

**UPSOM Curriculum Committee  
Minutes of the 427th Meeting  
August 17, 2020**

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

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

**Voting Members Present:** A. Doshi, MD; W. Yates, PhD; C. Yanta, MD; E. Waxman, MD, PhD; G. Hamad, MD, FACS, FASMBS; G. Null, MA; J. Hect, MS2; J. Rosenstock, MD; J. Duehr, MS2; L. Knepper, MD; L. Borghesi, PhD; M. Peretti, MS2; M. DeFrances, MD, PhD; M. Schmidt, PhD; M. Granovetter, MSTP; M. Zhang, MS3; P. Drain, PhD; R. Maier, MD, MA; S. Herrle, MD, MS; T. Bui, MD; Vikas Agarwal, MD

**Ex-Officio Members Present:** B. Piraino, MD; C. Pettigrew, PhD; C. Lance-Jones, PhD; J. Harvey, MD; P. Veldkamp, MD, MS; R. Buranosky, MD, MPH

**Invited Colleagues and Guests:** A. Biller, MD; A. James, MD, PhD; A. Shoukry, MD; A. Strong; A. McCormick, MD, FAAP; B. Mclvor, MD, FASA; B. Connolly; C. Cheun; D. Johnstone, MD; E. Ribar, MS4; E. Reis, MD, FAAP; F. Yates, MLIS; F. Modugno, MD, PhD, MPH; G. Gilmer, MSTP; J. Chiarchiaro, MD; JB McGee, MD; J. Medrano, MSTP; J. Fong-Isariyawongse, MD; J. Glance, MD; J. Suyama, MD, FACEP; J. Szymusiak, MD, MS, FAAP; J. McCausland, MD, MS, FACEP; K. Scott; K. Maietta; L. Rapkin, MD; M. Korytkowski, MD; M. Nance, MD; M. Elnicki, MD; N. Shah, MD; N. Shenai, MD; R. Van Deusen, MD, MS; R. Powers, PhD; R. Schuchert, MD; S. Khan, PhD; S. Opitz, MS2; S. Maximous, MD; S. Gabrielson, MSLIS; W. Walker, PhD

Dr. Rosenstock, MD, Chair of the Curriculum Committee, convened the meeting at 4:00pm.

Dr. Rosenstock announced the upcoming retirement of Betsy Nero, Senior Curriculum Specialist, on September 30. Betsy has served the School of Medicine for over 20 years, overseeing testing, Examsoft, and acting as the recording secretary for the Curriculum Committee. She will be missed, and the Committee wishes her well on her retirement.

**Subcommittee Updates:**

CCES: The subcommittee continues to meet weekly. CCES has been following up on the MS1 report and developing responses to the student needs. ROMS projects continue to be reviewed, COVID exposure policies have been improved, and the Resource Subcommittee approved supplies for a suturing and punch biopsy lab for the Skin-Musculoskeletal course in MS2.

CCQI: Four new members were announced: Lisa Borghesi, PhD; Eliana Bonifacino, MD, MS; Jim Duehr (MS2 CC rep) and Sabina Spigner (MS2). AAMC GQ results were released to schools. Results are generally positive with gains in many areas. One metric in particular asks 2020 graduates about their overall satisfaction with their education and 91% reported satisfaction with PittMed.

**New Business**

**Clinical Skills Update**

Dr. Herrle reviewed the make-up of both Advanced Physical Examination (APE) and Clinical Experiences (CE).

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Proposed changes to APE include the following:

- replace hospitalized patient sessions with SP session
- convert one patient session to a case-based reasoning session (virtual),
- continue CSA as a requirement (83 students left to complete this)
- move from a multi-station OSCE to virtual sessions (including written exam).

Each student will have at least one hands-on APE component and at least two hands-on adult component in the Introduction to Patient Care block (IPC). COVID-19 precautions are in effect, with students receiving information and training on donning/doffing PPE.

Dr. McCormick reviewed his elements of the IPC block (Pediatrics APE and CE). For pediatrics APE, didactics will be offered as a group, with a virtual exam of infant/toddler by faculty member, and didactic sessions on the head/ENT exam. Each student will be partnered with pediatrician for a virtual HPI with a real family, and they will complete both an oral presentation and a written HPI. For CE, hybrid options will include the following:

- For CE-Primary Care, two afternoon sessions will include completion of a Health Literacy Questionnaire each week with one patient, Learning Logs each week for one patient, and a 2-page reflection essay on health literacy.
- For CE-Disability, one session at morning multidisciplinary rounds, Learning Logs each week, a 2-page reflection essay on disability medicine and the importance of inter-professionalism, and attendance at supplemental lectures.
- For CE-Underserved, service learning project will still be required (although this has been challenging due to the pandemic; the school is working with sites to figure out completion, including virtual options). Students will also attend a PCMH session and participate in a Racism in Medicine series.

A vote was called to approve the APE/CE plan for the transition year. This motion was unanimously APPROVED.

### **Racism in Medicine Reading Group Update**

Dr. McCormick reviewed Anti-racism curriculum from CE. This included a didactic overview of racism, a reflection paper, and a pregnancy experience workshop. A pilot book club finished this summer. The book, *Medical Apartheid* by Harriet Washington, included two sessions using both small group and large group discussion. Facilitators from Graduate School of Public Health, Law School, Healthy Start, and SOM faculty brought much to the discussion. 82 of 149 MS1 students participated. 94% were satisfied/extremely satisfied. Students were asked for action steps, which included speaking out on bias, avoiding complacency, and to be open to listening, among others.

### **Organ System Pathophysiology (OSP) Block Report**

Dr. Chiarchiaro reviewed OSP Block. Workshops are continually well-received across the courses. The courses are better integrated across courses. Challenges include variable levels of skill with the facilitators. Student engagement is difficult in the workshops, particularly now that the workshops via Teams. Work still needs to be done to make changes to cases to include more social determinants of

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health. Attendance has been poor, even around patient activities/patient presentations, so a better system is in the works (e.g., beginning last year, patient panels are now required). Unprofessional student feedback has created a loss of faculty; the Block plans to work with students to learn how to give feedback, since it is a career skill needed as a physicians.

Some changes made with student feedback include better integration between organs and patient cases, better facilitator training, and NBME-style exams. As a block, the courses plan to standardize grading/small group work, with a reconfigured orientation.

The next meeting is scheduled for September 21. Dr. Rosenstock closed the meeting at 5:32.

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