-----------------------|--------------------------------------|--------------------|---------|--------------------------------------|-----------|-------------------|-----------------------|-------|--|-------|--|-----|--|
| AUG → | | OCT → | | NOV → | | DEC → | | JAN → | | FEB → | | APR → | | MAY → | | JUN | |
| Gross Anatomy | E X A M S | Gross Anatomy | Biochem I (POPS) | E X A M S | V A C A T I O N | Physiology | | V A C A T I O N | Endocrin. | Neurosci. | E X A M S | | | | | | |
| | | | | | | Clinical Nutrition | | | | | | | | | | | |
| Embryology | | Embryo | Micro. Anat. | | | Biochem II | | | | Biostats. & Epid. | | | | | | | |
| Religious Traditions in Health Care | | Micro. Anat. | Clinical Ethics I | | | Genetics | | | | | | | | | | | |
| PPB / IHC | | | | Ambulatory Care / IHC | | | | | | | | | | | | | |

SECOND YEAR

| | | | | | | | |
|-----------------|--------------------------|---------------------|--------------------------|--------------------|--------------------------|----------------------|--------------------------|
| Immunology | Study & Exams 2 weeks | Microbiology (POPS) | Study & Exams 2 weeks | Microbiology | Study & Exams 2 weeks | Prob. Solv./Lab Med. | Study & Exams 2 weeks |
| Pathology | | Pathology | | Pathology | | Pathology | |
| Pharmacology | | Pharmacology | | Pharmacology | | Psychiatry | |
| Ambulatory Care | | Ambulatory Care | | Clinical Ethics II | | Human Sexuality | |
| Phys. Diagnosis | | | | Dermatology | | Phys. Diagnosis | |
| | | Psychiatry | | | | | |
| | | Phys. Diagnosis | | | | | |

THIRD YEAR

| | | | | | | | |
|-----------------------|-----------------|-----------------|---------|---------|----------|------------|---------|
| Clerkships – 48 weeks | | | | | | | |
| 6 weeks | 6 weeks | 4 weeks | 4 weeks | 4 weeks | 12 weeks | 6 weeks | 6 weeks |
| Surgical Specialties | General Surgery | Family Medicine | Neuro. | Psych. | Medicine | Pediatrics | OB/GYN |

Note: All third-year surgery clerkship students select three two-week specialties from urology, orthopaedics, ENT, neurosurgery, plastic surgery, anesthesia, and ophthalmology in addition to six weeks of general surgery.

FOURTH YEAR

| | | | | | |
|--|-------------|---------------|-----------|---------------------|--------------------------------------|
| Electives – 16 weeks; Acting Internships – 12 weeks; Ambulatory Care – 4 weeks; ER – 4 weeks | | | | | |
| 4 weeks | 4 weeks | 4 weeks | 16 weeks | A/C-ER-8 weeks | Time period for residency interviews |
| Surgery AI | Medicine AI | 3rd AI Choice | Electives | ER/ Ambulatory Care | |

