UPSOM Curriculum Committee Minutes of the 452th Meeting November 15, 2021

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

Business of the Curriculum Committee on November 15, 2021

Motion	Vote Tally	Approved?
Approval of Minutes from the Nov 1 meeting	15 Yes, 0 No	YES
Approval of prerequisites of Admissions	17 Yes, 0 No	YES
Approval of EPO 13	16 Yes, 0 No	YES
Approval of OBGYN Clerkship Report	14 Yes, 0 No	YES

Voting Members Present: A. Brown, MD; A. McCormick, MD, FAAP; B. O'Donnell, MD; E. Ufomata, MD, MS; G. Hamad, MD, FACS, FASMBS; H. Hohmann, MD; J. Waxman, MD, PhD; J. Rosenstock, MD; J. Mocharnuk, MS2; L. Knepper, MD; L. Borghesi, PhD; M. DeFrances, MD, PhD; M. Schmidt, PhD; M. Nanni, MS4; O. Torres, MD, MS; P. Drain, PhD; P. Nelson, MS1; R. Schuchert, MD; R. Maier, MD, MA; S. Herrle, MD, MS; S. Truschel, PhD; T. Bui, MD; V. Agarwal, MD

Ex-Officio Members Present: A. Gonzaga, MD, MS; B. Piraino, MD; C. Lance-Jones, PhD; R. Buranosky, MD, MPH

Invited Colleagues and Guests: A. Clark, MD; A. Shoukry, MD; A. Serra, MD, MPH; B. Civi; C. Pacella, MD; E. Reis, MD; F. Yates, MLIS; F. Modugno, MS, PhD, MPH; G. Cooper, MD, PhD; Greg Null, MA; J. Maier, PhD, MD; J. Szymusiak, MD, MS; J. Davison, MD; K. Scott, MS; K. Maietta, MPPM; K. Critelli, MD; M. Elnicki, MD; M. Sergent, MPH; N. Shenai, MD; P. Zahnhausen; R. Van Deusen, MD, MS; S. Khan, PhD; S. Wu, PhD; S. Bartlett, MD; W. McIvor, MD, FASA; W. Walker, PhD

All members and guests remotely participated.

Jason Rosenstock, MD opened the meeting at 4:00pm.

A motion to approve the minutes of the 451st meeting of the Curriculum Committee was brought before the Curriculum Committee. The minutes were APPROVED.

Standing Committees and Threads

CCES: CCES continues to meet weekly. Research proposals continue to be reviewed, as well as policies on leave of absence, professionalism, USMLE exams, and Admissions. The Curriculum Colloquium date was shifted to February 24.

CCQI: CCQI shared final report USMLE Step 2CK status. The pass rate for PittMed is 99%. The scores are running higher than the national mean. The NBME Content Exam summary reports were also shared with the Committee. Of the eight clerkships who use these exams, all were above or around the national mean.

Social Medicine: Dr. Borghesi shared a video that incorporated Immunology and Social Medicine. This video is part of a series that brings together the science and social medicine in an engaging way. Dr. Borghesi thanked the Social Medicine thread leaders and Fellows for the video's design. Course and clerkship directors that are interested in this model should contact the thread leades.

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No changes.

GME Update

Dr. Waxman shared information on the Rita Patel GME Leadership Conference on Thursday, Feb 17. All are welcome.

Review of Prerequisites of Admission

Dr. Piraino reviewed the current admissions prerequisites with the Committee. She offered potential changes that include the reduction of the organic chemistry requirement from two to one semester; laboratory work experience may be substituted for lab courses; case-by-case alternative course formats or combinations that represent equivalent preparation will be accepted; advanced level courses can be used to satisfy basic course requirements; and courses with substantial biostatistics may be accepted to meet the biostatistics requirement.

Discussion included biochemistry requirements, biostatistics versus heavy statistics from another field, requirements needed in a compressed preclinical curriculum, annual Curriculum Committee oversight of prerequisites, and dissemination of this new information to prospective applicants.

A motion to approve the prerequisites was brought before the Curriculum Committee. The Committee APPROVED the prerequisites. We will review the prerequisites on an annual basis going forward.

Review of EPOs 13

Dr. Rosenstock led a discussion of Educational Program Objective (EPO) 13: Common signs and symptoms. The two sub-objectives were reviewed. A map of where each sub-objective is found throughout the curriculum was shared with the Committee. Links to the PCRS and EPAs were identified. The list of required clinical conditions, which is approved annually, was also reviewed. Discussions on required clinical conditions, sensitivity/specificity placement, and high value care placement within the EPOs were discussed.

A motion to approve the EPO 13 was brought before the Curriculum Committee. The Committee APPROVED EPO 13.

OB/GYN Clerkship Report

Dr. Hohmann reviewed the four-week clerkship and included clinical sites, course objectives, and clinical goals (including participation/observation of vaginal/cesarean delivery, laparoscopic surgery, and breast exam). CCQI data was reviewed, including grade turnaround, observed H&Ps, mid-course feedback, and duty hour compliance. Improvements on reported mid-clerkship feedback were reviewed. Evaluation data, including grading scheme and distribution were shared.

Changes made in the academic year included an FAQ document posted on Learning Management System, condensed PBL sessions, prerecorded lectures, reintroduction of clinical skills lab on Day 1, introduction of the Core Clerkship Resident Advisor role, and the addition of anti-racism

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content throughout the clerkship. Dr. Hohmann focused on interdisciplinary education, including the RN Preceptor program and midwives who teach in clinical skills labs, both popular with the medical students.

Planned changes to the clerkship include gathering additional student satisfaction data. Challenges include the need to learn so much in four weeks and high stress clinical experiences.

Dr. Rosenstock shared the clerkship's portfolio with the Committee.

A motion to approve the OBGYN Clerkship's report was brought before the Curriculum Committee. The Committee APPROVED the report.

Report from Artificial Intelligence Task Force

Dr. Hamad, Dr. Duran, Dr. Maier, Joseph Mocharnuk, Dr. Modugno, Savannah Tollefson, and Dr. Wu reported on the work of the task force. Artificial intelligence, machine learning, and deep learning (AI/ML/DL) and possible use within health care were defined. One professional enrichment course is currently offered in this area.

The task force brought forth the following objectives to be considered:

- 1. Understand the basic concepts of data science
- 2. Understand the strengths and limitations of AI/ML/DL in medical domains
- 3. Understand potential roles of AI in augmenting physician's work/workflow
- 4. Develop interests for AI/ML/DL research, evaluation, and human-AI collaboration

Possible competencies include:

- 1. Basic definition knowledge
- 2. Algorithm implementation understanding
- 3. Strength/limitation understanding
- 4. Identification of successful and unsuccessful integration in clinical surgical care by way of case studies
- 5. Understand impact of AI/ML/DL on the physician-patient relationship
- 6. Understand ethical, legal, and social implications of the area, and evaluate studies in literature to determine applicability

AI/ML/DL additions could include online tutorials, webinars, online case studies, and a possible stand-alone mini-course. Examples of where content could be added into the current curriculum were reviewed. School of Medicine experts in these areas were identified. As a new field, faculty development opportunities within this area were reviewed, and included online courses, ICRE and WISER offerings, and others. Areas of concentration, professional enrichment courses, and certificate program opportunities were identified. The task force reviewed social justice and bias avoidance mitigation strategies.

Prerequisites, social concerns with AI/ML/DL, possibility of exposure for all medical students, AI as quality improvement and integration in other areas of medical school, and places where AI is currently being added to the curriculum were discussed.

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A discussion on next steps came next. Possible actions include full integration in to the current curriculum, the creation of a thread, Curriculum Committee Executive Subcommittee action, or an addition of AI/ML/DL topics to the longitudinal research project. A layered approach was called upon due to the many avenues available.

The CCES will determine next steps and will bring back recommendations to the full Committee for consideration later. The task force was thanked for their work in this area.

The next meeting is on December 6 at 4pm. Dr. Rosenstock closed the meeting at 5:40pm.