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DARTMOUTH MEDICAL SCHOOL

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To: Members of Medical Education Committee

From: David W. Nierenberg

Subject: Minutes - Meeting held Tues., October 16, 2007 - 4:00 to 5:30 pm, Borwell

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VotingNarath Carlile, Rich Comi, Andy Daubenspeck, Susan Kelly (Yr. 3), Bill **Members**Kinlaw, Gene Nattie, Dave Nierenberg, Rebecca Pschirrer, Laura Reis (Yr.

Present: 4), Alan Rossi (Yr. 4), and Eric Shirley (n =11)

Voting Brian Guerci (Yr. 2), Brent Harris, Horace Henriques, John Hwa, Greg

Members Ogrinc, Michelle Oullette, and Jim Price,

Absent: (n = 7)

Guests and

Lori Alvord, Diane Grollman, Virginia Lyons, Brian Reid, Kalindi Trietley

Non-Voting (n = 5)

Members:

Scheduled Meetings:

Sept. 25	Oct. 16	Nov. 27	Dec. 18	Jan. 22	Feb. 19	Mar. 25	Apr. 15	May 20	June 17
Aud. B	Borwell	Borwell	Aud. A	Aud. F	Aud. A	Aud. A	Aud. A	Aud. A	Aud. A
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I. Course Review: Year 4 Human Anatomy and Embryology (HAE)

- a. Using information provided by the Office of Medical Education and an interview with the course director Rebecca Pschirrer presented a report on the Year 4 HAE course (Attachment A) with the following points:
 - i. The course meets over two terms Fall and Winter for 60 hours of lecture and 91 hours of lab.

- ii. The course director is Virginia T. Lyons, PhD and faculty includes three surgeons, one neurologist, and three PhD anatomists.
- iii. In their evaluations, students found the course to be "good" to "very good."
- iv. Students, on the whole, expressed enthusiasm for the instructors, resources and labs.
- v. Some students expressed that they found the subject of Embryology difficult.
- vi. Most students found quizzes and exams "were difficult but fair," but some found the oral lab quizzes to be stressful.
- b. Rebecca also reported that many of the problems associated with this course have been remedied or are in the process of remediation.

II. Report on Possible New Clinical Affiliatiation With California Pacific Medical Center (CPMC)

- a. Dave Nierenberg reported that work is continuing on exploring a possible clinical affiliation with California Pacific Medical Center (CPMC) in San Francisco. He further stated that although the clinical education at CPMC is no better or worse than DHMC and not intended to replace DHMC's clinical affiliation, it would help to solve issues related to cultural and econimic diversity for the following reasons:
 - 1. CPMC is the largest hospital system in San Francisco and provides patient diversity from the very poor to the very wealthy, and a large Asian and Hispanic demographic:
 - 2. The patient population is so diverse that CPMC maintains a staff of approximately 33 language interpreters.
- b. Eric Shirley conveyed that a pilot program is in the works in which 12 students (four at a time) will complete a clerkship at CPMC in Block 4 this academic year. DMS will pay airfare and CPMC will provide lodging, possibly in a hotel owned by the medical center. Upon completion of their clerkships, the students will fill out a written evaluation and have a personal debriefing with Dave Nierenberg and Erick Shirley.

III. Report on Ad Hoc Group to Study Options for Year 3 Clerkships and Electives

Rich Comi reported that the Ad Hoc Committee had not yet met, but he would have a full report at the next meeting.

Dave Nierenberg commented that an affiliation with CPMC may solve some of the issues that the Ad Hoc Committee is addressing.

IV. Report on the Survey of the Class of 1998

- a. Dave Nierenberg reported on the responses on surveys of the Class of 1998 (Attachment B). 34 responses (about half of survey sent out) were received. Graduates were asked how well DMS prepared them in different areas of study for their chosen careers in medicine. A few highlights cited by Dave included:
 - i. The highest scores were in ethical and professional approaches to medicine (before the mandated competencies);
 - ii. A relatively low score was received in proficiency in clinical skills (an area currently being addressed by OSCEs and other sims).
 - Relatively low scores were achieved in preparation for work in a complex healthcare system and understanding financial systems and management of healthcare systems (issues currently being addressed and improved since 1998);
 - iv. A low score was achieved in diversity of patient populations (a recurring issue that may be solved by the CPMC affiliation);
 - v. Comradeship and developing friendships among other students scored highly.

V. Report on the USMLE Step I Exam

Dave Nierenberg reported that although last years' class achieved a 100% pass rate on Step 1 of the LCME boards (Attachment C), this years' class showed five failures. He stated that some of the commonalities in the DMS history of students that failed include the following:

- i. In Year 2, they were in the lower 13 of the class and were offered remediation;
- ii. They all struggled in Year 1;
- iii. Some split either Year 1 or Year 2:
- iv. Some received accommodations for disabilities.

Dave opened the floor to discussion of ways to avoid students failing in the future. The following points were discussed:

- i. Dave and Kalindi Trietley have been promoting the use of the practice exam to help students and faculty determine shortfalls;
- ii. Although students who fail are consistently in the 15% of the class that is at high risk, it is impossible to determine which students in that 15% will actually fail.
- iii. A study group has been formed to determine if there are any indicators in the admissions process that would flag potentially failing students;
- iv. Care has been given to provide extra study time in Year 2;
- v. DMS requires that the boards be taken by a deadline date, but does not require passing. Would it be possible to mandate the passing of each of the steps before a student could continue into a clerkship?

vi. Students who receive accommodations in DMS education are encouraged to not depend on the accommodations as they may not be allowed accommodations on the boards.

VI. Agenda for November 27:

- a. Course Review: HSP (Horace Henriques)
- b. Course Review: Physiology (Narath Carlile)
- c. Report on Ad Hoc Committee for Yr. 3 (Rich Comi)