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Medical Student Education Committee Minutes

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5-17-2022

### 2022 May 17 - Medical Student Education Committee Minutes

Medical Student Education Committee, East Tennessee State University

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QUILLEN  
COLLEGE of MEDICINE

EAST TENNESSEE STATE UNIVERSITY

The Medical Student Education Committee (MSEC) of the Quillen College of Medicine met for a Meeting on Tuesday, May 17, 2022 via Zoom meeting.

Attendance

<u>FACULTY MEMBERS</u>	<u>EX OFFICIO NON-VOTING MEMBERS</u>
Ivy Click, EdD, Chair	Beth Anne Fox, MD, Vice Dean
Caroline Abercrombie, MD	Ken Olive, MD, Assoc Dean for Accreditation Compliance
Martha Bird, MD	
Thomas Ecay, PhD	<u>SUBCOMMITTEE CHAIRS</u>
Jennifer Hall, PhD	Keelin Roche, MD
Jon Jones, MD	Robert Acuff, PhD
Paul Monaco, PhD	
Jerry Mullersman, MD	<u>ACADEMIC AFFAIRS STAFF</u>
Antonio Rusinol, PhD	Kortni Dolinger, MS, Staff
	Mariela McCandless, MPH, Staff
<u>STUDENT MEMBERS</u>	Aneida Skeens, BSIS, CAP-OM, Staff
RJ Black, M3	
	<u>GUESTS</u>
<u>EX OFFICIO VOTING MEMBERS</u>	Earl Brown, MD
Deidre Pierce, MD	Leon Dumas, MMED
Robert Schoborg, PhD	Lindsey Henson, MD
Amanda Stoltz, MD	Kelly Karpa, PhD
Rachel Walden, MLIS	Robert T. Means, Jr, MD
	Karen Schetzina, MD
	Tory Street, Assistant Dean

Meeting Minutes

1. Approve: Minutes from the MSEC April 19, 2022 Meeting.

Dr. Click opened the meeting at 3:33 p.m. and asked for comments/updates to the April 19, 2022 meeting minutes, which were distributed to MSEC members via email on Friday, May 13, 2022.

**A motion was made to accept the April 19, 2022 minutes and seconded. MSEC approved the motion.**

*The MSEC minutes for April 19, 2022 are shared with MSEC Members via Microsoft Teams document storage.*

**Announcements:**

- Faculty Development
  - May 18 – 12:00-1:00 pm (Zoom)
    - Innovative Longitudinal Integrated Clerkship Design with Dr. Sarah Wood
  - June 8 – 11:30 am-1:00 pm (Zoom)
    - IQ Case Facilitation with Dr. Michelle Lizotte-Waniewski
  - June 21 (MSEC Retreat) – (In-person Workshop)
    - IQ Cases – Dr. Michelle Lizotte-Waniewski
  - June 30 – 3:00-4:30 (Zoom)
    - Professionalism in the Clinical Learning Environment with Dr. Charlene Dewey
- Faculty Book Club
  - June 1 – 4:30-5:30 pm
    - *The Immortal Life of Henrietta Lacks* by Rebecca Skloot
  - August 3 – 4:30-5:30 pm
    - *Radical Hope* by Kevin Gannon  
(potential luncheon with the author on August 8)

**2. Report: M3/M4 Review Subcommittee 2021-2022**

Surgery Clerkship

*Please see the Surgery Annual Review Report for additional data.*

Dr. Roche presented a review for the Surgery Clerkship. Dr. Trevy Ramos is the clerkship director. The reviewers were Dr. Russ Hayman and R.J. Black, M3.

- Goals, Outcomes, and Objectives: **Met expectations.**
- Content, Delivery, and Environment: Student satisfaction with educational methods, resources at each site, and faculty and resident teaching **met expectations**. Student satisfaction with the learning environment was **below expectations** with only 79.49% of students being satisfied.
- Assessment, Feedback, and Grading: Student satisfaction with feedback **exceeded expectations**. Student satisfaction with receiving mid-clerkship formative assessment, grade transparency and fairness, and timeliness of grades **met expectations**.
- Educational Outcomes: Grade breakdown **exceeded expectations**. NBME exam performance and fewer than 10% of students scoring at or below the 5<sup>th</sup> percentile **met expectations**.
- Student Feedback: Student satisfaction with clerkship quality was **below expectations** with only 82.05% being satisfied or very satisfied. Student satisfaction with clerkship organization **met expectations**. Student satisfaction with teaching quality was **below expectations** with only 79.49% being satisfied or very satisfied. Student satisfaction with quality of attending teaching **met expectations**.
- Previous Reviews: **Met expectations.**

Strengths and weaknesses of the course were discussed. Please see the M3/M4 Review Subcommittee Surgery Clerkship report for further details.

Comments from Clerkship Director: Please see the M3/M4 Review Subcommittee Surgery Clerkship report for further details.

Upcoming Changes Proposed by the Clerkship Director:

- Change: Less online content required
  - Reason: student able to be in on more in-person clinical experiences and provide more time for studying
  - Outcomes: students have more time to study for shelf and more time for in-person clinical experiences
- Change: Addition of lecture-based quiz
  - Reason: evaluation of student retention of lecturer/discussion content
  - Outcome: has reliably identified the stronger and weaker students

Recommendations for MSEC: Given that three total and two areas within student feedback fell below expectations, a CQI Plan is recommended.

This committee is also concerned that the quality of the clerkship is being impacted by lack of available site placements and DO/PA students crowding sites. This was a noted problem in past reviews. Given the increased size of future M1 classes, we think this is a matter of consideration.

Clerkship director comments related to this:

- <12-13 students per rotation is ideal. More than this requires we place multiple students on services built for enough volume for one student. With the increase in DO/PA schools paying private physicians for taking those students, we are losing high volume experiences for our students.
- We are no longer sending M3 students to HVMC for rotations (loss of a site that provided clinical experience for three students).
- Two private services typically taking 1-3 students at a time now can only accommodate 1 student given crowding by PA/DO students.
- We did gain: a single site with Dr. Jeremy Meyer, but this will not be consistent for each rotation throughout the year given his schedule; ETSU Surgery becoming busier with call and take 1-3 students; Trauma/ACS willing to take a single M3 student (but also is a site for M4/visiting/electives).

Dr. Click commented that the information regarding the overcrowding of DO/PA students will be passed on to those who are looking into how we make agreements with preceptors. Dr. Click noted that MSEC cannot control that piece but can pass the information along to others.

Dr. Jon Jones asked if students could complete a night float rotation, which would help to alleviate some of the overcrowding but more importantly, give students a more robust experience at night. Dr. Click noted that MSEC could make a recommendation to Dr. Ramos that she investigate a night float rotation for students. R.J. Black commented that she had a concern about uneven experiences among students and asked if the experiences could be evened out and perhaps made into a one week experience.

**A motion was made to accept the M3/M4 Review Subcommittee Surgery Clerkship report as presented with a CQI Plan to be submitted to MSEC at a later time with one consideration being to look at night experiences for the students and seconded. MSEC discussed and approved the motion.**

*The presented Surgery Annual Clerkship review document is shared with MSEC Members via Microsoft Teams document storage.*

Psychiatry Clerkship

*Please see the Psychiatry Annual Review Report for additional data.*

Dr. Roche presented a review for the Psychiatry Clerkship. Dr. Martha Bird is the clerkship director. The reviewers were Dr. Russ Hayman and Merkle Moore, M3.

- Goals, Outcomes, and Objectives: Student satisfaction with clerkship objectives supporting the QCOM Institutional Educational Objectives and/or Entrustable Professional Activities and objectives being assessed **met expectations**. Student satisfaction with educational event objectives supporting clerkship objectives was **below expectations**.
- Content, Delivery, and Environment: Student satisfaction with educational methods and faculty and resident teaching **met expectations**. Student satisfaction with resources at each site and with the learning environment **exceeded expectations**.
- Assessment, Feedback, and Grading: Student satisfaction with feedback **exceeded expectations**. Student satisfaction with receiving mid-clerkship formative assessment, grade transparency and fairness, and timeliness of grades **met expectations**.
- Educational Outcomes: Grade breakdown **exceeded expectations**. NBME exam performance was **below expectations** with 39.4% scoring at or above the national mean for May-November 2021. There were 3% for May-November 2021 that scored below the 5<sup>th</sup> percentile and this **exceeded expectations**.
- Student Feedback: **Exceeded expectations**.
- Previous Reviews: **Not identified**.

Strengths and weaknesses of the course were discussed. Please see the M3/M4 Review Subcommittee Psychiatry Clerkship report for further details.

Comments from Clerkship Director: Please see the M3/M4 Review Subcommittee Psychiatry Clerkship report for further details.

Recommended Changes for Clerkship Director: Encourage residents to allow students to document in the EMR.

Recommendations for MSEC: Help Dr. Bird in mapping the course objectives. Low numbers of core ETSU psychiatry faculty.

Dr. Bird noted that she has completed the mapping and has submitted to Aneida Skeens. Dr. Bird also raised concern of almost every clerkship failing to meet the NBME standard this year. Dr. Click commented that she would like to get the data for the entire year for each clerkship and bring back to MSEC for further discussion. Dr. Olive noted that looking at the whole year would be important because there is a general trend for students in the second half to do better than in the first half because they know more. Dr. Click stated now that the year had ended, the data for the second half of the year could be reviewed by MSEC to see how students fared and if this is a continuing trend of being lower than average and to also review other data.

**A motion was made to accept the M3/M4 Review Subcommittee Psychiatry Clerkship report as presented and seconded. MSEC discussed and approved the motion.**

*The presented Psychiatry Annual Clerkship review document is shared with MSEC Members via Microsoft Teams document storage.*

### 3. Report: M1/M2 Review Subcommittee 2021-2022

#### Anatomy

*Please see the Anatomy Annual Review Report for additional data.*

Dr. Acuff presented a review for the Anatomy course. Dr. Thomas Kwasigroch is the course director. The reviewers were Dr. Brian Rowe and Noah Rutherford, M2.

- Goals, Outcomes, and Objectives: **Met expectations.**
- Content, Delivery, and Environment: **Exceeded expectations.**
- Assessment, Feedback, and Grading: **Met expectations.**
- Educational Outcomes: Grade breakdown and percentage of students scoring at or below the 10<sup>th</sup> percentile **exceeded expectations.** The percentage of students scoring at or above the national mean on the NBME **met expectations.**
- Student Feedback: Student satisfaction with overall course quality **exceeded expectations.** Student satisfaction with course organization was **below expectations** with only 80% of students being satisfied or very satisfied. Student satisfaction with teaching quality was **below expectations** with only 82% of students being satisfied or very satisfied. Student satisfaction with course instructors **met expectations.**
- Previous Reviews: **No prior recommendations were given.**

Strengths and weaknesses of the course were discussed. Please see the M1/M2 Review Subcommittee Anatomy report for further details.

Comments from Clerkship Director: Please see the M1/M2 Review Subcommittee Anatomy report for further details.

Recommended changes to the Clerkship Director: Not applicable with the new TRAILS curriculum.

Recommendations for MSEC: None.

Dr. Click noted that this was the last iteration of anatomy as a stand-alone course.

Discussion arose regarding the struggles that students seemed to have had this year with courses and Step 1. Dr. Click commented that there have been a lot of concerns expressed in listservs about Step scores across the country. Dr. Click stated that this needs to be discussed further at a future MSEC meeting.

**A motion was made to accept the M1/M2 Review Subcommittee Anatomy Course report as presented and seconded. MSEC discussed and approved the motion.**

*The presented Anatomy Annual Course review document is shared with MSEC Members via Microsoft Teams document storage.*

#### Neuroscience

*Please see the Clinical Neuroscience Annual Review Report for additional data.*

Dr. Acuff presented a review for the Clinical Neuroscience course. Dr. Diego Rodriguez-Gil is the course director. The reviewers were Dr. David Johnson and Noah Rutherford, M2.

- Goals, Outcomes, and Objectives: **Met expectations.**
- Content, Delivery, and Environment: Student satisfaction with educational methods and content integration **met expectations.** Student satisfaction with the learning environment **exceeded expectations.**
- Assessment, Feedback, and Grading: **Met expectations.**
- Educational Outcomes: Grade breakdown **exceeded expectations.** The NBME exam performance was **below expectations** with only 25% scoring above the national mean and 20% scoring below the 10<sup>th</sup> percentile.
- Student Feedback: Student satisfaction with course quality was **below expectations** with 83.1% of students being satisfied. Course organization was **below expectations** with 76.1% of students being satisfied. Teaching quality was **below expectations** with 83.1% of students satisfied. It was noted that in 2020, course quality was 74.3%, course organization was 74.3%, and teaching quality was 68.6%, which is an overall improvement. Student satisfaction with course instructors **met expectations.**
- Previous Reviews: **Met expectations.**

Dr. Acuff noted that student evaluations point to a steady improvement taking place in the Clinical Neuroscience course and congratulated Dr. Rodriguez-Gil on that accomplishment. Dr. Acuff also noted that Dr. Rodriguez-Gil has been communicating with Dr. Shams on how to improve the clinical content and improve the overall satisfaction of the course.

Strengths and weaknesses of the course were discussed. Please see the M1/M2 Review Subcommittee Clinical Neuroscience report for further details.

Comments from Clerkship Director: Please see the M1/M2 Review Subcommittee Clinical Neuroscience report for further details.

Recommended changes to the Clerkship Director: Although some faculty use formative testing via questions during lecture and/or questions at the end of handouts, there are no graded quizzes or practice quizzes. Now that QCOM has access to MedEd, their notes might be used and will help faculty transition to the TRAILS curriculum. At the very least, course faculty should review the MedEd notes and possibly modify their own. Rather than broad questions, simple multiple choice (basic knowledge) and fill-in-the blank questions aid students more. MedEd also has flashcards and a Qbank that should help. Additional example questions from each individual lecturer may also help increase comfortability with the wide variety of professors that rotate through the class. AMBOSS provides additional information and testing, but be careful that students are not overwhelmed with outside resources; help them focus. Low stakes quizzing encourages students to keep up with the work and provides them early feedback. Given the number of faculty teaching in this course, Dr. Rodriguez-Gil is doing an excellent job with the organization and he is leading by example.

Recommendations for MSEC: None.

Dr. Click iterated Dr. Acuff's comment of Clinical Neuroscience increasing their performance evaluations year after year and are close to reaching the 85% goal. Dr. Click also noted that Dr. Rodriguez-Gil won the M2 Course Director of the Year award.

Dr. Schoborg stated he had gone back and looked at all the second-year course shelf scores for the last four or five years and noted that every single second-year course shelf went down in terms of the Quillen mean versus the national mean. There was not a single second-year course, that he is aware of, where the average was above the 50<sup>th</sup> percentile. Dr. Schoborg stated that it was not just that the national mean went up but that students have not done well in all courses for the last four or five

years. Dr. Click commented she has been watching the M2 NBME exams come in and noted they were all below the national average and were considerably lower from what we have done in past years. Dr. Click noted there are multiple variables that are impacting this and that we are not alone as other schools are experiencing these same kinds of issues.

Dr. Click noted that Dr. Rodriguez-Gil anticipated that a CQI Plan would be required as several things were below expectations on the review and submitted a plan for MSEC review today. Dr. Click commented that this course has one more year and MSEC should not brush aside that this course is ending and should carefully think about the actions Dr. Rodriguez-Gil has taken that have been successful as well as anything that needs to change for the future. Dr. Click stated MSEC needs to consider that the NBME score is not unique to this course as we just heard.

**A motion was made to accept the M1/M2 Review Subcommittee Neuroscience Course report as presented and seconded. MSEC discussed and approved the motion.**

*The presented Neuroscience Annual Course review document is shared with MSEC Members via Microsoft Teams document storage.*

#### 4. Report: CQI Plans

##### Rural Community-Based Health Projects – 2021-22

*Please see the Rural and Community-Based Health Projects CQI Plan for additional data.*

Dr. Karen Schetzina presented the CQI Plan for Rural and Community-Based Health Projects. Dr. Schetzina noted that she listed the three lowest course scores to target for improvement. Dr. Schetzina stated that this course became an elective with the 2022-23 academic year.

##### Problem Areas:

- General course organization rated as 2.33/4.0
  - Not enough time for projects/research
  - Insufficient guidance on IRB process
- Synchronous class meeting rated as 2.23/4.0
  - Spending too much time on Zoom and not spending enough time in community
  - Content overlapped with other MPH courses
- Asynchronous course content as 2.09/4.0
  - Spending too much time on education and activities that did not directly relate to project/research completion

##### Goals for Intervention:

- Goal 1 – To increase course scores for general course organization
  - Course director and faculty posts or emails course reminders at least once a week prior to class dates highlighting expectations, assignments, grading rubric, and class schedule of activities from course syllabus.
  - Consult and review of course materials, methods, and D2L site through ETSU Center of Excellence for Teaching and Learning.
  - Clarify how all course activities aid in project completion and improve time efficiency by encouraging contributions to the collaborative online final report template after each class group meeting.
  - Course director leads IRB applications during the summer before the course for groups if research with human subjects is part of group project. Course faculty meet with IRB staff/director prior to semester start to discuss questions.



- Goal 2 – To increase the course score for synchronous class meetings
  - Course sessions will not be offered via Zoom unless required for individual students who cannot attend a session in-person.
  - Course director will work with the course coordinators/faculty to maximize time in the community, recognizing limitations inherent in the medical school schedule when helping students design projects.
  - Course director will maintain communication with COPH regarding the MPH curriculum to ensure course activities and goals meet requirements of the MPH degree but are not a duplication.
- Goal 3 – To increase the course score for asynchronous course content
  - Consult and review of course materials, methods, and D2L site requested through ETSU Center of Excellence for Teaching and Learning.
  - Clarify how all course activities aid in project completion and improve time efficiency by encouraging contributions to the collaborative online final report template after each class group meeting.
  - Convert to hybrid elective RPCT course with more concise online pre-class assignments.

**A motion was made to accept the Rural Community-Based Health Projects CQI Plan as presented and seconded. MSEC discussed and approved the motion.**

*The presented Rural Community-Based Health Projects document is shared with MSEC Members via Microsoft Teams document storage.*

### Clinical Neuroscience

*Please see the Clinical Neuroscience CQI Plan for additional data.*

Dr. Rodriguez-Gil was unable to attend the MSEC meeting and Dr. Click presented the Clinical Neuroscience CQI Plan on his behalf. Dr. Click noted if the committee had any questions or needed Dr. Rodriguez-Gil to come to a future MSEC meeting, he would be willing to do that.

#### Problem Areas:

- There were 23.5% of students who reported dissatisfaction with course organization on LCME follow up survey in November of 2020.
- There were 35.3% of students who reported dissatisfaction with quality of teaching on LCME follow up survey in November of 2020.
- There were 25.5% of students who were dissatisfied with the overall course quality on LCME follow up survey in November of 2020.

#### Goals for Intervention:

- To bring student dissatisfaction of course organization closer to 15%
  - Changes were kept of dividing the contents in a logical manner and have block exams divided by content. The initial plan was later slightly modified due to time constraints of one of the professors teaching in the course. Contents per exam were kept the same as best could, but the order of the lectures for a couple of the exams had to be changed
  - Student feedback on having an extra exam were positive because it split the contents more uniformly.
- To bring student dissatisfaction of quality of teaching to a short-term goal of 20% with a long-term goal of closer to 15%
  - Encourage students to contact course director anytime they have a question.

- Handouts have been revised for the semester as done in the past.
- Work closely with Dr. Tanzid Shams on developing a better series of clinical lectures, case studies, and connecting the basic anatomical lectures with his case-oriented lectures.
- Maintained the number of flipped-class lectures and significantly increased the use of turning-point style questions.
- All new classes added last year were kept and added a new class this year to emphasize the importance of neuroanatomy of the spinal cord tracts.
- To bring student dissatisfaction of overall course quality to the expected 15% threshold.
  - Continue with integrating with other courses both from first and second year as follows:
    - Use contents from Physiology and Cell & Tissue Biology in class to remind students of what they already learned and build from there.
    - Have two lectures (3 hours) where we review contents from Anatomy (cranial nerves and peripheral nerves)
    - Lecture that matches the lecture in Pathology on demyelinating disorders

Dr. Click noted that this was one of the courses LCME was particularly concerned about because of its history. Dr. Click stated that the course has continued to show improvement based on everything Dr. Rodriguez-Gil has done and believes that having this plan in place will allow the course to continue showing improvement up until the final iteration of the course.

**A motion was made to accept the Clinical Neuroscience CQI Plan as presented. MSEC discussed and approved the motion.**

*The presented Clinical Neuroscience CQI Plan document is shared with MSEC Members via Microsoft Teams document storage.*

## 5. Discussion/Approval: Keywords

Dr. Click presented a list of the keywords used for our curriculum. Dr. Click stated that when we mapped our curriculum in the past, we used the USMLE Outline document to map keywords because we did not have an accurate way to determine where content was located in our curriculum due to the limitations we had with New Innovations. The AAMC has recommended a list of official keywords for curriculum mapping. This list is shorter than the USMLE Outline, which was more thorough, and the AAMC list is broader.

Dr. Click feels the AAMC list will make mapping easier for faculty since there are fewer keywords to choose from. In addition, Leo has a more robust search feature that not only searches the objectives and session objectives but also searches the content in materials.

Dr. Click stated that MSEC approved using the USMLE Outline list previously as the official keyword mapping list and now that the AAMC has this new list, it is being submitted for MSEC consideration.

Rachel Walden asked if we would still be using the PlusList to fill in some areas that we are closely monitoring. Dr. Click stated that a comparison was done of our PlusList to the AAMC list to see if there was any overlap and almost all the keywords from the PlusList were on the AAMC list. Our supplementation terms, which were around five keywords, would be added to the AAMC list. Dr. Click also commented that if any of our societal terms are not included on the AAMC list, they would be added but believes the majority are included.

**A motion was made to use the AAMC Keyword List for mapping and seconded. MSEC discussed and approved the motion.**

*The presented AAMC Keyword List document is shared with MSEC Members via Microsoft Teams document storage.*

## **6. Discussion/Approval: Policy Discussion**

### TRAILS Pre-Clerkship Attendance Policy

*Please see the TRAILS Pre-Clerkship Attendance Policy for additional information.*

Dr. Click presented a new attendance policy for the pre-clerkship phase. Dr. Click stated that with the design and pedagogy changing around TRAILS, it was discussed that a new attendance policy would need to be created or adjustments made to the current attendance policy would need to be done. Rather than trying to update the current policy and having two policies in one, it was decided to create a new TRAILS attendance policy that will stand alone and after the M2 legacy courses finish this year, the current policy will phase out.

Dr. Click reviewed the changes that were made to the current policy and noted the major change to the attendance policy was making attendance and active participation in all components of the TRAILS curriculum a requirement.

MSEC discussed the changes to the policy and the concept of including flex days for students to take was raised. After much discussion, Dr. Click stated that pieces of the policy would need to be approved by MSEC at this point in time and then the policy as a whole be brought back to MSEC. Dr. Click noted the pieces that MSEC should approve today included requiring attendance and active participation in all activities and the concept of adding two flex days per semester to the policy that are not to be carried over and should be monitored by the Office of Academic Affairs. MSEC discussed these proposals and determined that these should be placed into the policy.

**A motion was made to require attendance and active participation in all activities and seconded. MSEC discussed and approved the motion.**

**A motion was made to add two flex days per semester, not to be carried over, and monitored by the Office of Academic Affairs and seconded. MSEC discussed and approved the motion.**

*The presented Pre-Clerkship Attendance Policy document is shared with MSEC Members via Microsoft Teams document storage.*

### M3 Clerkship Grading and Required Clinical Experiences Policy

Dr. Click presented the M3 Clerkship Grading and Required Clinical Experiences policy noting that this policy included the combined M3 Clerkship Exam and Grading Policy and the Documentation of Clerkship Specific Required Procedures and/or Patient Types Policy. Dr. Click stated that the policy included the MSEC approved Honors Grading language. Dr. Click also noted that this policy includes an exemption on the use of the NBME Customized Assessment Services (CAS) exam rather than the NBME subject exam or Aquifer exam for the Family Medicine and Rural Primary Care Clerkships. Dr. Click stated the NBME CAS score plus the OSCE will provide a 35% objective grade component.

Dr. Click noted that there was no longer a quorum available to approve the policy and that it would be sent out to MSEC members for electronic approval. Dr. Click noted the policy was also included in the email to MSEC members with the agenda for today's meeting.

The MSEC meeting adjourned at 6:00 p.m.

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#### **MSEC Meeting Documents**

MSEC Members have access to the meeting documents identified above through the shared Microsoft Teams document storage option made available with their ETSU Email account and login.

**If you are unable to access Microsoft Teams MSEC Team please contact: Aneida Skeens at: [skeensal@etsu.edu](mailto:skeensal@etsu.edu). Telephone contact is: 423-439-6233.**

#### **MSEC Meeting Dates 2021-2022: (Zoom meetings unless noted)**

January 18, 2022 Retreat – 12:00-5:00 pm

February 15 – 3:30-6:00 pm

March 15 – 3:30-6:00 pm

April 19 – 3:30-6:00 pm

May 17 – 3:30-6:00 pm

June 21 - Retreat -11:30 am-3:00 pm (In-person meeting)

June 21 - Annual Meeting - 3:30-5:00 pm (In-person meeting)