

**UPSOM Curriculum Committee  
Minutes of the 438th Meeting  
March 15, 2021**

Jason Rosenstock, MD, Chair  
Bill Yates, PhD, Vice-Chair

Business of the Curriculum Committee on March 15, 2021

Motion	Vote Tally	Approved?
CCA as graduation requirement for AY 21-22	16 Yes, 0 No	YES
Surgery Clerkship Grading Scheme Change for AY21-22	11 Yes, 2 No	YES
Epilepsy Monitoring Unity Elective Proposal	16 Yes, 0 No	YES
Approval of clerkship overlap plan for AY20-21	13 Yes, 0 No	YES

**Due to COVID-19 pandemic, the meeting was held virtually using the Zoom platform. All members and guests remotely participated.**

Voting Members Present: A. Brown, MD; A. Doshi, MD; B. Yates, PhD; B. O'Donnell, MD; C. Yanta, MD; E. Ribar, MS4; E. Ufomata, MD, MS; G. Hamad, MD, FACS, FASMB; J. Waxman, MD, PhD; J. Rosenstock, MD; J. Zimo, MS4; J. Duehr, MS2; J. Perkins, MS3; K. Duffy, MS4; L. Knepper, MD; L. Borghesi, PhD; M. Peretti, MS2; M. DeFrances, MD, PhD; M. Zhang, MS3; N. Douglas, MS1; P. Campos, MS4; P. Drain, PhD; R. Maier, MD, MA; S. Herrle, MD, MS; T. Bui, MD; V. Agarwal, MD

Ex-Officio Members Present: A. Gonzaga, MD, MS; C. Pettigrew, EdD; C. Lance-Jones, PhD; M. McNeil, MD, MPH; P. Veldkamp, MD, MS; R. Buranosky, MD, MPH

**Invited Colleagues and Guests:** A. James, MD, PhD; A. Shoukry, MD; A. Strong; A. Serra, MD, MPH; B. McIvor, MD, FASA; C. Balaban, PhD; D. DiNardo, MD, MS; E. Reis, MD, FAAP; G. Null, MA; J. Suyama, MD, FACEP; J. Maier, PhD, MD; J. Szymusiak, MD, MS, FAAP; J. Yanta, MD; K. Scott, MA; K. Maietta; M. Tavares, MD, MS; M. Nance, MD; M. Massart, MD, PhD; M. Sergeant, MPH; N. Shenai, MD; R. Schuchert, MD; R. Van Deusen, MD, MS; R. Powers, PhD; R. Condario, MD; S. Gabrielson, MSLIS; S. Templer, DO, FACP, FIDSA; T. Painter, MD; V. Fulmer; V. Rajasekaran, MD; W. Mars, PhD; W. Walker, PhD  
Dr. Rosenstock began the meeting at 4:00pm.

**Standing Committees**

CCES: The Curriculum Committee Executive Subcommittee continues to meet weekly. Recently CCES has been planning Colloquium follow-up activities, preparing and monitoring AAMC Graduate Questionnaire and LCME School-administered survey exercises, and reviewing Shelf and Examsoft procedures.

CCQI: Curriculum Continuous Quality Improvement subcommittee meets monthly. The subcommittee formed a subgroup to review Social Medicine within the curriculum, through the Program Evaluation/CQI lens. More information is forthcoming

**Content Change Requests**

**Surgery Clerkship Grading Scheme Proposal**

Dr. Schuchert introduced a new grading scheme for the Surgery clerkship. The proposed scheme decreased clinical performance grade from 70% to 60%, included weekly quizzes at 10%, removed the

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laparoscopic cholecystectomy report, and bumped the social determinants of health essay from 2.5% to 5% of the total grade.

Those present discussed the changes, particularly the weekly quizzes as a form of Shelf practice.

A motion to approve this new grading scheme was brought before the Committee. The scheme was APPROVED by a vote of 11 Ayes, 2 Nays.

**Epilepsy Monitoring Unit Elective Proposal**

Dr. Rosenstock and Dr. Rajasekaran reviewed the Elective Proposal. The medical students will report to the eight-bed epilepsy-monitoring unit and will include online case conferences and weekly topic presentations. This elective will be available throughout the year for two students per period. The grading scale is H/HS/S/LS/U. Neurology clerkship is a prerequisite.

A motion to approve the elective was brought before the Committee. The elective was APPROVED unanimously.

**Mapping and Integration Subcommittee Report**

Drs. Walker and J. Yanta reported on findings from the review of the curriculum map. Threads covered included Communication Skills, Pathology, Palliative Care, LGBTQ+, Cultural Diversity, Tobacco, and Medical Informatics. The subcommittee felt that the Communication Skills and Pathology threads were covered throughout the curriculum in acceptable amounts. LGBTQ+, Palliative Care, and Tobacco were found in minimally acceptable amounts. Medical Informatics was found lacking with no detectable coordinated treatment of bioinformatics.

Drs. Walker and Yanta, and many of the subcommittee present, discussed how the reviews were completed. Discussion on inconsistencies between the curriculum management system and what was taught were discussed.

The subcommittee plans to include new tags and has a set of tags to review next year. The subcommittee also recommends some process changes, including participation of course directors in tagging, built-in alerts for changes in high-risk threads, and establishing process to review high-risk tags on a regular basis.

**Performance-based Assessment Subcommittee Report**

Dr. Van Deusen reported on the work of the Subcommittee and began with its objective and changes made in the past year. The CCA, used in the past as a screening test for potential Step 2CS failure, is a potential stand-in for the now-suspended Step 2CS. Proposals for a 2021 pilot and 2022 implementation were discussed.

For 2021, the CCA will be required to take a nine-station CCA, but students are not required to pass it in July. This experience. Using what was learned in July, the 2022 CCA will be a graduation requirement. All students will take a six-station OSCE. Students who do not pass will take a 10-station OSCE. Coaching and remediation strategies for students who do not pass the 10-station OSCE will need determined.

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A motion to approve the CCA as a graduation requirement was brought before the Committee. The motion was APPROVED unanimously.

**Eight-week Clerkship Overlap Plan**

Dr. Buranosky reported on the overlap plan for the Adult Inpatient Medicine Clerkship (AIMC), Pediatrics, and Surgery/Anesthesiology clerkships due to the approved calendar of Spring 2020. Across these clerkships, a mix of on-ward work will be balanced with non-ward learning, study time, vacation week, and Preclerkship Week activities. Clerkship-wise, the curriculum will readopt the pre-covid offerings of Anesthesiology and Specialty Care for Academic Year 2021-22.

For AIMC, six weeks of on-ward work and two weeks of non-ward skill building. Skill building topics will include leadership workshops, tutoring sessions, and exam study for the June 2 Shelf exams for outgoing MS3s, while incoming MS3s will receive an enhanced orientation, lectures/workshops on oral presentation and written notes, Complete Clinical Reasoning on-line modules, one observed H&P per student via Standardized Patient, and a leadership workshop.

For Pediatrics, medical students will segment through six weeks of on-ward learning for outgoing MS3 students followed by the final two weeks on non-ward learning. In turn, incoming MS3 students will begin with non-ward learning and finish on the wards. Non-ward learning includes completing virtual curriculum on Navigator, remote participation in conferences, exam study, and Shelf on June 2. Incoming MS3 students will complete an enhanced orientation, the virtual curriculum on Navigator, and participate remotely in conferences.

For Surgery and Anesthesiology, Outgoing MS3 students will complete the final round of surgical subspecialties via the Specialty Care clerkship. Incoming MS3 students will complete two weeks of the Anesthesiology clerkship.

A motion to approve the overlap plan, as reported, was brought before the Committee. The motion was APPROVED unanimously.

The next meeting is scheduled on April 5. The meeting was adjourned at 5:33pm.

Respectfully submitted by Gregory Null, recording secretary. Approved by Jason Rosenstock, MD.