### MEDICAL EDUCATION COMMITTEE

**Meeting Minutes**

**Meeting Date:** Tuesday, March 17, 2015  
**Time:** 4:00 – 6:00 pm  
**Meeting Location:** DHMC – Auditorium C  
**Recorded By:** Rachel A. Hammond  
**Approval Date:** Tuesday, April 21, 2015

### ATTENDANCE

<table>
<thead>
<tr>
<th>Voting Members</th>
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<th>Non-Voting Members</th>
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<tbody>
<tr>
<td>Abdelghany, Mazin (4th Yr. Rep)</td>
<td>Morrow, Cathleen (FC-Family Med)</td>
<td>Cousineau, Laura (Library Sciences)</td>
<td>Lyons, Virginia (Year I)</td>
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<tr>
<td>Barnes, Aaron (3rd Yr. Rep)</td>
<td>Morton, Stephanie (2nd Yr. Rep)</td>
<td>Dick. III, John (Yrs III, IV)</td>
<td>McAllister, Stephen (IS)</td>
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<td>Black, Candice (Clinical-Pathology)</td>
<td>Nierenberg, David (Clinical-Pharmacology)</td>
<td>Eastman, Terri (On Doctoring)</td>
<td>Noble, Geoffrey (PhD Rep)</td>
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<td>D'Agostino, Erin (1st Yr. Rep)</td>
<td>Rees, Christianna (PhD Rep)</td>
<td>Eliassen, Scottie (Fam Med. Clerkship)</td>
<td>Ogrinc, Greg (SADME)</td>
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<td>Freemantle, Sarah (Basic Science)</td>
<td>Sharma, Swapna (4th Yr. Rep)</td>
<td>Fall, Leslie (Faculty Development)</td>
<td>Reid, Brian (IS)</td>
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<td>Hyde, Robert (Clinical-EM)</td>
<td>Siegel, Timothy (CPEB)</td>
<td>Frew, Julia (SBM)</td>
<td>Shoop, Glenda (Academic Support)</td>
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<td>Igberasa, Oluwayinka (3rd Yr. Rep)</td>
<td>Smith, Marietta (2nd Yr. Rep)</td>
<td>Grollman, Diane (Assessment)</td>
<td>Todd, Frances (TDI)</td>
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<td>Johansen, Sarah (Chair)</td>
<td>Usherwood, Edward (Basic Science)</td>
<td>Hahn, Cynthia (3rd Yr. Rep)</td>
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<td>Madden, Dean (Basic Science)</td>
<td>Weinstein, Adam (Clinical-Pediatrics)</td>
<td>Jaeger, Michele (Registrar)</td>
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<td>Manning, Harold (Clinical-Pulmonary)</td>
<td>Basic Science</td>
<td>Kidder, Tony (Simulation Lab)</td>
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<td><strong>Guest(s)</strong></td>
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<td>Boardman, Maureen (CPEB)</td>
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Present = X / Absent = -- / Excused = 0
1. **Call to Order** – *Sarah Johansen, MD*

   Dr. Sarah Johansen, Chair, called the meeting to order at 4:05 pm.

2. **Approval of February’s meeting minutes** – *Sarah Johansen, MD*

   Dr. Sarah Freemantle made a motion to approve the February 2015 minutes. The motion was seconded by Stephanie Morton and Marietta Smith. There was one abstention. The motion passed.

3. **Announcements** – *Sarah Johansen, MD*

   Dr. Sarah Johansen addresses the low attendance at the past few meetings; it unfortunately doesn’t take much for the group to fall below quorum. It is especially helpful to let both Dr. Sarah Johansen and Rachel Hammond know if you cannot attend.

   Dr. Sarah Johansen announced that the Faculty Council is looking for the MEC to provide them with the names for new membership for the MEC.

4. **Old Business** – *Sarah Johansen, MD*

5. **New Business**

   - **SBM GI Objectives** - *Sarah Johansen, MD*

     Email clarification had been sent to the MEC members prior to the meeting.

     Dr. David Nierenberg made a motion to approve the SBM GI objectives. The motion was seconded by Dr. Sarah Freemantle. The motion passed by a unanimous vote.

   - **Year 1 CardioPulmonary Physiology Objectives** - *Sarah Johansen, MD*

     Email clarification had been sent to the MEC members prior to the meeting.

     Dr. David Nierenberg made a motion to approve the Year 1 CardioPulmonary Physiology objectives. The motion was seconded by Dr. Sarah Freemantle. The motion passed by a unanimous vote.

   - **Year 1 modifications for HCDS** – *Virginia Lyons, PhD*

     Dr. Virginia Lyons explained currently year 1 has fall, winter, spring terms. What will happen is the Biostatistics course will be incorporated into the HCDS course. It has left a gap of approximately 30 hours which will be divided into two parts of Anatomy; this will help eliminate repetition and overlap and will allow better integration of the topics.

     Reorganization of the courses and making the labs more pro-section based allowed the courses to give up approximately 1 to 2 hours for a total of 19 hours, which will free up afternoons for the students.

     A sign-up sheet has been put up and six 4-year students have already signed up to review course materials and share feedback on what was pertinent during their clerkships.

     Dr. Tim Lahey asked for suggestions when approaching the course directors and being sensitive to all the pertinent needs of the course and asking them for to “reorganize. It was suggested not to use the work “cut hours”. 
Dr. David Nierenberg expressed concern of work load and is it manageable during final exams. The content of the courses will be dissected over the summer. Dr. Virginia Lyons made note that the students will have 3 courses vs. 4 as in the past. At this time the HCDS course is not expected to go over the current hours that Anatomy currently has.

Dr. David Nierenberg also asked a hypothetical question of what if Dr. Tim Lahey and his group comes back to the MEC asking for additional hours for another course in years 1 and 2. What will happen if another 20 hours is needed, after a negation and vote has already been made for the HCDS course? Dr. Virginia Lyons agrees that it would be challenging, but she would make it work.

Dr. Dean Madden expressed concern about making a premature decision based on the foundation of the committees not being complete.

Group discussion was had that the first run will not be perfect but you can phase in the VIG into the courses. The VIG’s are working together and collaborating before they come back to the MEC in June or July. They will already be working with the HCDS course with the anticipation of moving forward in the fall with the HCDS.

Dr. Dean Madden would like the HCDS course to be prepared to possibly reduce their footprint in hours. The group agrees that 60 hours does not seem to be etched in stone, but flexible hours just like the other courses that are presented to the MEC.

Dr. Sarah Johansen address a discussion from the Annual Medical Education retreat is that as the MEC moves forward as who we are as an institution and who we want to be as an institution. Geisel School of Medicine does not only develop clinicians, but researchers, scientists, administrators and businessman. We the MEC should be sensitive to the dialog and not imply that we are only training clinicians, but rather than a broad institution.

Dr. Virginia Lyons presentation will be sent to the MEC members.

• Proposal of USMLE Step II Graduation Requirements – John Dick III, MD

Prior to the MEC meeting the proposal was sent to the MEC via email for voting.

Dr. David Nierenberg address his concern that all graduates should have the same requirements who receive the MD agree. There is no better and easier time to complete then while in the middle of their education while the information is fresh. When applying for residency the students needs to show that they have taken and passed all the required steps.

Dr. John Dick discussed conversation that he has had with others that if we require the student to take the Step II, but do not require them to pass it this is a double standard. If we are going to require the student to take the Step II, then they should be required to pass as well.

Discussion

Maybe there are students who are absolutely certain that they are never going to practice clinical medicine and that are fully aware of the potential consequences, then the decision should be up to the student at that point. Then they should be the students who complete the signed waiver.

The idea behind the consent/ waiver is that the student would meet with the Advising Dean and the Senior Associate Dean for Medical Education.

Almost every year there is a student who is convinced that they are never going to be an intern, it is frustrating as a course director to have a student who blows off the course/test.
Students feel that the cost is a factor when they know they are not going to be practicing clinicians. In this moment they know that this is not what they want to do, and it is one more item that they need to check off the list.

Added hitch, the clock starts ticking when you take Step I. Many states require all steps to be completed within a seven year timeframe. If you have not taken all the required steps within in the seven years you do have to retake all steps. This could potentially be very difficult for any individual.

After four years of medical school $2,000 is a relatively small amount of money, compared to what is being offered in the long term.

There are two valid arguments. 1. Group that wants to protect students from making a potential mistake. 2. Group that wants to alarm students of the potential mistake.

Dr. Harold Manning made a motion to approve the proposed amendments to the current policy on “USMLE Step II Graduation Requirements” as follows:

- Amend the current policy to allow the Senior Associate Dean to waive this requirement for students who are clearly not pursuing residency and request exemption.
- Protocol would be for these students to meet with Assistant Dean for Medical Education (Residency Advising Dean) to discuss their reasons/request. Residency Advising Dean would then approve or not approve and this would then be forwarded to SADME for final approval (or not). SADME would then notify Registrar’s Office.
- Students would be counseled on the consequences of this decision. Students would need to make this request by October 30th of their final year.

The motion was seconded by Dr. David Nierenberg. There were two abstentions. The motion passed.

After the vote was taken there was a discussion on absentee votes and if they should be accepted. The decision was that further motions that effect will not be voted by absentee votes.

- **Course preparation time** – Stephanie Morton and Marietta Smith, 2-year medical students

Dr. Sarah Johansen addressed the goal of this conversation is to come to some closer on the Contact Hours document.

Marietta Smith commented on the concerns from the students starting with the contact hours, and the MEC’s original intent behind the document and are we aligning at this time. Is there additional solicitation needed via survey to make concrete changes.

The average medical school contact hours, vs. Geisel contact hours. The LCME does not give an optimum amount of hours but they would like to permit enough hours from outside contact time for self-learning. Currently Geisel is approximately 2-3 hours above average in years 1, and 3-4 hours in year 2. Further clarification of contact hours is needed due regarding definition hours. Some examples are weeks that include holiday weeks, exam weeks, oscies, ground trip transportation to preceptor’s, clarification to eLearning and preparation materials.

Dr. David Nierenberg commented on how the hours are tracked in year 2. The actual hours for year 2 as of today are 35.6 weeks if you do not count vacation; 843 total hours or 23.7 hours per week. Year 2 has been operating under the LCME standards which states within each term the average number of instructional/exams hours per week has to average 25 hours or less. What is not included is what the students need to do to prepare for the next day’s session such as previewing the PowerPoint, or how much time is spent reviewing a recorded session.
Discussion

If you have a team based learning project how to do accurately anticipate for the hours when some students learn at a different pace. Preparing for a team based project should not very from any other class. What is harder if a course if we delete these hours of lecture, but you are now responsible for this entire iBook. Who knows how much time and depth is needed.

The definition of credit hour is one hour of lecture requires two to three hours of prep time. This possibly may be helpful to course designers. Students are looking for a balanced regular schedule. What might be missing is organization in the current schedules. Year 2 try's to take into account in sequencing, but when lectures move due to conflicts it is harder to coordinate. Room space is also an issue in creating an ideal schedule.

Yes, it would be helpful for the students curriculum reps to survey the student body about what an ideal balanced schedule would look like.

Enrichment Electives

Concern when taking an enrichment elective is that some of the clinical and surgery electives are only offered in the morning which is when require class is scheduled. It is surprising that the medical school offers an enrichment elective during a required class time. If the student has not scheduled their elective well in advance this can become an issue. The members agreed that the enrichment electives should be discussed in more detail at a future meeting. The enrichment electives are very popular with across years 1 and 2 it will be helpful for the MEC to look at these in more depth and how helpful and valuable they are to the students.

- **Policy on Contact Hours – Glenda Shoop, PhD**

About 6 months ago, Dr. Glenda Shoop started looking in the schools documents and policies with the intent to create a repository for the schools policies.

In January 2014, the MEC passed the workload policy. She was also getting questions from the course directors on how to count contact hours.

This topic will be added to the agenda for next months.

6. **Student Report/Feedback**

No comments or concerns at this time.

7. **Adjournment – Sarah Johansen, MD**

Dr. Sarah Johansen, Chair, adjourned the meeting at 6:05pm.

8. **Future Business**

9. **Action Pending**

10. **Future Meetings**

    *** Please note these meetings are on the 3rd Tuesday of each month, 4:00p-6:00pm

    - May 19, 2015
    - June 16, 2015
    - July 21, 2015