

**UPSOM CURRICULUM COMMITTEE  
MEETING MINUTES  
APRIL 15, 2019**

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

**Members present:** Andrew Abboud, MS4, Matt Allen, MS4, Thuy Bui, MD, Marie DeFrances, MD, PhD, Peter Drain, PhD, Areeg El-Gharbawy, MD, Giselle Hamad, MD, Heather Hohmann, MD, Beth Piraino, MD, Sandesh Raj, MS3, Martin Schmidt, PhD, Ann Thompson, MD, Phillip Wagner, MS4, Claire Yanta, MD

**Invited Colleagues:** John Maier, MD, PhD, Robert Powers, PhD, Rose Turner, MLIS, Zhazira Kassym, Olga Levokovich, Joe Losee, MD, Mike Elnicki, MD, Lisa Borghesi, PhD, William Walker, PhD

**Next meeting: Monday, May 6, 2019; 4:00--5:30**

Jason Rosenstock, MD, UPSOM Curriculum Committee Chair convened the meeting at 4:00 PM. This was the 400th meeting of the Standing Curriculum Committee since its first meeting on November 26, 1991.

**NEW BUSINESS – SPECIAL SURPRISE**

The Curriculum Committee celebrated its 400<sup>th</sup> meeting of the Standing Curriculum Committee with refreshments. No recording of discussion.

**NEW BUSINESS - LCME POSTMORTEM**

No recording of discussion.

**NEW BUSINESS – FAMILY MEDICINE CLERKSHIP REPORT**

Dr. Maier, Family Medicine Clerkship Director, presented. The Family Medicine clerkship is a four week rotation that encompasses the comprehensive and longitudinal care of patients with emphasis on care of individuals in the context of families and communities. Students participate in patient care at offices and clinics throughout the region, including hospital-based sites and a variety of community-based locations (20 different sites). Types of practice includes UPMC residency, rural/small town residency, FQHC, faculty practice, private practice and global health (Honduras and Haiti).

The clerkship goals for the students include excellent primary care of the entire population regardless of age or gender, focus on the whole person, and health literacy and cultural competency. The clerkship provides strong preparation for Step 2CK and CS through graded OSCEs and the NBME Family Medicine shelf exam. The four-week experience consists of an orientation day (didactics and workshops), Monday morning didactics via teleconference and in person, fmCASES, pain modules, health literacy exercise, home visit and reflection and the shelf exam and OSCE.

Dr. Maier felt the strengths of the clerkship were the robust clinical experiences along with longitudinal simulation and cultural competency teaching. Some of the recent improvements were the streamlined faculty re-appointment process, formal report of observed history and physicals, follow through reporting of mid-clerkship feedback and global evaluation of consistency of experience across sites via the learning log. Based on student feedback, the clerkship made a few adjustments to the curriculum. The weekly “Know What You Know” KWYK tests are now optional. The clerkship is now working with residency sites to avoid residents being assigned to teaching medical students post-call. They are also now monitoring learning environment questions with a quicker turnaround.

Student evaluations reflect a consistently positive overall rating over the past 8 years averaging 85% outstanding and good. Students report (96%) that they were able to utilize this clerkship to improve their clinical skills and 95% reported they gained a greater appreciation for the social context of

medicine. It was noted that UPSOM students average 2% higher than national averages on the Family Medicine shelf exam despite having two fewer weeks to study than the average clerkship nationally.

With regard to LCME measures, the clerkship had a 100% on time grade submission for the past year, 100% mid-clerkship feedback documented and 100% observed H&Ps. It was also reported that students were meeting duty hours requirements and students were satisfied with storage space and study space. Mistreatment measures were in place within the clerkship and only 1% of students reported that preceptors did not treat them with respect.

Family Medicine clerkship themes focus on social determinants of health through a cultural competency workshop, adverse childhood events presentation and a community and home assessment. Basic Science material is revisited within the clerkship with anatomy reviews with each of four musculoskeletal workshops (hand and wrist, foot, elbow and hip) and a basic Family Medicine approach of what does the range of normal look like? What types of pathology can develop? And problem-solve and access latest evidence-based medicine rather than memorization.

Dr. Maier discussed a new innovation within the clerkship of developing 3 additional OSCE stations, all specifically in the Step 2CS format to support boards preparation. There are currently 3 stations with faculty preceptors and oral presentations and the 3 additional stations will include written notes.

#### **NEW BUSINESS – MS4 CLASS REPORT**

(No recording of discussion)

The MS4 student CC representatives presented their final report. The presentation included a “Bird’s Eye View” of the 4<sup>th</sup> year that showed that during **May – August**, students are in MS3 clerkships, AIs, Step 2 study, research, etc. In **September**, students may take 1 elective if they want. **October through January**, students are doing interviews and low-contact electives. **February** is a mandatory clinical elective, **March** is Bootcamp, **April** is the ILS courses and **May** shows a “?”.

The report showed that the AIs were considered good and provided excellent preparation for their intern year. Students felt they are treated like true interns, increasing their clinical and time-management skills. Students are generally satisfied with the quality and flexibility of the interview month electives. It was noted that the most commonly taken electives are Quality and Patient Safety, Teaching to Teach, Clinical Reasoning, Clinical Radiology, Blood Coagulation and Neuropharm. The questions were raised whether Bootcamps were helpful in decreasing the “July effect” and do most Pitt students generally feel well-prepared for residency. Students who have taken electives such as Critical Care Medicine or Emergency Medicine, which have frequent and well-run WISER sessions, tend to believe that these are the most helpful preparation for mitigating the July effect. The ILS courses were also discussed and questions were raised about whether these should continue to be required and if not, would anyone still take them?

The Student MS4 CC Elective Teaching Awards winners were Dr. Chris Schott, Critical Care Medicine, Dr. Carl Fuhrman, Advanced Radiology, Dr. Missy McNeil, Teaching to Teach and Dr. Jason Rosenstock, Curriculum Committee Chair. The factors for the awards were excellence in evaluations, strong history of enrollment, responsiveness to student concerns, a reasonable amount of contact hours, and a preference for active course director/lecturer.

The meeting adjourned at 5:30 p.m. All reports presented were received for filing.

Respectfully submitted by,

Betsy Nero, Recording Secretary

Approved by:

Jason Rosenstock, MD, Chair Curriculum Committee