

Year 2 Curriculum Committee
Friday, April 27, 2007
7:30 a.m. – 8:30 a.m.

Minutes

Present:

Frank Aguirre, MD
Mary Aiello, MA, Staff
Amy Arai, PhD
Peter Borgia, PhD, Year 2 Director
George Dunaway, PhD
Rhona Kelley, MS
Debra Klamen, MD, MPHE
Janak Koirala, MD
Fritz Lower, MD

Anna Mies Richie, MD
John Murphy, MD
Vickram Ramkumar, PhD
Sandra Shea, PhD
Tracey Smith, APRN, BS, MS
Holly Steiner, Class of 2009
Don Torry, PhD
Brenda Yale, BSN, RN

Absent:

M. Steve Evans, MD, MS
Diane Fisk, BSN, RN
Karen Reynolds, RN, MS
Gary Rull, MD
Andrew Sherrick, MD
Steven Verhulst, PhD

Guest:

Nicole Roberts, PhD

1.0 Approval of minutes

The minutes from the March 23, 2007 meeting of the Year 2 Curriculum Committee (Y2CC) were approved.

2.0 Announcements

Tracey Smith announced and described the upcoming changes to the Y2 mentoring program. Overall, there will be a decreased number of mentoring visits. The total number of hours will decrease from 88 to 74. Each Physician Mentor will have two students. Mentors will be assigned after week 2 of the curriculum. In addition to the physician mentors, students will attend small group sessions facilitated by hospitalists. The small group sessions will cover clinical issues and each session will have objectives. The Doctoring Team intends these sessions to be better quality than previous years. Hopefully, everything will be completed early and there will be no delays. Dr. Dunaway reported his tutor group discussed mentor experiences. Students state mentor experiences are dependent on the assigned mentors. Some students want better or equal experiences. Ms. Smith related that it is

the hope of Doctoring that the proposed changes will alleviate these concerns and differences among mentors.

The Year 2 Retreat is tentatively scheduled for Wednesday, July 25, 2007. The July Y2CC meeting will likely be cancelled.

Dr. Klamen announced the Office of Education and Curriculum hired a new Nurse Educator, Carolyn Holmes, for Y2 Neuromuscular Behavior and the Y4 Neurology clerkship. Ms. Holmes replaces Diane Fisk, who retires at the end of May.

Nicole Roberts announced Leslie Smith will present her Masters project "The Lump is on the Floor" on May 15, 2007 in the Telehealth conference room. Also, Reflections on Teaching hosted by Dean Dorsey is May 24, 2007, 2:00 p.m. to 4:00 p.m. The three award winning faculty will present at this session.

3.0 Student Report

Holly Steiner, Class of 2009, reported many students complained about the Y3 options period offered on April 4, 2007. Students want the session earlier in the year and better leadership of the session. Dr. Dunaway would like it to be scheduled in another unit. Efforts will be made to improve it. Perhaps it can be an evening event, pizza provided, etc.

4.0 USMLE, STEP 1 results

Dr. Borgia provided the committee with USMLE Step 1 results of the Class of 2008. The top page was a summary of disciplines, zero is the national mean and 1&2 are the standard deviations. Subsequent pages track individual disciplines for first time test takers. Dr. Borgia is concerned incoming MCAT scores are going down and more students with lower MCAT scores are coming to SIUSOM. It would be nice to have students with more competitive scores would consider SIUSOM. The educational experience at SIUSOM is good.

The origin of increased scores in 2003 was discussed. In that year 5 students were held back from progressing to Y3 and that may explain the jump in scores. Those 5 repeating did well repeating Year 2 and all passed step 1. The passing score for USMLE, Step 1 will go up by two points this year. This may affect those students who are on the bubble (line).

In preparation for the retreat, Dr. Borgia would like the committee consider making cut points for passing exams harder (i.e. 0.5 and 1.0 standard deviations below the mean). Also, exams should be more board-like, use case vignettes. Dr. Borgia suggested offering a workshop that helps faculty write more challenging questions. Faculty

need to stop using questions that start “which of the following are not true.”

5.0 Cardiovascular, Renal, Respiratory Student Feedback

Dr. Lower summarized student feedback for the Cardiovascular, Renal, Respiratory (CRR) Unit. It was helpful to have Dr. Dunaway and Pharmacology’s assistance. Everything went smoothly from his perspective. Unfortunately, students did not see it that way. Overall, the ratings have been fairly consistent with those of the past. A few comments were made of students not being able to connect up with their mentors. Coordinating their schedules with mentor visits was an issue. One recurring comment was of a faculty member not responding in a timely manner to student inquiries. Next year, CRR unit directors will ask each faculty member what their preferred method of contact should be.

Comments about SAQs continue to plague the unit. There were more pathology SAQs, some were not proofread for grammar and/or spelling errors. Also it was unclear if these were discipline specific. They will fine tune these questions.

One topic that stood out was the end of unit exam. This surprised Dr. Lower. Content was good. Overall, students did not think it was representative of the material covered in the unit. Pharmacology, with Dr. Dunaway’s assistance, cleaned up their questions. The exam statistics indicated had a high number of discriminating questions. Dr. Borgia thought CRR produced a very good exam. It was a difficult exam. Dr. Klamen is all for student feedback, she is less concerned about the complaints on the difficulty of the exam. It was not extraordinarily difficult. The scoring system considers the difficulty of the exam. Overrepresentation of some material was commented on. There will always be some instance/area that is overrepresented.

Overwhelmingly, students are less happy with statistics and public health. Dr. Lower continues to see improvements with these and both are very important topics. Population Health and Prevention (PHP) faculty and unit faculty have tried to integrate PHP into the subject matter of the unit. CRR had a couple of planning sessions with PHP to determine what topics can be integrated.

Finally, the Y4 students received the best feedback in terms of small group facilitators. This was started in ERG and it has been quite successful. Students relate better to Y4 students.

Uniformity of facilitators is of concern. One facilitator brought an EKG specialist to a small group. Dr. Lower stated faculty need to be careful to not allow students to perceive one group is better due to the facilitator. He understands it may be difficult to be a tutor with a

certain expertise to hold back and not offer that expertise. Just a gentle nudge should be sufficient. Everyone should be on level playing field.

Dr. Arai asked how the ophthalmology session is organized. CRR focuses on how ophthalmology is affected by cardiovascular causes, such as hypertension. The rest of ophthalmology was moved to Neuromuscular Behavior (NMB). Dr. Arai reported ophthalmology was just placed in NMB. Dr. Arai would like to move it back to CRR. Neuromuscular Behavior just gives one 1-hour lecture. Mary Aiello will review past Y2CC meeting minutes to determine why ophthalmology was moved to NMB.

6.0 Other Business

Dr. Richie asked the committee to consider where in the curriculum the bladder should be covered. ERG covers a little about the male bladder. Would CRR consider adding something in their unit? Dr. Lower commented, right or wrong, he figures bladder and prostate goes together. Bladder coverage will be added as a topic for the retreat.

Dr. Richie asked where are kidney stones covered. Dr. Lower discusses renal stones in a resource session in CRR. The committee concluded that the topic should be discussed in the context of the bladder.

7.0 Adjournment

The Y2CC adjourned at 8:40 a.m.