

**UPSOM Curriculum Committee
Minutes of the 517th Meeting
April 21, 2025**

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

Business of the Curriculum Committee on April 21, 2025

Motion	Vote Tally	Approved?
Approval of Meeting Minutes from 4/07	17 Yes, 0 No	YES
Approval of Content Change Requests for Peds Acting Internship	19 Yes, 0 No	YES
Approval of Elective Course Proposals: (1) VA Outpatient Neurology; (2) Toxicology	16 Yes, 0 No	YES
Approval of Integrated Life Sciences (ILS) Working Group Report	12 Yes, 1 No	YES
Approval of ALCE Working Group Final Report	12 Yes, 0 No	YES

Voting Members Present: A. Liu, MS1; A. McCormick, MD, FAAP; A. Tanna, MS1; A. Slingerland, MS3; B. Yates, PhD; B. Spataro, MD; B. O'Donnell, MD; C. Yanta, MD; E. Egbert, MS1; J. Waxman, MD, PhD; J. Rosenstock, MD; M. DeFrances, MD, PhD; M. Schmidt, PhD; N. Chen, MSTP; N. Agarwal, MD; O. Torres, MD, MS; P. Drain, PhD; R. Schuchert, MD; R. Maier, MD, MA; S. Truschel, PhD; U. Gaffney, MS1; V. Agarwal, MD

Ex-Officio Non-Voting Members: A. Hyderi, MD, MPH; A. Gonzaga, MD, MS; B. Piraino, MD; C. Pettigrew, EdD; E. Ufomata, MD, MS; L. Borghesi, PhD; R. Buranosky, MD, MPH

Invited Colleagues and Guests: A. Yates, MD; A. Clark, MD; A. Serra, MD, MPH; A. Young, MLIS; A. Patel, MS3; B. Sensenig, MD, FAAP; C. Pacella, MD; C. Schott, MD, MS, RDMS, FACEP; C. Newman; C. Lance-Jones, PhD; E. Lovallo, MD; E. Kocyildirim, MD; E. Reis, MD; G. Perez, MD; G. Null, MA; J. Donohue, MS4; J. Kotey, MA; K. Scott, MA; K. Maietta, MPPM; M. Sen, PhD, MBA; M. Rubio-Valero, MD, PhD; M. Sergeant, MPH, MSL; M. Elnicki, MD; P. Mahadevan, MD; R. Van Deusen, MD, MS; R. Al-Ramadhani, MD; R. Peterson, MD; S. Templer, DO, FACP, FIDSA; T. Bui, MD; T. Cyr, MD, PhD

Members participated virtually and in-person.

Dr. Rosenstock opened the meeting at 4:00PM.

Curriculum Committee members voted to APPROVE meeting minutes from 4/07.

Committee Updates

Curriculum Committee: Dr. Rosenstock spoke about the annual dinner held to honor CC student representatives, particularly recognizing the hard work they do advocating for their peers and collaborating on educational matters. The event also serves as a farewell to graduating 4th-year students.

Content Change Request: Peds Acting Internship

Dr. Sensenig introduced a content change request from the Pediatrics Acting Internship, noting it had already been approved by the Bridges Subcommittee. She explained that the plan is to eliminate the requirement for acting interns to present individual patient cases, as this was pulling them away from valuable time on the wards. The interns will still receive similar training through other venues like morning reports and chairman's rounds. The critically appraised topic presentations will remain, and the total number of conference days per block will be reduced from four to two to prioritize clinical experience.

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Curriculum Committee members voted to APPROVE the content change request.

Elective Course Proposals

Dr. Jason Rosenstock presented two new two-week elective requests, both approved by the Bridges Subcommittee:

1. **VA Outpatient Neurology Elective** – Led by Dr. Sadasivan, this elective will offer exposure to general neurology in a VA outpatient setting, focusing on diagnostic studies (EMG, EEG) and common conditions. It will be pass/fail, available certain periods, and limited to one student per rotation.
2. **Toxicology Elective (Emergency Medicine & Medical Psychology)** – Created by Dr. Troutman, this elective combines patient interaction with lectures, readings, quizzes, and both synchronous (20 hours) and asynchronous activities. Up to four students can enroll per rotation, and a score of 70% or better on quizzes is required to pass.

Curriculum Committee members voted to APPROVE the two elective course proposals.

**Integrated Life Sciences (ILS) Working
Group Report**

Drs. Lania Rubio-Valero and Ergin Kocydilirim, who served as co-leads of the working group, presented an overview of a proposed interdisciplinary Integrated Learning and Science (ILS) course, designed to bridge basic and clinical sciences for medical students. The course, developed by a committee of faculty, administrators, and students, will be a one-month offering held annually in March during students' clinical years. It features large group lectures and small group case-based learning, covering 8–16 clinical topics across disciplines such as medicine, surgery, and diagnostics.

Key elements include:

- Focus on critical thinking and clinical application of basic sciences
- **Structured schedule:** Monday–Thursday sessions with Friday afternoons reserved for self-study
- Student presentations, expert-led discussions, and panel engagements
- Pass/fail grading based on participation and presentation
- Multidisciplinary faculty (clinical and basic sciences), whose contributions will be recognized and compensated
- **Topics include** genetic diseases, diabetes, cardiovascular issues, mental health, cancer, renal/liver disease, substance abuse, and public health

Discussion occurred after the presentation that included sorting out specifics over the next few months. Dr. Alda Gonzaga expressed concern about students who may not match during Match Monday, asking how they will manage the course work if they are focused on the Supplemental Offer and Acceptance Program (SOAP). The group discussed flexibility in scheduling to accommodate students in this situation, with a suggestion to extend the program to an 18-month period.

There was also a conversation about the course's design, which will include critical thinking, case-based learning, and integration of different topics. There are concerns about how the faculty will be selected, with a mix of content experts and skilled educators suggested. The group suggested scaling back on the classroom time, supplementing with clinical or simulation experiences, to better achieve some of the learning objectives, and to maximize student satisfaction. Simplifying the design would also limit space and faculty needs. Lastly, the idea of integrating this course with other components of the curriculum, such as the Diagnostics Course, was raised. The Bridges Subcommittee will revisit this curriculum design plan in six months.

Curriculum Committee members voted to APPROVE the ILS Working Group Report.

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ALCE Working Group Report

Dr. Robin Maier outlined a longitudinal, continuity-based ambulatory care program for medical students. The goals are to provide meaningful outpatient experiences, foster mentorship in students' chosen specialties, and emphasize continuity of care—an increasingly important aspect of modern medicine. The program involves students working one half-day per week across an entire year (April MS3 to March MS4), allowing for sustained relationships with preceptors and patients. Testimonials from past participants—ranging from recent graduates to new faculty—highlight the long-term value of these experiences. The program includes diverse specialties, with flexibility based on mentor availability and continuity criteria. It also accommodates unique adaptations for fields like radiology, pathology, and emergency medicine. The structure aims to enrich both clinical and professional development, offering students practical skills and career mentorship. Key points include:

1. **Emergency Medicine Involvement:** Emergency medicine has already discussed and supports this longitudinal model, offering students the chance to gain continuity experiences instead of just picking up shifts in the ED.
2. **Scheduling and Preferences:** Students with specific career interests (e.g., internal medicine, pediatrics) should have preference in selecting clinics that align with their academic goals. A system will be developed to ensure this, using a lottery if necessary.
3. **Telemedicine and Clinical Experience:** While telemedicine can be part of the clinical care, it should not exceed 50% of the experience, emphasizing hands-on outpatient learning. Students will receive pass/fail assessments with feedback provided throughout the year.
4. **Resource Management:** Concerns about space and preceptors for smaller specialties, like OB/GYN, were raised. Strategies for managing these resources and recruiting faculty or sites through other incentives, rather than relying solely on financial compensation, will be explored.
5. **Infrastructure and Leadership:** There was discussion about having champions for each specialty or subspecialty to manage the longitudinal clinics. Some specialties with fewer students might have overall course directors stepping in, while larger fields would have dedicated leads.

The overall aim is to create a unique and comprehensive experience for students, allowing them to build lasting patient relationships and gain diverse clinical skills while addressing challenges related to faculty and resources.

Curriculum Committee members voted to APPROVE the ALCE Working Group Report.

The next meeting is on Monday, May 5th at 4PM. Dr. Rosenstock closed the meeting at 5:39PM.

Respectfully submitted by Michelle Sergent, recording secretary.