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Medical Student Education Committee Minutes

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11-14-2017

### 2017 November 14 - Medical Student Education Committee Minutes

Medical Student Education Committee, East Tennessee State University

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**Medical Student Education Committee**

**Minutes: November 14, 2017**

The Medical Student Education Committee of the Quillen College of Medicine met for on Tuesday, November 14, 2017 in Classroom C002 of Stanton-Gerber Hall.

**Attendance**

**Voting Members**

Ramsey McGowen, PhD, Chair  
Martha Bird, MD  
Thomas Ecay, PhD  
Russell Hayman, PhD  
Dave Johnson, PhD  
Paul Monaco, PhD  
Jason Moore, MD  
Robert Schoborg, PhD  
Hunter Bratton, M2

**Ex Officio Voting Members**

Theresa Lura, MD  
Rachel Walden, MLIS

**Ex Officio Non-Voting Member**

Kenneth Olive, MD, EAD

**Non-Voting Members & Guests**

Robert Acuff, PhD  
Timir Paul, MD

**Academic Affairs Staff**

Lorena Burton, CAP  
Cathy Peeples, MPH

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Shading denotes or references MSEC ACTION ITEMS

**1. Approve: Minutes from October 17, 2017 Retreat Meeting**

Dr. McGowen asked for comments and approval of the minutes from the October 17, 2017 Retreat. Dr. Olive identified minor changes. Dr. Schoborg inquired about the part of the CBSE discussion comparing the CBSE I scores with the student percentile rank to see if there was any predictive value. Dr. Olive stated he did compute this, but had not yet brought back to MSEC. He reported that CBSE I scores showed a very weak correlation to Step I scores. Likewise, CBSE I class percentile showed a very weak correlation to Step 1 scores. The review of the student CBSE II score to Step1 score and class rank showed a strong correlation.

Dr. Schoborg made a motion to accept the October 17, 2017 Retreat Minutes. Dr. Bird seconded the motion. MSEC unanimously voted to accept the October 17, 2017 minutes.

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### **Announcements:**

- Dr. McGowen stated that the MSEC and COM Faculty meeting are both being held today during the 5-6:00 pm time period. Dr. Means will review the COM Faculty meeting content with MSEC during the January 16, 2018, MSEC meeting. Dr. Wilsie Bishop is planning to provide information at the COM Faculty meeting on the Mountain States and Welmont hospitals planned merger.
- The December MSEC meeting is being held one-week earlier on December 12, 2017, due to holidays.
- The MSEC Annual Meeting on June 12, 2018, will include a faculty development session on curriculum. Dr. Bobby Miller, Vice Dean for Medical Education at Marshall University. Marshall University had been placed on probation by the LCME in 2011, and since has completed an extensive review of their curriculum and obtained LCME accreditation. Dr. Miller will be here to talk about the lessons learned and the changes they have made in their curriculum. The session will be open to all COM faculty.
- Dr. Caroline Abercrombie has been selected as a Behringer Interprofessional fellow for the next year. With the added duties Dr. Abercrombie will need to step down from the M3/M4 Review Subcommittee. Dr. McGowen asked for volunteers to serve on the subcommittee.

*The October 17, 2017 MSEC minutes are shared with MSEC members via a One Drive document storage option.*

### **2. Report: Curriculum Content Query on Obesity**

Dr. Olive presented the findings of a content query on Obesity, utilizing New Innovations data, course and clerkship D2L sites, and discussion with course and clerkship directors. The courses that identified content coverage on Obesity included: Doctoring I, Cellular & Molecular Medicine, Lifespan Development, Cell and Tissues Biology, Physiology, Pathology I and II, Pharmacology, Human Sexuality II and Intro to Clinical Psychiatry, Clerkships included: Community Medicine, Family Medicine, Internal Medicine, Obstetrics and Gynecology, Pediatrics, Rural Primary Care, and Surgery.

MSEC members identified additional content for Intro to Clinical Psychiatry, Neuroscience and Case Based Learning (Doctoring I). Dr. Schoborg suggested that Biostatistics, EPID, EBM be reviewed for content. Dr. McGowen reminded MSEC that nutrition/physical activity/obesity are identified as trackable societal issues for our curriculum. Coverage of societal issues requires objectives related to diagnosis, prevention / education, treatment and/or appropriate reporting / documentation and how prevention of obesity is covered in the curriculum. Dr. Olive will update the content report with the additional content identified.

*The Curriculum Content Query on Obesity is shared with MSEC members via a One Drive document storage option.*

### **3. Report: Update/Action: Curriculum Integration Subcommittee (CIS) Charge / Scheduled Thread Reviews**

Dr. Olive presented an updated CIS charge to include the following changes:

- Subcommittee will **evaluate, rather than oversee** the design, content, integration and implementation for MSEC approved threads/cross-cutting themes

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- The subcommittee will **periodically review and report to MSEC** on approved threads/cross-cutting themes
- Identified content reviews are **not limited to the CIS subcommittee**
- The subcommittee will **periodically** review and report to MSEC on approved threads/cross-cutting themes
- The subcommittee will meet **monthly or as determined by the CIS chair based on needs/workload**

MSEC discussed and recommended that periodical review of threads/cross-cutting themes should be within the framework of the overall review of the curriculum that occurs over a four (4) year period. The charge will be updated to reflect this recommendation.

The current scheduled reviews of the threads/cross-cutting themes were presented. MSEC asked that the same language used in the charge for threads/cross-cutting themes be identified in the scheduled review document and that the Nutrition thread and Patient Safety, Quality Improvement & High Value Care thread should reflect a current *Review Presentation to MSEC* date within the current periodic and comprehensive evaluation of the curriculum.

Dr. Bird made a motion to accept the Curriculum Integration Subcommittee Charge and the scheduled review of the threads/cross-cutting themes with identified changes to both documents. Dr. Schoborg seconded the motion. MSEC unanimously voted to accept the updated Curriculum Integration Subcommittee Charge and scheduled review of threads/cross-cutting themes.

*The updated Curriculum Inventory Subcommittee Charge and Scheduled Thread Review Documents are shared with MSEC members via a One Drive document storage option.*

### **4. Presentation: Faculty Development Video #2/Discussion – Spaced Education and Interleaved Learning**

Dr. McGowen presented a second faculty development video on Spaced Education. Discussion followed with MSEC identifying that the concept had been used in courses/clerkships and resident training and offered assistance in assessing the learner's comprehension and retention of topic content. Hunter Bratton, M2 student representative, stated that a software called ANKI, which allows creation of flashcards for spaced content review, has been used by students and found useful with retention of topic content.

*The Faculty Development Video #2 – Spaced Education and Interleaved Learning link:*  
<https://www.youtube.com/watch?v=cVf38y07cfk>

### **5. Discussion / Action: Revised Attendance / Leave Policies: M3 Attendance / Leave and M4 Attendance / Leave**

Cathy Peeples brought back to MSEC the revised M3 and M4 Attendance / Leave policies that had been reviewed with the clerkship directors as MSEC decided at the MSEC October Retreat meeting. Ms. Peeples stated that the clerkship directors agreed with the Attendance / Leave policies and the need for students to complete a request for leave related to *Education Leave/Quillen Activity (Official QCOM committee or Integrated Grand Rounds/Other Teaching Activity)*. The leave request forms allows the clerkship coordinators and directors to be aware of the student's whereabouts in cases of emergency.

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Clerkship directors identified that in most instances the student leave request will be approved unless the requested time includes educational activity that cannot be repeated and/or experienced at a later date. Dr. McGowen noted that a similar policy is being drafted for MSEC discussion concerning M1/M2 students.

Dr. Bird made a motion to accept the M3 Attendance / Leave Policy MSEC 0316-13 with revisions. Dr. Schoborg seconded the motion. MSEC unanimously voted to accept the revised policy.

Dr. Johnson made a motion to accept the M4 Attendance / Leave Policy MSEC 0111-4 with revisions. Dr. Lura seconded the motion. MSEC unanimously voted to accept the revised policy.

*Both the M3 and M4 Attendance / Leave policies are shared with MSEC members via a One Drive document storage option.*

### **6. Discussion / Action: 2018-2019 Curriculum Implementations and NBME Minimum % Grade Waivers – MSEC Policy 0111-3**

Cathy Peeples reviewed existing MSEC Policy 0111-3 that stipulates each clerkship will allocate a weight on the grade scale of 35% for the NBME subject exam grade. During the next academic year (2018-2019) all clerkships will experience a one-week (1) shortening of their clerkships to allow transition to a revised M3 academic calendar which will begin in May versus June for 2019-2020. A one-year waiver is being requested for the required 35% NBME subject exam grade allocation for the 2018-2019 academic year to reduce the possible adverse effects of time pressures created by the abbreviated clerkship periods.

Clerkship directors discussed this in October 2017, and could not reach a consensus on the best grade allocation for the NBME subject exam in the 2018-2019 academic year. Some clerkship directors recommended keeping the grade allocation for the NBME at 35% while others recommended reducing it to 25%. Therefore, the waiver request proposes clerkship directors determine the allocation between a minimum of 25% and maximum of 35% weight for the 2018-2019 academic year. Clerkship directors would allocate other clerkship grade components accordingly. At the conclusion of the AY 2018-2019 this one-year policy exception will expire and the NBME subject exam percentage will revert to the current policy of 35% for all clerkships utilizing NBME end of clerkship exams.

MSEC discussion included: that there is no data to know which percentage is most appropriate for shorter clerkships; previously setting the required 35% across all clerkships was to give uniformity to the students NBME grade component; all clerkships would need to be sure to clearly communicate to the students what the clerkship set as the NBME percentage grade component; a selection of 25% would be the best advantage for the student; faculty evaluation scores can be subjective so it would be up to the clerkship directors to best identify the other grade component weights based on the clerkship structure; clerkship directors identified both options without full consensus for either and MSEC should adopt a minimum 25% and maximum 35%, just as clerkship directors did; Promotions Committee may see more clerkship failures next year due to NBME performance because of the possible time pressures created by the abbreviated clerkship periods.

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Dr. Ecay made a motion to accept the proposed suspension of the required 35% NBME subject exam grade scale in AY 2018-2019 for all clerkships utilizing the NBME subject exam; and adopt a minimum of 25% and a maximum of 35% NBME subject exam grade scale for all clerkships utilizing the NBME subject exam. Dr. Lura seconded the motion. MSEC voted five (5) in favor of acceptance and five (5) opposed. Dr. McGowen cast the tie vote in favor of acceptance.

Clerkship directors will set the NBME subject exam grade percentage to between 25% and 35% of the clerkship grade and adjust the remaining clerkship grade components accordingly at the beginning of the academic year.

At the conclusion of the AY 2018-2019 the one-year policy exception will expire and the NBME subject exam percentage will revert to the current policy of 35% for all clerkships utilizing NBME subject exams at the end of their clerkships.

### **7. Report: M1/M2 Review Subcommittee 2016-2017 Review Reports:**

Dr. Acuff presented the following 2016-2017 M1/M2 annual course reviews completed by the review subcommittee. All course reviews include completion of a substantiating document which details the basis of the review. The summary reports and associated substantiating documents are made available for review by MSEC.

**Medical Physiology**, directed by Dr. Tom Ecay, is an M1 course delivered in the spring semester. There were no short or long-term recommendations identified to MSEC. The overall course evaluation was 3.83/5.00, compared to 4.11/5.00 in 2015-2016. Two new teaching faculty are being added for the cardiovascular content in the course. Students applauded the simulation components of the course. Student concerns included the variation in presentation styles among teaching faculty and invited speakers – hoping for more consistency. Dr. Ecay acknowledged the various presentation styles and explained it is hard to set one style among many presenters. The percent of students scoring at / above the national NBME mean was 54% for 2016-2017. Dr. Ecay noted that the Physiology NBME subject exam is one of the harder subject exams in the first year, and that the high level of student performance on the exam is an indication of accomplishment.

### **MSEC accepted the report as delivered with no short or long term recommendations.**

**Pathology I & II**, directed by Dr. Earl Brown, are courses delivered in the fall semester and spring semester. There were no short or long-term recommendations identified to MSEC. The overall course evaluation for Pathology I was 3.97/5.00 in 2016-2017, compared to 4.65/5.00 in 2015-2016. Pathology II overall evaluation was 3.31/5.00 in 2016-2017, compared to 3.97/5.00 in 2015-2016. The report noted that the Outcomes Subcommittee had referred to the M1/M2 Review Subcommittee the finding that the Pathology II course did not meet the Benchmarks monitored by the Outcomes Subcommittee for student dissatisfaction rate (3.31). The M1/M2 Review Subcommittee recommended continued monitoring and re-examination of the student evaluation scores for the course during the next review cycle in 2018-2019. The percent of students scoring at/above the national NBME mean was 69% for 2016-2017, compared to 54% in 2015-2016 and the course is performing well in the Pathology section of STEP I as well. Other than the monitoring of evaluation scores in the next review, there were no major changes recommended for the course overall.

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**Dr. Schoborg made a motion to accept the Pathology I & II Annual Review with no short or long-term recommendations, but to acknowledge that continued monitoring and re-examination of the evaluation scores are identified for the review of the course in 2018-2019. Dr. Walden seconded the motion. MSEC unanimously voted to accept the motion.**

**Biostatics, Epidemiology, Evidence Based Medicine**, directed by Dr. Beth Bailey, is an M1 course delivered in the spring semester in 2016-2017. This has since been changed to delivery in the fall semester block in 2017-2018, directed by Dr. Jerry Mullersman. The Review Subcommittee identified a short-term recommendation to write a letter to Dr. Beth Bailey expressing the commendation of MSEC for a job well-done. There were no long-term recommendations. The overall course evaluation was 4.30/5.00 for 2016-2017, compared to 3.51 in 2015-2016. With the changes in the course director and course placement in the curriculum, the Substantiating document was waived for this review.

**Dr. Schoborg made a motion to accept the Biostatics, Epidemiology, and Evidence Based Medicine Annual Review with the short-term recommendation. Dr. Lura seconded the motion. MSEC unanimously voted to accept the motion.**

**Case Oriented Learning (COL)**, directed by Dr. Paul Monaco, is an M1 course that was delivered in the fall and spring semester blocks and is now a Doctoring I component in 2017-2018 identified as Case Based Learning (CBL). There were no short or long-term recommendations identified to MSEC. The overall course evaluation for Case Oriented Learning was 4.54/5.00 in 2016/2017 compared to the 4.07/5.00 for COL I and 4.02/5.00 for COL II in 2015/2016. The students' review of instructors was very positive and it is anticipated that the CBL component will remain a well-received component of Doctoring I.

**MSEC accepted the report as delivered with no short or long term recommendations.**

**Genetics**, directed by Dr. Paul Monaco, is an M1 course that was delivered in the fall semester block in 2016-2017 and now begins in the fall semester in 2017-2018 and continues into the spring semester block. There were no short or long-term recommendations identified to MSEC. The overall course evaluation for Genetics was 4.61/5.00 for 2016-2017, compared to 4.40/5.00 in 2015-2016. The Review Subcommittee noted that the course's isolation from other basic science courses had been corrected with the moving of the course from the fall to the spring in 2017-2018.

**MSEC accepted the report as delivered with no short or long term recommendations.**

*The M1/M2 Review Subcommittee Reports are made available to MSEC members via a One Drive document storage option.*

### **8. Follow UP: Neuroscience Course Update**

Dr. Schoborg presented the MSEC requested updates for the M2 Neuroscience course (directed by Dr. Eric Beaumont) on items identified for improvement in the course's annual review in May 2017. There were five (5) specific areas targeted for improvement.

1. Lecture and lab handouts, to include USMLE style practice questions, and their availability to students
2. Individual quizzes for labs and lectures with accessibility on D2L
3. Labs aligned with lectures material and quizzes

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4. PT student objectives, exams specific to PT content, and availability of course material for PT students
5. Improving faculty lectures to include assessing gaps and redundancies.

The presentation addressed all five (5) areas with changes made to improve each. Hunter Bratton, M2 student representative acknowledged that the current Neuroscience course is functioning like other classes and that student responses to the changes made have been positive.

Dr. McGowen thanked Dr. Schoborg for his update on the Neuroscience course and acknowledged that the course director and teaching faculty have done a lot of work to incorporate the changes to the course. Dr. McGowen also thanked the M1/M2 Review Subcommittee and MSEC for their attention and follow up to the identified course needs.

*The Neuroscience Course Update presentation is available to MSEC members via a One Drive document storage option.*

### **9. Follow Up: Intro to Psychiatry – MSEC Recommendation Letter to Dr. Goodkin**

Dr. Olive wrote to Dr. Goodkin, Psychiatry Department Chair, in response to a September 2017 MSEC action. The letter confirmed the importance of the Intro to Clinical Psychiatry course and the teaching responsibilities of the course director, Dr. Bird. A meeting followed with Dr. Goodkin, Dr. Bird, and Dr. Olive where Dr. Goodkin expressed his understanding of the importance of the course, both in the past and in the future and ensured that Dr. Bird will have sufficient time to fulfill her responsibilities.

Dr. Bird was asked for further comment and stated that she felt the meeting was successful.

### **10. Discussion/Action: Internal Medicine (IM) 2-week Specialty Rotation(s)**

Dr. Paul, Internal Medicine (IM) Clerkship Director, proposed a change to the IM clerkship structure with the addition of a two-week (2) subspecialty rotation as part of the current eight-week (8) clerkship rotation. Dr. Paul reported he had reviewed the proposal with the IM faculty and identified sufficient slots to accommodate both the M4 selective/electives needs and the M3 subspecialty selections of specialty slots. The proposed changes would give the M3 students exposure to patients in specialty areas and help them decide if the specialty would be a good fit for them in residency. The following structure was offered as example:

1. Six-weeks of inpatient rotations and two-weeks of elective subspecialty/ambulatory rotations.
2. Assign 3-4 students in subspecialty/ambulatory rotations for 2-weeks (depending on the number of students in given period) in a rotatory fashion.
3. Format:
  - a. 2-weeks subspecialty/ambulatory + 3-weeks wards (VA) + 3-weeks wards (JCMC)
  - b. 3-weeks wards (HVMC) + 2-weeks subspecialty/ambulatory + 3-weeks wards (VA)
  - c. 3-weeks wards (JCMC) + 3-weeks wards (HVMC) + 2-weeks subspecialty / ambulatory



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4. Students would be able to give their preferences for subspecialty elective rotations. If more than 3 students choose the same subspecialty in a given period the clerkship will assign the subspecialty based on a lottery or their second preference(s).

MSEC discussion included whether there would be any draw backs to students doing a two-week (2) specialty before they had exposure to the clerkship itself. Dr. Paul assured MSEC that in the past when specialties were offered first there was not a problem with students following the clerkship structure after the two-week (2) week period. Cathy Peeples expressed concern about the limitations for the Jr Clinical Experiences specialty offerings which use many of the same IM specialties. There will be a need for close coordination with all scheduling coordinators to ensure there is not a conflict with slots being selected.

Dr. Paul confirmed that students in the subspecialty rotations of the clerkship would attend all didactic sessions. MSEC was concerned about study time for the NBME and Dr. Paul assured that the student will have ample student time for the NBME within the specialty assignment. Dr. McGowen noted that next year (2018-2019) identified as the Transition Year, all clerkships will have one-week (1) less in their rotations and this will provide a challenge to all clerkship directors to schedule student clinical duties, didactic sessions, and NBME study time.

Dr. McGowen asked for additional comments before asking for a motion on the agenda item. There were no further comments.

Dr. Johnson made a motion to accept the request to implement the addition of an Internal Medicine two-week subspecialty rotation within the present eight-week (8) clerkship time block for each student on the rotation, beginning with Period 4 in January 2018. Dr. Moore seconded the motion. MSEC unanimously voted to accept motion.

### **11. Standing Agenda Item: Subcommittees, Implementation Groups & Technology Updates**

None were identified.

The meeting adjourned at 5:26 p.m.

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### MSEC Meeting Documents

MSEC Members have access to the meeting documents identified above through a shared One Drive document storage option made available with their ETSU Email account and login. Quick access to the files can be made by clicking on the below link and opening the August 15, 2017 MSEC meeting folder. [https://etsu365-my.sharepoint.com/personal/mckinley\\_etsu\\_edu/layouts/15/onedrive.aspx?id=%2Fpersonal%2Fmckinley%5Fetsu%5Fedu%2FDocuments%2FMSEC%20Meeting%20Documents](https://etsu365-my.sharepoint.com/personal/mckinley_etsu_edu/layouts/15/onedrive.aspx?id=%2Fpersonal%2Fmckinley%5Fetsu%5Fedu%2FDocuments%2FMSEC%20Meeting%20Documents)

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### Upcoming MSEC Meetings

**MSEC Meeting Dates: \* NOT 3rd Tuesday – Location To Be Determined**

December 12, 2017 – 3:30-6:00 pm\*

January 16, 2018 Retreat 12:00 noon-5:00 pm

February 20, 2017 – 3:30-6:00 pm

March 20, 2018 – 3:30-6:00 pm

April 17, 2018 – 3:30-6:00 pm

May 15, 2018 – 3:30-6:00 pm

June 12, 2018 Retreat 12:00-3:00 pm & Annual Meeting 3:30-5:00 pm\*