

Logan Health Student Affiliations

How to use mCE - Student Account

REQUESTING A ROTATION WITH LOGAN HEALTH

1. Find the 'MY REQUESTS' area on your main screen
2. Click 'SEE ALL'

The screenshot shows the myClinicalExchange dashboard. At the top, there is a navigation bar with the logo and links for Home, My Rotations, and Account Settings. A banner for Nursegrid is visible. Below the banner, the user is greeted with 'Hello Karolyi Biles' and a 'Get Started' button. The main content area is divided into two columns. The left column contains a 'Campus Checklist' section with a 'Get Started' button and a 'See All >' link. The right column contains a 'Things to do' section with a 'See All >' link. Below these sections, there is an 'Upcoming Rotations' section with a 'See All My Rotations >' link. At the bottom of the dashboard, there is a 'Coming Soon!' notification and a 'My Requests' button highlighted with a red box and an arrow. To the right of the 'My Requests' button is a 'See All >' button also highlighted with a red box and an arrow.

3. Click "New Request" to request a rotation directly from a hospital.

The screenshot shows the 'My Requests' page. At the top, there is a navigation bar with the logo and links for Home, My Rotations, and Account Settings. Below the navigation bar, there is a '< Back' link and the page title 'My Requests'. A message states: 'Some schools allow you to request rotations directly at specific hospitals. Click "New Request" to request a rotation directly from a hospital.' At the bottom right of the page, there is a '+ New Request' button highlighted with a red box and an arrow.

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4. Select Hospital
5. Select the Program you are enrolled in
 - i. If your program is not listed, please call 406-752-1775, option 5
 1. Do **NOT** proceed if your program is not listed.
6. Complete steps 1 through 3, then press 'Review & Submit'

When submitting a request for Logan Health, please ensure that you include the following details in the **COMMENTS SECTION**:

1. Course number, course description, and academic rank of your program.
2. Specify the type of rotation you are requesting, such as Family Medicine or Internal Medicine.
3. Preceptor qualifications (example: MD, DO, NP)
4. Preceptor:
 - a. If you are requesting a specific provider and have NOT spoken to them directly, please include their name in the comments.
 - b. If you have spoken with someone, please indicate who has agreed to be your preceptor.

*****If you do not include the following details in the comments, please be advised that we may reject your rotation request.*****

New Request

Hospital and Program

State
Select from dropdown... -

Hospital*
Select from dropdown... -

Program*
Select from dropdown... -

Continue

New Request

Request to Logan Health

STEP 1 OF 3

School Info

Degree
GPA

School Coordinator Details

School Coordinator Details - NOT student

First Name*
First Name
Please enter coordinator name

Middle
M

Last Name*
Last Name
Please enter coordinator name

Email*
Email
Please enter coordinator email

Phone*
Phone
Please enter coordinator phone

****RED Asterisk fields are required only!**

Past Experience

Employment Status*
Select from dropdown...
Please select employment status

..... Continue to page 3

Logan Health Student Affiliations

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Request to Logan Health STEP 2 OF 3

Schedule Preferences

Facility (Clinical Location)
-

Department
-

Unit
No Unit(s) Selected -

Rotation Period*

Rotation Start Date
Rotation End Date

Start Date End Date

Enter valid start date Enter valid end date

Days*

Sun Mon Tue Wed Thu Fri Sat Select day(s).

Shift*

-

Select shift

Shift Hours*

-

Enter shift hours (ex. 4 or 8)

Total Hours*

total number of hours needed for rotation

Enter total number of hours you are planning to do rotation

Shift Time

08:00 AM 04:00 PM

Start Time End Time

**RED Asterisk fields are required only!

Preceptor

First Name **Middle** **Last Name**

Email **Phone**

Request () to Logan Health STEP 3 OF 3

Compliance

Item	Value	Comments	Supporting Docs.
General			
Resume/CV <small>Attach your most recent resume or curriculum vitae. Enter 'Yes' in the value column.</small>	<input type="text" value="yes"/>	<input type="text" value="zbrbab"/>	<ul style="list-style-type: none"> ■ The requirement does not apply to this program.pdf Attach Document
Bio <small><p>Write a brief biography to introduce yourself, highlight achievements and any notable information you would like your preceptor to know. Please include your education goals while rotating with Logan Health.
*</p>This information will be shared with potential preceptors.
*</p>Enter 'Yes' in the value column.
*</p></small>	<input type="text" value="yes"/>	<input type="text" value="dngn"/>	<ul style="list-style-type: none"> ■ The requirement does not apply to this program.pdf Attach Document
Comments			