**MS1 Year**

* First week in August- Introduction to the Profession (orientation)
* Second and Third week in August- Clinical Training Immersion
	+ Strengthen clinical training among Duke medical students
	+ Better prepare students for their second year clinical rotations
	+ Place the clinical care of the patient at the center of our education
* End of August – January - Foundations of Patient Care Part 1
	+ Foundational biomedical sciences taught in the context of clinical care
	+ Includes microanatomy, gross anatomy, physiology and brain science
* February – June – Foundations of Patient Care Part 2
	+ Continuation of foundational biomedical sciences taught in the context of clinical care
	+ Includes pathology, pharmacology, microbiology, immunology and behavioral health
* June-July
	+ Consolidation and Integration of Medical Knowledge
* Longitudinal Courses – occur throughout entire year
	+ Clinical Skills Foundation 1 – introduction to interviewing and physical exam with emphasis on developing doctor/patient relationship
	+ Social and Structural Drivers of Health (SSDH) – investigate contributors to health disparities among vulnerable populations
	+ LEAD – integrated events that delve into components of leadership in healthcare

**MS2 Year**

* Clinical Skills Intensive – three-week immersion that provides a foundation of clinical skills needed to success in the impending clinical environment
* CSI/Radiology - 1 week
* Core Block Inpatient Clerkship Rotations – rotate through 8 specialties learning to provide patient-centered care in both inpatient and ambulatory settings
	+ Medicine
	+ Surgery
	+ Pediatrics
	+ OB/GYN
	+ Psychiatry
	+ Neurology
	+ Anesthesia
	+ Radiology
* Core Longitudinal Outpatient Clerkship Rotations (PIONEER) – 16-week course attending longitudinal clinics in each of the following specialties
	+ Family Medicine
	+ Internal Medicine
	+ Neurology
	+ OB/Gynecology
	+ Pediatrics

Includes participation in

* Emergency Medicine shifts
* Discovery – one half-day weekly for individualized education
* Trailblazing – one half-day weekly for interactive workshops training students to be leaders and innovators in humanistic care
* Longitudinal Courses – occur throughout entire year
	+ Clinical Skills Course (CSC) – building off of the three-week immersion focusing on procedural skills, interpretation and characteristics of diagnostic tests, advanced clinical reasoning skills and evidence-based medicine
	+ Clinical Skills Foundation 2 (CSF2) – focus on advanced communication skills and reflection on clerkship experiences
	+ Cultural Determinants of Health and Health Disparities (CDHD)– facilitates clerkship-specific exploration of high yield strategies to improve patient care among vulnerable populations
	+ LEAD – integrated events that delve into components of leadership in healthcare
	+ Selectives – two-week experiences in sub-specialties
* End of Year OSCE – a summative exam that tests clinical skills acquired during clerkship experiences

**MS3 Year**

* Scholarly experience – 9-12 months of dedicated time to perform basic science or clinical research or complete a dual degree program
* Longitudinal Courses
	+ Clinical Skills Foundation Year 3 – 34 week ambulatory care experience designed to teach patient outcomes over time
	+ Medical Statistics/Evidence Based Medicine – joint training in evidence based medicine and medical statistics

**MS4 Year**

* Clinical Electives – 1-5 week experiences in sub-specialties
* Capstone – longitudinal course provides tools and information needed for a smooth transition to residency with a three week onsite portion in March
* Graduation