



## DARTMOUTH MEDICAL SCHOOL

### SENIOR ASSOCIATE DEAN FOR MEDICAL EDUCATION

Dartmouth Medical School

Hinman Box 7005

Hanover, NH 03755

Telephone 603-650-7679

Facsimile 603-650-6841

David.W.Nierenberg@Dartmouth.edu

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Dear xxx,

In April 2005, the LCME did its periodic site visit and assessment of DMS. While the visit was overwhelmingly positive, one of the concerns that the visitors had was that our Medical Education Committee did not have a plan in place to review every single required course and clerkship on a periodic basis. We did mention that we review a few courses and clerkships each year, and that we review global stats on our students (e.g. performance on NBME exams, etc), but they insisted that we develop a plan to do this. They also insisted that every course and clerkship be presented in a manner that shows its “coverage” and “assessment” of what they do in the six major competency domains.

The Medical Education Committee decided that the simplest way for us to conduct this review—and the simplest way for each course and clerkship director to comply with our requests—is for us to send you a brief form each summer for you to complete. The form will provide you with certain information about your course and clerkship; provide you with a copy of the most recent student review of your course; provide you with your most recent report of your course’s coverage of the major competency areas; and then ask you to provide some new information about your course or clerkship. We have also included, at the very end, an example of what such a report might look like (I’ve provided information about the Year 4 CPT course, since I am most familiar with that).

I estimate that it would take you a maximum of 20-30 minutes to complete these brief forms. If you could please return them to me within a month after you receive this request, that would be very helpful to us, as we need to begin our reviews early in the Fall.

Many thanks, in advance, for your help!

Sincerely yours,

David W. Nierenberg, M.D.

- 1. Course/clerkship name:**
- 2. Year taught:**
- 3. Course/clerkship director:**
- 4. Date prepared:**
- 5. Overall course/clerkship score based on student evaluation:**
- 6. Overall course rank within year:**
- 7. Performance in this area on USMLE Step I/II exams last year:**
- 8. Rank of performance on USMLE exam last year:**
- 9. Based on your own assessment and student comments, what would you list as the two main strengths of your course or clerkship?**
  - A.**
  - B.**
- 10. Based on your own assessment and student comments, what would you list as the two features of your course or clerkship that are most in need of remediation or improvement?**
  - A.**
  - B.**
- 11. What two changes for the coming academic year are you most excited about for your course or clerkship? Any significant innovations or experiments?**
  - A.**
  - B.**
- 12. Is there any specific way that the Medical Education Committee can assist you in improving your specific course or clerkship?**

**Medical Education Committee**  
**AY 04-05 Annual Course/Clerkship Update**  
**Summer 2005**

**EXAMPLE ONLY!!!**

- 1. Course/clerkship name:** Clinical Pharmacology and Therapeutics
- 2. Year taught:** 4
- 3. Course/clerkship director:** David Nierenberg and Lionel Lewis
- 4. Date prepared:** 5/23/05
- 5. Overall course/clerkship score based on student evaluation:** Overall score for lectures was 3.6/5.0 (we use a slightly different template for student evals)
- 6. Overall course rank within year:** N/A (fourth year)
- 7. Performance in this area on USMLE Step I/II exams last year:** Step II (03-04), Principles of Management, +0.22 SD
- 8. Rank of performance on USMLE exam last year:** 3rd out of 5 categories assessed
- 9. Based on your own assessment and student comments, what would you list as the two main strengths of your course or clerkship?**
  - A. Course requires synthesis of much previous information from Year 2 (pharmacology and pathophysiology) and Year 3 (all clerkships), and then adds new information about drug management of disease
  - B. Students like problem sets each week, and new series of lectures about management of medical emergencies. They also liked the new lecture on the timely subject of “What happened to Vioxx”.
- 10. Based on your own assessment and student comments, what would you list as the two features of your course or clerkship that are most in need of remediation or improvement?**
  - A. A few of the lectures (like understanding process of discovery and development of new drugs) do not seem to have immediate value to students as they prepare for internship (although I believe they will be of value over the long run)
  - B. A few of the specific lecturers, for a few specific lectures, did not achieve student scores as high as I would like.
- 11. What two changes for the coming academic year are you most excited about for your course or clerkship? Any significant innovations or experiments?**
  - A. We plan to continue our annual practice of deleting 5-10% of lectures, and replacing them with new lectures on current controversies or developments.
  - B. We plan to resume our previous plan of offering a joint panel discussion with the Year 2 class at Tuck, on a subject of mutual interest (last year it was Direct-to-Consumer Advertising).

**Course/clerkship: Clinical Pharmacology and Therapeutics (CPT)    SAMPLE ONLY!!!!**  
**Director: David Nierenberg, MD**  
**Year: 4**  
**Completed Fall 2003**  
**(Note: This course is offered concurrently with HSP)**

COMPETENCY	WHAT WE TRY TO COVER	HOW WE TRY TO ASSESS COMPETENCY
<b>1. Medical knowledge</b> about established and evolving biomedical, clinical, epidemiological, and social-behavioral sciences, and how to apply that knowledge to patient care.	Core clinical pharmacology topics (i.e. kinetics, ADRs) Application to specific conditions (i.e. shock, acute MI, etc) Statistical analysis	Final exam (MCQ, essay) Class case discussions Paper (consultation or ethics issue)
<b>2. Skills for providing patient care</b> that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health.	How to individualize therapeutic plans for each patient Importance of the therapeutic alliance	Paper (consultation)
<b>3. Interpersonal and communication skills</b> that result in clear and effective communication with patients, their families, peers, and health professionals.	Therapeutic alliance MedWatch forms Analysis of case Providing drug information to patient Accessing CP Online	Written case consultations Submitted MedWatch forms Submitted drug information sheets Submitting CP Online worksheets
<b>4. Professionalism</b> as manifested through a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population.	Discussion of a variety of ethical topics related to drug discovery, approval, marketing, advertising, prescribing, conflicts of interest, etc	Written paper about ethical issues
<b>5. Practice-based learning and improvement</b> that involves investigation and evaluation of the student's own patient care, appraisal and assimilation of best scientific evidence, planning improvements in medical care, and skills for lifelong learning.	Root cause analysis of medical (drug) errors Assessing ADRs and ADEs Accessing best available data How to read and analyze primary literature Promote lifelong learning (i.e. Medical Letter, CP On Hand)	Written assignment of ADRs Submitted literature search Submitted evaluation of course
<b>6. Systems-based practice</b> as manifested by actions that demonstrate teamwork, responsiveness to the larger context and system of health care, and the ability to effectively call on appropriate system resources when needed.	System that involves drug ordering, order entry, compounding, dispensing, and administration; system that involves ADRS and MedWatch	Student papers discussing medical errors or ADRs, and how they can be increased or decreased by system changes