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Medical Student Education Committee Minutes

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2010 September 7 - Medical Student Education Committee Minutes

Medical Student Education Committee, East Tennessee State University

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**EAST TENNESSEE STATE UNIVERSITY
JAMES H. QUILLEN COLLEGE OF MEDICINE
Medical Student Education Committee
Minutes
September 7, 2010**

The Medical Student Education Committee of the James H. Quillen College of Medicine met on Tuesday, September 7, 2010 at 4:15 p.m. in the Academic Affairs Conference Room, Stanton-Gerber Hall.

**Voting Members
Present:**

Ken Olive, MD
Rich Feit, MD
Mary Hooks, MD
Dave Johnson, PhD
Steve Loyd, MD
Ramsey McGowen, PhD
Paul Monaco, PhD
Dawn Tuell, MD
Jamie Reagan, M-2
Jessica White, M-1

***Ex officio* / Non-Voting & Others
Present:**

Earl Brown, MD
Michelle Duffourc, PhD
Tom Kwasigroch, PhD
Theresa Lura, MD
Patrick Macmillan, MD
Rakesh Patel, MD
Thomas Roy, MD
Penny Smith, EdD
Cindy Lybrand, MEd
Cathy Peebles, MPH
Lisa Myers, BA

1. Approval of Minutes

The minutes from the 8-3-10 meeting were approved as distributed.

2. Topics

a. Schedule for M-2 Spring Semester 2011

To determine whether the semester, the Pathology and Pharmacology courses in particular, should be shortened by 1 – 2 weeks to give students more time to study for USMLE Step 1 *in response to*:

- 18 students (almost a third of the class) deferring the start of their third year by one period, and one of the factors related to the deferral being the shorter time (5 weeks) between the end of M-2 classes and the Transitions to Clinical Clerkships course the week before the start of the Period 1 Clerkships
- The Student Promotions Committee asking MSEC to examine the Spring schedule

Including input from Pathology and Pharmacology course directors, Dr. Brown and Dr. Duffourc, in follow up to their email correspondence with Dr. Olive, *discussion regarded*:

- Loss of 1, and especially 2 weeks, significantly compressing already difficult lecture / exam schedules and being problematic for students
- Opinion that 3 weeks is enough time for most students to prepare and 4 weeks is enough time for *all* students to prepare; time beyond that is counterproductive

- Last week of the Spring semester basically being a comprehensive review of both Path and Pharm
- *No motion: M-2 Spring semester will remain as scheduled; “USMLE study time” will not be increased beyond the 5 weeks*

b. Clerkship Director Reports (*PowerPoint presentations linked below*)

[INTERNAL MEDICINE](#) – Thomas Roy, MD

[SURGERY](#) – Mary Hooks, MD

Reports outlined:

1. Overall structure of rotation including typical daily schedule
2. Objectives
3. Core Content
4. Teaching Methods
5. Evaluation Methods
6. Grading Structure
7. Summary of Student Feedback
8. Clerkship Strengths
9. Clerkship Weaknesses
10. Areas with Potential for Growth
11. Changes Anticipated for (2011-2012) 6-Week Rotations

Discussion included:

INTERNAL MEDICINE

- Dr. Patrick Macmillan to take part in revamping structure for 6-week timeframe; Dr. Loyd invited to contribute
- How to incorporate more rigor and hands-on, part-of-the-team involvement in teaching / learning medicine
- Experiences routinely involve end-of-life issues

SURGERY

- Praise for Lorena Burton, Surgery Clerkship Coordinator
- Emphasis being placed on interpretation, communication and interaction
- Use of HPS lab for complex surgical scenarios

In general

- Benefits of using New Innovations
- Need for residents to be informed of the educational objectives
- Observation of H&Ps, review of students’ case and procedure logs and documentation of EBM
- Potential for improvement related to continuity of experience and formal feedback
- Clerkship reports to MSEC providing a baseline; collecting data to evaluate our change from 8 to 6-week rotations

c. Medical Student Work Hours Policy

Proposal (Drs. Olive & McGowen):

“Medical student assignments, including the nature and content of activities and the number of duty hours required, must be determined by the educational value of the assignment. All assignments must provide meaningful educational value. In no circumstance should medical student work hours exceed those of a first year resident in either organization (e.g., call frequency, time off between duty hours, etc.) or in total hours worked.”

- *A question regarding work hours will be added to the Student Evaluation of Clerkship online form*
- *On a motion by Dr. McGowen and seconded by Dr. Monaco the policy was approved.*

d. Required Clinical Skills/Patient Types: LCME ED-2 b. “Provide a table summarizing the criteria for patient types or clinical conditions, level of student responsibility, and clinical setting for each required clerkship rotation.”

Table, which had recently been distributed to Clerkship directors, was distributed to members for their input.

e. 2010 AAMC Graduation Questionnaire

Members previously reviewed the questionnaire results. Today’s comments and concerns were in regard to reports of abusive or hostile situations; also regarding students’ ambivalence about whether to disclose these situations, and Quillen’s system of response when made aware of them.

3. Recent documents / topics {Linked or on file in Academic Affairs – contact myers@etsu.edu}

Internal Medicine Clerkship Director Report
Surgery Clerkship Director Report
Proposal: Medical Student Work Hours Policy
LCME Standard ED-2b table
2010 AAMC Graduation Questionnaire

4. Announcements

Dr. Olive welcomed M-1 student representative, Jessica White
Preparation for LCME accreditation site visit (to all QCOM faculty & staff)
The next meeting will be on October 5, 2010.

5. Adjournment

The meeting adjourned at 5:45 p.m.