

The Medical Student Education Committee of the Quillen College of Medicine met on Tuesday, November 19, 2019 in C000 of Stanton-Gerber Hall, Building 178.

Attendance

Faculty Members

Ramsey McGowen, PhD, MSEC Chair Caroline Abercrombie, MD

Ivy Click, EdD

Thomas Ecay, PhD

Russ Hayman, PhD

Jon Jones, MD

Paul Monaco, PhD

Jason Moore, MD

Mark Ransom, MD

Mitch Robinson, MD

Anthony Rusinol, PhD

Robert Schoborg, PhD

Student Members

RJ Black, M1

Sarah Allen Ray, M2

Ex Officio Voting Members

Tom Kwasigroch, PhD

Rachel Walden, MLIS

Ex Officio Non-Voting Member

Kenneth Olive, MD, EAD

Guests

Robert Acuff, PhD

William A. Block, MD

David Taylor, M3

Academic Affairs Staff

Lorena Burton, CAP

Mariela McCandless, MPH

Skylar Moore, BSPH

Cathy Peeples, MPH

Meeting Minutes

1. Approve: Minutes from October 15, 2019 Retreat Meeting & Announcements

MSEC approved the October 15, 2019 Retreat minutes with one change recommended under Agenda item two (2); describe "Cadaver presentations" as "patient presentations".

The revised MSEC Retreat minutes for October 15, 2019 are shared with MSEC members via OneDrive document storage option.

The following announcements were made:

- The next faculty development session will be held on Thursday, November 21, 2019, from 3-4:00 pm, in the large auditorium.
 - Dr. Keith V. Johnson, PhD, ETSU Vice President for Equity and Inclusion, will be presenting *Implicit Bias and How it Negatively Impacts Your Healthcare*.
- Our next Faculty Book Club is scheduled for January 16, 2020. The subject book will be "Grit" by Angela Duckworth. Books are now available for pickup.
- MSEC Chair will transition from Dr. Ramsey McGowen to Dr. Ivy Click effective January 1, 2020. Dr. Click was welcomed and provided MSEC with a quick introduction of her background.

2. Report: LCME Survey Visit Update

Dr. Olive presented a summary of the LCME Survey Team exit report delivered at the conclusion of their visit to the COM. The LCME Elements identified in the exit report included:

- Element 2.3 Access & Authority of the Dean
- Element 3.3 Diversity/Pipeline Programs and Opportunities
- Element 7.1 Biomedical, Behavioral, and Social Sciences
- Element 8.1 Curricular Management
- Element 8.2 Use of Medical Education Objectives
- Element 8.3 Curriculum Design, Review, Revision/Content Monitoring
- Element 9.8 Fair & Timely Summative Assessment
- Element 11.1 Academic Advising
- Element 12.6 Health & Disability Insurance

Dr. Olive commented on multiple elements of Standard 8 identified and how common themes (coordination, integration, cohesion, etc.) can be considered in our Comprehensive Review of the Curriculum, but until we receive the official response from the LCME (estimated for February 2020), we do not know what we will have to directly address in our curriculum.

The agenda was revised at this point to allow Dr. Block to share his thoughts on the Curriculum and LCME Site Visit.

8. Discussion: Dr. Block Discussion of the Curriculum

Dr. Block thanked everyone who worked so hard on the LCME Self-Study submission. He also acknowledged the time spent by faculty and staff in meeting with the LCME Survey Team. This Survey Team visit went much better than the last LCME visit.

Dr. Block summarized the recent conference keynote address from AAMC President and CEO David J. Skorton, MD, and stated he is in agreement with Dr. Skorton's message that the status quo of medical education is unacceptable. While we can be proud of what we have done, and that LCME has not come down hard on us, but we also can read the comments from the exit report and find that what we are doing in the first two years of our curriculum may not be right.

Dr. Block stated there are a number of ways to judge whether what we are doing is best:

• The LCME final Survey Report and whether they view our curriculum as acceptable.

- Do accepted applicants follow-through with attending ETSU College of Medicine (COM) or, if they have the opportunity, choose to attend elsewhere?
- Our on-line advertisement of the medical school and its curriculum should be viewed by students as being exciting, invigorating, and inviting – students should want to come here for their medical school training.
 - Review other medical school curriculums and ask questions.
- Our approach to education needs to be defined and integrated the costs and work involved to make this happen should not be barriers to getting this done.
 - Ask ourselves why we have not integrated our curriculum.

If we do not examine ourselves and make changes, there are our other medical schools who would love to take our place in the community.

Dr. Block charged MSEC with identifying what curriculum approach is right and how it will be accomplished.

Dr. Block acknowledged that some changes we need to consider require COM senior administration/input to accomplish such as creation of a neurology clerkship or substantive changes related to the Community Medicine Clerkship.

• He suggested that integration of the community should begin with integration of the Tri-Cities and health fairs within our local communities should be a priority.

MSEC noted that the end product – great graduates, which we have right now, needs to continue and be the focus.

Dr. Block thanked MSEC for their time and invited anyone to come speak with him either through direct contact or email. His door is always "open".

Dr. McGowen asked that MSEC member discussion of the remaining agenda items incorporate their thoughts on Dr. Block's presentation.

3. Update: Comprehensive Curriculum Review Process - Working Groups

Dr. McGowen reported that the Curriculum Review Working Groups (WGs) are close to being finalized. The willingness of people to assist in this process has been gratifying and enabled each WG to contain COM faculty, students, and AA support staff. The WG members will soon receive information on their WG placement and charge, as well as additional resources that will assist in completing their charge. Each group will provide an interim report in March of 2020, and a final report in May/June of 2020. The chairs of each group are:

- WG1: Content Rachel Walden
- WG 2: Sequencing, Integration & Coherence Dr. Jason Moore
- WG 3: Instruction & Assessment Dr. Robert Schoborg

Dr. Olive stated that the WGs will bring their recommendations back to MSEC and MSEC will organize recommendations and re-distribute to Implementation Groups (IGs). IGs will bring their recommendations back to MSEC for final approval.

Dr. McGowen noted that there is a full year build into the Comprehensive Review of the Curriculum that allows us to complete thoughtful planning that will make the recommendations a reality. This is not to say that every adopted recommendation needs to wait a full year for implementation, it will be dependent on the complexity of the change to the curriculum. Both the WGs and IGs should be mindful of the things that Dr. Block raised in his discussion with MSEC. The WGs and IGs should not be constrained by the questions each group are tasked with answering. There are/could be issues/topics not directly addressed in the Comprehensive Review/questions asked of the curriculum (Neurology clerkship, Emergency Medicine, Community Medicine needs, etc.).

4. Review/Accept: Curriculum Content Report: Where Biomedical Sciences are taught in Clerkships

Dr. Olive presented a content report on material presented in clerkships that includes basic science content review.

MSEC discussion after receiving the report included:

Recommended completing a content report on Pathophysiology across the curriculum.
 A previous Power Point presentation of Pathophysiology content delivered in the Pathology and Physiology courses was presented to MSEC, but not in the form of a content review across the curriculum.

Dr. McGowen called for a motion on the delivered content report. Dr. Schoborg made a motion to accept the report as delivered. Dr. Click seconded the motion. MSEC voted to accept the motion with one abstention vote.

The Curriculum Content Report: Where Biomedical Sciences are taught in Clerkships is shared with MSEC members via OneDrive document storage option.

5. Discussion/Action: End-of-Year 2 NBME Exams

Dr. McGowen reminded MSEC of the October discussion about specific student stressors in Year 2 related to the exam schedule at the end of the academic year. Suggestions included consulting Year 2 course directors who deliver NBME exams in March about the importance of retaining administration of those exams. Dr. Olive has obtained course director opinions on ways to decompress the end of Year 2, including changes to NBME exam administration.

Dr. Hayman, 2nd year Microbiology & Immunology course director, provided a detailed response, including the Microbiology & Immunology NBME exam producing an average grade increase by 1.43%.

Dr. Hayman's comments included:

- Eliminating the NBME exams in March may only be delaying the stress
- End of course NBME exams provide a review of course material
- Provides the student with a better idea of what content they are less familiar with selfassessment
- Courses now delivering only an NBME exam and not a comprehensive exam would lose an assessment grade component

- Difficulty in using the CBSE in the course's final grade
- Students will see fewer content areas for courses in the CBSE than what they would see on the course NBME exams
- Considering optional NBME exams with various ways to either include or not include in the student's final grade for the course

David Taylor, M3 Class President, referenced a survey conducted by Erin Lutz, found that students are already studying extensively for STEP I in the spring semester and it is not clear that students are studying any more extensively for NBME exams being delivered in the same time period.

Sarah Allen Ray stated that students are not opposed to taking NBME exams, but if the effect on course grades could be reduced, student stress may be lessened.

MSEC Discussion included:

- The value of NBME exams where the course is also delivering in-house comprehensive exams within the same time period
- The use of NBME exams as curriculum benchmarks
- NBME exams providing students with self-assessment of their readiness to take STEP I
- CBSE delivery also offering self-assessment of the students' readiness to take STEP I (results are not as detailed as those provided with the NBME)
- The NBME exam being the same percentage of the total grade as a major sectional exam in the course. (MSEC Policy 1212-12 NBME Policy for Preclerkship Courses)
- Course directors needing to re-apportion the course grade components if NBME exams are not administered or counted toward the course grade
- NBME options to customize exams with the combining of different course content in one exam (integration) it may be worth discussing with NBME
- Use of NBME exam results where final course grade is enhanced and not enhanced

Dr. Olive confirmed that today's discussion is related to those NBME exams given in the March 2020 time-frame only, when the density of exams is higher than other periods of time in the M2 curriculum. Dr. McGowen called for a motion.

Dr. Moore made a motion to have the NBME exams delivered by Year 2 courses in March 2020, be required, with the NBME exam grade being a component of the student's course grade only where it improves/benefits the student's final course grade. Dr. Rusinol seconded the motion. Dr. Schoborg asked the motion be amended to include that the Outcomes Subcommittee Benchmark(s) be reviewed and adjusted accordingly for courses where the NBME is not a required component of the course grade. Dr. Moore accepted the amendment. MSEC approved the motion with three (3) votes opposing the motion. There were no abstentions.

Academic Affairs will draft guidance for the Year 2 course directors related to the motion.

The presentation of documents related to student NBMEs in the spring semester are shared with MSEC members via OneDrive document storage option.

6. Approve: M4 Elective: Orthopedic Surgery

Cathy Peeples presented a new proposed elective for the M4 curriculum. The elective will be taught by Dr. Daniel Krenk, ETSU Orthopedic Surgery faculty. A maximum of four (4) students may enroll in the elective at one time.

The elective is designed for students who plan to pursue a career as an orthopedic surgeon. Both ambulatory (30%) and inpatients (70%) sites will be utilized. The elective will require extensive time commitment by the students who enroll in the course.

MSEC voted to approve the Orthopedic Surgery Elective with one (1) abstention vote.

The M4 Elective: Orthopedic Surgery is are shared with MSEC members via OneDrive document storage option.

7. Report/Accept: M1M2 Review Subcommittee – 2018-2019 Comprehensive Reviews Dr. Acuff presented each of the course reviews.

M1 Medical Physiology - Course Director: Dr. Tom Ecay, PhD

Students found the SIM lab case for cardiology and pulmonology was helpful in integrating the material and demonstrating a clinical case. The course director and professors are fair and listen to students' concerns regarding questions used in the exams. There were positive comments regarding the lecture notes, textbook, and Tegrity recordings and plan to use to study for the USMLE Step 1 exam. Some students noted opportunities to improve content sequencing, handouts, and clear exam formats. Dr. Ecay noted that the content sequencing is reviewed each year and adjusted if needed. Content presented earlier in the course is reviewed prior to the NBME exam.

NBME scores for the course did not meet the Outcomes benchmark of "50% of students taking the exam will score at or above the NBME National Mean" (45.95% scored at or above the mean). Dr. Ecay noted that the Quillen student mean (63.6%) exceeded the National mean (63.1%).

Trends in student overall evaluation of the course were:

2018-2019 - 4.06

2017-2018 - 4.17

2016-2017 - 3.83

All of the course's teaching faculty received an overall student evaluation rating of =/>3.50.

There were no short- or long-term recommendations for MSEC, though there are recommendations to the course director for consideration.

MSEC voted to accept the M1 Medical Physiology Comprehensive Review as presented with two (2) abstention votes.

M1 Rural Health Research & Practice – Course Directors: Dr. Ivy Click, Ed D and Dr. Karen Schetzina, MD

Students are allowed a great deal of creativity in developing a project that will best help the community. Students and the course directors are reviewing how best to share the course activities with the Doctoring I Rural Track activities. The IRB training has been successful with the change to completing in this M1 spring course. Students identified that the course assignments needed to be explained at the beginning of the semester and again throughout the course, reminding the students of deadlines as they approach. Dr. Click noted that with the multiple student groups it may be that the faculty are not all covering course assignments in the same manner and/or frequency. This will be addressed with additional faculty development sessions.

Trends in student overall evaluation of the course were:

2018-2019 - 3.53

2017-2018 - 3.20

2016-2017 - 3.31

All of the course's teaching faculty received an overall student evaluation rating of =/>4.45.

Short- and Long-term recommendations for MSEC included:

- 1. There are concerns with the students evaluating both course and faculty unrelated to the course evaluation at hand. Academic Affairs is arranging a training session with M1/M2 Review Subcommittee students to review New Innovations and identify processes that will assist students to more clearly identify who/what the evaluation is about/for.
- 2. Students interested in Rural Track should receive in writing all Rural Track requirements for course completion as they begin the Rural Track program.

MSEC voted to accept the M1 Rural Health Research & Practice Comprehensive Review as presented with one (1) abstention vote.

M2 Medical Pharmacology – Course Director: Dr. Richard Kostrzewa, PhD

Students identified the course as well organized with dedicated, knowledgeable and well-experienced faculty and lecturers. Pharmacology is an excellent review/refresher on physiology/pathophysiology.

The course needs additional SIM lab staff as it schedules its SIM lab sessions, assistance with the course's Tegrity video audio, and identification of a replacement course director as Dr. Kostrzewa plans his retirement. Dr. Abercrombie offered assistance with the scheduling of SIM lab staff. Rachel Walden offered the assistance of Matthew Carroll for the Tegrity audio needs. MSEC members noted that difficulties with the Tegrity video recordings are sometimes problematic, but not always, it is more of a "hit and miss" situation.

The students' NBME scores for the course (78%) were well above the Outcomes measure of "50% of students taking the exam will score at or above the NBME National Mean".

All of the course's teaching faculty received an overall student evaluation rating of =/>3.0.

Trends in student overall evaluation of the course were:

2018-2019 - 4.03

2017-2018 - 4.03

2016-2017 - 4.54

Short- and Long-term recommendations for MSEC included:

- 1. Investigate ways to facilitate SIM lab scheduling for the course, i.e., a clinical pharmacist facilitate when Dr. Blankenship is not available. Dr. Olive noted that the need for replacement faculty in the SIM lab needs to be identified prior to the scheduled date of the SIM lab, not on/after the date of the SIM lab. Dr. Abercrombie noted that additional instruction is being offered to faculty so they are comfortable in the Sim lab and can "fill-in" as needed in a SIM lab session.
- 2. Assistance in finding a replacement for Dr. Kostrzewa, the present course director who is planning to retire. Recruitment of new/additional faculty is imperative for the continued success of this course. MSEC has previously expressed the need for replacement faculty to the Biomedical Sciences Chair and received a response that efforts are in motion.

There were short- and long-term recommendations for the course directors as well as congratulations for a successful course.

MSEC voted to accept the M2 Medical Pharmacology Comprehensive Review as presented with one (1) abstention vote.

The Comprehensive Reviews of the M1/M2 courses are shared with MSEC members via OneDrive document storage option.

9. Update: Family Medicine Clerkship: Student EHR Training - Tabled to December 2019

10. Discussion: Journal Club: Continuum of Innovation

Dr. Click led a discussion of an article by Novak, et al titled: Continuum of Innovation: Curricular Renewal Strategies in Undergraduate Medical Education, 2010–2018, Academic Medicine, 2019. Discussion included:

- Methodology: Authors' review and selection of schools included in the article not all LCME accredited medical schools are represented in the article
- Schools with radical changes seem to have significant problems
- Definition of the curriculum structure termed Thematic curriculums
- Delivery of Step exams in the curriculum (best time)
- Need to review other school curriculums and adopt a template, rather than re-creating the wheel

The Continuum of Innovations article is shared with MSEC members via OneDrive document storage option.

Dr. McGowen thanked everyone that attended the MSEC meeting for their input to discussions of agenda items. The MSEC meeting adjourned at 6:05 p.m.

MSEC Meeting Documents

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

If you are unable to access the One Drive link or have not set up your OneDrive contact: Matthew Carroll, Instructional Design and Technology Manager at: carrollmo@etsu.edu. Telephone contact is: 423-439-2407.

MSEC Meeting Dates 2019-2020: * NOT the 3rd Tuesday of the month

December 17, 2019 - 3:30 - 6:00 pm - C000

January 14, 2020 – 3:30 - 6:00 pm* - C003

February 18, 2020 - 3:30 - 6:00 pm - C000

March 17, 2020 – 3:30 - 6:00 pm – C000

April 21, 2020 - 3:30 - 6:00 pm - C000

May 19, 2020 **Retreat -** 11:30 am - 5:00 pm - C003

June 16, 2020 – 1:30 - 3:00 pm – C003 – **Annual Meeting** 3:30-5:00 pm – Lg. Auditorium