

East Tennessee State University

## Digital Commons @ East Tennessee State University

---

Medical Student Education Committee Minutes

---

8-16-2022

### 2022 August 16 - Medical Student Education Committee Minutes

Medical Student Education Committee, East Tennessee State University

Follow this and additional works at: <https://dc.etsu.edu/msec-minutes>



Part of the [Higher Education Commons](#), and the [Medical Education Commons](#)

---

#### Recommended Citation

Medical Student Education Committee, East Tennessee State University, "2022 August 16 - Medical Student Education Committee Minutes" (2022). *Medical Student Education Committee Minutes*. 179. <https://dc.etsu.edu/msec-minutes/179>

This Minutes is brought to you for free and open access by Digital Commons @ East Tennessee State University. It has been accepted for inclusion in Medical Student Education Committee Minutes by an authorized administrator of Digital Commons @ East Tennessee State University. For more information, please contact [digilib@etsu.edu](mailto:digilib@etsu.edu).



**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, August 16, 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	
Jennifer Hall, PhD	<u>SUBCOMMITTEE CHAIRS</u>
Jon Jones, MD	Robert Acuff, PhD
Paul Monaco, PhD	James Denham, MD
Jerry Mullersman, MD	
Antonio Rusinol, PhD	<u>ACADEMIC AFFAIRS STAFF</u>
Russell Hayman, PhD	Mariela McCandless, MPH, Staff
Jason Moore, MD	Aneida Skeens, BSIS, CAP-OM, Staff
Jean Daniels, PhD	
	<u>GUESTS</u>
<u>STUDENT MEMBERS</u>	Patti Amadio, MD
RJ Black Leach, M4	Andy Berry
Andrew Hicks, M3	Brock Blankenship, MD
Helen Mistler, M2	Leon Dumas, MMED
	Brad Feltis, MD
<u>EX OFFICIO VOTING MEMBERS</u>	Lindsey Henson, MD
Melissa Robinson, MD	Kelly Karpa, PhD
Robert Schoborg, PhD	Ryan Landis, MD
Amanda Stoltz, MD	Robert T. Means, Jr, MD
Rachel Walden, MLIS	Trevy Ramos, DO
	Tory Street, Assistant Dean
	Brad Wood, MD

Meeting Minutes

1. **Approve: Minutes from the MSEC Retreat and Annual Meetings – June 21, 2022.**

Dr. Click opened the meeting at 3:30 p.m. and asked for comments/updates to the June 21, 2022 Retreat and Annual meeting minutes, which were distributed to MSEC members via email on Friday, August 12, 2022.

**A motion was made to accept the June 21, 2022 Retreat and Annual Meeting minutes and seconded. MSEC approved the motion.**

*The MSEC Retreat and Annual Meeting minutes for June 21, 2022 are shared with MSEC Members via Microsoft Teams document storage.*

**Announcements:**

- Faculty Development
  - August 18 – 3:30-4:30 pm (Zoom)
    - Patient Safety/Quality Improvement with Patricia Chambers, MD
  - September 21 – 3:30-4:30 pm (In-person)
    - Integrative Active Learning in the Classroom Setting with Amy Johnson, EdD
  - October 19 – 12:00-1:00 pm (In-person, Votaw Auditorium)
    - Wellness and Professional Boundaries with Michael Baron, MD, MPH, DFASAM, Medical Director for the Tennessee Medical Foundation-Physician’s Health Program
  - October 26 – 12:00-1:00 pm (In-person)
    - Clinical Narrative Assessment with Blair Reece, MD and Deidre Pierce, MD
- Faculty Book Club
  - **Updated Date** - August 23 – 4:30-5:30 pm
    - *Radical Hope* by Kevin Gannon
- New Committee – Student Success Committee
  - The Student Success Committee (SSC) will replace the Student Performance Assessment Review Committee (SPARC) for the M1 students.
    - SSC will meet every two weeks
    - SSC will include the current basic science course directors and Doctoring course director as needed
    - SSC policy (ADMIN-0722-26) has been placed on the Educational Policy website
  - SPARC will remain in place for the M2 students and then dissolve at the end of the 2022-23 academic year.

**2. Report: Outcomes Subcommittee**

*Please see the Outcomes Subcommittee Measures Report for additional information.*

Dr. Denham presented the Outcomes Subcommittee Measures report. Dr. Denham noted there were 31 benchmarks in the report and all but 2 were met. Dr. Denham commented that out of the 29 benchmarks met, there were 3 that the committee was monitoring. The committee will continue monitoring those benchmarks.

Dr. Denham stated the two following benchmarks were not met:

1. Personal and Professional Development 2 (*At Least 90% of students will report being at least adequately prepared to recognize and address personal stressors during medical school.*)
2. Program Benchmark 6 (*In order to address primary care needs of the public, QCOM graduates will obtain PGY 1 residency positions in Family Medicine, Internal Medicine, Pediatrics and OB/GYN above the annually reported national match rates for each specialty.*)

Dr. Denham noted that the Personal and Professional Development benchmark was not met last year with the percentage being in the mid to upper 80s and this year, it is in the mid-80s. Dr. Denham noted that the recommendation from the committee last year had not been implemented due to the new TRAILS curriculum and felt that the committee would continue to monitor to see if Learning Communities will help to increase this measure.

Dr. Denham noted that for the Program Benchmark 6, we were above the national Match rates when you take it as a group; however, we are below the national average in internal medicine. The national average is 18% and we are at 10%. Last year, our internal medicine Match rate was at 12%, which was also below the national average so we have dropped from last year. Dr. Denham noted that a drop in internal medicine has been noted nationally as well. Dr. Denham commented that the committee did not have any recommendations for this since as a group, we are doing very well on a whole and felt like some of the changes in the internal medicine department had probably contributed to this and with more stability, it will hopefully improve. Dr. Denham noted that family medicine had more than doubled the national average and this is a positive.

Dr. Click commented that a lot of the benchmarks have been rolled to five-year averages and wondered if the Program Benchmark 6 should be looked at every five years instead of year to year as there are ups and downs from year to year. Dr. Click noted that we probably would still be below the national average on internal medicine though.

Dr. Click noted that with the implementation of Learning Communities this year and topics related to wellness and personal stress, including topics on sleep health, yoga, mindfulness, brain health, wellness, and Parc House, the Personal and Professional Development 2 benchmark should improve.

Dr. Click stated that one of the benchmarks that was met, Knowledge for Practice 6 (*Fewer than 10% of students will score at or below the 5th percentile on any overall Phase 2[Clinical] NBME or other nationally normed end of clerkship exam.*), we had been below the 10% and this year, it was 3.55%. Last year, MSEC discussed whether this should be lowered and it was tabled. Dr. Click noted that we are again well below the 10% benchmark and asked if MSEC should consider moving it to fewer than 5% of students. Dr. Olive concurred that MSEC should act upon this. Dr. Henson commented that MSEC might want to consider what the LCME is asking us to do in relation to the new curriculum, the old curriculum, the outcome measures, etc. Dr. Henson noted that there will likely be some changes in the clerkship curriculum that may impact how this goes and although it would be nice to have below 5%, but if you were aiming for 10% and there were changes, you could still meet your benchmark. Dr. Click commented with the struggle of recent NBME failures, this would be something to consider as well.

Dr. Click asked MSEC their thoughts on whether or not lowering the Knowledge for Practice 6 benchmark should move forward. No discussion ensued during this time.

**A motion was made to accept the Outcomes Subcommittee report as presented and seconded. MSEC discussed and approved the motion.**

*The presented Outcomes Subcommittee report document is shared with MSEC Members via Microsoft Teams document storage.*

### **3. Approval: Electives**

#### Advanced Wilderness Life Support

*Please see the Advanced Wilderness Life Support Elective document for additional data.*

Dr. Click presented the Advanced Wilderness Life Support for MSEC review. Dr. Click noted this is a two-week elective and would be offered for a specific time period. There will be a maximum of six students per period. Dr. Click noted that Dr. Brock Blankenship will be the rotation director and asked him to give more detail on the elective to MSEC members. Dr. Blankenship commented that he and Andy Berry will be the instructors for the elective. Dr. Blankenship noted that this is a program done out of AdventureMed, an international program. Dr. Blankenship stated they will follow the AdventureMed curriculum and if students desire to get the Advanced Wilderness Life

Support (AWLS) certification (four-year certification), they will have to pay a fee for the certification. It will be a mostly hands-on interactive elective with the hopes of expanding to 12-15 students and completing two courses in a calendar year.

**A motion was made to approve the Advanced Wilderness Life Support elective as presented and seconded. MSEC discussed and approved the motion.**

*The presented Advanced Wilderness Life Support Elective document is shared with MSEC Members via Microsoft Teams document storage.*

#### Surgical Essentials for Medical Students (Core Content for Surgical Clerkships)

*Please see the Surgical Essentials for Medical Students (Core Content for Surgical Clerkships) document for additional data.*

Dr. Dumas presented the Surgical Essentials for Medical Students (Core Content for Surgical Clerkships). Dr. Dumas noted that this elective is focused on M4 students who are near the end of their education and intend to go into a surgical discipline, primarily in this case, general surgery. The intent of the elective is to group all things surgical together so we can provide a platform of transitioning into residency easier than they would otherwise have. Dr. Dumas stated that the American College of Surgeons, in association with the Association of Surgical Education, does have a core curriculum specifically for medical students and he has tried to use that as a foundation. Dr. Dumas noted that he will also be meeting with Dr. Brad Feltis and Dr. Ryan Landis in a week or two to see what other requirements they may have that might suite students better.

Dr. Jon Jones commented that it looks like the students will be self-assessing and asked Dr. Dumas if there would be any objective evaluation of how students are doing with the mastery of the elective. Dr. Dumas stated at this point in time, the answer would be no, but this can easily be changed and can be formalized. Dr. Jones noted if you are going to have a patient encounter and team encounter, it will be difficult to do all within a classroom setting. Dr. Dumas noted they met with Dr. Browder about a year ago and he was keen on formalizing this into a structure. Dr. Dumas stated that when he meets with Dr. Landis, he might provide some direction on how to evaluate the students and could incorporate this into the selective.

Dr. Click commented that since this selective will not be implemented this academic year and with Dr. Dumas meeting with Dr. Feltis and Dr. Landis in the near future, we can ask Dr. Dumas to come back at a later time and give MSEC an update on how students will be assessed.

**A motion was made to approve the Surgical Essentials for Medical Students (Core Content for Surgical Clerkships) as presented and seconded. MSEC discussed and approved the motion.**

*The presented Surgical Essentials for Medical Students (Core Content for Surgical Clerkships) document is shared with MSEC Members via Microsoft Teams document storage.*

#### **4. Approval: CQI Plans**

##### Surgery Core Clerkship

*Please see the Surgery Core Clerkship CQI Plan document for additional data.*

Dr. Click stated that the M3/M4 Review Subcommittee recommended that Dr. Trevy Ramos complete a CQI Plan for the Surgery Clerkship due to three total areas falling below expectations, two of which were within student feedback.

Dr. Ramos presented the CQI Plan for the Surgery Clerkship.

Problem Areas:

- Student satisfaction with the learning environment was below expectations with only 79.49% of students being satisfied.
- Student Feedback
  - Student satisfaction with clerkship quality was below expectations with only 82.05% being satisfied or very satisfied.
  - Student satisfaction with teaching quality was below expectations with only 79.49% being satisfied or very satisfied.

Goals for Intervention:

1. Provide students with an effective learning environment
  - a. Wait to hear back from MSEC/ETSU regarding strategies to make our students a priority to private physicians. Private physicians allow us to provide an experience to more students. Private physicians are now being paid by PA/DO schools to take their students. We do not pay them and therefore have fewer physicians to offer their time to students. I cannot offer more resources I do not have.
  - b. Will add a listing of all available open work spaces available to medical students to the syllabus
2. Improve satisfaction with student learning environments to a score of 85%
  - a. A contract has been established between BRMC physicians Dr. Collins and Dr. Vance that has been put into place since May or June 2022 that commits these surgeons to our students only.
  - b. Both surgeons are made aware of any issues needing to be addressed at their institution.
  - c. Directly emailing each resident the feedback that medical students provide during their evaluations. Not previously done.
3. Improve satisfaction with clerkship quality to a score of 85%
  - a. Decrease didactics to one week.
  - b. Met with lecturers and requested if they are unable to make a lecture, they are to have a backup ready so no lectures are missed.
4. Improve student satisfaction with teaching quality from residents to a score of 85%
  - a. Notify residents of issue.
  - b. Giving tips to residents during Residents as Teachers lecture on how to achieve better teaching quality.

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

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

OB/GYN Clerkship

*Please see the OB/GYN CQI Plan for additional data.*

Dr. Click noted that the M3/M4 Review Subcommittee recommended Dr. Timothy Wood complete a CQI Plan for the OB/GYN Clerkship due to two areas being below expectations in student feedback and one area being below expectations in educational outcomes.

Dr. Timothy Wood presented the OB/GYN CQI Plan.

Problem Areas:

- NBME exam performance was rated as below expectations as only 36.1% of students scored at or above the national mean.
- Student satisfaction with clerkship organization (66%) was below expectations.
- Student satisfaction with teaching quality (83%) was below expectations.

Goals for Intervention:

- At least 50% of students will score at or above the national mean on the NBME or other nationally normed exam
  - APGO teaching curriculum utilizing videos and teaching cases. Covering more topics and utilizing online recordings to flesh out missed lectures if there is a conflict on either teachers' or students' ends.
  - Basic science integration with pelvic anatomy review utilizing a cadaver
  - Students have access to several question banks and are encouraged at the beginning of the clerkship as well as the mid-clerkship review to utilize these resources.
- At least 85% of students will be satisfied or very satisfied with clerkship organization
  - The implementation of Leo will standardize clerkship organization throughout clerkships. We were previously using Microsoft Teams.
- At least 85% of students will be satisfied or very satisfied with quality of resident teaching
  - Resident teaching has been standardized through use of the APGO teaching cases and so any teacher should be dispensing the same information.
  - We plan to implement an L+D bingo game to each block of the clerkship to improvement involvement of the students in their learning and interaction with the residents
  - I give a yearly lecture titled "Residents as Teachers" while it typically refers to more of the function of the resident as an evaluator, I have modified the lecture to include tips for effective teaching.

**A motion was made to accept the OB/GYN Clerkship CQI Plan as presented. MSEC discussed and approved the motion.**

*The presented OB/GYN Clerkship CQI Plan document is shared with MSEC Members via Microsoft Teams document storage.*

## 5. Report: M1/M2 Review Subcommittee 2021-22

### Cell & Tissue Biology

*Please see the Cell & Tissue Biology Annual Review Report for additional data.*

Dr. Acuff presented a review for the Cell & Tissue Biology course. Dr. Paul Monaco is the course director. The reviewers were Dr. Tyrone Genade and Blanton Gillespie, M2.

- Goals, Outcomes, and Objectives: **Met expectations.**
- Content, Delivery, and Environment: **Exceeded expectations.**
- Assessment, Feedback, and Grading: **Met expectations.**
- Educational Outcomes: Grade breakdown **exceeded expectations.** The percentage of students scoring at or above the national mean on the NBME **met expectations.** The percentage of students scoring at or below the 10<sup>th</sup> percentile (13%) **was below expectations.**
- Student Feedback: **Exceeded expectations.**
- Previous Reviews: **Met expectations.**

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

Comments from Course Director: Please see the M1/M2 Review Subcommittee Cell & Tissue Biology report for further details.

Recommended Changes to the Course Director: Students express that the cornucopia of resources are hard to navigate and it takes them a long time to discover what works best for them. It would be advisable to survey previous students as to which resources worked the best, perhaps correlate these with BIG 5 personality traits, to better advise students which of the resources would work the best for them. Given how student work load will likely increase in the TRAILS curriculum, any effort to better match students with resources could be very valuable.

The large drop in students excelling on the NBME is a surprise and careful thought should be taken as to why this should be.

Recommendations for MSEC: None.

**UPDATE:** Following the review of the report, Dr. Monaco stated that the percentage listed on the NBME Exam Performance section was noted to be 61.5% but should have been 43%. The review report has been updated to reflect that 43% scored at or above the national mean on the NBME.

**A motion was made to accept the M1/M2 Review Subcommittee Cell & Tissue Biology course report as presented and seconded. MSEC discussed and approved the motion.**

*The presented Cell & Tissue Biology Annual course review document is shared with MSEC Members via Microsoft Teams document storage.*

## Doctoring II

*Please see the Doctoring II Annual Review Report for additional data.*

Dr. Acuff presented a review for the Doctoring II course. Dr. Patricia Amadio is the course director. The reviewers were Dr. Tyrone Genade and Kayla Taylor, M3.

- Goals, Outcomes, and Objectives: **Met expectations.**
- Content, Delivery, and Environment: Educational methods and course integration **exceeded expectations.** Student satisfaction with the learning environment **met expectations.**
- Assessment, Feedback, and Grading: **Met expectations.**
- Educational Outcomes: Grade breakdown **exceeded expectations.** There is no NBME exam for Doctoring II.
- Student Feedback: **Met expectations.**
- Previous Reviews: **Met expectations.**

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

Comments from Course Director: Please see the M1/M2 Review Subcommittee Doctoring II report for further details.

Recommended Changes to the Course Director: More emphasis should be placed on the integration of medical ethics into the medical curriculum. While inconsistencies between faculty can be a problem, it should be emphasized that upon graduation, they will need to work with diverse people



who are going to be inconsistent in their delivery of information and students need to learn to cope with this annoyance, which is integral to the diversity of human personality. Likewise, the reason for the way notes are taken should be articulated to students clearly at the start of the course. Providing more practice cases similar to the oral final would be beneficial to students to learn to think like doctors and extract relevant information from cases.

Recommendations for MSEC: MSEC should note Prof Amadio's recommendation that only Semester 2 and 3 doctoring students should be in IGR and the student comment of the lack of integration on medical ethics.

Dr. Click noted for the MSEC recommendation of only the second and third semester doctoring students participating in IGR that we would follow up how the IGR integrates as this year's IGR has already been scheduled for October 17.

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

*The presented Doctoring II Annual course review document is shared with MSEC Members via Microsoft Teams document storage.*

### Introduction to Clinical Psychiatry

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

Dr. Acuff presented a review for the Introduction to Clinical Psychiatry course. Dr. Jameson Hirsch is the course director. The reviewers were Dr. James Sheffey and Sarah Bridgeman, M3.

- Goals, Outcomes, and Objectives: **Met expectations.**
- Content, Delivery, and Environment: **Met expectations.**
- Assessment, Feedback, and Grading: **Met expectations.**
- Educational Outcomes: Grade breakdown **exceeded expectations.** The percentage of students scoring at or above the national mean on the NBME (45%) and the percentage of students scoring at or below the 10<sup>th</sup> percentile (25%) were **below expectations.**
- Student Feedback: Student satisfaction with overall course quality (83.1%) and teaching quality (84.51%) were **below expectations.** Student satisfaction with course organization **exceeded expectations.** Course instructors receiving an overall satisfaction score of  $\geq 3.0/4.0$  **met expectations.**
- Previous Reviews: **Met expectations.**

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

Comments from Course Director: Please see the M1/M2 Review Subcommittee Introduction to Clinical Psychiatry report for further details.

Recommended Changes to the Course Director: None, as this course will not be delivered in this format in the future. Defer to MSEC regarding new TRAILS curriculum.

Recommendations for MSEC: NBME scores are not aligning with course quality evaluation scores. In year 2018-2019, the course was rated 1.99/5.0, and 59% of students scored at or above the national mean. In 2020-2021, the course was rated 2.44/4.0 and 83% of students scored at or above the national mean. This year, the course was rated 3.17/4.0 and only 45% of students scored at or above the national mean. Care should be taken to ensure that the content is adapted into the TRAILS curriculum in such a way that it results in improved performance on national standard tests.

Dr. Acuff commented that he felt the students' comments were more positive this time than they have been in the past. The students were very appreciative of the course and many were also pleased with the feedback they received.

Dr. Click commented that this was a course that has been rated very poorly in the last few years. It has shown improvement. Seeing these large improvements from where the course was last year was to be commended. Knowing all second-year courses have struggled with NBME performance this year, she commented that she did not know how much to attribute to the course and course director versus this class struggling overall. All NBME subject exams were below the national average. Dr. Click said it is worth noting that Dr. Hirsch commented that critiques of the course were appreciated and were tempered by recognition that the current iteration of the course represented an improvement from past years in many ways and that he anticipates implementing many of the student suggestions when he teaches the course for the second time in 2022-23.

**A motion was made to accept the M1/M2 Review Subcommittee Introduction to Clinical Psychiatry course report as presented and seconded with a CQI Plan to be submitted to MSEC for review. MSEC discussed and approved the motion.**

*The presented Introduction to Clinical Psychiatry Annual course review document is shared with MSEC Members via Microsoft Teams document storage.*

#### Medical Microbiology and Immunology

*Please see the Medical Microbiology and Immunology Annual Review Report for additional data.*

Dr. Acuff presented a review for the Medical Microbiology and Immunology course. Dr. Russ Hayman is the course director. The reviewers were Dr. Robert Acuff, Dr. Leon Dumas, and Sarah Bridgeman, M3.

- Goals, Outcomes, and Objectives: **Met expectations.**
- Content, Delivery, and Environment: **Exceeded expectations.**
- Assessment, Feedback, and Grading: **Exceeded expectations.**
- Educational Outcomes: Grade breakdown **exceeded expectations.** The percentage of students scoring at or above the national mean on the NBME (32.9%) and fewer than 10% of students scoring at or below the 10<sup>th</sup> percentile on the NBME (18.6%) were **below expectations.**
- Student Feedback: **Exceeded expectations.**
- Previous Reviews: **No prior recommendations were given.**

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

Comments from Course Director: Please see the M1/M2 Review Subcommittee Medical Microbiology and Immunology report for further details.

Recommended Changes to the Course Director: No recommendations to the course director – stellar course with the exception of NBME outcome. Course Directors response to NBME scores: “I have concern regarding the performance of the class on the NBME final subject exam, not only in this course, but in all the courses of the M2 year. Much discussion has been had regarding this, but there are no good answers. It is puzzling because the Med Micro/Immuno course has not significantly changed over the past few years, and student performance on the sectional exams this year would not have predicted such an outcome, yet, the scores this year are the lowest in my 10-11 years as course director.”

Recommendations for MSEC: No MSEC action needs to be pursued with the exception of the need to discuss NBME subject exam scores.

**A motion was made to accept the M1/M2 Review Subcommittee Medical Microbiology and Immunology course report as presented and seconded. MSEC discussed and approved the motion.**

*The presented Medical Microbiology and Immunology Annual course review document is shared with MSEC Members via Microsoft Teams document storage.*

### Medical Pharmacology

*Please see the Medical Pharmacology Annual Review Report for additional data.*

Dr. Acuff presented a review for the Medical Pharmacology course. Dr. Richard Kostrzewa is the course director. The reviewers were Dr. Brad Feltis and Hibah Virk, M3.

- Goals, Outcomes, and Objectives: **Met expectations.**
- Content, Delivery, and Environment: Educational methods **exceeded expectations.** Student satisfaction with learning environment and integration of course content **met expectations.**
- Assessment, Feedback, and Grading: **Met expectations.**
- Educational Outcomes: Grade breakdown **exceeded expectations.** The percentage of students scoring at or above the national mean on the NBME (46%) and fewer than 10% of students scoring at or below the 10<sup>th</sup> percentile on the NBME (12.7%) were **below expectations.**
- Student Feedback: **Below expectations.** Student satisfaction with overall course quality was rated as 84.5%, student satisfaction with course organization was rated as 81.7%, and student satisfaction with teaching quality was rated at 80%.
- Previous Reviews: **Met expectations.**

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

Comments from Course Director: Please see the M1/M2 Review Subcommittee Medical Pharmacology report for further details.

Recommended Changes to the Course Director: None identified.

Recommendations for MSEC: None identified.

Dr. Click noted that this is the last iteration of the course, but there is a decline in the performance this year versus previous years. Dr. Click also commented that there is a new course director, Dr. Michelle Duffourc, for the course. According to the QCOM policy of three or more total below expectation ratings, a CQI Plan is recommended for this course.

**A motion was made to accept the M1/M2 Review Subcommittee Medical Pharmacology course report as presented and seconded with a CQI Plan to be submitted to MSEC for review. MSEC discussed and approved the motion.**

*The presented Medical Pharmacology Annual course review document is shared with MSEC Members via Microsoft Teams document storage.*

Dr. Click commented that MSEC’s discussions of the evaluation of the courses from the course reviews is worthy for additional discussion later.

Dr. Click stated that we implemented the rubric process two years ago and set the goal of student satisfaction at 85% as anything below this percentage seemed to be what the LCME cited us on. Dr. Click asked MSEC members if there should be changes made to the rubric. It is worthy of discussion, and especially for the first iteration of the TRAILS courses, on how we review the courses after this year. Dr. Bird commented that she wondered if those who reviewed the self-study reports prior to implementing the rubric had ideas on things that were lost versus things that were gained by moving to the rubric. Dr. Acuff noted that this was a good comment and stated he could talk to the M1/M2 Review Subcommittee and compare how they used to complete the reviews versus how they are doing it now. A discussion ensued and Dr. Acuff also offered to reach out to the M3/M4 Review Subcommittee and bring back suggestions for change to MSEC from both subcommittees.

## 6. Report: M3/M4 Review Subcommittee

### M4 Electives/Selective 2021-22

Dr. Click presented the M4 Electives/Selectives report for 2021-22 that was administratively reviewed as in the past. Dr. Click noted this report was sent out for MSEC members to review prior to the meeting. Dr. Click stated that students were very satisfied or satisfied with the electives/selectives with many having a perfect score of 4.0. Dr. Click commented there was nothing that stood out in the comments regarding the electives/selectives. Dr. Click noted it is important to note that some electives/selectives would only have a few students who participated.

**A motion was made to accept the M4 Electives/Selectives report for 2021-22 and seconded. MSEC discussed and approved the motion.**

*The presented M4 Elective/Selectives report document is shared with MSEC Members via Microsoft Teams document storage.*

Dr. Click noted there were a lot of questions regarding the NBME midpoint results when reviewing the clerkship reviews and what the year as a whole would look like. Kortni Dolinger compiled this information together for presentation at today’s meeting and was included with the meeting reminder sent on August 12. Kortni made some updates to the report after the email was sent to committee members and was going to present to MSEC today, but she was unable to make the meeting so this agenda item will be moved to the September 20 MSEC meeting.

The MSEC meeting adjourned at 5:45 p.m.

---

### 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 2022-2023: (Zoom meetings unless noted)**

MSEC Minutes – August 16, 2022

July 19, **2022** – 3:30 – 6:00 pm

August 16 – 3:30-6:00 pm

September 20 – 3:30-6:00 pm

October 18 – **Retreat** – 11:30 am-5:00 pm (**in-person**)

November 8 – 3:30-6:00 pm\*

December 13 – 3:30-6:00 pm\*

January 17, **2023 Retreat** – 11:30 am-5:00 pm (**in-person**)

February 21 – 3:30-6:00 pm

March 21 – 3:30-6:00 pm

April 18 – 3:30-6:00 pm

May 16 – 3:30-6:00 pm

June 20 - **Retreat** -11:30 am-3:00 pm (**in-person**)

June 20 - **Annual Meeting** - 3:30-5:00 pm (**in-person**)